

**OFFICE OF THE SELECT BOARD**

730 Massachusetts Avenue  
Town of Arlington  
Massachusetts 02476-4908

(781) 316-3020  
(781) 316-3029 fax

**\$60.00 Filing Fee**

Inspections Dept. at 51 Grove St. must review completed application before returning to this office.

**APPLICATION**

*To the Licensing Authorities of the Town of Arlington*

The Undersigned hereby makes application for a

- ☐ COMMON VICTUALLER LICENSE (Eat In)  
☒ FOOD VENDOR LICENSE (Take Out Only)

Location 71 Park Ave  
Name of Applicant Jason Denancourt  
Corporate Name (if applicable) All Heart, Inc.  
D/B/A ABBOTT'S FROZEN CUSTARD  
Date 7/9/20

I/We hereby agree to conform in all respects to the conditions governing such License as printed in the By-Laws of the Town, and such other rules and regulations as the Selectmen may establish. With the signing of this application, the applicant acknowledges that:

- A. It is understood that the Board is not required to grant the license.
- B. no work is to commence at the premises of the proposed location which is the subject matter of this application until the license is approved by the Select Board, and, furthermore, any work done is done at the applicant's risk, and
- C. in the event of a proposed sale of a business requiring a Common Victualler License, an application for a transfer of said license will be deemed to be an application for a new license (subject to the rules and regulations herein contained), and the owner of such business shall be required to file with the Select Board a thirty day notice of his intention to sell same before such application will be acted upon by the Select Board.
- D. That the license is subject to revocation if the holder of the license does not comply with Town By-Laws or the Rules and Regulations of the Board.

Print Name Jason Denancourt  
Signature Name [Signature]

Phone (Home) 781-777-1853  
Email jdenancourt@abbotts custard.com

Note: (A) If a corporation, state full names and addresses of principal officers.

(B) If a co-partnership, information must be provided on each partner; if a corporation, information must be provided on corporate officer making application.

Name Taron Denuncat Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_

DESCRIPTION OF APPLICANT

Born in the U.S. Yes No  
Born Where \_\_\_\_\_  
Date of Naturalization \_\_\_\_\_  
Male or Female \_\_\_\_\_  
Date of birth \_\_\_\_\_  
Photo 1 inch by 1 inch

DESCRIPTION OF APPLICANT

Born in the U.S., Yes \_\_\_\_\_ No \_\_\_\_\_  
Born Where \_\_\_\_\_  
Date of Naturalization \_\_\_\_\_  
Male or Female \_\_\_\_\_  
Date of birth \_\_\_\_\_

The Establishment shall operate as:

Sole Ownership / Partnership / Total Number of Partners

Corporation Based in California

(Once approved, please go to Clerk's Office for Business Certificate)

Corporate Information Required:

President Taron Denuncat  
Secretary Taron Denuncat  
Treasurer Taron Denuncat  
Name Address Zip

# INFORMATION RELATIVE TO APPLICATION

Breakfast

Yes \_\_\_ No X

Lunch

Yes \_\_\_ No X

Dinner

Yes \_\_\_ No X

Do you own the property?

Yes \_\_\_ No X Tenant at Will ✓ Lease \_\_\_\_\_ (years)

Hours of Operation:

Day M-SU

Hours 1-9

Day \_\_\_\_\_

Hours \_\_\_\_\_

Day \_\_\_\_\_

Hours \_\_\_\_\_

Floor Space 250 Sq. Ft.

Seating Capacity (if any) none

Parking Capacity (if any) none spaces

Number of Employees 2-4

List Cooking Facilities (and implements)

no cooking

Freezer storage only for

products made at 311 Broadway, etc.

Will a food scale be in use for sale of items to the public?

Yes \_\_\_ No -

Will catering services be provided by you?

Yes \_\_\_ No -

The following items must be submitted with the application:

1. Layout Plan of Facility & Fixtures Date Received \_\_\_\_\_
2. Site Plan (obtained at Bldg. Dept., 51 Grove St.) Date Received \_\_\_\_\_
3. Outside Facade and Sign Plan (dimensions, color) Date Received \_\_\_\_\_
4. Menu Date Received \_\_\_\_\_
5. Maintenance Program Date Received \_\_\_\_\_

If the facilities are not yet completed, provide estimated cost of work to be done \$ \_\_\_\_\_

## FOR OFFICE USE ONLY

Scheduled Hearing when Application will be presented to Select Board for approval:

