

5000.1 Walk Through

OBJECTIVES

To demonstrate mastery of Directive 5000.1, the trainee will:

1. Describe the inspection verification procedures performed to verify establishment compliance with the Sanitation Performance Standards.
2. Describe the inspection verification procedures performed to verify establishment compliance with Sanitation SOP regulations.
3. Describe the inspection verification procedures performed to verify establishment compliance with HACCP regulations.
4. Identify the procedure performed to verify compliance with generic *E. coli* requirements.
5. Describe the responsibility for inspection personnel to verify compliance with the *Salmonella* and *Campylobacter* performance standards.

adulteration of product, or interfere with inspection by FSIS program employees. Establishments must have in place a pest management program to prevent the harborage and breeding of pests on the grounds and within establishment facilities. Pest control substances used must be safe and effective under the conditions of use and not be applied or stored in a manner that will result in the adulteration of product or the creation of insanitary conditions.

Proper maintenance of the grounds around an establishment is essential for ensuring good sanitation. Establishments are responsible for preventing sources of adulteration of product even if the cause of the adulteration originates from conditions outside the designated boundaries of the establishment.

Establishments must implement and maintain an integrated pest control program to eliminate the harborage and breeding of pests on the grounds and within the establishment facilities and must safely and effectively use interventions, such as pesticides, fumigants, and rodenticides. This regulation does not require the integrated pest control program to be a written document. This regulation does not require that pest control substances be approved by FSIS prior to use.

The performance standards regulations also require the establishment to be responsible for the safe and effective use and storage of pesticides. Product must not be adulterated by the misapplication of pest control products. It is the establishment's responsibility to ensure that Environmental Protection Agency (EPA) requirements under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) are followed, including the application of a pesticide or the safety of a chemical. Pesticides must also be properly stored, labeled, and applied in accordance with label instructions. It is important that such supporting documentation is on file in the establishment file.

Examples of failure to meet grounds and pest control performance standards are:

- an accumulation of old equipment outside providing harborage for rodents and insects
- storage of pesticides in an open container next to food ingredients

(b) Construction.

(1) Establishment buildings, including their structures, rooms, and compartments must be of sound construction, be kept in good repair, and be of sufficient size to allow for processing, handling, and storage of product in a manner that does not result in product adulteration or the creation of insanitary conditions.

(2) Walls, floors, and ceilings within establishments must be built of durable materials impervious to moisture and be cleaned and sanitized as necessary to prevent adulteration of product or the creation of insanitary conditions.

(3) Walls, floors, ceilings, doors, windows, and other outside openings must be constructed and maintained to prevent the entrance of vermin, such as flies, rats, and mice.

FSIS does not require establishments to be innovative in regard to facility construction or layout. The performance standards for construction do, however, provide establishments, regardless of size, the flexibility to design facilities and equipment in the manner they deem best to maintain the required sanitary environment for food production.

Buildings, walls, ceilings, and floors must be sound and in good repair to prevent insanitary conditions or the adulteration of product. The walls, floors, and ceilings should be made of durable materials impervious to moisture.

Example of failure to meet performance standards:

- flaking or chipping paint on the walls or ceilings of edible product areas
- holes in glass board permitting moisture to penetrate the wood behind it

Doors and windows must also close properly and prevent the entrance of vermin.

Example of failure to meet performance standard:

- gaps around the outside doors

(4) Rooms or compartments in which edible product is processed, handled, or stored must be separate and distinct from rooms or compartments in which inedible product is processed, handled, or stored, to the extent necessary to prevent product adulteration and the creation of insanitary conditions.

Establishments can process, handle, or store edible and inedible product in the same room as long as they are separated by time or space, in a manner that prevents the adulteration of the edible product or the creation of insanitary conditions.

Example of failure to meet performance standard:

- grinding meat and storing condemned product together in a room too small to keep employees and products separated

(c) Light.

Lighting of good quality and sufficient intensity to ensure that sanitary conditions are maintained and that product is not adulterated must be provided in areas where food is processed, handled, stored, or examined; where equipment and utensils are cleaned; and in hand-washing areas, dressing and locker rooms, and toilets.

Specific regulatory requirements for lighting combine the meat and poultry lighting requirements into one performance standard. However, FSIS has reserved specific lighting requirements in meat establishments at postmortem inspection stations and in poultry establishments at the postmortem inspection stations and at reinspection stations (§ 307.2 and § 381.36 *et seq*).

While establishments have flexibility in providing lighting, illumination must be adequate in quality and quantity, and well distributed. It must allow for proper monitoring of sanitary conditions and processing conditions, and for examination of product for evidence of adulteration.

Examples of failure to meet performance standard:

- low lighting in the gizzard peeling area that prevents inspection of the product

- shadows on carcasses at final rail inspection preventing inspection of product

(d) Ventilation.

Ventilation adequate to control odors, vapors, and condensation to the extent necessary to prevent adulteration of product and the creation of insanitary conditions must be provided.

The Agency does not expect the establishment to completely eliminate all odors, vapors, and condensation. However, establishments must control ventilation to prevent adulteration of the environment that, in turn, can lead to adulteration of product or the creation of insanitary conditions.

Examples of failure to meet performance standard:

- diesel fumes from parked trucks being drawn into the establishment at receiving areas.
- excessive odors from condemned/inedible rendering area spreading onto slaughter floor.

(e) Plumbing.

Plumbing systems must be installed and maintained to:

(1) Carry sufficient quantities of water to required locations throughout the establishment;

(2) Properly convey sewage and liquid disposable waste from the establishment;

It is the responsibility of the establishment to ensure that plumbing and sewage systems provide an adequate supply of potable water to the establishment to prevent product adulteration or creation of insanitary conditions.

Example of failure to meet performance standard:

- inadequate water pressure for cleanup
- plumbing system not providing adequate floor drainage

It is the responsibility of the establishment to ensure that plumbing and sewage systems remove waste and sewage from the establishment without adulterating product or creating insanitary conditions.

Example of failure to meet performance standard:

- plugged sewer line preventing cleanup water from draining from the establishment

(3) Prevent adulteration of product, water supplies, equipment, and utensils and prevent the creation of insanitary conditions throughout the establishment;

The design, installation and maintenance of an adequate plumbing system are key responsibilities of the establishment. Because plumbing systems carry water into establishments and convey water from the establishments, problems with plumbing systems can easily cause product contamination or adulteration.

Example of failure to meet performance standard:

- dead-end pipes on potable water lines

(4) Provide adequate floor drainage in all areas where floors are subject to flooding-type cleaning or where normal operations release or discharge water or other liquid waste on the floor;

(5) Prevent back-flow conditions in and cross-connection between piping systems that discharge waste water or sewage and piping systems that carry water for product manufacturing; and

Floor drainage must be adequate to prevent the spread of contaminants into the production environment during cleaning and normal operation.

Example of failure to meet performance standard:

- a stopped up drain in the cooler

Cross-connection between potable and non-potable water is not acceptable. The plumbing system must be installed and maintained to prevent adulteration. Back-flow devices must also be used as appropriate to prevent cross contamination of potable water sources.

Example of failure to meet performance standard:

- a water hose nozzle left submerged in the evisceration flow away drain

(6) Prevent the backup of sewer gases.

Example of failure to meet performance standard:

- sewer gas emitting from a floor drain in the smokehouse area

(f) Sewage disposal.

Sewage must be disposed into a sewage system separate from all other drainage lines or disposed of through other means sufficient to prevent backup of sewage into areas where product is processed, handled, or stored. When the sewage disposal system is a private system requiring approval by a State or local health authority, the establishment must furnish FSIS with the letter of approval from that authority upon request.

The establishment must ensure that sewage does not back up into processing areas. Documentation from a State or local authority approving private sewage disposal systems must be on-site and available to FSIS upon request.

Example of failure to meet performance standard:

- establishment has no documentation on file from state or local health authority for approval of private sewer or system

(g) Water supply and water, ice, and solution reuse.

(1) A supply of running water that complies with the National Primary Drinking Water regulations (40 CFR part 141), at a suitable temperature and under pressure as needed, must be provided in all areas where required (for processing product, for cleaning rooms and equipment, utensils, and packaging materials, for employee sanitary facilities, etc.). If an establishment uses a municipal water supply, it must make

available to FSIS, upon request, a water report, issued under the authority of the State or local health agency, certifying or attesting to the potability of the water supply. If an establishment uses a private well for its water supply, it must make available to FSIS, upon request, documentation certifying the potability of the water supply that has been renewed at least semi-annually.

The water performance standard requires that potable water comply with EPA's National Primary Drinking Water regulations. Certifications of water potability provided by the state or local governments or other responsible entities are evidence that the establishment meets the EPA requirements.

Some meat and poultry establishments use private wells for their water supply. EPA does not require testing for these water sources, but FSIS requires it semi-annually. Generally, State or local governments do not test private wells for potability. Establishments can obtain such documentation from private laboratories.

Example of failure to meet performance standard:

- no documentation on file demonstrating that the municipal water supply complies with the National Primary Drinking Water regulations

(2) Water, ice, and solutions (such as brine, liquid smoke, or propylene glycol) used to chill or cook ready-to-eat product may be reused for the same purpose, provided that they are maintained free of pathogenic organisms and fecal coliform organisms and that other physical, chemical, and microbiological contamination have been reduced to prevent adulteration of product.

FSIS expects establishments to produce ready-to-eat products that are free of pathogens; therefore, reuse water used to chill or cook ready-to-eat product must be free of pathogens.

In many cases establishments monitor water reuse activities as part of their HACCP plans because the water treatments or conditioning can eliminate or reduce hazards they have determined to be reasonably likely to occur. The requirement that water be reused only "for the same purpose" refers to reusing water from the ready-to-eat area only in the ready-to-eat area, and reusing water from the not-ready-to-eat areas only in not-ready-to-eat areas. For example, chiller water or water from the final bird washer that is reconditioned can be reused in the scalding.

Example of failure to meet performance standard:

- reusing brine solution without filtering or treating

(3) Water, ice, and solutions used to chill or wash raw product may be reused for the same purpose provided that measures are taken to reduce physical, chemical, and microbiological contamination so as to prevent contamination or adulteration of product. Reuse that which has come into contact with raw product may not be used on ready-to-eat product.

Establishments can reuse water in a manner that does not adulterate product or create insanitary condition. For example, an establishment's recirculating water in a chill tank for

raw poultry might add chlorine to the water to reduce the number of pathogens. An establishment reusing ice to chill raw poultry might bag the ice to prevent it from contacting product. The performance standards allow the reuse of water in numerous processing contexts, as long as the establishment takes actions necessary to ensure that the water does not adulterate product and that sanitation is not compromised.

Example of failure to meet performance standard:

- reusing ice from wax lined boxes to chill salvage parts without bagging it

(4) Reconditioned water that has never contained human waste and that has been treated by an onsite advanced wastewater treatment facility may be used on raw product, except in product formulation, and throughout the facility in edible and inedible production areas, provided that measures are taken to ensure that this water meets the criteria prescribed in paragraph (g)(1) of this section. Product, facilities, equipment, and utensils coming in contact with this water must undergo a separate final rinse with non-reconditioned water that meets the criteria prescribed in paragraph (g)(1) of this section.

Some establishments recondition their water through an advanced wastewater treatment facility, either onsite or under contract. To prevent establishments from using water from sewage lines, reconditioned water must never have contained human waste. Because reconditioned water is of high quality, it can be used on raw product, except in product formulation, and throughout the facility in edible and inedible production areas. Product, facilities, and equipment coming in contact with this reconditioned water must undergo a separate final rinse with potable, non-reconditioned water.

FSIS believes it is likely that most establishments will use the reconditioned water in this provision to wash equipment, floors, and carcasses on the kill floor, all of which can easily be rinsed.

Example of failure to meet performance standard:

- no final potable water rinse on product after using reconditioned water

(5) Any water that has never contained human waste and that is free of pathogenic organisms may be used in edible and inedible product areas, provided it does not contact edible product. For example, such reuse water may be used to move heavy solids, to flush the bottom of open evisceration troughs, or to wash antemortem areas, livestock pens, trucks, poultry cages, picker aprons, picking room floors, and similar areas within the establishment.

Any water can be used for any purpose in edible or inedible product areas, provided it:

- has never contained human waste.
Establishments must not reuse water from sewage lines, therefore, it is required that the reuse water never have contained human waste.
- has been conditioned to be free of pathogenic organisms.
Reuse water must be free of pathogenic organisms to prevent their spread throughout the establishment, which could lead to cross-contamination of product.
- does not contact edible product.

Reuse water might contain coliforms or chemical or physical contaminants, so it cannot contact edible product.

Example of failure to meet performance standard:

- using treated or untreated water from the employee welfare area to clean antemortem pens.

(6) Water that does not meet the use conditions of paragraphs (g)(1) through (g)(5) of this section may not be used in areas where edible product is handled or prepared or in any manner that would allow it to adulterate edible product or create insanitary conditions.

To prevent contamination or adulteration of the product, establishment must not use water contaminated with pathogens, chemicals, or physical contaminants in edible product areas.

Example of failure to meet performance standard:

- using reuse water not meeting conditions of (g)(1) through (g)(5) to flush evisceration troughs in edible product areas

(h) Dressing rooms, lavatories, and toilets.

(1) Dressing rooms, toilet rooms, and urinals must be sufficient in number, ample in size, conveniently located, and maintained in a sanitary condition and in good repair at all times to ensure cleanliness of all persons handling any product. They must be separate from the rooms and compartments in which products are processed, stored, or handled.

OSHA standards (29 CFR 1910.141) for lavatories must be followed when establishments are constructed or remodeled. FSIS does not regulate the number of lavatories required. The establishment must maintain lavatory facilities in good repair and in a sanitary manner.

Example of failure to meet performance standard:

- used toilet tissue piled on the floor in the welfare facility

(2) Lavatories with running hot and cold water, soap, and towels must be placed in or near toilet and urinal rooms and at such other places in the establishment as necessary to ensure cleanliness of all persons handling any product.

Example of failure to meet performance standard:

- no hot water or soap in the toilet area

(3) Refuse receptacles must be constructed and maintained in a manner that protects against the creation of insanitary conditions and the adulteration of product.

Leaking refuse receptacles allow the spread of pathogenic organisms into the environment, which could then lead to cross-contamination of product and product areas.

Example of failure to meet performance standard:

- holes in the bottom of trash receptacle in the dressing room with liquids draining onto the floor.

§ 416.3 Equipment and utensils.

(a) Equipment and utensils used for processing or otherwise handling edible product or ingredients must be of such material and construction to facilitate thorough cleaning and to ensure that their use will not cause the adulteration of product during processing, handling, or storage. Equipment and utensils must be maintained in sanitary condition so as not to adulterate product.

Establishments may select any method to clean utensils and equipment as long as they are maintained in a sanitary condition.

Example of failure to meet performance standard:

- meat residues from previous days use on the underside of a product transfer belt

(b) Equipment and utensils must not be constructed, located, or operated in a manner that prevents FSIS inspection program employees from inspecting the equipment or utensils to determine whether they are in sanitary condition.

Equipment and utensils must be designed in a manner that allows FSIS inspection personnel to view them for compliance with sanitary requirements. They must be located so that they are safely accessible to inspection prior to and during operation.

Example of failure to meet performance standard:

- a piece of equipment is constructed in a manner that prevents thorough cleaning Ex: a splashguard located over the auger to the meat grinder that prevents access the equipment for inspection
- when equipment is installed preventing inspection from making a sanitary condition determination

(c) Receptacles used for storing inedible material must be of such material and construction that their use will not result in the adulteration of any edible product or in the creation of insanitary conditions. Such receptacles must not be used for storing any edible product and must bear conspicuous and distinctive marking to identify permitted uses.

