



**Public Health**  
Prevent. Promote. Protect.

**Peoria City/County  
Health Department**  
Health Protection Division  
Environmental Health

# Application for Alternative Operating Procedures Bare Hand Contact with Ready-To-Eat Foods Food Code 3-301.11 (E)

- 1. Establishment Name:** \_\_\_\_\_
- 2. Establishment Address:** \_\_\_\_\_
- 3. Responsible Person (Person in Charge):** \_\_\_\_\_
- 4. List Procedure and Specific Ready-To-Eat-Foods** to be considered for use of bare hand contact with ready-to-eat foods \*Please use additional sheets of paper if the space provided is not adequate; \*\*Procedure must be specific and provide detail description of start to finish including when handwashing will occur:

Ready to Eat Food	Procedure**	Reason for Bare Hand Contact
i.e. Cookies	Decorating cookies: Wash hands, set up all ingredients/ equipment necessary for cooking decorating- blank RTE cookies will be handled with a barrier of protection until employee is actively decorating the cookie, wash hands, decorate all cookies, if tasks changes or hands become contaminated wash hands again. Once decorating the cookies are complete, the employee will be required to use a barrier of protection while in contact with the cookies.	Impossible to decorate cookies with gloves on or another barrier of protection without destroying artwork

**5. Handwashing Facilities:**

a. Are the following requirements met?

- o At least one handwashing sink is located immediately adjacent to the area where the above bare hand contact procedures will be conducted and used for no other purposes other than handwashing?  
 YES  NO
- o The handwashing sink has soap and disposable paper towels or other acceptable drying mechanism?  
 YES  NO
- o The handwashing sink has a clearly visible sign or poster notifying employees that hand washing is required?  
 YES  NO

b. All toilet rooms have one or more handwashing sinks in, or immediately adjacent to them, and the sinks are equipped and maintained in accordance with provisions of the Code.  
 YES  NO

**6. Employee Health Policy:**

Do you have documentation that food employees, conditional employees, and the Person in Charge acknowledge that they are informed to report information about their health and activities as they relate to gastrointestinal symptoms and diseases that are transmittable through food?

YES  NO

Is the Employee Health policy kept at the establishment?

YES  NO

**7. Employee Training:**

Do you have documentation that food employees have received training in:

- The risks of contacting the specific ready-to-eat foods with bare hands
- Proper handwashing procedures to include how, when, where to wash, & fingernail maintenance.
- Prohibition of jewelry, artificial nails, nail polish, etc.
- Good hygienic practices.

YES  NO

In the space provided, please give a brief description of how employees are trained for EACH training area:

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## 8. Documentation of Handwashing Practices:

- Do you have handwashing procedure that include the requirement that hands are washed before food preparation and as necessary to prevent cross contamination by food employees during all hours of operation when the specific ready to eat foods are prepared?

YES  NO

## 9. Documentation of Additional Control Measures:

- Does your establishment have two (2) or more additional control measures (listed below) and documentation that corrective action is taken when the requirements of bare hand contact are not followed?

- Double handwashing;
- Use of nailbrushes;
- Use of department approved hand antiseptic after handwashing \*must provide documentation;
- Incentive programs such as paid leave encouraging food employees not to work when they are ill; or
- Other control measures approved by the regulatory authority.

YES  NO

Please provide this department with the following documents:

- Attach a diagram, photo, or other information showing the location of hand sinks and include information on the distance (feet) to areas where bare hand contact is being proposed.
- Employee Health Policy
- Additional Control Measures
- Handwashing procedures
- Documentation of Employee Training

*If approved, all written procedures must be maintained in the food establishment and made available to the Regulatory Authority upon request during all hours of operations, including a specific list of ready-to-eat foods that are touched by bare hands and diagrams and other information showing that handwashing facilities, installed, located, equipped, and maintained are in an easily accessible location and in close proximity to the work station where the bare hand contact procedure is conducted. Any changes in procedures or addition to the list of Ready-to-Eat foods with Bare Hand Contact, must be approved by this Department prior to implementation.*

**I certify all of the following:** All food employees are individually trained in the risks of contacting ready-to-eat foods with bare hands, personal health and activities as they relate to diseases that are transmissible through food, proper handwashing procedures, prohibition of jewelry, and good hygienic practices. A record of this training is kept on site. I understand that bare hand contact with ready-to-eat food is prohibited except for those items listed in section four (4) above. A handwashing sink is located immediately adjacent to the posted bare hand contact procedure. All handwashing sinks are maintained with hot water, soap, and drying devices. I understand that documentation is needed for handwashing practices and additional control measures. I understand that records to document handwashing are kept current and kept on site. I understand that the request for alternative operating procedures, bare hand contact, will only be granted if: In the opinion of the Health Authority, a health hazard or nuisance will not result.

**This Department reserves the right to revoke approval of Alternative Operating Procedures for Bare Hand Contact.**

NAME (Printed): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Health Authority (HA) Use Only:

Establishment Number: \_\_\_\_\_

File Review Conducted on History of Handwashing Compliance:  Yes  No

Site Visit Conducted  Yes  No

Comments: \_\_\_\_\_

Approved: Effective Date: \_\_\_\_\_ Sanitarian \_\_\_\_\_

Not Approved: Reason for Denial: \_\_\_\_\_