Date \_\_\_\_\_ Time \_\_\_\_\_

Board Action: Approved Yes \_\_\_ No \_\_\_\_\_

renew  
9/20  
IF  
Summer  
goes  
well  
only  
at 71  
Park



# APPLICANT'S RESUME

## Food Business Experience of Applicant

From 4/15/2018 to Present  
 Employee ABBOTT'S FROZEN CREAM  
 Sole Owner ✓ Location 1853 MASS COXINGTON  
 Partnership ✓ Type Food ICE CREAM  
 Corporation Penacost Brothers Inc. Number of Employees 40

From 4/15/2019 to Present  
 Employee ✓ D/B/A ✓  
 Sole Owner ✓ Location 311 Broadway Arlington  
 Partnership ✓ Type Food ICE CREAM  
 Corporation ATI Hunt Inc Number of Employees 20

List any other information that you feel will assist in the review of this application.

---

---

---

---

---

---

---

---

Sales in Arlington Center have plummeted due to restaurant closures.

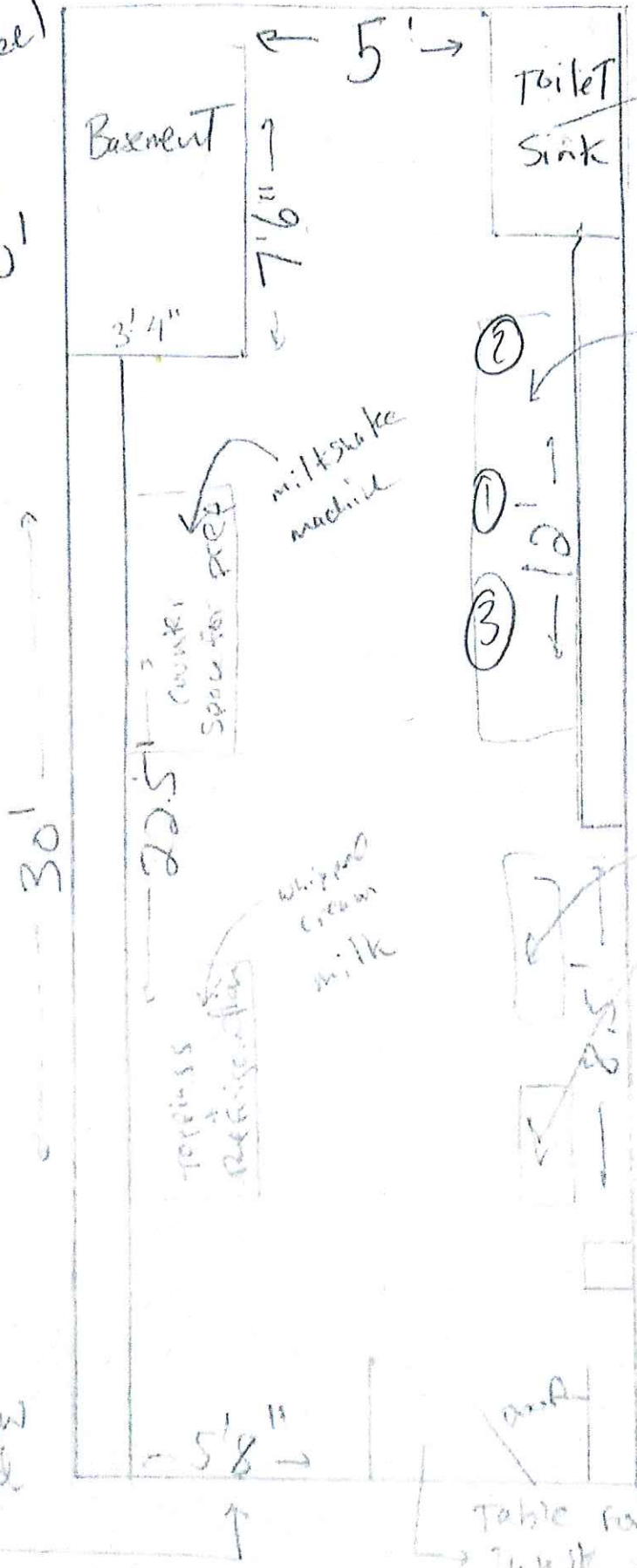
This location has been chosen because it is directly across from the old Brigham 1968-2016.

We want to bring ice cream back to the neighborhood now and for a very long time.