Inedible receptacles used for storing inedible product must be properly and conspicuously marked.

Example of failure to meet performance standard:

- unmarked inedible barrels

§416.4 Sanitary operations.

(a) All food-contact surfaces, including food-contact surfaces of utensils and equipment, must be cleaned and sanitized as frequently as necessary to prevent the creation of insanitary conditions and the adulteration of product.

Generally, establishments clean their operations once a day; however, some establishments conduct chemical cleanup procedures less than once a day. Such extended cleanup procedures should be incorporated into the firm's Sanitation Standard Operating Procedures (Sanitation SOP) (See § 416.12). To ensure that extended cleanup procedures prevent insanitation and the adulteration of product, establishments might conduct microbiological testing to evaluate the effectiveness of the extended cleanup.

Example of failure to meet performance standard:

- accumulation of fat on a belt rubbing against metal guard creating oxidized fat on the belt

(b) Non-food-contact surfaces of facilities, equipment, and utensils used in the operation of the establishment must be cleaned and sanitized as frequently as necessary to prevent the creation of insanitary conditions and the adulteration of product.

During the normal course of operations meat and poultry products should not come in contact with non-food contact surfaces. If non-food contact surfaces are not properly cleaned and sanitized, insanitary conditions could result, leading to potential adulteration of product.

Example of failure to meet performance standard:

- dried meat scraps on a wall located away from product but in a production area

(c) Cleaning compounds, sanitizing agents, processing aids, and other chemicals used by an establishment must be safe and effective under the conditions of use. Such chemicals must be used, handled, and stored in a manner that will not adulterate product or create insanitary conditions. Documentation substantiating the safety of a chemical's use in a food processing environment must be available to FSIS inspection program employees for review.

It is required that meat and poultry products be neither adulterated nor misbranded through the misuse of proprietary substances and nonfood compounds. Documentation substantiating the safety of a chemical's use in a food-processing environment must be available for FSIS review. The documentation can vary with the nature and intended use of that chemical. For example, the establishment should have documentation showing that a pesticide used in the establishment is registered with EPA, and the label information for the pesticide should be on file. For a chemical sanitizer used on food contact surfaces, an establishment should have documentation showing that the compound complies with the relevant Food and Drug Administration (FDA) regulations in 21 CFR 178.1010. (Sanitizers meeting FDA requirements are usually identified as "Food Grade."). Meat and poultry establishments must ensure that all proprietary substances and nonfood compounds are safe for their intended use and used appropriately.

Example of failure to meet performance standard:

- no documentation showing that the sanitizers used in the facility are safe as used

(d) Product must be protected from adulteration during processing, handling, storage, loading, and unloading at and during transportation from official establishments.

As product moves through the process there might be elements in the environment that could adulterate it. Employees who move and handle product improperly are another possible source of contamination. The establishment must decide, depending upon the situation and the circumstances within the establishment, how the product should be protected through all phases of the process. For example, the establishment might cover the product when it is stored in the cooler to prevent contamination.

Example of failure to meet performance standard:

- combos stored in tiered storage racks not appropriately covered creating an insanitary condition

§416.5 Employee hygiene.

(a) Cleanliness. All persons working in contact with product, food- contact surfaces, and product-packaging materials must adhere to hygienic practices while on duty to prevent adulteration of product and the creation of insanitary conditions.

The performance standards allow establishments to develop alternative or innovative means to ensure that employee hygiene practices do not result in product adulteration or contamination.

Example of failure to meet performance standard:

- an employee wiping his runny nose on the sleeve of his smock

(b) Clothing. Aprons, frocks, and other outer clothing worn by persons who handle product must be of material that is disposable or readily cleaned. Clean garments must be worn at the start of each working day and garments must be changed during the day as often as necessary to prevent adulteration of product and the creation of insanitary conditions.

The sanitation performance standards require establishments to develop acceptable policies for prescribing when garments must be changed during the day to prevent contamination or adulteration of product.

Example of failure to meet performance standard:

- an employee wearing a soiled smock from the raw product area entering the sausage drying room

(c) Disease control. Any person who has or appears to have an infectious disease, open lesion, including boils, sores, or infected wounds, or any other abnormal source of microbial contamination, must be excluded from any operations which could result in product adulteration and the creation of insanitary conditions until the condition is corrected.

FSIS has authority to take action against any unhygienic practice that could result in insanitary conditions or adulterated product. This includes handling procedures that might contaminate edible products or create insanitary conditions.

Example of failure to meet performance standard:

- an employee handling edible product with an open sore on her forearm

§416.6 Tagging insanitary equipment, utensils, rooms or compartments. When an FSIS program employee finds that any equipment, utensil, room, or compartment at an official establishment is insanitary or that its use could cause the adulteration of product, he will attach to it a "U.S. Rejected" tag. Equipment, utensils, rooms, or compartments so tagged cannot be used until made acceptable. Only an FSIS program employee may remove a "U.S. Rejected" tag.

It is appropriate to take regulatory control action, which may include tagging affected areas, when an official establishment operates in a manner that leads to insanitary conditions or product adulteration. Regulatory control actions should remain in effect until the establishment has taken corrective action and has proposed effective preventive measures.

Sanitation Standard Operating Procedures 9 CFR 416.11— 416.17

SANITATION SOP REGULATIONS

§416.11 General Rules

Each establishment shall develop, implement, and maintain written standard operating procedures for sanitation (Sanitation SOP's) in accordance with the requirements of this part.

The establishment is responsible for developing, implementing, and maintaining written sanitation standard operating procedures (Sanitation SOPs) that meet the requirements of part 416. FSIS believes that effective establishment sanitation is essential for food safety and for successful implementation of HACCP. Insanitary facilities or equipment, improper personal hygiene, and similar insanitary practices create an environment conducive to contamination of products. Direct and substantial links exist between inadequate sanitation and the contamination of meat and poultry products by pathogenic bacteria. Sanitation SOP clearly defines the establishment's responsibility to consistently follow effective sanitation procedures that will substantially minimize the risk of product contamination and adulteration.

§416.12 Development of Sanitation SOP's

(a) The Sanitation SOP's shall describe all procedures an official establishment will conduct daily, before and during operations, sufficient to prevent direct contamination or adulteration of product(s).

It is a regulatory requirement that the establishment have written Sanitation SOPs describing the daily procedures conducted before and during operations to prevent direct contamination or adulteration of products.

IPP need to be able to read and understand the Sanitation SOP. This means that Sanitation SOPs written in a foreign language may need to be translated into English.

(b) The Sanitation SOP's shall be signed and dated by the individual with overall authority on-site or a higher level official of the establishment. This signature shall signify that the establishment will implement the Sanitation SOP's as specified and will maintain the Sanitation SOP's in accordance with the requirements of this part. The Sanitation SOP's shall be signed and dated upon initially implementing the Sanitation SOP's and upon any modification to the Sanitation SOP's.

The Sanitation SOP written procedure is signed and dated by an official with overall sanitation authority or a higher-level official of the establishment. It is not required that the person be listed on the Grant of Inspection or the PBIS establishment profile. Written procedures must be signed upon initiation and whenever they are modified. For example, the establishment manager might sign the Sanitation SOP.

(c) Procedures in the Sanitation SOP's that are to be conducted prior to operations shall be identified as such, and shall address, at a minimum, the cleaning of food contact surfaces of facilities, equipment, and utensils.

The written procedures must identify pre-operational sanitation procedures. At a minimum, Sanitation SOPs must address the cleaning of food contact surfaces of facilities, equipment, and utensils. The regulation does not specify how much detail Sanitation SOPs must contain. For example, the Sanitation SOP may describe the pre-operational procedures as follows. "The food contact surfaces in the facility will be cleaned with hot soapy water. Equipment that can be disassembled will be taken apart prior to cleaning. After cleaning, a sanitizer will be applied to product contact surfaces followed by a potable water rinse." When followed the procedures should be sufficient to ensure prevention of direct product contamination or adulteration.

(d) The Sanitation SOPs shall specify the frequency with which each procedure in the Sanitation SOPs is to be conducted and identify the establishment employee(s) responsible for the implementation and maintenance of such procedure(s).

The Sanitation SOP must contain:

- the frequency the procedures in the Sanitation SOP are conducted
- identification of the employee(s) responsible for the implementation and maintenance of the Sanitation SOPs (does not have to be the people performing the activities but the person responsible).

Establishments may identify individual(s) by name or job title. The individuals or positions identified do not have to have separate lines of authority from the production process. Production employees, lead line personnel, department forepersons, etc. may be identified. The employee(s) identified may or may not be the employee who actually performs the activities.

For example, the Sanitation SOP might specify that overheads are wiped every half-hour of operation to prevent product contamination or adulteration. The QA technician might be the person responsible for monitoring this procedure, but the QA manager is responsible for the overall implementation of Sanitation SOP.

§416.13 Implementation of SOP's

(a) Each official establishment shall conduct the pre-operational procedures in the Sanitation SOP's before the start of operations.

Establishments are responsible for implementing the Sanitation SOP daily. They must perform their procedures before the start of operations as prescribed in their written pre-operational procedures. An establishment may have several departments, starting at different times during the approved hours of operation. They may perform their pre-operational procedures at staggered times prior to the approved starting time. In other words, the establishment does not have to perform pre-operational procedures in all the departments prior to starting operations in any one department.

(b) Each official establishment shall conduct all other procedures in the Sanitation SOP's at the frequencies specified.

Establishments are responsible for the daily implementation of all procedures identified in the Sanitation SOP that occur during operations. An example procedure is a Sanitation SOP that includes a procedure for using a footbath prior to entering the ready-to-eat area.

(c) Each official establishment shall monitor daily the implementation of the procedures in the Sanitation SOP's.

Establishments must monitor the Sanitation SOP procedures they conduct daily to ensure they effectively prevent direct product contamination or adulteration. For example, an establishment might have a procedure that calls for cleaning and examining all equipment prior to operations and a monitoring procedure that includes examining a random selection of representative equipment prior to operations.

§416.14 Maintenance of Sanitation SOP's

Each official establishment shall routinely evaluate the effectiveness of the Sanitation SOP's and the procedures therein in preventing direct contamination or adulteration of product(s) and shall revise both as necessary to keep them effective and current with respect to changes in facilities, equipment, utensils, operations, or personnel.

Establishments should routinely evaluate the content and effectiveness of the Sanitation SOP and modify it accordingly. The Sanitation SOPs must be kept current. When facilities, personnel, or operations change, the establishment must still prevent direct product contamination and adulteration. For example, if the establishment changed their operations by expanding the facility and adding new pieces of equipment, they must reevaluate their written procedures and, if necessary, make changes to effectively prevent direct contamination or adulteration of product.

§416.15 Corrective Actions

(a) Each official establishment shall take appropriate corrective action(s) when either the establishment or FSIS determines that the establishment's SOP's or the procedures specified therein, or the implementation or maintenance of the Sanitation SOPs, may have failed to prevent direct contamination or adulteration of product(s).

The establishment must take corrective actions any time the establishment or FSIS determines that the Sanitation SOP has failed to prevent direct product contamination or adulteration of product. Sanitation SOP failure can be the result of either not implementing or not maintaining the Sanitation SOP, and it can occur before or during operations. This applies to contamination or adulteration of direct product contact surfaces or direct product zones found by the establishment or FSIS procedures before or during operations. For example, in a poultry cut-up operation, the establishment has a procedure for the salvage of product that contacts the floor written into its Sanitation SOP. The Sanitation SOP says that the product will be removed from the floor promptly by an employee in the cut-up area and trimmed, washed, and treated with a chlorine rinse before it is returned to production. The Sanitation SOP further states that this procedure will be monitored once per hour by the QC technician. If the procedure were followed as written, corrective actions would not have to be implemented. However, if during a monitoring procedure the QC technician finds that the procedure is not followed, corrective actions must be implemented.

(b) Corrective Actions include procedures to ensure appropriate disposition of product(s) that may be contaminated, restore sanitary conditions, and prevent the recurrence of direct contamination or adulteration of product(s), including appropriate reevaluation and modification of the Sanitation SOP's or the procedures specified therein.

Establishments must initiate corrective actions when either the establishment or FSIS determines implementation of the procedures fails to prevent direct product contamination or adulteration. Establishments must implement all three parts of the corrective action, i.e., they must:

- dispose of contaminated or adulterated product appropriately
- restore sanitary conditions
- prevent recurrence of failure

Corrective actions may also include reevaluation and modification of the Sanitation SOP or the procedures specified in it; however, it might not be necessary to modify the Sanitation SOP in every case.

The establishment is not required to document specifics in the Sanitation SOP regarding exactly which corrective actions will be taken in every single possible case of contamination or adulteration. They must, however, address all three parts of corrective action and include these actions in the records if product contamination or adulteration occurs.

§416.16 Recordkeeping requirements

(a) Each official establishment shall maintain daily records sufficient to document the implementation and monitoring of the Sanitation SOP's and any corrective actions taken. The establishment employee(s) specified in the Sanitation SOP's as being responsible for the implementation and monitoring of the procedure(s) specified in the Sanitation SOP's shall authenticate these records with his or her initials and the date.

Establishments must maintain daily records that document they are carrying out the sanitation procedures outlined in the Sanitation SOP, including the corrective actions taken. Establishment management may exercise flexibility in designing records. There is no set format, and records do not have to be included in the written Sanitation SOP.

For example, the SSOP might describe a hygienic procedure where all employees must wash their hands after returning from break and that the QC manager is responsible for monitoring the procedure. The record should document that employees were monitored after break before returning to work. If an employee was observed returning to work without washing his hands, a description of the incident and the three parts of corrective actions taken by the establishment must be documented.

(b) Records required by this part may be maintained on computers provided the establishment implements appropriate controls to ensure the integrity of the electronic data.

Records may be maintained on a computer in lieu of hard copy as long as they are accessible to inspection personnel. The establishment must prevent tampering with the electronic records. It is up to them to determine how to ensure integrity of the electronic data.

(c) Records required by this part shall be maintained for at least 6 months and made accessible available to FSIS. All such records shall be maintained at the official establishment for 48 hours following completion, after which they may

be maintained off-site provided such records can be made available to FSIS within 24 hours of request.

All Sanitation SOP records generated must be retained for six months. For oversight and enforcement purposes FSIS requires access to all establishment sanitation records. The establishment is required to keep records on-site for 48 hours and make them available to FSIS upon request. Afterwards, records may be stored off-premises as long as they can be provided to FSIS within 24 hours of a request for them.

§416.17 Agency verification

FSIS shall verify the adequacy and effectiveness of the Sanitation SOP's and the procedures specified therein by determining that they meet the requirements of this part. Such verification may include:

(a) Reviewing the Sanitation SOP's;

(b) Reviewing the daily records documenting the implementation of the Sanitation SOP's and the procedures specified therein and any corrective actions taken or required to be taken;

(c) Direct observation of the implementation of the Sanitation SOP's and the procedures specified therein and any corrective actions taken or required to be taken; and

(d) Direct observation or testing to assess the sanitary conditions in the establishment.

FSIS verifies that Sanitation SOPs are developed, implemented, maintained, and that they are effective. FSIS also verifies that the establishment maintains daily records.

Hazard Analysis and Critical Control Point (HACCP) System 9 CFR 417.1 — 417.8

HACCP REGULATIONS

§417.1 Definitions.

For purposes of this part, the following definitions shall apply:

Corrective action. Procedures to be followed when a deviation occurs.

Critical control point. A point, step, or procedure in a food process at which control can be applied and, as a result, a food safety hazard can be prevented, eliminated, or reduced to acceptable levels.

