

# **Food, Lodging & Institutions Authorization Procedures**

**Original Set**

**Authorization Procedures Revised  
September 12, 2023**

# Food, Lodging & Institutions Authorization Procedures

NC Division of Public Health  
Environmental Health Section

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## PRELIMINARY ACTIVITIES

Applicant & Supervisor Initial/Date Completed

- \_\_\_\_\_ 1. The applicant shall successfully complete Centralized Intern Training by NC DHHS, Division of Public Health, Environmental Health Section.
- \_\_\_\_\_ 2. The applicant shall complete Tier IV training with a regional specialist before beginning the Field Practice and Review section. Date of Tier IV training \_\_\_\_\_
- \_\_\_\_\_ 3. The local health department shall train the applicant to keep daily records of time and activities, and to use forms properly.
- \_\_\_\_\_ 4. The supervisor shall assign the applicant to an authorized registered environmental health specialist (REHS) in the department to learn routine procedures of field work. If no authorized environmental health specialist is available in the applicant's department, the regional specialist shall find an alternate location for this training. The local health directors of both health departments will be involved in the negotiations concerning time and location for the training.
- \_\_\_\_\_ 5. The supervisor shall supply the applicant with the necessary equipment to perform required duties and ensure that the applicant is familiar with the use of all equipment.
- \_\_\_\_\_ 6. The supervisor shall assign the applicant to an authorized REHS for practice of skills and knowledge in the following specific areas; inspections will be carried out at each of the following types of establishments:
  - Food Service (30) (Minimum of 20 applicant led)

Food Service	26
Meat Market (no more than 6)	4
  - Lodging (3) (Minimum of 2 applicant led)
  - Institutions: (6)

Local Confinement	1
Hospital/Nursing Home	3
Residential Care	2
  - Water Supply (3) (for migrant housing)
  - On-Site Wastewater Facilities (3) (for migrant housing if the applicant does not hold an Onsite Water Protection authorization)
  - Total of 45 Inspections

**For each establishment evaluated**, the following file shall be developed for review and comments made by the supervisor. The file shall be organized in chronological order and separated by the establishment type as indicated in PRELIMINARY ACTIVITIES #6. Inspection forms filled out by the applicant and the authorized REHS shall be together. It shall include:

- A. A copy of this document, Food, Lodging and Institutions Authorization Procedures.
- B. Each establishment inspection form as specified in PRELIMINARY ACTIVITIES #6 and FIELD PRACTICE AND REVIEW.
- C. Suspension or revocation form, and a transitional permit, completed by the applicant. (If no establishment is suspended or revoked, the file shall include at least one mock suspension or revocation form and a mock transitional permit.)
- D. Product Disposition Form.
- E. Bacteriological Analysis of Water Sample.
- F. Pre-occupancy Evaluation Report of Drinking Water Supply and Wastewater Facilities for Migrant Housing.
- G. Documentation of verification visits.