1" = 3 Feet

FRONT to  
Back is 30'

width is  
12'



Storage /  
Storage  
Back wall  
or  
basement

~~potential~~ Sink area  
① Hand Sink  
② map Sink  
③ Dish washer

ideal for  
walk-in window  
if permitted





COPYRIGHT©2017 Sardella Sign & Graphics

This drawing is original artwork created and owned by Sardella Sign & Graphics. Any reproduction of this drawing or concept by any means, without the written permission from Sardella Sign & Graphics is strictly prohibited.



68 NORTH AVENUE, WAKEFIELD, MA 01880  
781.245.1988 FAX 781.245.1987

CUSTOMER

Abbott's Frozen Custard

LOCATION OR  
PROJECT NAME

71 Park Avenue Arlington

SCALE AS SHOWN

DATE 7/7/20

SALESMAN

APPROVED BY X





COPYRIGHT©2017 Sardella Sign & Graphics

This drawing is original artwork created and owned by Sardella Sign & Graphics. Any reproduction of this drawing or concept by any means, without the written permission from Sardella Sign & Graphics is strictly prohibited.

X



68 NORTH AVENUE, WAKEFIELD, MA 01880  
781.245.1988 FAX 781.245.1987

CUSTOMER **Abbott's Frozen Custard**

LOCATION OR PROJECT NAME **71 Park Avenue Arlington**

SCALE **AS SHOWN** DATE **7/7/20**

SALESMAN **APPROVED BY X**

## CONES & SCOOPS



Kid's Pie  
4.00

Single  
5.00

Double  
6.00

### WAFFLE CONES & BOWLS

Cone/Bowl

add \_\_\_\_\_

Dipped

add \_\_\_\_\_



## MILKSHAKES



Milkshake 7.00

Small Milkshake 6.00

Malt 0.50

*Handcrafted Just For You*  
Ask about all the possible  
flavor combinations

## FLOATS



Float

5.25

Your choice of custard floated  
on any soda in the shop





## SUNDAES & SPLITS

### Sundaes



Your choice of custard with any  
topping available in our shop

A few of our favorites include:

Hot Fudge • Peanut Butter Cup • Mexican  
Hot Fudge Brownie • Snickers® • Strawberry Shortcake  
Warm Caramel



### Splits

Banana Split  
Warm Cookie Sundae  
Hot Fudge Banana Split



8.00

## FLURRIES

### Flurrie

Combine any flavor of custard with any  
topping for a truly unique treat



6.00



## TOPPINGS & SAUCES

Sprinkles  
Whipped cream  
Nuts  
Sliced Bananas

0.75

1.00

1.00

1.00

Candy/Sweets 1.00 ea

Brownies • Cookie Dough Cookies • Snickers®  
Peanut Butter Cups® • Heath bar® • Butterfinger®  
J&M's® • Reese's Pieces® • Gummy Bears®  
M&M's® • Oreos®

Sauces 1.00 ea

Hot Fudge • Chocolate Sauce • Caramel  
Butterscotch • Peanut Butter • Marshmallow  
Strawberry • Blueberry • Raspberry  
Apple



Facility  
Name: \_\_\_\_\_

Department: \_\_\_\_\_

Policy No: \_\_\_\_\_

---

## STANDARD OPERATING PROCEDURE

---

### Facility and Equipment Maintenance

**Policy:** The facility and equipment will be maintained to ensure the safety of the food served to customers.

**Procedure:** The restaurant manager must:

1. Ensure that all handwashing sink areas are supplied with soap dispensers and disposable towels or functioning air dryers at all times.
2. Maintain toilet facilities so that they function properly and are clean.
3. Take temperatures routinely of water to ensure that hot (minimum 110°F) and cold (70°F) running water is available at all sinks.
4. Check to make sure that there is no possibility of back siphonage.
5. Check to make sure that all food waste and rubbish are stored in rodent and insect-proof containers with tight fitting lids.
6. Be sure temperatures of all cooling equipment are taken and recorded routinely to ensure proper calibration of thermometers and proper equipment operation. See Temperature Record for Freezer, Temperature Record for Freezer/Refrigerators, and Temperature Record for Refrigerator.
7. Be sure temperatures of all heating equipment are taken and recorded routinely to ensure proper functioning and thermometer calibration.
8. Record temperatures of holding equipment at least daily to ensure proper functioning and calibration.
9. Monitor the maintenance of ventilation systems, ensuring that systems are adequate and regularly cleaned according to the recommended schedule.