Critical limit. The maximum or minimum value to which a physical, biological, or chemical hazard must be controlled at a critical control point to prevent, eliminate, or reduce to an acceptable level the occurrence of the identified food safety hazard.

Food safety hazard. Any biological, chemical, or physical property that may cause a food to be unsafe for human consumption.

HACCP System. The HACCP plans in operation, including the HACCP plan itself.

Hazard. SEE Food Safety Hazard.

Preventive measure. Physical, chemical, or other means that can be used to control an identified food safety hazard.

Process-monitoring instrument. An instrument or device used to indicate conditions during processing at a critical control point.

Responsible establishment official. The individual with overall authority on-site or a higher level official of the establishment.

Above are the regulatory definitions for these specific terms when used throughout regulation 417.

§417.2 Hazard Analysis and HACCP Plan.

(a) Hazard analysis.

(1) Every official establishment shall conduct, or have conducted for it, a hazard analysis to determine the food safety hazards reasonably likely to occur in the production process and identify the preventive measures the establishment can apply to control those hazards. The hazard analysis shall include food safety hazards that can occur before, during, and after entry into the establishment. A food safety hazard that is reasonably likely to occur is one for which a prudent establishment would establish controls because it historically has occurred, or because there is a reasonable possibility that it will occur in the

particular type of product being processed, in the absence of those controls.

With the implementation of the Pathogen Reduction/HACCP (PR/HACCP) regulation, each federally inspected establishment either conducted or had conducted for it a hazard analysis. At a minimum a hazard analysis must be developed for each processing category in the establishment. The purpose of the hazard analysis is to identify biological, chemical, and physical hazards reasonably likely to occur in the process and to identify preventive measures to control those hazards. Regulation 417.1 defines preventive measures as physical, chemical, or other means that can be used to control an identified food safety hazard. FSIS is unaware of any meat or poultry production process that can be deemed categorically to pose no food safety hazards. All three types of hazards (biological, chemical, or physical) must be considered at all steps in the process, e.g. receiving, storage, and grinding.

(2) A flow chart describing the steps of each process and product flow in the establishment shall be prepared, and the intended use or consumers of the finished product shall be identified.

The flow chart is often a simple schematic picture of the process used to produce the product for an example of process flow charts refer to “Regulated Industries” module, p 30-42). The establishment should verify the process flow chart by walking through the establishment and comparing the steps in the process to the flow chart. Examples of steps in a slaughter process might include antemortem, stunning, head removal, evisceration, carcass splitting, final trim, and cooling. Steps in a processing establishment might include receiving, formulation, cooking, and cooling. Examples of steps that have been overlooked by establishments are returned product and rework.

The establishment should consider whether “at risk” populations, such as the elderly or children, are intended consumers of the product.

(3) Food safety hazards might be expected to arise from the following:
(i) Natural toxins;
(ii) Microbiological contamination;
(iii) Chemical contamination;
(iv) Pesticides;
(v) Drug residues;
(vi) Zoonotic diseases;
(vii) Decomposition;
(viii) Parasites;
(ix) Unapproved use of direct or indirect food or color additives; and
(x) Physical hazards

FSIS believes an establishment should consider the ten areas above when performing a hazard analysis.

The establishment should consider all potential food safety hazards at all steps in the process. If an establishment determines that a food safety hazard is reasonably likely to occur, they must address it with a critical control point somewhere in the process. During the initial stages of the hazard analysis, the establishment might list many different potential hazards. During assessment, however, they might find that many hazards are not

reasonably likely to occur. For example, an establishment might determine that product contamination is a potential hazard at the receiving step. After assessing the situation, the establishment determines that this is not a food safety hazard likely to occur in the process because they have a procedure in their Sanitation SOP that addresses the situation.

(b) The HACCP plan.

(1) Every establishment shall develop and implement a written HACCP plan covering each product produced by that establishment whenever a hazard analysis reveals one or more food safety hazards that are reasonably likely to occur, based on the hazard analysis conducted in accordance with paragraph (a) of this section, including products in the following processing categories:

(i) Slaughter—all species.

(ii) Raw product—ground.

(iii) Raw product—not ground.

(iv) Thermally processed—commercially sterile.

(v) Not heat treated—shelf stable.

(vi) Heat treated—shelf stable.

(vii) Fully cooked—not shelf stable.

(viii) Heat treated but not fully cooked—not shelf stable.

(ix) Product with secondary inhibitors—not shelf stable.

(2) A single HACCP plan may encompass multiple products within a single processing category identified in this paragraph, if the food safety hazards, critical control points, critical limits, and procedures required to be identified and performed in paragraph (c) of this section are essentially the same, provided that any required features of the plan that are unique to a specific product are clearly delineated in the plan and are observed in practice.

Every product must be produced under a HACCP plan when a hazard analysis reveals a food safety hazard likely to occur within the process. The establishment may develop one HACCP plan to control hazards for all products in the same processing category. For example, if an establishment produces different fully cooked products such as franks and cooked beef, they could be included in the same HACCP plan.

An establishment may develop one HACCP plan for a product that passes through multiple process categories. As an example, if an establishment slaughters and produces cut-up chicken, the product passes through both “slaughter” and “raw intact” (raw not ground) processes. The establishment may use two HACCP plans or it may address the entire slaughter and cut-up process under one HACCP plan. If an establishment slaughters chickens, produces cut-up chicken, and produces mechanically separated chicken, it would need a minimum of two HACCP plans.

The processing category is determined by the product label when it leaves the establishment. For example, certain products such as country hams and lard may be in different processing categories depending on the establishment process and l

(3) HACCP plans for thermally processed/commercially sterile products do not have to address the food safety hazards associated with microbiological contamination if the product is produced in accordance

with the requirements of part 318, subpart G, or part 381, subpart X, of this chapter.

Establishments producing thermally processed commercially sterile products are not required to address microbiological hazards if the product is produced in accordance with the canning regulations. However, the hazard analysis must still consider physical and chemical hazards at every step in the process because the current canning regulations exclusively address microbial hazards. For example, if the establishment determines foreign material is a food safety hazard likely to occur in the process, there must be a CCP somewhere in the process to control foreign material.

- (c) The contents of the HACCP plan. The HACCP plan shall, at a minimum:***
(1) List the food safety hazards identified in accordance with paragraph (a) of this section, which must be controlled for each process.

Each establishment must provide a list of the food safety hazards identified while conducting the hazard analysis. Some commonly identified hazards are pathogens such as *Listeria*, *E. coli* O157:H7, and foreign material, such as metal.

- (2) List the critical control points for each of the identified food safety hazards, including, as appropriate:***
(i) Critical control points designed to control food safety hazards that could be introduced in the establishment, and
(ii) Critical control points designed to control food safety hazards introduced outside the establishment, including food safety hazards that occur before, during, and after entry into the establishment;

If a food safety hazard is identified in the hazard analysis, and is determined to be reasonably likely to occur, there must be a critical control point somewhere in the process to address it. As an example, if a biological hazard is identified at the receiving step in an establishment that produces fully cooked product, the CCP to control the hazard might be lethality at the cooking.

- (3) List the critical limits that must be met at each of the critical control points. Critical limits shall, at a minimum, be designed to ensure that applicable targets or performance standards established by FSIS, and any other requirement set forth in this chapter pertaining to the specific process or product are met;***

Regulation 417.1 defines a critical limit as the minimum or maximum value to which a physical, biological, or chemical hazard must be controlled at a critical control point to prevent, eliminate or reduce to an acceptable level the occurrence of the identified food safety hazard. (Note: critical limits may also be expressed as a range if the decision making documents support that limit, such as in the case of the use of lactic acid as an antimicrobial intervention. If the establishment utilizes FSIS Directive 7120.1 to support the critical limit for lactic acid, the range would be 2% to 5% lactic acid in solution.) Critical limits are expressed as numbers or specific parameters and need to be measurable. Establishments must have documents supporting the selection of CCPs and critical limits. The documents should be scientific, regulatory, or technical, and show that when the critical limits are achieved, the product produced will be safe.

For example, an establishment that slaughters 4-pound birds put a CCP in the cooler 4 hours post-evisceration. The critical limit is that the average internal temperature of three carcasses must be 40° F or less. While performing a monitoring check the establishment records temperatures of 39° F, 39° F, and 42° F. The average for the three is 40° F. The average temperature critical limit does not meet the regulatory requirement of 417.1 because each carcass must meet the 40° F critical limit.

(4) List the procedures, and the frequency with which those procedures will be performed, that will be used to monitor each of the critical control points to ensure compliance with the critical limits;

The monitoring procedures and frequencies in the HACCP plan must describe a planned sequence of observations or measurements to assess whether a CCP is under control and to produce an accurate record for use in future verification. Reading the monitoring procedures and frequencies in the HACCP plan should allow visualization of what is taking place during the monitoring of a CCP. The establishment should use monitoring records to track process control. Continuous monitoring is always preferred when feasible. For example, an establishment, which uses a smokehouse to cook hams, may use a continuous time and temperature recording device to chart the time and temperature of the product in the ovens as it is cooked. When continuous monitoring is not possible, discontinuous monitoring must be performed often enough to show that the process is under control. An example of a continuous operation with discontinuous monitoring is an establishment that cooks chicken patties on a conveyor and measures the internal temperature of 10 patties every 30 minutes.

(5) Include all corrective actions that have been developed in accordance with §417.3(a) of this part, to be followed in response to any deviation from a critical limit at a critical control point; and

The HACCP plan must contain the corrective actions taken when a deviation from a critical limit occurs. An establishment may simply state “the regulatory requirements of 417.3(a) will be met when a deviation occurs” to satisfy this regulatory requirement. A prudent establishment would consider the different causes of a deviation and work through scenarios to address them. This additional information is not required to be part of the official HACCP plan.

(6) Provide for a recordkeeping system that documents the monitoring of the critical control points. The records shall contain the actual values and observations obtained during monitoring.

The HACCP plan shall list the records used to document monitoring critical control points. Records must contain actual values and observations obtained during monitoring. An example of such a HACCP record is the monitoring log. Actual values and observations must be entered on the monitoring log at the time the event occurs.

(7) List the verification procedures, and the frequency with which those procedures will be performed, that the establishment will use in accordance with §417.4 of this part.

Verification procedures and frequencies must be present in the HACCP plan. The verification procedures should be very clear. Anyone reading the verification procedures in

the HACCP plan should be able to visualize what takes place when the verification procedure is performed.

(d) Signing and dating the HACCP plan.

- (1) The HACCP plan shall be signed and dated by the responsible establishment individual. This signature shall signify that the establishment accepts and will implement the HACCP plan.**
- (2) The HACCP plan shall be dated and signed:**
 - (i) Upon initial acceptance;**
 - (ii) Upon any modification; and**
 - (iii) At least annually, upon reassessment, as required under §417.4 (a) of this part.**

The HACCP plan must be signed and dated when the establishment develops and implements the HACCP plan, when it is modified, and to indicate the annual reassessment has been performed.

(e) Pursuant to 21 U.S.C 456, 463, 608, and 621, the failure of an establishment to develop and implement a HACCP plan that complies with this section, or to operate in accordance with the requirements of this part, may render the products produced under those conditions adulterated.

If an establishment does not develop and implement a HACCP plan as required by Part 417 of the regulations, any product produced without a HACCP plan may be determined to be adulterated.

§417.3 Corrective actions.

- (a) The written HACCP plan shall identify the corrective action to be followed in response to a deviation from a critical limit. The HACCP plan shall describe the corrective action to be taken, and assign responsibility for taking corrective action, to ensure:**
- (1) The cause of the deviation is identified and eliminated;**
 - (2) The CCP will be under control after the corrective action is taken;**
 - (3) Measures to prevent recurrence are established; and**
 - (4) No product that is injurious to health or otherwise adulterated as a result of the deviation enters commerce.**

When there has been a deviation from a critical limit, the establishment must implement all four parts of corrective actions. They must:

- identify and eliminate the cause of the deviation
- ensure the CCP is under control after the corrective action is taken
- prevent recurrence of the deviation
- ensure that no product injurious to health or otherwise adulterated enters commerce

Affected product is generally considered to be that produced since the last acceptable monitoring result recorded by the establishment.

- (b) If a deviation not covered by a specified corrective action occurs, or if another unforeseen hazard arises, the establishment shall:**
- (1) Segregate and hold the affected product, at least until the requirements of paragraphs (b)(2) and (b)(3) of this section are met;**

(2) Perform a review to determine the acceptability of the affected product for distribution;

(3) Take action, when necessary, with respect to the affected product to ensure that no product that is injurious to health or otherwise adulterated, as a result of the deviation, enters commerce;

(4) Perform or obtain reassessment by an individual trained in accordance with §417.7 of this part, to determine whether the newly identified deviation or other unforeseen hazard should be incorporated into the HACCP plan.

If a deviation from a critical limit occurs that is not covered by a specified corrective action or if an unforeseen hazard is identified, the establishment must implement the following corrective actions:

- segregate and hold the affected product, at least until the requirements of paragraphs (b)(2) and (b)(3) of this section are met;
- perform a review to determine the acceptability of the affected product for distribution;
- take action, when necessary, with respect to the affected product to ensure that no product that is injurious to health or otherwise adulterated, as a result of the deviation enters commerce;
- perform or obtain reassessment by an individual trained in accordance with § 417.7 of this part, to determine whether the newly identified deviation or other unforeseen hazard should be incorporated into the HACCP plan.

(c) All corrective actions taken in accordance with this section shall be documented in records that are subject to verification in accordance with §417.4 (a)(2)(iii) and the recordkeeping requirements of §417.5 of this part.

Whatever an establishment does to fulfill all four parts of corrective action should be documented in the HACCP records. The records must be available for FSIS review.

§417.4 Validation, Verification, Reassessment.

(a) Every establishment shall validate the HACCP plan's adequacy in controlling the food safety hazards identified during the hazard analysis, and shall verify that the plan is being effectively implemented.

(1) Initial validation. Upon completion of the hazard analysis and development of the HACCP plan, the establishment shall conduct activities designed to determine that the HACCP plan is functioning as intended. During this HACCP plan validation period, the establishment shall repeatedly test the adequacy of the CCP's, critical limits, monitoring and recordkeeping procedures, and corrective actions set forth in the HACCP plan. Validation also encompasses reviews of the records themselves, routinely generated by the HACCP system, in the context of other validation activities.

It is the establishment's responsibility to develop a HACCP plan and to ensure its adequacy. Establishments may use independent consultants, process authorities, or employees trained as per 417.7 to develop and validate the plan. Validation means scientifically demonstrating that a HACCP system, as designed, effectively controls the food safety hazards identified in

the hazard analysis. While no particular validation method must be used, the data assembled to support a HACCP plan are usually of two types:

- theoretical principles from process authorities, scientific data etc.
- in-plant observations, measurements, test results, or other information demonstrating that control measures achieve the intended food safety objective

Validation must demonstrate that the HACCP plan is scientifically sound. Establishments must support the critical limits selected. They may use Appendices A or B (“Compliance guidelines for cooling heat-treated meat and poultry products”), modeling programs, or other scientific support for their critical limits. For example, a slaughter establishment with steam pasteurization has a CCP with a critical limit at 180° F for 10 seconds at the carcass surface. The establishment supported this critical limit with a scientific journal article that indicated steam applied at 180° F for 10 seconds to the carcass surface reduces pathogens by 1 log. The establishment also had records demonstrating their ability to meet the parameters of steam at 180° F for 10 seconds on the carcass surface.

FSIS believes validated data for any HACCP plan must also include some practical data or information reflecting initial validation in implementing the HACCP plan. Validation must demonstrate that the monitoring can be performed by the establishment as per the HACCP plan and when the monitoring is performed the establishment can meet the critical control points and critical limits.