## FIELD PRACTICE & REVIEW

Applicant & Supervisor Initial/Date Completed

- \_\_\_\_\_ 1. The supervisor or their authorized designee will make the necessary number of inspections with the applicant. In the beginning of the practice work, the applicant and the authorized REHS shall complete independent inspection forms. The applicant and the authorized REHS will discuss both inspection forms upon completion of each inspection in the absence of the operator.
- \_\_\_\_\_ 2. After at least 10 inspections (filled out separately from the authorized REHS), the applicant should take the lead role in conducting the inspections, writing up the inspection and discussing the findings with the operator. The authorized REHS shall review and concur with the findings documented on the inspection form. The final score may be discussed and agreed upon by the authorized REHS and the applicant. The final determination of the score is made by the authorized REHS. The forms shall be signed by both the authorized REHS and the applicant. The applicant should be able to discuss, explain and recommend the appropriate correction of violations.
- \_\_\_\_\_ 3. The minimum of 20 inspections that are applicant led shall be conducted at Category III or IV establishments. The applicant must be able to identify violations, discuss the needed corrections with the operator, complete an inspection form, and review the inspection form with the operator. Only one inspection form is completed at this point. The authorized REHS will provide guidance to the applicant as needed until satisfied that the applicant is proficient in conducting inspections in the various types of establishments.
- \_\_\_\_\_ 4. The applicant shall be trained on assessing risk factors through observations or discussions using the following risk-based concepts:
- A. RRCC (Receiving, Reheating, Cooking, Cooling)
  - B. Hot/Cold Holding, TPHC
  - C. Date Marking
  - D. Food Protection/Cross Contamination
  - E. Employee Health/Hand Hygiene/BHC
  - F. Cleaning/Sanitizing
  - G. Approved Sources
  - H. Menu Review/Consumer Advisory
- \_\_\_\_\_ 5. During the necessary inspections, if at least one *intent to suspend* and one *transitional permit* are not issued, a mock notice of *intent to suspend* and a *mock transitional permit* shall be completed by the applicant. The mock permit action shall be done onsite at one of the 30 food service establishments or one of the three lodging establishments. If at least one Product Disposition Form is not filled out, a mock form shall be completed by the applicant.
- For all Priority and/or Priority Foundation violations that require a verification, documentation of correction shall be included for review.**
- \_\_\_\_\_ 6. Migrant Housing Delegation is required unless currently authorized in Onsite Water Protection. The applicant shall conduct evaluations of at least three existing on-site wastewater systems and three on-site water supplies for compliance with 15A NCAC 18A .1700 and .1900 rules in the presence of an REHS authorized in a program other than Childhood Lead Poisoning Prevention. The evaluations may be conducted at any location with an on-site water supply and wastewater system.
- A review of the records on file and a site visit shall be made for each evaluation. A water sample shall be collected at each of the sites visited. An inspection form for each site visited shall be completed by the applicant and reviewed and co-signed in the field by the authorized REHS. Complete three of each form: Pre-occupancy Evaluation Report of Drinking Water Supply and Wastewater Facilities for Migrant Housing.
- \_\_\_\_\_ 7. The supervisor shall review the applicant's paperwork to determine if all requirements have been fulfilled.

**DISCLAIMER:** If upon reviewing the file, the regional specialist finds that the applicant needs additional practice, the evaluation for authorization may be postponed until that practice is completed. It is the supervisor/health director's responsibility to see that the applicant has sufficient field practice to prepare the applicant for authorization. Inspections submitted for this review must have been completed within the last 12 months. Inspection forms beyond 12 months will not be considered by the regional specialist.

## SCHEDULING THE EVALUATION FOR AUTHORIZATION

Applicant & Supervisor Initial/Date Completed

- \_\_\_\_\_ 1. After completion of the PRELIMINARY ACTIVITIES and FIELD PRACTICE & REVIEW, the applicant shall provide the *completed Food, Lodging & Institutions Authorization Procedures* **AND** the *Application for Authorization (DPH-EHS 1056)* to the Environmental Health Section at: [ehs.authorization@dhhs.nc.gov](mailto:ehs.authorization@dhhs.nc.gov)
- \_\_\_\_\_ 2. Contact your regional specialist to determine their preferred delivery method of all practice work.
- \_\_\_\_\_ 3. The Environmental Health Section will contact the appropriate regional environmental health specialist who will set an appointment to work with the applicant as soon as possible. If the evaluation cannot begin within a timely manner from receipt of completed files and the referral from the Section, the regional specialist shall contact their supervisor to arrange for the evaluation to be conducted by another regional specialist. The supervisor will communicate with the education and training specialist when the application has been referred to another regional specialist. Evaluations for authorizations are top priority for the regional specialist.

## EVALUATION PROCEDURES

The regional specialist shall determine the level of knowledge and skills of the applicant concerning the enforcement of laws and rules by administering a written exam and conducting field work exercises.

