FORM 1-B Conditional Employee or Food Employee Reporting Agreement

Preventing Transmission of Diseases through Food by Infected Conditional Employees or Food Employees with Emphasis on Illness due to Norovirus, *Salmonella* Typhi, *Shigella* spp., or Shiga toxin-producing *Escherichia coli* (STEC), nontyphoidal *Salmonella* or Hepatitis A Virus

The purpose of this agreement is to inform conditional employees or food employees of their responsibility to notify the person in charge when they experience any of the conditions listed so that the person in charge can take appropriate steps to preclude the transmission of foodborne illness.

I AGREE TO REPORT TO THE PERSON IN CHARGE:

Any Onset of the Following Symptoms, Either While at Work or Outside of Work, Including the Date of Onset:

- 1. Diarrhea
 - 2. Vomiting
 - 3. Jaundice
 - 4. Sore throat with fever
 - 5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part, or other body part and the cuts, wounds, or lesions are not properly covered (such as boils and infected wounds, however small)

Future Medical Diagnosis:

Whenever diagnosed as being ill with Norovirus, typhoid fever (*Salmonella* Typhi), shigellosis (*Shigella* spp. infection), *Escherichia* coli O157:H7 or other STEC infection, nontyphoidal *Salmonella* or hepatitis A (hepatitis A virus infection)

Future Exposure to Foodborne Pathogens:

- 1. Exposure to or suspicion of causing any confirmed disease outbreak of Norovirus, typhoid fever, shigellosis. *E.* coli O157:H7 or other STEC infection, or hepatitis A.
- 2. A household member diagnosed with Norovirus, typhoid fever, shigellosis, illness due to STEC, or hepatitis A.
- 3. A household member attending or working in a setting experiencing a confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, *E.* coli O157:H7 or other STEC infection, or hepatitis A.

I have read (or had explained to me) and understand the requirements concerning my responsibilities under the **Food Code** and this agreement to comply with:

- 1. Reporting requirements specified above involving symptoms, diagnoses, and exposure specified;
- 2. Work restrictions or exclusions that are imposed upon me; and
- 3. Good hygienic practices.

I understand that failure to comply with the terms of this agreement could lead to action by the food establishment or the food regulatory authority that may jeopardize my employment and may involve legal action against me.

Conditional Employee Name (please print)	
Signature of Conditional Employee	Date
Food Employee Name (please print)	
Signature of Food Employee	Date
Signature of Permit Holder or Representative	Date

Food Allergy Warning

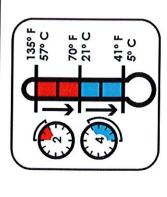
peanuts, tree nuts, soy, milk, eggs, wheat, shellfish or fish and sesame. Please be advised that our food may have come in contact or contain



Please ask a staff member about the ingredients used in your meal before ordering. Thank you.

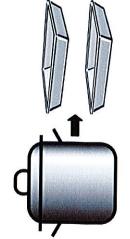
Cool Food Fast for Food Safety!

Enfríe las comidas rápidamente para no dejar crecer la bacteria

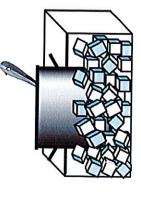


- Step 1 Cool hot food to 70°F within 2 hours Enfríe comida a 70°F dentro de 2 horas
- Step 2 Cool food from 70°F to 41°F within 4 hours Enfríe comida desde 70°F hasta 41°F dentro de 4 horas

Comidas calientes deben ser enfriadas hasta 41° F o menos dentro de 6 horas Hot food should be 41°F or colder within 6 hours



Divide large containers into shallow pans Divida la comida en bandejas poco profundas



lce bath with frequent stirring Use un baño de hielo y revuelva la comida frecuentemente



Use an ice paddle or add ice as an ingredient
Use una paleta de hielo o use hielo como un ingrediente



Reduce food mass Reduzca las cantidades de comida

Clean-up Procedure for Vomit and Fecal Matter

1 ISOLATE THE AREA

- Promptly remove ill employees and customers from areas where food is being prepared or stored
- · Cover the vomit or fecal matter with disposable cleaning towels