- (2) Ongoing verification activities. Ongoing verification activities include, but are not limited to:**
- (i) The calibration of process-monitoring instruments;**
 - (ii) Direct observations of monitoring activities and corrective actions;**
 - and**
 - (iii) The review of records generated and maintained in accordance with § 417.5(a)(3) of this part.**

Verification procedures must ensure the HACCP plan functions as intended. All plans must, at a minimum, include three types of ongoing verification: calibration of process monitoring equipment, observation of monitoring activities and corrective actions, and records review, except for cases where one or more of the minimum ongoing verification activities are not necessary. Such scenarios may be when there are no process monitoring devices used (e.g. visual inspection at zero tolerance CCP), or in a one person operation where direct observation can not be performed. Validation and reassessment are two additional types of verification.

For example, a verification procedure for equipment calibration might look like this: “A hand-held dial thermometer is placed in slush ice water and calibrated to within $\pm 1^\circ$ of 32° F.” The establishment should have supporting data that this procedure effectively calibrates dial thermometers.

- (3) Reassessment of the HACCP plan. Every establishment shall reassess the adequacy of the HACCP plan at least annually and whenever any changes occur that could affect the hazard analysis or alter the HACCP plan. Such changes may include, but are not limited to, changes in: raw materials or source of raw materials; product formulation; slaughter or processing methods or systems; production volume; personnel; packaging; finished product distribution systems;**

or, the intended use or consumers of the finished product. The reassessment shall be performed by an individual trained in accordance with §417.7 of this part. The HACCP plan shall be modified immediately whenever a reassessment reveals that the plan no longer meets the requirements of §417.2(c) of this part.

HACCP plans are dynamic and evolving. The establishment should reassess its HACCP plan whenever any significant change in the processing environment occurs. Changes in product formulation, addition or removal of equipment, an increase in the amount of production, and the addition of new customers are just a few examples of instances when an establishment needs to reassess. The HACCP plan must be immediately modified if the reassessment reveals that the plan is no longer adequate. The individual performing the reassessment must be trained as per 417.7. FSIS believes that reassessment encompasses the different types of evaluation, from re-analyzing the verification procedures for an updated CCP to repeating the validation procedures when necessary.

(b) Reassessment of the hazard analysis. Any establishment that does not have a HACCP plan because a hazard analysis has revealed no food safety hazards that are reasonably likely to occur shall reassess the adequacy of the hazard analysis whenever a change occurs that could reasonably affect whether a food safety hazard exists. Such changes may include, but are not limited to, changes in: raw materials or source of raw materials; product formulation; slaughter or processing methods or systems; production volume; packaging; finished product distribution systems; or, the intended use or consumers of the finished product.

Even if an establishment previously did not have a HACCP plan, changes such as product formulation, new slaughter or processing methods, or the use of new raw materials should cause the establishment to reassess its hazard analysis. If any changes result in identification of a food safety hazard, the establishment should then develop a HACCP Plan.

For example, an establishment received pork pellets cooked by another establishment. The producing establishment certified that lethality adequate to control the pathogen of concern was applied, that the product was tested, and that sample results were negative. The receiving establishment addressed employee hygiene and product handling in the Sanitation SOP. The receiving establishment determined there were no food safety hazards likely to occur in the process of popping and packaging the pellets, so they did not have a HACCP plan for the process. At a later time the establishment decided to start popping raw pork skins. When the incoming materials changed, the establishment reassessed the hazard analysis to determine if a food safety hazard was likely to occur.

§417.5 Records.

(a) The establishment shall maintain the following records documenting the establishment's HACCP plan:

(1) The written hazard analysis prescribed in §417.2(a) of this part, including all supporting documentation;

The hazard analysis and all supporting documents must be in the establishment file. Supporting documentation varies from establishment to establishment because the decision making process differs. Examples of supporting data establishments might have for the hazard analysis are historical data and scientific journal articles.

(2) The written HACCP plan, including decision making documents associated with the selection and development of CCP's and critical limits, and documents supporting both the monitoring and verification procedures selected and the frequency of those procedures.

The establishment must have supporting data for CCPs and critical limits. Supporting data may include FSIS regulations, FSIS Guidelines, the FDA food code, journal articles from reputable publications, etc. Establishments may use universities, extension services, and industry associations for assistance in gathering supporting documentation. One example of supporting data for a critical limit is using Appendix B to support a stabilization CCP.

The establishment must also have supporting documentation for their monitoring procedures. The establishment must be able to support that the monitoring frequency is adequate to demonstrate process control.

This regulation also requires the establishment to have supporting documentation for verification procedures and frequencies listed in the HACCP plan. The establishment must have documents that explain how the verification procedures were determined and what information was used to determine the frequencies for these procedures.

(3) Records documenting the monitoring of CCP's and their critical limits, including the recording of actual times, temperatures, or other quantifiable values, as prescribed in the establishment's HACCP plan; the calibration of process-monitoring instruments; corrective actions, including all actions taken in response to a deviation; verification procedures and results; product code(s), product name or identity, or slaughter production lot. Each of these records shall include the date the record was made.

This regulation lists specific information that the establishment must document on their records when HACCP activities are performed. When monitoring each CCP and its critical limits, actual values must be recorded, e.g. times, temperatures, or other quantifiable values. The establishment must also document all corrective actions, calibration of process-monitoring instruments, and verification procedures and frequencies.

(b) Each entry on a record maintained under the HACCP plan shall be made at the time the specific event occurs and includes the date and time recorded, and shall be signed or initialed by the establishment employee making the entry.

The establishment shall make all entries on the records at the time the specific event occurs and sign or initial the entry. Each time a monitoring procedure is performed, the establishment must record the time, product identity, actual value and initials of the person performing the monitoring. Example: date: 9/9/01, time: 8:02 a.m., product identity: Lot A6 - chicken carcasses, actual value: 39°F, initials: MPT. When the establishment performs a verification procedure, the records must include the verification procedure performed and the results of that procedure, as well as the date, time and initials or signature of the person performing verification. For example, when the establishment performs a direct observation, the record entry might show "direct observation performed, monitoring performed as per the HACCP plan".

(c) Prior to shipping product, the establishment shall review the records associated with the production of that product, documented in accordance with this section, to ensure completeness, including the determination that all critical limits were met and, if appropriate, corrective actions were taken, including the proper disposition of product. Where practicable, this review shall be conducted, dated, and signed by an individual who did not produce the record(s), preferably by someone trained in accordance with §417.7 of this part, or the responsible establishment official.

Before shipping product, an establishment must review all records associated with the production of that product. As part of the pre-shipment review the establishment needs to insure that all critical limits have been met and all corrective actions are taken, if necessary.

There are many ways an establishment can perform pre-shipment review. They may perform it on a time basis, on specific production, or continuously as the product goes through the process. For example, an establishment might conduct pre-shipment review every hour and conduct records review verification daily. If the pre-shipment review is performed continuously, it is possible that the only documentation on the records at the time of review will be monitoring entries. If monitoring records are the only ones available, the review still satisfies the regulatory requirement. In addition, the frequency at which the verification procedures are performed may not correspond to the frequency at which the pre-shipment review is performed. The verification procedures should be reviewed, if available, at the time the pre-shipment review is performed.

(d) Records maintained on computers. The use of records maintained on computers is acceptable, provided that appropriate controls are implemented to ensure the integrity of the electronic data and signatures.

The establishment may maintain records on computer provided they have controls to protect record integrity. Even though the establishment is keeping records on the computer, they must be readily accessible to Agency personnel.

(e) Record retention.

(1) Establishments shall retain all records required by paragraph (a)(3) of this section as follows: for slaughter activities for at least one year; for refrigerated product, for at least one year; for frozen, preserved, or shelf-stable products, for at least two years.

(2) Off-site storage of records required by paragraph (a)(3) of this section is permitted after six months, if such records can be retrieved and provided, on-site, within 24 hours of an FSIS employee's request.

(f) Official review. All records required by this part and all plans and procedures required by this part shall be available for official review and copying.

It is the establishment's responsibility to maintain the records for the required amount of time per the regulation. If the establishment chooses to store the records off-site after 6 months, then the establishment must be able to provide them, upon request, within 24 hours. If the records are kept on-site after the first 6 months, they must be available upon request. Both

the hazard analysis and HACCP plan should be available upon request. If an FSIS inspector working the second shift at an establishment, requests a copy of the HACCP plan, the establishment should be able to provide it to the inspector at that time.

All of the records specified by 417.5 must be available to FSIS upon request. Along with the records, a prudent establishment would keep the HACCP plan corresponding to those records if changes at some point have been made to the HACCP plan.

§417.6 Inadequate HACCP Systems.

A HACCP system may be found to be inadequate if:

(a) The HACCP plan in operation does not meet the requirements set forth in this part;

(b) Establishment personnel are not performing tasks specified in the HACCP plan;

(c) The establishment fails to take corrective actions, as required by §417.3 of this part;

(d) HACCP records are not being maintained as required in §417.5 of this part;
or

(e) Adulterated product is produced or shipped.

If establishment personnel do not perform procedures as specified in the HACCP plan, if corrective actions are not taken, or if HACCP records are not maintained, the HACCP system may be inadequate. For example, an establishment had several deviations from a critical limit. When implementing corrective actions, they failed to address 417.3(a)(3), “measures to prevent recurrence are established.” If the establishment repeatedly did not meet that regulatory requirement, the system could be deemed inadequate as per 417.6(c).

§417.7 Training.

(a) Only an individual who has met the requirements of paragraph (b) of this section, but who need not be an employee of the establishment, shall be permitted to perform the following functions:

(1) Development of the HACCP plan, in accordance with §417.2(b) of this part, which could include adapting a generic model that is appropriate for the specific product; and

(2) Reassessment and modification of the HACCP plan, in accordance with §417.3 of this part.

(b) The individual performing the functions listed in paragraph (a) of this section shall have successfully completed a course of instruction in the application of the seven HACCP principles to meat or poultry product processing, including a segment on the development of a HACCP plan for a specific product and on record review.

Training is essential to the success of HACCP. The establishment must use trained individuals to develop, conduct reassessments of, and make modifications to HACCP plans. It is not required that the individual be an employee of the establishment or be on-site for the establishment to operate.

§417.8 Agency verification.

FSIS will verify the adequacy of the HACCP plan(s) by determining that each HACCP plan meets the requirements of this part and all other applicable regulations. Such verification may include:

- (a) Reviewing the HACCP plan;**
- (b) Reviewing the CCP records;**
- (c) Reviewing and determining the adequacy of corrective actions taken when a deviation occurs;**
- (d) Reviewing the critical limits;**
- (e) Reviewing other records pertaining to the HACCP plan or system;**
- (f) Direct observation or measurement at a CCP;**
- (g) Sample collection and analysis to determine the product meets all safety standards; and**
- (h) On-site observations and record review.**

FSIS uses various steps to verify that HACCP plans are adequate. These are further described in FSIS Directives 5000.1 and 5400.5.

Process Control Verification

***E. coli* Testing – LIVESTOCK**

§310.25 Contamination with microorganisms; process control verification criteria and testing; pathogen reduction standards.

(a) Criteria for verifying process control; *E. coli* testing.

(1) Each official establishment that slaughters livestock must test for *Escherichia coli* Biotype 1 (*E. coli*) Establishments that slaughter more than one type of livestock or both livestock and poultry, shall test the type of livestock or poultry slaughtered in the greatest number.

FSIS requires all livestock slaughter establishments to conduct microbial testing for generic *E. coli*, Biotype 1, an *E. coli* specie that is commonly found in the intestinal tract of food animals. Generic *E. coli* is an excellent indicator of fecal contamination, which is the primary pathway for contamination of meat and poultry with pathogens such as *E. coli* O157:H7, *Salmonella*, and *Campylobacter*. The testing requirement helps establishments determine the adequacy of their process control for fecal contamination. Using an Agency baseline study FSIS established verification performance criteria that reflect the prevalence of *E. coli* contamination on carcasses. Not all species tested by establishments have performance criteria available. The Agency is currently conducting field surveys to develop additional criteria.

FSIS *E. coli* criteria are guidelines, not regulatory standards. FSIS does not use company test results by themselves to take regulatory action. *E. coli* test results are considered in conjunction with other information. The company test results can support more objective assessments and help determine whether establishments meet current statutory requirements for sanitation and the prevention of adulteration. The generic *E. coli* test results play an integral role in the successful implementation of HACCP in livestock slaughter establishments.

If the establishment only slaughters one species and it is not listed in the *E. coli* regulations, the establishment is not required to test for generic *E. coli*.

The establishment must test the species that it slaughters in greatest number (major species) and that is listed in the regulations. When the major species slaughtered in a multiple-species slaughter establishment is not required by regulation to be tested the establishment must test the species produced in the next greatest number that is listed in the *E. coli* regulations.

§ 310.25 (a)(1) Continued

The establishment shall:

- (i) Collect samples in accordance with the sampling techniques, methodology, and frequency requirements in paragraph (a)(2) of this section;***
- (ii) Obtain analytic results in accordance with paragraph (a)(3) of this section; and***
- (iii) Maintain records of such analytic results in accordance with paragraph (a)(4) of this section.***

(2) Sampling requirements.

(i) Written procedures. Each establishment shall prepare written specimen collection procedures which shall identify employees designated to collect samples, and shall address location(s) of sampling, how sampling randomness is achieved, and handling of the sample to ensure sample integrity. The written procedure shall be made available to FSIS upon request.

§ 310.25 (a)(2)(i) requires that the establishment identify the employee(s) who will collect samples. The establishment procedure may simply designate a company position or title to identify the sample collector.

The regulation also requires that carcasses be selected at random. The establishment determines the methods by which randomness is achieved. For example, random number tables, computer-generated random numbers, or drawing cards may be used. In cattle, each half-carcass represents one unit eligible for sampling. Both the “leading” and “trailing” sides of a carcass should have an equal chance of being selected within the designated time frame. In swine, each whole carcass represents one unit eligible for sampling.

The location requirement in the regulation refers to the place within the establishment where the sample is collected. The half-carcass or carcass eligible for sampling should be selected from those in the cooler 12 or more hours after slaughter. The location of selection may also be at the transfer chain, a rail, or a similar place that contains carcasses that have chilled 12 hours or more. In cases where the carcasses are inaccessible in the cooler, or employee safety is jeopardized, it is acceptable to select random samples before carcasses enter the cooler. Selected carcasses may be chilled in a more accessible area and sampled after 12 hours. Similar random sample selection methods are used in establishments conducting hot-boning operations, but the samples are selected after the final wash.

If more than one shift is operating at the establishment, the sample can be taken from either shift, provided the sample selection time is based on the appropriate sampling frequency. The half-carcass or carcass for sampling must be selected at random from all the eligible half-carcasses or carcasses. The time of sampling is based on the appropriate sampling frequency. Sample selection method in establishments conducting hot-boning operations on whole or split carcasses are selected at the end of the slaughter line prior to chilling.

Finally, the written procedure must declare the actions the establishment will take to ensure the sample is handled in a manner that protects the integrity of the sample.

(ii) Sample collection. The establishment must collect samples from all chilled livestock carcasses, except those boned before chilling (hot-boned), which must be sampled after the final wash. Samples must be collected in the following manner;

(A) For cattle, establishments must sponge or excise tissue from the flank, brisket and rump, except for hide-on calves, in which case establishments must take samples by sponging from inside the flank, inside the brisket, and inside the rump.

(B) For sheep, goat, horse, mule, or other equine carcasses, establishments must sponge from the flank,

brisket and rump, except for hide-on carcasses, in which case establishments must take samples by sponging from inside the flank, inside the brisket, and inside the rump. (C) For swine carcasses, establishments must sponge or excise tissue from the ham, belly and jowl areas.