The restaurant manager in conjunction with certified food protection manager will:

1. Assure all equipment in the restaurant is well maintained.
2. Contract with an equipment repair company to have preventive maintenance done for all equipment, including calibration of cooking equipment.
3. Log all preventative and repair work maintenance.
4. Review temperature logs to ensure that they are being done and to determine problem areas.
5. Follow up on any equipment issues or needs.
6. Maintain all facility and equipment documentation with the Food Safety Plan.





Facility  
Name: \_\_\_\_\_

Department: \_\_\_\_\_

Policy No: \_\_\_\_\_

---

## STANDARD OPERATING PROCEDURE

---

### Dip Well and Scoop Maintenance

**Policy:** The scoops will be stored in the dipper well while not in use; and will be W/R/S every four hours.

**Procedure:** The manager must:

1. Ensure that dip well is functioning with a continuous velocity/flow to remove food product.
2. Ensure that staff are storing scoops in dip well while not in use.
3. Create a schedule to remove scoops from service to be properly W/R/S every four hours.
4. At the end of the shift, prior to closing the dip well and surrounding areas must be W/R/S

The restaurant manager in conjunction with certified food protection manager will:

1. Assure all equipment in the restaurant is well maintained.
2. Contract with an equipment repair company to have preventive maintenance done for all equipment, including calibration of cooking equipment.
3. Log all preventative and repair work maintenance.
4. Review temperature logs to ensure that they are being done and to determine problem areas.
5. Follow up on any equipment issues or needs.
6. Maintain all facility and equipment documentation with the Food Safety Plan.

# Food Employee Reporting Agreement

## Preventing Transmission of Diseases through Food by Infected Food Employees

*The purpose of this agreement is to ensure that Food Employees and Applicants who have received a conditional offer of employment 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:

#### ***SYMPTOMS***

1. Diarrhea
2. Fever
3. Vomiting
4. Jaundice
5. Sore throat with fever
6. Lesions containing pus on the hand, wrist, or an exposed body part  
(such as boils and infected wounds, however small)

#### ***MEDICAL DIAGNOSIS***

Whenever diagnosed as being ill with *Salmonella* Typhi (typhoid fever), *Shigella* spp. (shigellosis), *Escherichia coli* O157:H7, hepatitis A virus, *Entamoeba histolytica*, *Campylobacter* spp., *Vibrio cholera* spp., *Cryptosporidium parvum*, *Giardia lamblia*, Hemolytic Uremic Syndrome, *Salmonella* spp. (non-typhi), *Yersinia enterocolitica*, or *Cyclospora cayetanensis*.

#### ***PAST MEDICAL DIAGNOSIS***

Have you ever been diagnosed as being ill with one of the diseases listed above? \_\_\_\_\_  
If you have, what was the date of the diagnosis? \_\_\_\_\_

#### ***HIGH-RISK CONDITIONS***

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

I have read (or had explained to me) and understand the requirements concerning my responsibilities under 105 CMR 590/1999 Food Code and this agreement to comply with the reporting requirements specified above involving symptoms, diagnoses, and high-risk conditions specified. I also understand that should I experience one of the above symptoms or high-risk conditions, or should I be diagnosed with one of the above illnesses, I may be asked to change my job or to stop working altogether until such symptoms or illnesses have resolved.

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.

Applicant or Food Employee Name (please print) \_\_\_\_\_

Signature of Applicant or Food Employee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Permit Holder or Representative \_\_\_\_\_ Date \_\_\_\_\_





Facility  
Name: \_\_\_\_\_

Department: \_\_\_\_\_

Policy No: \_\_\_\_\_

## **STANDARD OPERATING PROCEDURE**

### **Serving Food To Guests with Food Allergies**

**Policy:** All food will be served in a manner to ensure food safety.

**Procedure:** Employees involved in the service of food must observe the following procedures:

1. Use your receiving procedures.
  - Check all ingredient labels each time a food is purchased.
  - Date each food item when received.
2. Store food items that contain allergens in a separate location from the non-allergenic items.
3. Keep ingredient labels for a minimum of 24 hours after serving the product.
4. If a guest states they have a food allergy; bring the attention to the PIC/Manager on duty to discuss possible safe alternatives. Never GUESS or ASSUME. Refrain from serving the food item if there is a question as to whether there is an allergen contained in that food.
5. Prevent cross-contact during food preparation.
  - Wash hands before preparing foods.
  - Wear single-use gloves.
  - Use a clean apron when preparing allergen-free food.
  - Wash, rinse, and sanitize all cookware before and after each use.
  - Wash, rinse, and sanitize food contact surfaces.
  - Designate an allergy-free zone in the kitchen. When working with multiple food allergies, set up procedures to prevent cross-contact within the allergy-free zone.
  - Prepare food items that do not contain allergens first. Label and store the allergen-free items separately.
  - Use clean, sanitized utensils when preparing food.
6. Prevent cross-contact during service.
  - Use dedicated serving utensils and gloves for allergen-free foods.

