FOOD PROTECTION MANAGEMENT EVALUATION

Thank you again for participating in our Food Protection Management program. We hope that you found that the information was useful. To help us make sure that this program is meeting the needs of food service employees, we are asking you to take a few minutes to help us evaluate the program. You do not need to put your name on the form. Participation is voluntary and a Pre-Paid Business Reply Envelope is enclosed.

1. For each of the food safety practices listed below, fill in one bubble in the left column that best describes how often you followed that practice BEFORE the course; and fill in one bubble in the right column that best describes how often you follow that practice AFTER the course. If the practice does not apply to what you do in your business please fill in N/A.

<table>
<thead>
<tr>
<th>BEFORE Program</th>
<th>AFTER Program</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td>Never</td>
</tr>
<tr>
<td>Sometimes</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Always</td>
<td>Always</td>
</tr>
<tr>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

a. Maintain food temperature at 41F or below for cold holding.  □ □ □ □ □
b. Maintain food temperature at 135F or above for hot holding.  □ □ □ □ □
c. Date mark all ready-to-eat refrigerated potentially hazardous foods.  □ □ □ □ □
d. Dispose of potentially hazardous foods that have not be consumed after 7 days.  □ □ □ □ □
e. Use a thermometer to determine the doneness of food.  □ □ □ □ □
f. Use the 2-stage cooling method to cool foods to 41F or below.  □ □ □ □ □
g. Wash hands for 20 seconds using soap and warm water.  □ □ □ □ □
h. Show employees proper hand-washing techniques.  □ □ □ □ □
i. Touch ready-to-eat foods with bare hands.  □ □ □ □ □
j. Come to work with vomiting and/or diarrhea.  □ □ □ □ □
k. Clean and sanitize food contact surfaces and utensils between uses.  □ □ □ □ □
l. Clean and sanitize all clean-in-place equipment every day.  □ □ □ □ □
m. Store raw foods below ready-to-eat foods in the refrigerator.  □ □ □ □ □
n. Keep raw foods separate from ready-to-eat foods in food preparation  □ □ □ □ □
o. Label and store all poisonous or toxic materials properly to prevent contamination.  □ □ □ □ □

Open Ended Section
For the following questions, please answer by writing the most appropriate answer.

2. On average, how many customers does your establishment serve per day? [ ] [ ] [ ]

3. In which county did you take the "Food Safety: It's Our Business" training? [ ]
4. As a result of attending our "Food Safety: It's Our Business" training, to what extent do you use the following pieces of equipment? Fill in ONE bubble that best describes the extent that each piece of equipment is used.

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Does Not Apply To Our Establishment</th>
<th>Currently Not Used</th>
<th>Used Before Coming to Program</th>
<th>Have Begun Using since attending Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves for Handling Ready-to-Eat Food</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Food Thermometers</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Color-Coded Cutting Boards</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Test Strips</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

5. What has been the biggest change you implemented at your establishment since participating in the "Food Safety: It's Our Business" training?


6. How easy has it been for you to practice the food safety skills that you learned in this program in your current job? Fill in ONE response.
   - O Very Easy
   - O Somewhat Easy
   - O Not Sure
   - O Somewhat Difficult
   - O Very Difficult

7. In which county do you work?


8. How many years have you worked in Food Service/Restaurant Business?


**Demographics Section**

9. Current Title or Position:
   - O Asst. Manager
   - O Cook
   - O Dietary Services Director
   - O Manager
   - O Owner
   - O Supervisor

10. Age:
    - O Under 30
    - O 30-39
    - O 40-49
    - O 50-59
    - O 60+

11. Ethnicity:
    - O African American
    - O Hispanic
    - O White
    - O Asian
    - O Other

12. Gender:
    - O Male
    - O Female

13. Highest Level of Education Completed:
    - O Less Than High School
    - O High School Graduate or GED
    - O Some College
    - O College Graduate
    - O Graduate Degree (Master's or Ph.D.)

14. Is there anything else you would like to add?


THANK YOU FOR COMPLETING THIS EVALUATION!