§ 310.25 (a)(2)(ii) requires carcasses to be hot-boned be sampled after the final wash. There are two sampling methods an establishment may use to collect *E. coli* samples: excision sampling and sponging. Establishments slaughtering cattle and swine may choose either method. These are described as follows:

1. Excision sampling involves aseptically cutting a surface section from the carcass (8 x 6 x ½ inch thick for beef and 10 x 5 x ½ inch thick for swine) and either sending the excision sample for laboratory analysis or running the analysis in-house. Excising tissue from a carcass is a destructive method of sampling.
2. Sponging involves aseptically swabbing a sterile sponge on a surface of the carcass (10 cm x 10 cm for beef, swine, and equines; and 10 cm x 5 cm for sheep and goats) and either sending the sponge to the laboratory for analysis or running the analysis in-house. Sponging is a nondestructive method of sampling.

Samples must also be taken from specific sites on cattle and swine carcasses, sheep, goat, horse, mule, or other equine carcasses. The three sites from which either excision or sponging samples must be taken on **cattle** carcasses are the:

- Flank
- Brisket
- Rump

In the case of **hide-on** calves, sheep, goats, horses, mules, or other equines the three sites from which sponging samples must be taken are **inside** the:

- Flank
- Brisket
- Rump

In the case of **swine**, the three excision or sponging samples must be taken from the:

- Belly
- Ham
- Jowls

FSIS assumes that meat establishments following the "*Guidelines for E. coli testing for Process Control Verification in Cattle and Swine Slaughter Establishments*" will conduct their sampling in a manner that does not jeopardize the integrity of the sample or the reliability of the test results. Because these guidelines are not regulatory requirements, the establishment may choose to use a comparable sampling technique and not be out of compliance.

(iii) Sampling frequency. Slaughter establishments, except very low volume establishments as defined in paragraph (a)(2)(v) of this section, must take samples at a frequency proportional to the volume of production at the following rates:

(A) Cattle, sheep, goats, horses, mules, and other equines: 1 test per 300 carcasses, but, a minimum of one sample during each week of operation.

Swine: 1 test per 1,000 carcasses, but a minimum of one sample during each week of operation.

The required frequency of *E. coli* testing is based on production volume.

(iv) Sampling frequency alternatives. An establishment operating under a validated HACCP plan in accordance with §417.2(b) of this chapter may substitute an alternative frequency for the frequency of sampling required under paragraph (a)(2)(iii) of this section if,

(A) The alternative is an integral part of the establishment's verification procedures for its HACCP plan and,

(B) FSIS does not determine, and notify the establishment in writing, that the alternative frequency is inadequate to verify the effectiveness of the establishment's processing controls.

In some cases an establishment operating under a validated HACCP plan may substitute an alternative frequency for the frequency in the regulation. This is allowed when the alternative frequency is an integral part of the establishment's verification procedures for its HACCP plan. An example is the case in which *E. coli* testing is built into a critical control point in the HACCP plan. The m/M criteria or the statistical process control upper limit is the critical limit for the CCP. The establishment that slaughters 9,000 cattle per year includes alternative testing frequency in the HACCP plan to sample once per week for a total of 52 samples per year, not 30 samples as would be required by the 1 test per 300 carcasses frequency.

In smaller establishments slaughtering no more than 50 animals per year, not more than 25% of the carcasses will be sampled.

(v) Sampling in very low volume establishments.

(A) Very low volume establishments annually slaughter no more than 6,000 cattle, 6,000 sheep, 6,000 goats, 6,000 horses, mules or other equines, 20,000 swine, or a combination of livestock not exceeding 6,000 cattle and 20,000 total of all livestock. Very low volume establishments that collect samples by sponging shall collect at least one sample per week, starting the first full week of operation after June 1 of each year, and continue sampling at a minimum of once each week the establishment operates until June 1 of the following year or until 13 samples have been collected, whichever comes first. Very low volume establishments collecting samples by excising tissue from carcasses shall collect one sample per week, starting the first full week of operation after June 1 of each year, and continue sampling at a minimum of once each week the establishment operates until one series of 13 tests meets the criteria set forth in paragraph (a)(5)(i) of this section.

SPECIES	VERY LOW VOLUME REQUIREMENT
Cattle	Annually slaughter < 6,000 head
Horses, Mules, Equines	Annually slaughter < 6,000 head
Sheep, Goats	Annually slaughter < 6,000 head
Swine	Annually slaughter < 20,000 head

Whether the establishment collects samples by sponging or the excision method, the regulation requires that at least one sample be collected each week of the year that the establishment slaughters. The sample year begins on June 1 of each year. Starting the first full week of operation after June 1st the establishment must collect samples as required until 13 samples and test results have been accumulated.

There is no regulatory limitation on the maximum number of tests that can be performed weekly to meet the thirteen tests requirement of § 310.25 (a)(2)(iv). It is hypothetically possible for the establishments to collect all thirteen samples in one week and meet regulatory requirement for the production year.

(B) Upon the establishment's meeting requirements of paragraph (a)(2)(v)(A) of this section, weekly sampling and testing is optional, unless changes are made in establishment facilities, equipment, personnel or procedures that may affect the adequacy of existing process control measures, as determined by the establishment or FSIS. FSIS determinations that changes have been made requiring resumption of weekly testing shall be provided to the establishment in writing.

After the initial 13 tests are completed for the production year, further *E. coli* testing is optional for the establishment. However, if the establishment determines that there have been changes (remodeling, new equipment, new employees, or new procedures) that affect how well the process works, the establishment must resume weekly testing. Another series of 13 tests can establish the effectiveness of the changed process.

If FSIS determines there have been changes that affect the process, the information must be provided to the company in writing. The establishment would then be required to resume *E. coli* testing to judge the process control.

(3) Analysis of samples. Laboratories may use any quantitative method for analysis of E. coli that is approved as an AOAC Official Method of the AOAC International (formerly the Association of Official Analytical Chemists) or approved and published by a scientific body and based on the results of a collaborative trial conducted in accordance with an internationally recognized protocol on collaborative trials and compared against the three tube Most Probable Number (MPN) method and agreeing with the 95 percent upper and lower confidence limit of the appropriate MPN index.

(4) Recording of test results. The establishment shall maintain accurate records of all test results, in terms of CFU/cm² of surface area sponged or excised. Results shall be recorded onto a process control chart or table showing at least the most recent 13 test results, by type of

livestock slaughtered. Records shall be retained at the establishment for a period of 12 months and shall be made available to FSIS upon request.

(5) Criteria for evaluation of test results.

(i) An establishment excising samples from carcasses is operating within the criteria when the most recent E. coli test result does not exceed the upper limit (M), and the number of samples, if any, testing positive at levels above (m) is three or fewer out of the most recent 13 samples (n) taken, as follows:

Table 1. --Evaluation of *E. coli* Test Results

Types of Livestock or Poultry	Lower limit of marginal range (m)	Upper limit of marginal range (M)	Number of samples tested (n)	Maximum number permitted in marginal range (c)
Cattle	Negative*	100 CFU/cm ²	13	3
Swine	10 CFU/cm ²	10,000 CFU/cm ²	13	3

*Negative is defined by the sensitivity of the method used in the baseline study with a limit of sensitivity of at least 5 CFU/cm² carcass surface area.

Cattle and swine slaughter establishments may choose either excision or sponge sampling, however, the performance criteria of “m” (minimum value) and “M” (maximum value) is currently only available for excision samples. Table 1 above shows the “m” and “M” values for *E. coli* performance criteria set forth by the Agency for the species that have had a baseline study completed.

Establishments must document or record *E. coli* test results. Each test result must be recorded in terms of colony forming units per square centimeter (cfu/cm²) for excision and sponging results. As stated earlier, the *E. coli* performance criteria, or “m” and “M”, are not enforceable regulatory standards.

E. coli test result levels are separated into three categories for the purpose of process control verification:

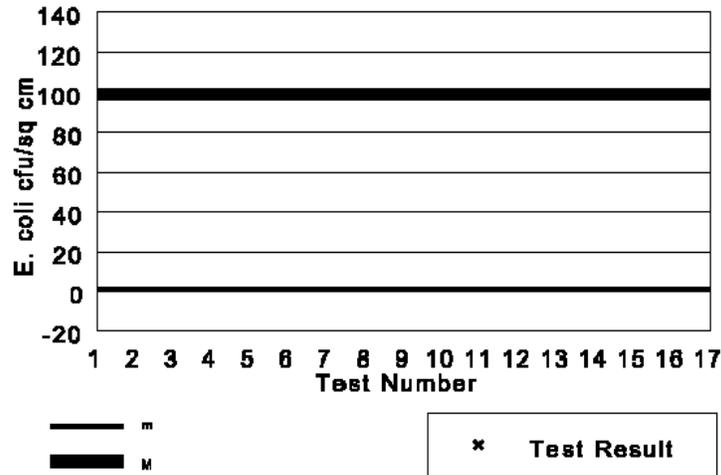
- acceptable, marginal (represented by “m”)
- unacceptable (represented by “M”)

Marginal results (“m”) are those within the worst 20% of overall industry performance in terms of *E. coli* counts. More than three marginal results in the last 13 tests are deemed unacceptable.

Results above “M” are within the worst 2% of overall industry performance. Any single test result exceeding “M” is deemed unacceptable.

The “m” and “M” values are applied to a moving window of 13 test results. Only the last 13 test results are evaluated to determine if the performance criteria are met. Any single test result exceeding “M” is unacceptable. More than three results exceeding the marginal limit in the last 13 tests is also unacceptable.

The establishment may elect to use a table type form or a control chart to plot *E. coli* results. Examples of these types of documents follow.



The above example is a control chart. The *E. coli* test results are plotted vertically using the *E. coli* CFU/cm² axis. Each sample result is plotted, starting at Test Number “1” in the horizontal axis and moving to the right. The heavier dark line (at 100 CFU/cm²) represents the upper limit of the marginal range or big “M”. The lighter dark line (at 0 CFU/cm²) represents the lower limit of the marginal range or little “m”.

Test #	Date	Time Collected	Test Result (cfu/cm ²)	Result unacceptable?	Result marginal?	Number marginal or unacceptable in last 13	Pass/Fail ?
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

This is an example of a table form. The *E. coli* test results are entered from the top down as they are received. The results are evaluated using a moving window of the last thirteen samples collected. Example: Test #1 thru 13, 2 thru 14, 3 thru 15, 4 thru 16, etc., would be used to determine if the *E. coli* test results meet the m/M criteria. With each new test result recorded the window would move ahead one result so that a set of thirteen sample results is maintained at all times. The column "Result unacceptable" is marked "yes" if the upper control limit ("M") has been exceeded and the column "Results marginal" is marked "yes" if the result of the *E. coli* sample is above the lower control limit ("m"), but not above "M". The "number marginal or unacceptable in the last 13" column tracks the number of results in the marginal range within the last thirteen results.

To illustrate the use of *E. coli* performance criteria, *E. coli* sample results covering a period of seventeen tests have been plotted on each of the two types of formats previously illustrated. The data plotted on both forms is from an establishment that slaughters cattle and samples were taken using the excision method (refer to Figure 1 and Figure 2).

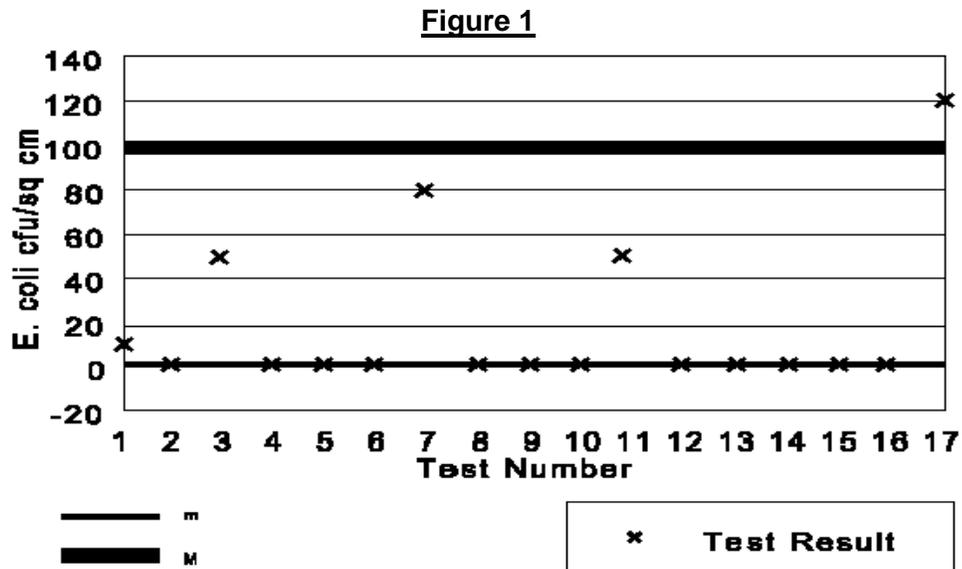


Figure 2

Test #	Date	Time Collected	Test Result (cfu/cm ²)	Result unacceptable?	Result marginal?	Number marginal or unacceptable in last 13	Pass/Fail ?
1	10-07	08:50	10	No	Yes	1	Pass
2	10-07	14:00	Negative	No	No	1	Pass
3	10-08	07:10	50	No	Yes	2	Pass
4	10-08	13:00	Negative	No	No	2	Pass
5	10-09	10:00	Negative	No	No	2	Pass
6	10-09	12:20	Negative	No	No	2	Pass
7	10-10	09:20	80	No	Yes	3	Pass
8	10-10	13:30	Negative	No	No	3	Pass
9	10-11	10:50	Negative	No	No	3	Pass
10	10-11	14:50	Negative	No	No	3	Pass
11	10-14	08:40	50	No	Yes	4	Fail
12	10-14	12:00	Negative	No	No	4	Fail
13	10-15	09:30	Negative	No	No	4	Fail
14	10-15	15:20	Negative	No	No	3	Pass
15	10-16	07:30	Negative	No	No	3	Pass
16	10-16	11:40	Negative	No	No	2	Pass
17	10-17	10:20	120	Yes	No	3	Fail

The following observations can be made from the above data. First, test number eleven documents the fourth test result in the marginal (“m”) range. Therefore, the establishment has entered an unacceptable process control status because the fourth marginal result exceeds the limit of no more than three marginal results in the past 13 consecutive tests.

Secondly, tests number twelve and thirteen are negative, therefore, in the acceptable range. However, if you consider the last 13 test results, or the 13-test moving window, there are still more than three results in the marginal range. The company has marked its record to show that it is still in a failing mode because of the four marginal test results. In reality this is *not* an unacceptable result because tests twelve and thirteen are negative, indicating the process is back in control. The failure documented on the table for tests twelve and thirteen cannot be gleaned as evidence of a new problem. The log or documentation of corrective action taken for the first failure at test number eleven should be adequate to verify that the problem was addressed.

Third, at test number fourteen the number of marginal results in the last thirteen tests window is reduced to three. The marginal result for test number one is dropped and replaced by an acceptable result as the 13-test window moves ahead one line; i.e. the moving window is tests 2 through 14.

The fourth observation possibly made from the data annotated on the records is that the test result for test number seventeen exceeds 100 cfu/cm², the “M” value for cattle. Any result over 100 cfu/cm² is automatically unacceptable. It only takes one test in the “M” range to indicate the establishment may not have adequate process control.

(ii) Establishments sponging carcasses shall evaluate E. coli test results using statistical process control techniques.

If the sponging method is selected, the establishment must use statistical process control for evaluating test results.

If the cattle or swine establishment is using the sponge technique, statistical process control must be used, not the “m” and “M” criteria. Charts or tables of the sample results must show at least the most recent 13 test results, if they are available.