#### **MONITORING:**

Certified Food Protection Manager

#### **CORRECTIVE ACTION:**

1. Retrain any Abbott's employee not following this SOP.
2. Call 911 immediately if a guest consumes a product with an allergen.

## VOMIT AND DIARRHEA CLEAN-UP PROCEDURE FOR

---

ABBOTTS FROZEN  
CUSTARD

---

71 Park  
314 Broadway

---

### WHY DO WE HAVE THIS PROCEDURE?

Vomiting and diarrhea can be symptoms of several very contagious diseases and it is the responsibility of food service management to protect both employees and customers from transmission of these diseases. The most important ways of accomplishing this task are:

- 1) ensure that employees understand the importance of frequent handwashing and that they know where and how to wash their hands;
- 2) ensure that employees understand their responsibility to report all disease symptoms, such as vomiting, diarrhea, jaundice, fever and sore throat; diagnosis of diseases; and exposure to others who are sick to the Person in Charge;
- 3) ensure that employees are trained and do not handle food that is ready to eat with their bare hands;
- 4) ensure that employees understand the importance of following all regular cleaning and sanitizing procedures on a daily basis and special cleaning and sanitizing procedures such as this one.

New employees will be trained in all of the above-mentioned procedures within the first week of hiring. Reminder trainings will be done for all food service staff on an **ANNUAL** basis.

### VOMIT/DIARRHEA CLEAN-UP KIT

A vomit/diarrhea clean-up kit is stored in a labeled bin in the office

---

#### Contents of Clean-up Kit:

- 1) Personal Protective Equipment (PPE)
  - disposable gloves, nitrile or non-latex
  - face and eye shields (clean and sanitize after use)
  - disposable shoe covers
  - disposable aprons
  - masks
  - hair covers



- 2) Paper towels
- 3) Absorbent material: baking soda, Red Z powder, or kitty litter
- 4) Scoop or scraper, preferably disposable
- 5) Large plastic bags with twist ties
- 6) Caution tape for closing off areas

Buckets, wiping cloths, detergent and sanitizers will also be needed and are available in various locations throughout the food service area. The Person-in-Charge is responsible for refilling the clean-up kit after use. Extra supplies will be on hand. All supplies will be purchased or ordered at the time of the incident so that the kit is ready for use as soon as possible after the incident.

### **WHEN A VOMITING OR DIARRHEA INCIDENT OCCURS**

- 1) Remove the following from the area if **no contact** with vomit or diarrhea:
  - a) employees and/or customers
  - b) packaged food or food in closed containers
  - c) portable equipment, linens and open single-use and single-service articles.

For diarrhea, the immediate area that is visibly soiled should be the area of clean-up concentration. For vomiting, since particles can be in the air, an area of 25 feet in all directions should be considered the clean-up area. This is very important when considering which employees or customers need to be removed; the food; and open single-use and single-service articles that need to be discarded; the linens that will need to be washed; and the equipment that will need to be cleaned and sanitized.

- 2) If vomiting occurred, completely close off area around the spill for 25 feet in all directions. Use caution tape from the Clean-up Kit.

Some small food service establishments will have to close during the clean-up of a vomiting incident either by an employee or a customer. In the case of closure, the Regulatory Authority should be called immediately to report the incident. A sign can be put at the entrance stating that the food service establishment will be closed until a time judged to be sufficient to accomplish the required clean-up.

- a) \_\_\_\_\_, due to its small size

will close after a vomiting incident until clean-up is finished.

- b) Jason Denoncourt, will determine what areas will  
ABBOTTS FROZEN CUSTARR  
 need to be cleaned and sanitized, but will remain open with limited service, unless the incident occurs in the only food prep area.

- 3) A trained employee should put on Personal Protective Equipment, gloves last.

All employees are trained in this clean-up procedure. If staffing allows, cooks should not be the first choice for carrying out the clean-up.

