

Hazard Analysis Critical Control Point (HACCP) Application Checklist Dried Fermented Sausage – Cured Meats

Establishment Name:	Tel:
Address:	Email:
Owner/Person-in-Charge:	Fax:
Who is in Charge of the HACCP Process?	Tel:

Before a plan may be approved a food establishment must have a satisfactory inspection history.

This checklist must be complete before submission.

- Variance request
- Name of each food product(s)
- A list of all ingredients for each product. Include a copy of the starter culture instructions.
- A copy of the label, including information on how the product will be tracked (batch number).
- An accurate, step-by-step description (food flow) of how the product is formulated, prepared, mixed, measured, formed, fermented, dried, etc. for each product. See example
- Standard Sanitation Operating Procedures (SSOP) including: procedures prohibiting bare hand contact with ready-to-eat foods; handwashing protocols; how cross contamination between raw and ready-to-eat foods will be prevented; and where the processing will occur. The processing should be separate from other operations. Include the location of the fermentation and drying areas. Also include a list of equipment and materials used in the process. Equipment must meet ANSI standards. These standards are in 4-1 and 4-2 of the FDA Model Food Code.
 - o Describe how equipment is cleaned and sanitized. Also include how often in the process equipment is cleaned (before beginning, between types of foods, etc.)
- Include these requirements in your HACCP:
 - o Certified pork or the equivalent as defined by the USDA must be used.
 - o Commercial starter cultures are required.
 - o Each batch needs to be tested for ph drop. A ph meter or other approved method is required. Staff must know how to use, calibrate and maintain the meter.
 - o Each batch must be tested for final water activity.
 - o Provide a method to measure humidity in the drying process.

- Identification of the most important food safety control(s) for each process. Each of these important food safety controls is called a Critical Control Points (CCP). Critical Control Points for dried Fermented sausage usually include; ph drop, final water activity, ppm of nitrite/nitrates used. More complicated sausage processes will have more CCPs. See attached HACCP worksheet

For Each Critical Control Point:

- Identify acceptable levels. These levels are called Critical Limits. **Critical Limits must be things you can measure.** Examples are ph drop to 4.6 within ___hours or equivalent degree hours, Aw less than .85, ___ppm nitrite, etc.
- Describe how the Critical Limits will be measured. Include who will measure, how they will measure and when they will measure. Provide specifications of testing equipment and instructions on use.
- Who will verify that the measurements and procedures are correctly documented and followed? How often will this be done?
- What are the actions taken by the *person in charge* if the critical limits for each critical control point are not met? Corrective actions need to be specific to the critical limit. For example, what will you do when the ph does not reach 4.6 in ___ hours? What will happen if the Aw is not .85 when tested?
- Include samples of the form(s) that will be used to keep track of the measurements, verify the procedures are correct and record corrective actions when critical limits are not met. A single form could be used for all.
- Provide a food safety training program that shows employees and supervisors know how to perform the steps in this plan, how to use necessary equipment and how to implement corrective actions. Employees need to sign off on the training plan.
- Laboratory analysis may be required to verify on site testing. A test batch will be required to demonstrate the process meets standards for ph and water activity.
- Include a statement that an approved, signed copy of the plan will be kept on the premises for review by the regulatory authority. Also a statement that the regulatory authority will be informed in advance of any significant changes in the process that may affect the accuracy or effectiveness of the plan.

I certify that all of the information submitted is accurate to the best of my knowledge. The operation is in compliance with Washington State Retail Food Code.

I understand that failure to comply with this plan and/or falsification of monitoring records is a violation of the Title 5, King County Board of Health Food Code and may result in enforcement action.

 Permit Holder or Person-in-Charge Signature/Title Date: _____

For Health Department Use:

Date	Reviewer	Comments	Accepted

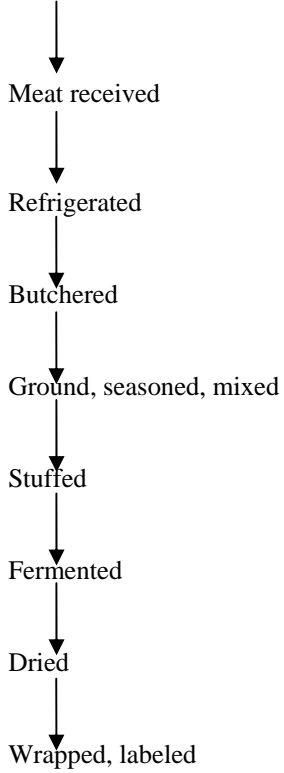
Implementation Date: _____

DISTRICT HEALTH CENTERS

EASTGATE	DOWNTOWN
14350 S.E. Eastgate Way	401 - 5 th Avenue, Suite 1100
Bellevue, WA 98007	Seattle, WA 98104
(206) 296-9791	(206) 296-4632

Sample Fermented Dried Sausage Food Flow

Salami



Dry ingredients received
Packaging received