(6) Failure to meet criteria. Test results that do not meet the criteria described in paragraph (a)(5) of this section are an indication that the establishment may not be maintaining process controls sufficient to prevent fecal contamination. FSIS shall take further action as appropriate to ensure that all applicable provisions of the law are being met.

Whenever an establishment determines that its *E. coli* test results do not meet “m” and “M” performance criteria it must take corrective action to bring the process back into control. In the case of establishments using statistical process control, when *E. coli* test results do not meet *E. coli* limits set by the establishment, corrective action to regain process control must be taken.

Although the establishment is required to make corrections to its process to regain control of contamination, it is **not** required to document those corrective actions.

(7) Failure to test and record. Inspection shall be suspended in accordance with rules of practice that will be adopted for such proceedings upon a finding by FSIS that one or more provisions of paragraphs (a) (1)-(4) of this section have not been complied with and written notice of same has been provided to the establishment.

When establishments do not evaluate their test results §310.25(a)(5), they might not be maintaining process controls sufficient to prevent fecal contamination. The District Office will be notified of these instances. District management and will decide what further action should be taken to ensure all applicable provisions of the law are being met.

Microbiological Sampling for Poultry Slaughter (other than Ratite) Operations

The purpose of the new sampling requirements is to ensure that establishments monitor and evaluate the effectiveness of their procedures to prevent contamination of carcasses by enteric pathogens and visible fecal material on an ongoing basis. Fecal contamination is a principal source of pathogenic organisms that contaminate poultry carcasses. Under the Modernization of Poultry Slaughter Inspection final rule establishments that slaughter poultry, other than ratites, are required to perform microbiological sampling and analysis, for example, testing for *Salmonella*, *Campylobacter*, or indicator organisms such as aerobic plate count (APC), total coliform, Enterobacteriaceae, and *Escherichia coli*, Biotype I, also known as generic *E. coli*.

Because establishments have differences in their operations, each establishment has the flexibility to develop a sampling plan and determine the microbial organism that will accurately monitor the effectiveness of its process control procedures.

Microbiological test results that represent the level of microbiological contamination at key steps in the slaughter process are necessary for the establishment to provide comprehensive objective evidence to demonstrate process control. Process control consists of the programs and procedures that an establishment implements to ensure its process prevents contamination of poultry carcasses and parts, including contamination with pathogens and fecal material. Process control also ensures that the resulting product meets applicable standards or definitions.

Inspection Program Personnel (IPP) Responsibilities

In poultry slaughter establishments (other than ratite), IPP are to conduct verification tasks, as outlined in Directive 5000.1 following the verification instructions in Notice 64-14. The PHIS verification task that IPP perform depends on how the establishment has incorporated its written procedures for preventing contamination of carcasses and parts by enteric pathogens and fecal contamination throughout the entire slaughter and dressing operation in its HACCP system. For instance:

- If the establishment's written procedures are part of its HACCP plan, IPP are to verify HACCP regulatory requirements by performing the **Slaughter HACCP verification task** when it has been scheduled in PHIS.
- If the establishment's written procedures are part of its Sanitation SOPs, IPP are to verify that the establishment meets all Sanitation SOP regulatory requirements by performing the **Operational SSOP Review and Observation task** when it has been scheduled in PHIS.
- If the establishment's written procedures are part of another prerequisite program or other control measures, IPP are to verify the implementation of such program by performing the **Slaughter HACCP verification task** when it has been scheduled in PHIS.

IPP are to perform the appropriate PHIS verification task on a **routine** basis at the frequency specified in the establishment's task list. IPP are also to initiate a **directed** verification task if they observe noncompliance with the requirements in 381.65(g) and (h) while performing other tasks or when instructed to do so by supervision or other policy issuances.

IPP are to verify that the poultry slaughter establishment:

- Developed a written sampling program that identifies the specific microorganisms being tested and location/frequency where samples are collected,
- Incorporated its written sampling program for preventing contamination by enteric pathogens into its HACCP system,
- Implements and maintains its written sampling program,
- Maintains scientific and technical documentation to support the decisions that the establishment made in designing the sampling program,

- Maintains daily records documenting the implementation and monitoring of its procedures including sample results

Microbiological Sampling and Analysis Verification

Each poultry slaughter establishment's written procedures for preventing contamination of carcasses and parts with enteric pathogens and fecal material must include sampling and analysis for microbial organisms.

The regulations require each establishment to maintain scientific and technical documentation to support the judgments that the establishment made in designing the sampling program. The regulations prescribe the minimum requirements for the location and frequency of sampling, based on the establishment size and production volume. Each establishment must maintain daily records to document the implementation and monitoring of their procedures including records documenting the test results of its sampling plan.

Note: Establishments may use *Salmonella* Initiative Program (SIP) microbial data as part of their sampling plan to monitor their process control, provided they meet minimum frequencies and location requirements.

A Microbiological Testing of Raw Poultry Summary Chart (Attachment 2 of this handout) is provided as a reference for the establishment size, sampling frequencies, and sampling locations requirements. It is a quick and easy inspection aid when conducting the PHIS verification task.

IPP must understand what each statement of the regulation means in order to conduct the appropriate PHIS verification task. IPP address the requirements of 9 CFR 381.65(g) and (h) as follows:

1. Sampling requirements – Microbial Indicator Organism paragraph (g) of section 381.65

Each establishment must develop its own sampling program/procedure that identifies the specific microbiological organisms (i.e., *Salmonella*, *Campylobacter*, or other enteric organisms) for which the establishment will test to monitor the effectiveness of its process control procedures that prevent contamination of carcasses and parts with enteric pathogens and fecal material.

Note: Very small and very low volume poultry slaughter establishments (as defined below) operating under **Traditional Inspection** can choose to continue conducting generic *E. coli* testing at post-chill to meet the requirements under the Modernization of Poultry Slaughter Inspection final rule. FSIS considers the requirements under the former §381.94(a) regulations for generic *E. coli* testing of poultry to be scientifically validated “**safe harbor**” for monitoring process control.

2. Sampling requirements – Location (paragraph (g)(1) and paragraphs (g)(1)(i) and (ii) of section 381.65) and technique

Poultry slaughter establishments are codified by size and annual slaughter volume, according to regulation 381.65(g)(1)(i) and (ii), and FSIS Notice 64-14.

- Very small establishments are establishments with fewer than 10 employees or annual sales of less than \$2.5 million.
- Very low volume (VLV) establishments annually slaughter no more than 440,000 chickens, 60,000 turkeys, 60,000 ducks, 60,000 geese, 60,000 guineas, 60,000 squabs or a combination of all types of poultry not exceeding 60,000 turkeys and 440,000 birds total.

The location refers to the place within the establishment where the sample is collected. Very small establishments and VLV establishments operating under **Traditional inspection** are required to collect samples for microbial organisms at the **post-chill point** in the process. All other establishments must collect samples at both the **pre-chill and post-chill** locations.

The pre-chill location for sampling is any point in the slaughter process from re-hang to just prior to the chiller. The post-chill location for sampling is a point in the slaughter process after the carcass exits the chiller and after all slaughter interventions are completed, which is the same point in the process that FSIS collects samples for *Salmonella* and *Campylobacter* verification testing.

Carcasses must be selected at the required points in the process (pre and post chill). At the post-chill site, samples should be collected after the final wash and the application of any final antimicrobial interventions. A drip time of at least 60 seconds should be observed before sample collection to prevent excessive antimicrobial carryover in the collected sample.

Note: Antimicrobials used during processing steps may make it harder to detect live bacteria in the collected sample if the carcass is not allowed adequate drip time before collecting the sample. Consequently, antimicrobial carryover (residual) can result in altered test results (lower bacterial counts), may invalidate the test results, and may not provide a true representation of the establishment's process control.

The sampling methods for collecting carcass samples may include the nondestructive sponge technique for sample collection from turkeys and geese (back and thigh) and a whole bird rinse technique for sample collection from chickens, guineas, ducks, geese, and squabs. All carcass samples should be taken using aseptic techniques.

The establishment must provide scientific or technical support for their sampling technique and sample site on the carcass. If IPP have concerns with the establishment's support, they should contact the District Office through supervisory channels.

3. Sampling requirements – frequency paragraphs (g)(2)(i) and (ii) of section 381.65

VLV establishments must collect and analyze samples at least once during each week of operation starting June 1 of every year. If, after consecutively collecting 13 weekly samples, a VLV establishment can demonstrate that it is effectively maintaining process control, it may modify its sampling plan. In this case the establishment would need to document the

changes and maintain documentation showing that the changes allow the establishment to continue to effectively monitor process control.

Seasonal VLV operations must complete all microorganism testing during whichever months it operates. For example, a seasonal duck slaughter establishment that operates from September through December must begin testing during its first full week of operations and complete 13 tests before operations end in December.

All other establishments (including very small establishments) must collect and analyze a pair of samples, one at pre-chill and one at post-chill, at the following frequencies:

- Chickens: once per 22,000 carcasses but at a minimum of once during each week of operation;
- Turkeys, ducks, geese, guineas, and squabs: once per 3,000 carcasses but at a minimum once each week of operation.

Slaughter volume does not always match frequency rates in the regulations. Establishments should account for extra slaughter volume. This can be done by conducting additional microbiological tests. For example, a chicken establishment that slaughters 40,000 birds per day should test at least once a day at the 22,000 birds per test frequency. However, the remaining 18,000 birds should also be accounted for to monitor process control. To account for the extra slaughter volume, the establishment could “carry over” the 18,000 extra birds to the next day’s volume and conduct two (2) microorganism tests on the second day.

4. Random selection of carcasses

Samples should be collected randomly at the frequency determined by the establishment as part of its sampling plan. At a minimum, the establishment must collect samples at the frequency specified under 9 CFR 381.65(g)(2). If more than one shift is operating at the establishment, the sample can be taken on any shift. Different methods of selecting the specific carcass for sampling could be used, but the method used should include the use of random numbers to ensure that testing data is not biased. Examples of methods include random number tables, calculator or computer-generated random numbers, or drawing cards.

The carcass that is sampled should be selected at random from all eligible carcasses. If there are multiple lines or chillers, randomly select the line or chiller for sample collection for that interval. Each line or chiller should have an equal chance of being selected at each sampling interval within the relevant time frame (based on the sampling frequency for the plant).

The establishment must provide scientific or technical support the decisions it made in designing the sampling program.

5. Sample analysis and testing method

To obtain the most accurate results, samples should be analyzed as soon after collection as possible. If samples must be transported to an off-site laboratory, they should be refrigerated and then shipped refrigerated, on the same day they were collected, via an

overnight delivery or courier service to the laboratory. A sample should arrive at the laboratory and be analyzed no later than the day after it is collected.

In addition, establishments should ensure that microbiological testing is reliable and meets its food safety needs. Each establishment needs to determine whether sample analysis will be performed by an outside or on-site laboratory. FSIS has available the compliance guideline “*Establishment Guidance for the Selection of a Commercial or Private Microbiological Testing Laboratory*” if the establishment decides to use an outside laboratory to analyze microbiological samples. This guidance document should be particularly useful to very small establishments when they are selecting a commercial or private laboratory to analyze establishment microbiological samples.

FSIS has also made available a list of *Foodborne Pathogen Test Kits Validated by Independent Organizations* for the detection of relevant foodborne pathogens (i.e., *Salmonella*, *Campylobacter*, *E. coli* O157:H7, and *Listeria spp.* including *L. monocytogenes*). This list is intended to be informational and is not an endorsement or approval of any particular testing method, regardless of its inclusion in the list.

Poultry slaughter establishments (other than ratite) must include the analysis of microbial organisms in their sampling procedures as part of their HACCP system (381.65(g)). Therefore, scientific and technical documentation must be provided to support the design of the sampling program. The Agency recommends that the industry follow the guidelines in the document titled “FSIS Compliance Guideline: HACCP Validation” published on May 2013. The documentation can be found in the FSIS website at:

http://www.fsis.usda.gov/wps/wcm/connect/a70bb780-e1ff-4a35-9a9a-3fb40c8fe584/HACCP_Systems_Validation.pdf?MOD=AJPERES

IPP are to review the establishment’s written programs, scientific and technical support, and records to verify that the laboratory analyzes the samples using an AOAC Official Method or one validated by another recognized independent testing body. When in doubt about whether the laboratory testing procedure is acceptable, IPP should go through the supervisory chain-of-command to the District Office for assistance.

6. Records of test results – paragraphs (g)(2)(iii) and (h) of section 381.65

Official poultry slaughter establishments must maintain daily records documenting the implementation and monitoring of its procedures required under paragraph (g) including accurate records of all test results from its sampling plan for at least one year. These records can be maintained in an electronic format on a computer, provided there are measures in place to ensure the integrity of the electronic data. These records must be readily accessible for review by IPP upon request.

IPP are to verify that the establishment maintains daily records documenting the implementation and monitoring of its procedures, makes these records available for IPP to review and retains these records for one year, and implements appropriate controls to ensure the integrity of electronic data if records are maintained on computers

7. Criteria for evaluation of test results

Poultry slaughter establishments should use statistically valid approach or statistical process control (SPC) to interpret their microbiological test results as previously discussed in this handout. Establishments gather initial test results and set the upper control limit that is used to assess whether the slaughter process is under control. As long as the test results remain below the upper control limit, the slaughter process is considered under control.

In cases where an establishment does not have the resources or capacity to develop and implement their own statistical control limits or procedures, establishments can utilize the results from FSIS nationwide livestock or poultry surveys. The tables below demonstrate the indicator organism median values for chickens and turkeys.

Table 1 - Indicator Organism Median Values for Chickens

	Median (CFU/mL)			
	Generic E. coli	APC	Enterobacteriaceae	Total Coliform
Carcass – Rehang	540	28,000	1,600	940
Carcass – Post Chill	20	260	20	20

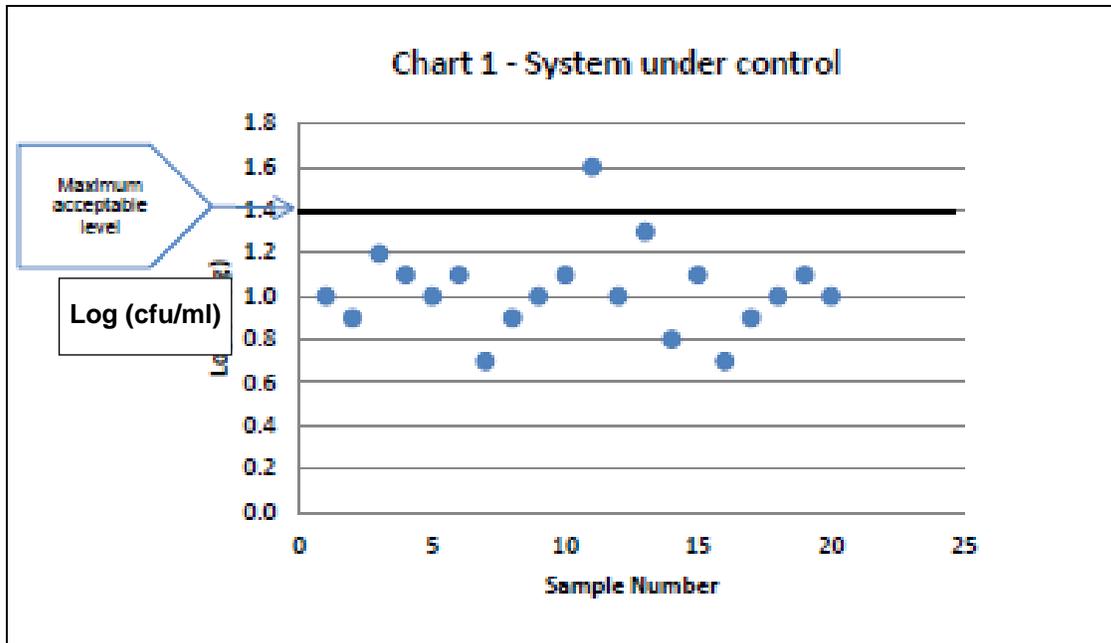
Table 2 - Indicator Organism Median Values for Turkeys

	Median (CFU/mL)			
	Generic E. coli	APC	Enterobacteriaceae	Total Coliform
Carcass – Rehang	22	1,800	50	40
Carcass – Post Chill	<1.2	18	<1.2	<1.2

An establishment sample value that is higher than the corresponding one listed in the table indicates the establishment may not be maintaining process control and may be less likely to meet applicable performance standards. Sample values lower than the one listed in the table indicate the establishment may be maintaining process.