- 4) Sprinkle \_\_\_\_\_ on vomit/fecal matter to soak up liquid.  
*kitty litter*

Using the scraper or scoop from the Clean-up Kit, and paper towels, carefully wipe up vomit/fecal matter and discard in a plastic trash bag. Then remove and discard gloves.

If staffing allows, a separate employee, wearing gloves and a mask, can hold the trash bag open by folding the top back over their hands so that the top of the bag is not contaminated in the process of discarding the paper towels, gloves, etc.

- 5) Wash hands and put on new disposable gloves and wash the area involved with detergent and warm water.

All surfaces within the incident area, plus all doorknobs, railings, wall corners or other places that you know are frequently touched should then be washed with soap and water. All restrooms should be cleaned also, even if they were not known to be affected by the incident. They are often used by employees and customers when they are not feeling well and the infectious germs will be there even if they cannot be seen.

All areas washed as described above will then be sanitized.

- 6) Sanitize hard or porous surfaces with chlorine bleach solution allowing the area to remain **wet for no less than 5 minutes**; follow policy directions for other surfaces or when using other sanitizers.

**Bleach concentrations:**

5.25% Sodium Hypochlorite or 6% dish machine sanitizer	1 2/3 cup bleach per gallon of water (1 part bleach to 10 parts water)	5000 PPM
8.25% concentrated Sodium Hypochlorite	1 cup bleach per gallon of water (1 part bleach to 16 parts water)	5000 PPM

Sanitizer to be used in this establishment will be \_\_\_\_\_  
and will be left wet on hard surfaces for \_\_\_\_\_ minutes before drying with  
papers towels.

**Ammonium chloride sanitizers are ineffective against Norovirus** so if those are the standard sanitizers used in a food service establishment, then chlorine bleach (or some



other commercial product approved by the EPA to kill Norovirus) must be kept on hand for use during a vomit/diarrhea incident.

Bleach is available in several different concentrations so food service establishments need to be aware of the concentration they have available. Once opened, a bottle of bleach maintains its strength for 30 days so **PUT THE DATE ON THE BOTTLE WHEN YOU OPEN IT**. Discard it after 30 days.

Remember that bleach will discolor many items such as carpets, flooring, etc. Test a small area if there is any reason to believe that there will be a problem. Steam cleaning of carpets and upholstery is recommended once the vomit/diarrhea has been removed. Linens should be washed in hot water and dried in a hot dryer.

Open windows or increase ventilation as much as possible during the clean-up.

Make sure that all high-touch areas and restrooms are sanitized before areas are re-opened.

- 7) When totally finished cleaning up, dispose of all paper towels and PPE in the plastic bag. Tie the bag closed and double bag it before putting it in your regular trash.
- 8) Rinse food contact surfaces with clean water to remove chlorine residue left on the surface because you used 5000 PPM to kill the infectious agents and re-sanitize with your usual 100 ppm sanitizer.

#### **RE-OPENING ESTABLISHMENT OR CLEANED AREAS**

When the above-described clean-up procedure has been completed, the areas may be re-opened. Establishments that closed for clean-up should call the Regulatory Authority and report that they are ready to re-open. The Regulatory Authority may, or may not, want to actually visit the establishment prior to re-opening.

Establishments should anticipate that some customers may request some kind of compensation. Management should discuss that with employees as part of the training on this procedure. The decision concerning compensation is entirely up to the establishment management.

#### **MONITORING EMPLOYEES FOR ILLNESS**

After incidents involving diarrhea, and particularly vomiting, all employees, but particularly those involved in the clean-up, will be monitored for signs of illness for several days. The Person-in-Charge will remind employees to report symptoms of any illness.

#### **INCIDENT REPORT**

It is advisable for the Person-in-Charge to complete an incident report describing the date and time of the incident; which employees were in charge of the clean-up; an

overall description of the area of the incident; how it was cleaned and sanitized; and the other areas of the establishment cleaned and sanitized. It should also state what food was discarded. This report should be kept in the establishment files in case there are any future questions about the incident.

#### REFERENCES:

"Clean-up and Disinfection for Norovirus ("Stomach Bug") Poster from [disinfect-for-health.org](http://disinfect-for-health.org).

Food Code, U.S. Public Health Service, FDA, 2013, Annex 3, Public Health Reasons/Administrative Guidelines, pages 395-397.

"Food Safety Sample SOP," NFSMI and USDA, Revised 2013.