1. The regional specialist shall review the documents generated in the PRELIMINARY ACTIVITIES and FIELD PRACTICE & REVIEW. The regional specialist will provide feedback to the applicant after the review.
2. The regional specialist shall coordinate the administration of a written exam. The applicant must score at least 70% on the written exam prior to the field evaluation by the regional specialist. The regional specialist shall discuss the incorrect answers on the test with the applicant prior to continuing the evaluation. If the applicant fails the test, he/she will be denied authorization. The written exam may be repeated at a later date.
3. The applicant shall complete at least four but no more than eight independent establishment inspections. The establishments shall be selected by the regional specialist.
4. The regional specialist shall evaluate the applicants' knowledge, skills, and ability to properly inspect the establishments selected. The intern will conduct the inspection, complete the inspection form, discuss findings with the regional specialist, discuss findings with the person in charge of the establishment and post the grade. The regional specialist will evaluate the intern by using the current *Quality Assurance Field Assessment Worksheet*. The regional specialist and the applicant shall jointly sign the inspection form and any other pertinent forms related to the inspection.
5. Upon satisfactorily completing the field work, the regional specialist shall complete the Request for Authorization form and return to the EHS Authorization email address. If the request for authorization is denied, the specific reasons for denial with recommendations for improvements shall be included.

## DELEGATION OF AUTHORITY

1. Upon receipt of the recommendation from the regional specialist, a letter from the Environmental Health Section Chief will be sent to the applicant approving or denying the request for authorization.
2. The applicant may begin to enforce laws and rules when the letter of authorization is received by the local health department.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ENVIRONMENTAL HEALTH SECTION

N. C. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
ENVIRONMENTAL HEALTH SECTION  
**APPLICATION FOR DELEGATION OF AUTHORITY**

New       Transfer      REHS NUMBER \_\_\_\_\_

**\*PLEASE PRINT CLEARLY AND COMPLETE ALL LINE ITEMS\***

DATE OF EMPLOYMENT: \_\_\_\_\_

NAME: \_\_\_\_\_ MAIDEN: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_ WORK EMAIL: \_\_\_\_\_

CURRENT COUNTY OF EMPLOYMENT: \_\_\_\_\_

CURRENT COUNTY ADDRESS: \_\_\_\_\_

HEALTH DIRECTOR NAME & EMAIL: \_\_\_\_\_

SUPERVISOR NAME & EMAIL: \_\_\_\_\_

PREVIOUS COUNTY OF EMPLOYMENT: \_\_\_\_\_ DATE LEFT: \_\_\_\_\_

CIT TRAINING: LOCATION: \_\_\_\_\_ DATES: \_\_\_\_\_

PREVIOUS AUTHORIZATION:

( ) CCSS                      ( ) FLI; Migrant Housing                      ( ) POOLS                      ( ) WELLS  
( ) CLPP                      ( ) OSWP; Migrant Housing                      ( ) TATTOO

TYPE OF AUTHORIZATION REQUESTED:

( ) CCSS                      ( ) FLI; Migrant Housing                      ( ) POOLS                      ( ) WELLS  
( ) CLPP                      ( ) OSWP; Migrant Housing                      ( ) TATTOO

**STATEMENT OF APPLICANT**

I hereby request that I be authorized to enforce state laws and rules.

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

**STATEMENT OF SUPERVISOR**

I hereby certify that the applicant has successfully completed the Preliminary Duties and Field Practice and Review. The applicant is ready to be considered for authorization.

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

**INSTRUCTIONS:**

Purpose: To request authority to be delegated to an environmental health specialist to administer and enforce state environmental health laws and rules.

Preparation: This form shall be completed by the applicant when all Preliminary Activities and Field Practice and Review have been completed or when the applicant changes the county of employment. Each item preceded by a blank space must be initialed and dated by the applicant when the activity has been completed. Forms with missing information will not be processed.

Distribution: 1. Original to: [ehs.authorization@dhhs.nc.gov](mailto:ehs.authorization@dhhs.nc.gov) - CIT and Authorizations  
2. Copy: Local health department files.

Disposition: This form may be destroyed in accordance with Standard 6, Personnel Records, *Records Disposition Schedule* published by the North Carolina Division of Archives and History.