SPC usually includes the use of a control chart, which plots data over time but also displays an upper control limit for specific measurements and a centerline (the average), above and below which there is an equal number of sample results. A sample result above the upper control limit would indicate the likely presence of a special cause of variation that should be addressed. Results within control limits indicate simply that the process is in control.

The example below shows a SPC chart for a poultry slaughter operation which plots test results for an indicator organism in terms of sample number, along the horizontal X-axis, against Log cfu/ml on the Y-axis. This chart illustrates a pattern of an indicator organism test results that would be seen in a well-controlled system. In a well controlled system, the majority of the test results will be clustered around a central value (the average). It is important to note that even in a well-controlled system there is some frequency of isolated results above the acceptable level.



As part of its process control procedures, an establishment should define the actions it will take if the microbiological test results obtained through its sampling are above the limits it has set. The establishment should delineate what its actions will be, who will take each action, how the outcome of these actions will be documented, and how it will be verified.

FSIS has made available the *FSIS Compliance Guidelines for the Control of Salmonella and Campylobacter in Raw Poultry*. The guidelines summarize known control points for *Salmonella* and *Campylobacter* in the pre- and post-harvest production process. Establishments should use this compliance guide to improve management practices, to ensure effective dressing operations and to assist in investigating when there is a loss of control of the slaughter process.

When IPP review the establishment's records that document its microbiological test results, they should look for trends in the test results that indicate a loss of process control. For example, IPP are to look for:

- A significant number of test results that exceeded the establishment's upper control criteria, if the establishment has such criteria,
- Instances where the test results exceed the establishment's criteria by a large amount over a relatively short period of time (e.g., days or weeks); or
- Test results that show a trend of worsening performance over a relatively long period of time (e.g., days, months, seasonal).

Very Small or Very Low Volume Establishments that Slaughter Poultry under Traditional Inspection Using the Safe Harbors to Monitor Process Control

The Agency considers former provisions 381.94(a)(2)(i), (a)(3), and (a)(5)(i) as safe harbors if very small and very low volume establishments slaughter poultry under Traditional Inspection chooses to test for generic *E. coli* at post chill as the indicator microorganism.

These establishments use the M/m values in the following table and a moving window of the last 13-documented test results to evaluate process control.

Type of poultry	Lower limit of marginal range (m)	Upper limit of marginal range (M)	Number of Samples tested (n)	Maximum number permitted in the Marginal range
Chickens	100 cfu/ml	1,000 cfu/ml	13	3

An establishment is operating within the criteria when the most recent generic *E. coli* test result does not exceed the upper limit (M), and the number of samples, if any, testing positive at levels above (m) is three or fewer out of the most recent 13 samples (n) taken.

Whenever a prudent poultry slaughter establishment determines that its generic *E. coli* test results do not meet m/M performance criteria, it should take necessary actions to bring the slaughter process back into control.

8. Sample Integrity

Even though the regulatory requirements in 9 CFR 381.65(g) for poultry slaughter microbiological testing programs do not specifically address the handling of the samples to ensure sample integrity, a prudent establishment should include a description of how samples are handled ensure the sample integrity. Remember, the regulation requires each poultry slaughter establishment to incorporate their written procedures in its HACCP system which must comply with the 9 CFR 416 or 417 regulations.

Poultry Slaughter Operations and Procedures – 381.65(g) and 381.65(h)

Sec. §381.65 Operations and procedures, generally

(g) *Procedures for controlling contamination throughout the slaughter and dressing operation.* Official poultry slaughter establishments must develop, implement, and maintain written procedures to prevent contamination of carcasses and parts by enteric pathogens and fecal contamination throughout the entire slaughter and dressing operation. Establishments must incorporate these procedures into their HACCP plans, or sanitation SOPs, or other prerequisite programs. At a minimum, these procedures must include sampling and analysis for microbial organisms in accordance with the sampling location and frequency requirements in paragraphs (g)(1) and (2) of this section to monitor their ability to maintain process control.

(1) *Sampling locations.* Establishments, except for very small establishments operating under Traditional Inspection or very low volume establishments operating under Traditional Inspection must collect and analyze samples for microbial organisms at the pre-chill and post-chill points in the process. Very small establishments operating under Traditional Inspection and very low volume establishments operating under Traditional Inspection must collect and analyze samples for microbial organisms at the post-chill point in the process.

(i) Very small establishments are establishments with fewer than 10 employees or annual sales of less than \$2.5 million.

(ii) Very low volume establishments annually slaughter no more than 440,000 chickens, 60,000 turkeys, 60,000 ducks, 60,000 geese, 60,000 guineas, or 60,000 squabs.

(2) *Sampling frequency.* (i) Establishments, except for very low volume establishments as defined in paragraph (g)(1)(ii) of this section, must, at a minimum, collect and analyze samples at a frequency proportional to the establishment's volume of production at the following rates:

(A) *Chickens.* Once per 22,000 carcasses, but a minimum of once during each week of operation.

(B) *Turkeys, ducks, geese, guineas, and squabs.* Once per 3,000 carcasses, but at a minimum once each week of operation.

(ii) Very low volume establishments as defined in paragraph (g)(1)(ii) of this section must collect and analyze samples at least once during each week of operation starting June 1 of every year. If, after consecutively collecting 13 weekly samples, a very low volume establishment can demonstrate that it is effectively maintaining process control, it may modify its sampling plan.

(iii) Establishments must sample at a frequency that is adequate to monitor their ability to maintain process control for enteric pathogens. Establishments must maintain accurate records of all test results and retain these records as provided in paragraph (h) of this section.

(h) *Recordkeeping requirements.* Official poultry slaughter establishments must maintain daily records sufficient to document the implementation and monitoring of the procedures required under paragraph (g) of this section. Records required by this section may be maintained on computers if the establishment implements appropriate controls to ensure the integrity of the electronic data. Records required by this section must be maintained for at least one year and must be accessible to FSIS.

***Salmonella* and *Campylobacter* Performance Standards Verification Testing**

Introduction

The pathogen reduction program is an integral part of the FSIS food safety strategy. It stimulates improvements in food safety practices by establishing guidelines and ensuring proper process control. FSIS established performance standards for *Salmonella* in July 1996, as part of the *Pathogen Reduction; Hazard Analysis Critical Control Point (PR/HACCP) Systems; final rule*.

In May 2010, FSIS published a Federal Register Notice (Docket No. FSIS-2009-0034) The PR/HACCP Final Rule established *Salmonella* performance standards that are used to verify process control in meat and poultry slaughter and processing establishments that produced certain classes of product (9 CFR 310.25(b)(1) and 381.94(b)(1), respectively). The performance standards were developed using national baseline studies conducted before the rule's implementation. Only the performance standards for livestock carcasses and certain raw ground meat products (9 CFR 310.25(b)) are still applicable.

Since then, FSIS has conducted additional prevalence and risk assessments for pathogens in FSIS regulated products, revised the performance standards to meet public health goals, and has published a number of Federal Register Notices (FRN).

- FSIS published new performance standards in 2010 and 2011 for *Salmonella* and *Campylobacter* for chilled carcasses in young chicken (broiler) and turkey slaughter establishments. The Agency has identified *Campylobacter* as part of FSIS's pathogen reduction strategy and established *Campylobacter* performance standards for poultry carcasses.
- In December 2012, FSIS informed establishments that produce not ready-to-eat (NRTE) ground or otherwise comminuted chicken and turkey products that they were required to reassess their HACCP plans (FRN Docket No. 2012-0007; April 21, 2014) as a result of two multi-state outbreaks linked to ground turkey products. FSIS also expanded the *Salmonella* sampling beyond ground chicken and turkey to include all forms of non-breaded, non-battered comminuted Not-Ready-to-Eat (NRTE) poultry products to determine the prevalence of *Salmonella* and *Campylobacter* in NRTE comminuted poultry, and to develop pathogen reduction performance standards for these products.
- In 2014, FSIS published the Modernization of Poultry Slaughter Inspection; Final Rule (Federal Register Docket No. FSIS-2011-0012; August 21, 2014) to facilitate pathogen reduction in poultry products, improve the effectiveness of poultry slaughter inspection, make better use of Agency's resources, and remove unnecessary regulatory obstacle to innovation. In this publication, FSIS informed industry that it was removing the codified *Salmonella* pathogen reduction performance standards for poultry (9 CFR 381.94(b)). Furthermore, in another publication (Federal Register Docket No. FSIS-2012-0038; June 5, 2014), FSIS announced that it will analyze for *Salmonella* all raw beef samples collected for shiga

toxin-producing *E. coli* (STEC) analysis including the follow-up samples in response to STEC positive results. In addition, the raw ground beef samples portion for *Salmonella* analysis increased from 25 grams to 325 grams. FSIS will gather data necessary to determine the prevalence of *Salmonella* in ground beef and beef trim to propose new performance standards for ground beef.

- In January 2015, the Agency identified new *Salmonella* and *Campylobacter* performance standards for raw chicken parts and NRTE comminuted poultry products. (FRN Docket No. FSIS-2014-0023; January 26, 2015). It also announced that it will use the results of routine sampling throughout the year, using a moving window approach, to assess whether the establishment's processes are effectively addressing pathogens on poultry carcasses and other products derived from these carcasses. In this publication, FSIS is also implementing an exploratory sampling of raw pork products for pathogens of public health concern, as well as indicator organisms.

Why *Salmonella* and *Campylobacter*?

Salmonella was selected as the target pathogen because it is the leading cause of foodborne illness among enteric pathogens, it is present at varying frequencies on all types of raw meat products, and it can easily be tested for in a variety of products. Furthermore, improvements in process control that result in reductions in *Salmonella* are expected to result in reductions of other pathogens found in the intestines of animals.

Campylobacter species, specifically *C. jejuni* and *C. coli*, are most often isolated from the intestinal tract of poultry as well as in poultry products. *Campylobacter* bacteria are the second most frequently reported cause of food borne illness, and *Campylobacter jejuni* is the most common strain causing illness.

Salmonella and *Campylobacter* can be transmitted to humans by eating foods contaminated with animal feces. The goal of the newly revised *Salmonella* and *Campylobacter* testing program is to protect the consumer from contaminated products, especially from fecal contamination, by verifying that each establishment's performance meets the new performance standards for poultry as well as the *Salmonella* performance standard for meat products as codified in 9 CFR 310.25(b). In addition to reporting individual *Salmonella* and *Campylobacter* sample results to establishments, FSIS posts nationwide *Salmonella* and *Campylobacter* data on its website on a quarterly basis.

FSIS collects raw meat and poultry products samples from establishments and test the samples for *Salmonella* and *Campylobacter* to verify that establishments are meeting the pathogen reduction performance standards. Pathogen reduction performance standards for raw products are an essential component of FSIS food safety strategy as they provide a direct measure of progress in controlling and reducing the most significant hazards associated with raw meat and poultry products. Accordingly, the collection of samples in establishments by inspection program personnel is a significant Agency priority.

***Salmonella* and *Campylobacter* Verification Testing**

Testing is conducted in plants by FSIS personnel, who collect both carcass and ground product samples.

The *Salmonella* and *Campylobacter* verification sampling is conducted in establishments by FSIS inspection program personnel (IPP). IPP will collect samples using on-going scheduled sampling (routine sampling) using a moving window approach to assess process control for all *Salmonella* performance standards.

It is important for IPP in establishments slaughtering or producing raw intact or raw non-intact chicken and turkey products to update the establishment's Public Health Information System (PHIS) profile information as per FSIS Notice 12-15. The Agency has made changes to the product group options in the PHIS establishment profile to identify establishments that produce specific types of raw intact and non-intact chicken and turkey products.

Products Eligible for Sampling

Raw ground products, sampled and **analyzed for *Salmonella*** include:

- Ground and chopped raw meat from cattle carcasses (beef or veal which may or may not contain added ingredients, spices, or seasonings), that meet the standards of identity for ground and chopped beef (9 CFR 319.15(a)) and hamburger (9 CFR 319.15(b)). Sampled products may contain meat derived from advanced meat recovery (AMR) systems, but AMR meat by itself is not sampled.
 - Products that are **not** sampled in this program include beef patties as defined in 9 CFR 319.15(c), and fabricated steaks and similar products as defined in 9 CFR 319.15(d).

Note: *Salmonella* verification sample sets for raw ground beef products have been discontinued with the exception at establishments that recently exceeded the performance standard and are in 'Category 3' (FSIS Notice 28-14). FSIS also discontinued collecting MT43S samples in very low volume grinding establishments. In addition, raw beef samples collected for STEC analysis are also analyzed for *Salmonella*.

Note: FSIS is not currently sampling and testing for *Salmonella* in steers or heifers, cows or bulls, or market hogs per FSIS Directive 10,250.1.

IPP also collect the following poultry samples, using a moving window sampling approach, to be **analyzed for both *Salmonella* and *Campylobacter*** as described in Directive 10,250.1, Notice 22-15, and FSIS Notice 31-15.

- Poultry carcasses
 - young chicken carcasses including broilers, fryers, roasters, and Cornish game hens, as described in 9CFR 381.170(a), and
 - young turkey carcasses

- NRTE comminuted poultry

NRTE comminuted poultry is any non-breaded, non-battered, raw NRTE chicken or turkey product that has been processed to reduce the particle size which may or may not contain added ingredients. NRTE comminuted poultry includes:

- (1) ground (Ground product group category) – ground chicken or turkey for any purpose (e.g., packed for consumer or for any type of further processing); or
- (2) mechanically separated (Mechanically Separated product group) – mechanically separated chicken or turkey, as defined in 9 CFR 381.173; or
- (3) hand or mechanically-deboned and further chopped, flaked, minced, or otherwise processed to reduce particle size. Chicken or turkey product, other than ground or mechanically separated falls under the Other Non-intact product group. These products include:
 - NRTE comminuted chicken product may be derived from any age chicken, including young chickens (broilers, fryers, and roasters), fowl, capons, and roosters, as defined in 9 CFR 381.170(a)(1); and
 - NRTE comminuted turkey product may be derived from any age turkey, including young turkeys, yearling turkeys, and old turkeys, as defined in 9 CFR 381.170(a)(2).

Note: These products include final (consumer-ready) products or intermediary product for further processing as NRTE product that are destined for sale as NRTE product for consumers.

Note: The Agency **does not** collect samples of chickens/turkeys or chicken/turkey products produced under a *religious exemption* and not bearing the mark of inspection. Products from any product class diverted for pet food manufacture without the mark of inspection are also **not** sampled. In addition, FSIS does not currently sample eligible product for *Salmonella* testing from poultry establishments that produces less than 1,000 pounds per day.

As explained in the January 26, 2015 Federal Register Notice (Docket Number FSIS-2014-0023), FSIS began exploratory sampling of chicken parts as well as of raw pork products for pathogens of public health concern as instructed in FSIS Notice 16-15 and FSIS Notice 23-15 .