"Guidelines for Responding to Vomiting and Diarrhea in Food Establishments," Rhode Island Department of Health, Yankee Conference Presentation by Cathy Feeney and Lydia Brown, September 22, 2016.

"Norovirus Information Guide," from SafeMark Best Practices, the Food Marketing Institute and Ecolab, July 2010.

"White Paper: Guidelines for Response to Vomiting and Diarrheal Incidents in Food Service Establishments," prepared by Paula Herald, PH.D., CP-FS, Technical Consultant, The Steritech Group, Inc., [www.steritech.com](http://www.steritech.com).

(Document updated November, 2018 after MA adopted the 2013 Federal Food Code and the 2015 Amendments.)



# STANDARD OPERATING PROCEDURE

---

## Cleaning and Disinfecting after Incidents Involving Body Fluids

**Policy:** This standard operating procedure (SOP) should be implemented to safely and properly respond to all incidents requiring cleaning and disinfecting of body fluid spills. Body fluids – including vomit, diarrhea, and blood – are considered potentially infectious. Norovirus is easily spread through projectile vomiting and because a low infectious dose is needed. Cleaning and disinfecting procedures should ensure this virus is killed.

### Procedure:

In the event of an incident involving body fluids, the following steps should be taken:

1. Contain the affected area

Discontinue foodservice operations if spill occurred in food preparation or service areas. Block off the area of the spill from staff and customers until cleanup and disinfection are complete.

For incidents involving vomit, contain all areas within 25 feet of the spill.

2. Sick staff and/(customers) should be excluded from the lunch line. Ill students should be sent to the school clinic/nurse for assistance.
3. Contact workplace administrators (i.e in school settings, this would be building principal and district superintendent; in restaurants this would be manager or owner).
4. Foodservice employees with symptoms of vomiting or diarrhea must be excluded from the foodservice operation or sent home. See Employee Health and Hygiene SOP.
5. Affected area should be cleaned by **designated foodservice employees** and/or custodial staff with training in how to clean and disinfect body fluid spills.

6. Cleaning Process

Retrieve the Body Fluid Cleanup Kit. Refer to the Food Safety Sample SOP Assembling a Body Fluid Cleanup Kit, [www.nfsmi.org/documentlibraryfiles/PDF/20111012102252.pdf](http://www.nfsmi.org/documentlibraryfiles/PDF/20111012102252.pdf)

Put on personal protective equipment (PPE), including:

- Disposable, non-latex gloves. Gloves should be vinyl or nitrile (rubber), and non-powdered. Consider double gloving (wearing two gloves on each hand). Replace gloves if they tear or become visibly soiled. Keep hands away from face while wearing gloves.
- Disposable gown or apron and disposable shoe covers.
- Face mask with eye protection, or goggles.

Remove visible body fluid

- Pour sand, or liquid spill absorbent material, on body fluid spill.
- Use a disposable scoop, or equivalent, and disposable paper towels to remove the sand and body fluid from the affected surfaces.

Clean the affected area

- Put on new disposable gloves. Consider double gloving.

- Clean the affected area with soap and water, and paper towels and/or a disposable mop head. This includes surfaces that came into direct contact with body fluids, and surfaces that may have been contaminated with body fluids. Dispose of the paper towels and/or disposable mop head in a plastic garbage bag.
- Work from clean to dirty surfaces
  - Always begin cleaning in the least dirty areas and clean toward the known, dirtier areas.
  - If you are cleaning up any bodily fluids (such as vomit), you should clean from the edges of the spill toward the center.
  - Bathrooms should be cleaned last.
- Clean from top to bottom
  - Carpets and floors should be cleaned last.
  - Carpets should be cleaned with a chemical disinfectant that is effective against Norovirus (see attached list) and then **steam cleaned at 158°F for 5 minutes or 212°F for 1 minute** for complete inactivation.
  - Separate clean linens from dirty or soiled linens.

## 7. Disinfecting Process.

Disinfect the cleaned, affected area:

- a) Wash hands. See Handwashing SOP.
- b) Put on new disposable gloves. Consider double gloving.
- c) Non-absorbent Surfaces (i.e., tile, stainless steel)

Prepare a chlorine bleach disinfecting solution.\*

Wear all PPE, including the face mask with eye protection, or goggles. Ensure that area is well ventilated (mix solution outdoors if necessary).

Prepare solution immediately before applying it to surfaces using unscented, household bleach (5.25% concentration hypochlorite) or concentrated bleach (8 % concentration of hypochlorite) with water.