2 DISINFECT |

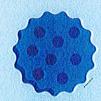
- Wear personal protective equipment, including disposable gloves, a mask, a gown or apron, and shoe covers
- Wipe vomit/feces with disposable cloth soaked in soap and water and put in a garbage bag; use baking soda or kitty litter for carpet or upholstery
- Mix 1000-5000ppm or 5-25 tablespoons of household bleach (5.25%) per gallon of water make sure the area is ventilated
- Apply the bleach solution on the wiped area and let stand for at least 10 minutes or allow to air dry
- Place all disposable protective materials in a garbage bag and dispose in the dumpster; wash and disinfect all non-disposable materials that were used during the clean-up
- Properly wash your hands and, if possible, take a shower and change your clothes
- Throw away any food that may have been exposed in the affected area

3 DOCUMENT 🖹 🤚

- Document information of the person(s) who was/were ill; include their name, address, age, travel history (within the last few days), and a 3-day food consumption history
- Complete an **incident report** of the actions that were taken as a result of the individual(s) being sick; include the location of the incident, the time and date, and the procedures of the clean-up process
- Keep these documents on file for at least one year



Foodborne diseases can be spread by food, water, or hand-to-mouth contamination, such as from contact with fecal matter, vomit, or contaminated surfaces.



Norovirus is one of the most common causes of foodborne illness. It can spread from hand-to-mouth contamination and by air.

If you have experienced vomiting and/or diarrhea, report this to your supervisor and do not handle food until cleared to do so!

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH ENVIRONMENTAL HEALTH SECTION RECREATION PROGRAM

RECOMMENDED PROCEDURE FOR CLEAN-UP OF FECAL, VOMIT AND BLOOD INCIDENTS IN AND AROUND PUBLIC POOLS

Prevention Procedures:

- 1. Maintain all chemical feed systems and filtration equipment in good working order. Maintain the required minimum disinfection residual level at all times when the public pool is open for use.
- 2. All persons must be advised, through posting of signs, to bathe with warm water and soap before entering the public pool.
- 3. All persons with known or suspected of having a communicable disease must be advised, through posting of signs, not to use the public pool.
- 4. All persons wearing diapers should wear swimsuit diapers or tight fitting rubber or plastic pants.
- 5. Do not allow animals in the public pool.

Clean-Up Procedures:

Formed Fecal Incident in Public Pools:

- 1. Close the public pool. Direct everyone to leave the public pool. If there are multiple public pools that use the same filter—all public pools will have to be closed. Do not allow anyone to enter the contaminated public pool(s) until all decontamination procedures are completed.
- 2. Remove as much of the fecal material as possible using a net or scoop and dispose of it in a manner in accordance with OSHA. Clean and disinfect the net or scoop (e.g., after cleaning, leave the net or scoop immersed in the public pool during disinfection). Do not vacuum the fecal material from the public pool.
- 3. Using an unstabilized chlorine, such as sodium hypochlorite, raise the free available chlorine level in the public pool to 2 ppm (mg/l), while maintaining the pH between 7.2 7.5. Maintain these levels for at least 25-30 minutes before reopening the public pool. Chlorine levels should be collected from various locations around the public pool(s) to ensure that the entire public pool is being treated. In the presence of chlorine stabilizers such as cyanuric acid, a level of 3.0 ppm (mg/l) of free available chlorine must be maintained.
- 4. Ensure that the filtration system is operating while the public pool reaches and maintains the proper free available chlorine concentration and pH levels during the disinfection process.
- 5. Re-opening the public pool: Swimmers may be allowed back into the public pool after the disinfection process has been completed and the free available chlorine concentration and pH levels are within the acceptable operating range.
- 6. Establish a fecal accident log. Document each fecal accident by recording date and time of the event, note whether formed stool or diarrhea, and note the chlorine levels at the time or observation of the event. Before reopening the

public pool, record the chlorine level and pH, the procedures followed in response to the fecal accident (including the process used to increase chlorine levels if necessary), and the contact time.