- Raw Chicken Parts Sampling Project: FSIS Notice 16-15 instructs IPP to collect raw chicken parts (finished product) to be analyzed for *Salmonella* and *Campylobacter*. Chicken parts that are subject to sampling include those that are non-intact (that have been needle injected with clear liquid or marinated in a clear solution, mechanically tenderized, vacuum tumbled, or similarly processed; refer to Attachment 1 of the notice). Definitions are found in 9 CFR 381.170(b), Standards for kinds and classes, and for cuts of raw poultry. Eligible chicken parts for sample collection include:
 - Legs: whole legs (no backbone attached), drumsticks, thighs, and cut up or portioned leg meat (3/4 inch larger in at least one dimension),
 - Breasts: whole and half breasts (with or without ribs), boneless and skinless breasts, tenderloins and tenders, and cut up portioned breast meat (3/4 inch larger in at least one dimension), and

- Wings: whole wings (with or without the wing tip), mixed wing sections, drummettes, mid-sections (flats), wing tips, and boneless wings

Note: Chicken half carcasses and quarter carcasses are not eligible for collection under this sampling program.

- Raw Pork Products Exploratory Sampling Project (RPESP): As stated in FSIS Notice 23-15, IPP are to collect samples at establishments that produce raw pork products as part of the nationwide RPESP. These samples are analyzed for *Salmonella* as well as for indicator organisms. The eligible raw pork products include:
 - Raw intact pork products – retail cuts, tray ready cuts, foodservice cuts, or portion cuts prepared for consumers that have not been tenderized, injected, pumped, or vacuum tumbled; and
 - Raw non-intact pork products – retail cuts, tray ready cuts, foodservice cuts, or portion cuts prepared for consumers that have been tenderized, injected, pumped, or vacuum tumbled; ground pork, mechanically separated pork, AMR pork, pork sausage, patties or other formed products; and other comminuted pork.

Circumstances in Which Sampling is not Warranted

Even though most raw meat and poultry products are subject to *Salmonella* testing, there is a narrow set of circumstances in which sampling is not warranted. According to FSIS Directive 10,250.1, when an establishment processes all its products into ready-to-eat (RTE) product or diverts all of its raw products to another federally-inspected establishment for further processing into a RTE product, FSIS will exclude the establishment from the *Salmonella* verification testing program.

If an establishment claims that all products are processed into RTE product, IPP are to verify this during the performance of a HACCP procedure, by observing that all the products are actually further processed into RTE product in the establishment, or by reviewing records to ensure that all products are further processed into RTE products in the establishment.

The Performance Standards

FSIS replaced its existing *Salmonella* sampling set-approach with a routine sampling approach for **ALL** FSIS-regulated products subject for *Salmonella* and *Campylobacter* verification testing. This includes broiler and turkey carcasses, chicken parts, comminuted poultry, ground beef (tested for *Salmonella* only), and beef manufacturing trimmings (tested for *Salmonella* only). *Salmonella* and *Campylobacter* performance standard verification samples are taken as part of a moving window and the results are used to determine if an establishment is meeting the performance standard on a continuous basis. When assessing process control under a moving window approach, FSIS intends to evaluate, over a certain period of time, a number of sequential results from a single establishment. Thus, given the fixed timeframe of one year (52 weeks) for which an establishment has been sampled, FSIS would assess the first moving window by evaluating the number of samples taken within the 52-week period.

As an example, if an establishment has five *Salmonella* positives within 52 samples (one sample per week for a year), then the establishment passed the performance standard if the performance standard allows five positive samples among 52 samples. When the next sample is taken (week 53, in this example), the moving window would shift forward the fixed timeframe of one year (52 weeks); that is, the original week 1 (and the original first sample) is excluded, while the most recent week is included in the new 52-week moving window. This shifting is repeated with each new week and allows FSIS to continuously assess the process control of an establishment.

The charts below shows the maximum acceptable percent positive results or number of positives results allowed in the moving window before the establishment fails to meet the performance standard. A test is considered positive when any *Salmonella* or *Campylobacter* organisms are found.

***Salmonella/Campylobacter* Performance Standards for Poultry**

Product	Maximum Acceptable % Positive		Performance Standard	
	<i>Salmonella</i>	<i>Campylobacter</i>	<i>Salmonella</i>	<i>Campylobacter</i>
Broiler Carcasses [^]	7.5	10.4	5 of 51	8 of 51
Turkey Carcasses [^]	1.7	0.79	4 of 56	3 of 56
Comminuted Chicken [*]	25.0	1.9	13 of 52	1 of 52
Comminuted Turkey [*]	13.5	1.9	7 of 52	1 of 52
Chicken Parts [*]	15.4	7.7	8 of 52	4 of 52

[^] The maximum percent positive for *Salmonella* and *Campylobacter* under the performance standards for young chicken and turkey carcasses is listed in FSIS Directive 10,250.1

^{*} Developed proposed performance standards published in the FRN Docket No. FSIS-2014-0023

Note: The new *Salmonella* performance standards are to be applied to sample results in place of the performance standards for young chickens (as broilers) and ground chicken and ground turkey codified in 9 CFR 381.94(b).

For highest-volume establishments, FSIS expects to collect 52 samples within the 52-week moving window. In this case, to assess process control (at establishments producing products with performance standards measured in 52 samples), one need only to count the number of positives test results within the 52-week moving window. For example, the proposed performance standard for *Salmonella* in raw chicken parts is eight positives out of 52 samples. Assuming that 52 samples were collected from the establishment within a 52-week moving window, if the establishment has eight or fewer *Salmonella* positives within that 52-week timeframe, then it would pass the performance standard. If, on the other hand, the establishment has nine or more *Salmonella* positives within that same 52-week timeframe, then it would fail the performance standard.

To assess process control in establishments that FSIS samples less often than weekly (i.e., lower volume establishments), FSIS will assess establishment performance (as percent positive) based on the (likely variable) number of samples collected and positive results within the 52-week moving window. To illustrate this point, if a small establishment producing raw chicken parts is sampled fewer than 52 times in the 52-week moving window, only 26 times, for example, with three of those samples testing positive for *Salmonella*, 26 will be the denominator while three be the numerator. This gives the establishment a percent positive of 11.5 ($(3 \div 26) \times 100 = 11.5\%$). In this example, the resulting percent positive is less than 15.4, the acceptable percent positive for the proposed performance standards for *Salmonella* in raw chicken parts. As such, the establishment would pass the performance standard.

***Salmonella* Performance Standards for Ground Beef¹**

Product class	Pathogen	Performance standard	Number of samples tested	Sampling Method	Maximum number of positives to achieve standard	Revised Standard Implemented
Ground Beef	<i>Salmonella</i>	7.5%	53	One sample per event	5	N/A

¹ As per Directive 10,250.1

For ground beef, an establishment can have no more than 5 positive sample results out of 53 samples in the moving window.

Sampling Procedures

The purpose of the *Salmonella* and *Campylobacter* verification sampling program is to verify the establishment’s process control for **all applicable products**. All eligible products produced at an establishment will be scheduled for sampling during the month under routine sampling. For example, if an establishment produces more than one product type (chicken carcasses, chicken parts, and NRTE comminuted chicken) that is eligible for sampling, then all of those products will be scheduled for sampling during the month. IPP are to collect samples in accordance with the step-by-step directions found in FSIS Directive 10,250.1 and FSIS notices for all product classes including young chicken and turkey carcasses.

Salmonella and *Campylobacter* verification sampling is a **directed** sampling task. Taking into account risk factors including production volume and past establishment testing performance (i.e., positive *Salmonella* and *Campylobacter* test results), FSIS will establish the sampling frequency accordingly for a particular establishment. The Public Health Information System (PHIS) displays sampling tasks (including the sampling project code) on the establishment task list for the sampling programs that apply to the establishment.

The specific sampling methodologies for the product classes to be sampled are explained in detail in FSIS Directive 10,250.1 and applicable FSIS notices.

IPP collect samples using a carcass sponge swab, a whole bird rinse, or taking a specific amount of ground/comminuted product using the sampling technique as described in FSIS Directive 10,250.1 and in published FSIS notices. Even though the Agency is not collecting livestock carcasses samples, the sampling procedures for cattle and hog carcasses are also included in the directive in case they are needed for special purposes.

Turkey carcasses are sampled using a sponge sample technique. Sponge sampling of turkey carcasses uses two sponges, one that is analyzed for *Salmonella* and the other for *Campylobacter*. Sponge sample sites are to the left and right of the back and thigh as per instructions delineated in the directive.

Chicken carcasses are sampled using whole bird rinses; IPP are to collect 100 ml rinsate.

Note: For poultry carcasses, at the post-chill sampling location, IPP are to determine a random time at which the carcass will reach the end of the drip line or the equivalent point in air-chill systems. IPP are to randomly select a poultry carcass from the post-chill area (after all interventions have taken place) and to allow drip time to prevent dilution of the sample.

Chicken parts are sampled by collecting approximately 120 ml of rinsate from 4 lbs. \pm 10% of the eligible raw chicken parts.

The amount of ground product collected (final package or aseptically when not in final package) by the IPP will depend on the sampling project code as follows:

- Ground beef products, as well as raw beef trim samples collected for routine and follow-up projects for *E. coli* O157:H7 and other STECs are sampled as per instructions in FSIS Directive 10,010.1.
- NRTE comminuted poultry products are sampled by collecting sufficient product to fill the two provided Whirl-Pak bags up to the fill-line indicated on each bag, following the instructions as described in FSIS Notice 31-15. The total weight of the two bags of samples should be approximately two pounds. This larger sample size will provide consistency as the Agency moves toward analyzing each sample for both pathogens.

For the RPPESP, IPP will be collecting fresh, not frozen, raw pork samples in final packaging, whenever possible, corresponding to 2 lbs.

In establishments that produce more than one type of product subject to testing, **all** eligible products produced will be scheduled for sampling during the month under routine sampling.

Defining Categories

If the sample under the routine *Salmonella* verification sampling meets the *Salmonella* and *Campylobacter* performance standards (i.e., the maximum acceptable percent positive allowed under the moving window approach), it passes. If the sample results in the moving window exceed the maximum percent positive allowed, the establishment has not met the performance standard.

FSIS uses categories in evaluating an establishment's level of process control and for scheduling *Salmonella* and *Campylobacter* performance standard verification testing. For all products sampled under routine *Salmonella* verification sampling, FSIS has modified the time component of the categories definitions as follows:

Category 1 – Consistent Process Control: Establishments that have achieved 50 percent or less of the performance standard during all completed 52-week moving windows over the last six months. This performance demonstrates the **best process control** for this pathogen.

Category 2 – Variable Process Control: Establishments that meets the standard for all completed 52-week moving windows but have results greater than 50 percent of the standard during any completed 52-week moving window over the last six months. This performance demonstrates **intermediate process control** for this pathogen.

Category 3 – Highly Variable Process Control: Establishments that have exceeded the performance standard during any completed 52-week moving window over the last six months. This performance demonstrates the **least process control** for this pathogen and means the establishment has failed the *Salmonella* performance standard.

The Agency will also post the following information on the FSIS Web site:

<http://www.fsis.usda.gov/wps/portal/fsis/topics/data-collection-and-reports/microbiology/salmonella-verification-testing-program/>.

- Beginning July 1, 2015, FSIS will begin web-posting individual establishment category information for chicken and turkey carcasses.
- Until July 2015, FSIS will continue to web-post existing Category 3 poultry carcass establishments.
- The Agency will post aggregate reports quarterly showing the categories 1/2/3 distribution for each relevant product class subject to FSIS *Salmonella* and *Campylobacter* testing, as applicable.
 - FSIS will continue to post aggregate reports for chicken and turkey slaughter establishments showing category distribution for current performance standards for carcasses.
 - Starting in March 2015, FSIS will begin posting aggregate reports showing the category 1/2/3 distribution for chicken parts as data becomes available, and comminuted chicken and turkey using historical data and new results beginning in March based on the proposed performance standards.

Agency Actions

Under the new performance standards and under the new moving window approach, when an establishment does not meet a performance standard (i.e., the number of positive samples within a specified timeframe exceeds the maximum acceptable for that product class), FSIS will immediately conduct follow-up samples that will be analyzed for both *Salmonella* and *Campylobacter*, where applicable. Specifically, either 16 or eight follow-up samples will be collected depending on the size and production volume of the

establishment. The Agency will analyze the follow-up sampling data independent of the moving window approach to assess whether the establishment is making or has made changes to its food safety system to improve its process control.

In addition, when the establishments do not meet the performance standards, FSIS will conduct a for-cause Food Safety Assessment (FSA) at the establishment that produced the product.

Even when establishments meet the performance standards, if FSIS *Salmonella* or *Campylobacter* verification testing data from an establishment show a high number of positives or serotypes of human health significance, FSIS may perform Incident Investigation Team testing or conduct a for-cause FSA that includes collection of samples or take other appropriate actions (additional sanitary dressing verification procedures) at the establishment that produce the product.

Salmonella Regulations, Livestock, 310.25(b)

Sec. 310.25 Contamination with microorganisms; process control verification criteria and testing; pathogen reduction standards.

(b) Pathogen reduction performance standard; *Salmonella*. (1) Raw meat product performance standards for *Salmonella*. An establishment's raw meat products, when sampled and tested by FSIS for *Salmonella*, as set forth in this section, may not test positive for *Salmonella* at a rate exceeding the applicable national pathogen reduction performance standard, as provided in Table 2:

Table 2--Salmonella Performance Standards

Class of product	Performance Standard (percent positive for <i>Salmonella</i>) ^a	Number of samples tested (n)	Maximum number of positives to achieve Standard (c)
Steers/heifers.....	1.0%	82	1
Cows/bulls.....	2.7%	58	2
Ground beef	7.5%	53	5
Hogs.....	8.7%	55	6
Fresh pork sausages.....	^b N.A.	N.A.	N.A.

^a Performance Standards are FSIS's calculation of the national prevalence of *Salmonella* on the indicated raw product based on data developed by FSIS in its nationwide microbiological data collection programs and surveys. Copies of Reports on FSIS's Nationwide Microbiological Data Collection Programs and Nationwide Microbiological Surveys used in determining the prevalence of *Salmonella* on raw products are available in the FSIS Docket Room.

^b Not available; values for fresh pork sausage will be added upon completion data collection programs for those products.

(2) Enforcement. FSIS will sample and test raw meat products in an individual establishment on an unannounced basis to determine prevalence of *Salmonella* in such products to determine compliance with the standard. The frequency and timing of such testing will be based on the establishment's previous test results and other information concerning the establishment's performance. In an establishment producing more than one class of product subject to the pathogen reduction standard, FSIS may sample any or all such classes of products³.

³ A copy of FSIS's "Sample Collection Guidelines and Procedure for Isolation and Identification of *Salmonella* from Meat and Poultry Products" is available for inspection in the FSIS Docket Room.

(3) Noncompliance and establishment response. When FSIS determines that an establishment has not met the performance standard:

- (i) The establishment shall take immediate action to meet the standard.
- (ii) If the establishment fails to meet the standard on the next series of compliance tests for that product, the establishment shall reassess its HACCP plan for that product and take appropriate corrective actions.

(iii) Failure by the establishment to act in accordance with paragraph (b)(3)(ii) of this section, or failure to meet the standard on the third consecutive series of FSIS-conducted tests for that product, constitutes failure to maintain sanitary conditions and failure to maintain an adequate HACCP plan, in accordance with part 417 of this chapter, for that product, and will cause FSIS to suspend inspection services. Such suspension will remain in effect until the establishment submits to the FSIS Administrator or his/her designee satisfactory written assurances detailing the action taken to correct the HACCP system and, as appropriate, other measures taken by the establishment to reduce the prevalence of pathogens.