Mix about 1/3 cup household bleach or 1 2/3 Tablespoon concentrated bleach with 1 gallon of water at temperature of about 75 ° F to achieve a solution concentration of 1000 parts per million (ppm) for use on non-porous hard surfaces such as countertops and utensils. Mix in a bucket designated for chemical use.

For porous surfaces such as natural stone or unsealed concrete, a solution with 5000 parts per million (ppm) is needed. Mix 1 and 2/3 cups household bleach or about 1 cup concentrated bleach with a gallon of water. Note that once opened, household bleaches lose their effectiveness after 30 days. Use a new, unopened bottle of bleach every 30 days for preparing solutions.

Transfer solution to a spray bottle. Spray disinfecting solution on affected surfaces, including surfaces that came into direct contact with body fluids, and surfaces that may have been contaminated with body fluids.

For incidents involving vomit, disinfect all areas and surfaces within 25 feet of the spill.

Allow at least 5 minutes contact time.

Rinse disinfected surfaces with potable water.

Allow surfaces to air dry.

Keep area well-ventilated.

## 8. Post-disinfection cleaning and sanitizing affected food contact surfaces



Food contact surfaces in infected area should be treated as soiled surfaces.

Clean and sanitize following regular mechanical or manual procedures (See SOP Cleaning and Sanitizing).

9. Discard potentially contaminated food

Put on new disposable gloves. Consider double gloving.

Dispose of exposed food and food in containers that may have been contaminated by body fluid in a garbage bag.

For incidents involving vomit, discard all food within 25 feet of the spill. Food in intact, sealed containers (i.e., cans) may be salvaged if adequately cleaned and disinfected.

Have a second employee, one who is not directly contacting potentially contaminated food, inventory the discarded food and record.

Remove gloves. Dispose of gloves in a plastic garbage bag.

Wash hands.

10. Handling clean-up materials

Laundering of dirty linens/clothing

- Items containing bodily fluids (such as vomit) that need to be laundered should be double-bagged.
- Handle laundry carefully and avoid shaking it as this can spread the virus.
- Launder with hot water in a laundry detergent solution effective against Norovirus (see attached list) for the longest available cycle length. Laundry should then be machine dried.

Disposal of PPE and cleaning and disinfecting materials.

- Put on new disposable gloves. Consider double gloving.
- Securely tie garbage bags containing all materials disposed of
- Place garbage bags in a second garbage bag
- Discard the bag(s) in disposal area identified by administration.

Clean all non-disposable items (bucket, mop handle, etc) with soap and water; then disinfect. Allow these items to air dry. Ensure water, soap, and mop head are changed after cleaning body fluids.

Remove soiled clothes, if necessary, and place clothes in a separate garbage bag. Securely tie the garbage bag. Keep clothes in the tied garbage bag until they can be adequately laundered.

Remove gloves. Dispose of gloves in a plastic garbage bag.

Wash hands. See Handwashing SOP.

NOTES: A disinfectant registered as effective against Norovirus by the Environmental Protection Agency (EPA) may be used IF approved for use in food facilities. Any product that will be used to sanitize food contact surfaces must be approved by FDA under 21CFR178.1010. See the following link for a list of approved chemicals:

[www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=178.1010](http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=178.1010)

If you have questions, consult the manufacturer for more information on the approval for use of their product on food contact surfaces and/or in foodservice facilities.

***The work place manager will:***

1. Review practices with all employees as part of new employee orientation.
2. Complete an incident report.
3. Review inventory list of damaged or discarded food.
4. Ensure that the Body Fluid Cleanup Kit is properly assembled at all times and restock after incidents as needed.
5. Ensure that at least one foodservice employee per shift is:  
Designated and trained to implement this SOP, and  
Trained in the use of the Body Fluid Cleanup Kit.
6. Establish protocols to contain affected area and communicate these with other stakeholders.
7. Ensure that foodservice employees are:  
Educated on illnesses and symptoms that must be reported to managers.  
Retrain/educate foodservice employees in Exclusions and Restrictions for Ill or Infected Food Service Employees.  
Restrict or exclude ill foodservice employees in accordance with SOPs.

Modified from NFSM and USDA Sample SOP Cleaning and Disinfecting Body Fluid Spills

Additional Training Resources available at:

[www.nfsmi.org/documentlibraryfiles/PDF/20111012101726.pdf](http://www.nfsmi.org/documentlibraryfiles/PDF/20111012101726.pdf)