Loose (Diarrhea) Fecal Incident in Public Pools:

- 1. Close the public pool. Direct everyone to leave the public pool. If there are multiple public pools that use the same filter—all public pools will have to be closed. Do not allow anyone to enter the contaminated public pool(s) until all decontamination procedures are completed.
- 2. Remove as much of the fecal material as possible using a net or scoop and dispose of it in a manner in accordance with OSHA. Clean and disinfect the net or scoop (e.g., after cleaning, leave the net or scoop immersed in the public pool during disinfection). Do not vacuum the fecal material from the public pool.
- 3. <u>Public Pools NOT using a chlorine stabilizer (cyanuric acid, dichlor, and trichlor)</u> Using an unstabilized chlorine, such as sodium hypochlorite, raise the free available chlorine concentration to 20 ppm(mg/l) and maintain the pH between 7.2 and 7.5. Maintain these levels for at least 12.75 hours. Chlorine levels should be collected from various locations around the public pool(s) to ensure that the entire public pool is being treated.
- 4. Public Pools using a chlorine stabilizer (cyanuric acid*, dichlor, and trichlor) Using an unstabilized chlorine, such as sodium hypochlorite, raise the free available chlorine concentration to 20 ppm (mg/l) and maintain the pH between 7.2 and 7.5. Maintain these levels for at least 28 hours (or at 30ppm (mg/l) for at least 18 hours). Chlorine levels should be collected from various locations around the public pool(s) to ensure that the entire public pool is being treated.
 - *The cyanuric acid concentration needs to be between 1-15 ppm. If the cyanuric acid concentration is more than 15 ppm, lower the concentration to the desired range of 1-15 ppm by partially draining and adding fresh water to the public pool.
- 5. Ensure that the filtration system is operating while the public pool reaches and maintains the proper free available chlorine concentration and pH levels during disinfection.
- 6. Backwash all sand and DE filters thoroughly. Replace cartridges in cartridge filters.
- 7. Re-opening the public pool: Swimmers may be allowed back into the public pool after the disinfection process has been completed and the free available chlorine concentration and pH level have been returned to the acceptable operating range.
- 8. Establish a fecal accident log. Document each fecal accident by recording date and time of the event, note whether formed stool or diarrhea, and note the chlorine levels at the time or observation of the event. Before reopening the public pool, record the chlorine level and pH, the procedures followed in response to the fecal accident (including the process used to increase chlorine levels if necessary), and the contact time.

Vomit Incident in Public Pools:

- 1. Vomiting as a result of swallowing too much water is probably not infectious. No action is necessary.
- 2. Vomiting full contents of the stomach would require the same response as that of a formed fecal incident as outlined above.

Blood Incident in Public Pools:

There is no recommended procedure for clean-up or closing the public pool after a blood spill in a public pool. However, as a matter of comfort for the patrons, the pool operator may opt to close the public pool temporarily.

Dead Animals Found in Public Pools:

- 1. It is the recommendation of this office that the animal should be removed immediately, by a net or scoop, and disposed of properly.
- 2. The public pool should be closed and the free available chlorine level should be increased to at least 10 ppm (mg/l), while maintaining a pH level between 7.2 7.5.
- 3. Swimmers may be allowed back into the public pool when the free available chlorine level has been returned to the normal operating range.

Fecal, Vomit or Blood Incident on the Public Pool Deck Area:

- 1. Block off the area of the spill from patrons until clean-up and disinfection is complete.
- 2. Put on disposable latex gloves to prevent contamination of hands.
- 3. Wipe up the spill using paper towels or absorbent material and place in a plastic garbage bag.
- 4. Gently pour bleach solution (9 parts cool water and 1 part household bleach*) onto all contaminated areas of the deck.
- 5. Let the bleach solution remain on the contaminated area for 20 minutes.
- 6. Wipe up the remaining bleach solution.
- 7. All non-disposable cleaning materials used such as mops and scrub brushes should be disinfected by saturating with bleach solution and air dried.
- 8. Remove gloves and place in plastic garbage bag with all soiled cleaning materials.
- 9. Double-bag and securely tie-up plastic garbage bags and discard.
- 10. Thoroughly wash hands with soap and water.

NOTIFY THE LOCAL HEALTH DEPARTMENT IN YOUR AREA OF ANY INCIDENTS THAT RESULT IN A PUBLIC POOL CLOSING.

Revised 1/7/2019

^{*} Add the household bleach to the water and gently mix the solution. Since a solution of bleach and water loses its strength quickly, it should be mixed fresh before each clean-up to make sure it is effective.