

**National Shellfish Sanitation Program (NSSP) Guide for the Control of Molluscan Shellfish:  
2013 Revision**

**NSSP Standardized Shellfish Processing Plant Inspection Form**

|                                                       |                                                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Agency Name:                                          |                                                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             |                                     | Date                                                                         |                                                                              |
| Type of Inspection:                                   | <input type="checkbox"/> Certification <input type="checkbox"/> Pre-operational <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Standardization |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
| Dealer Name:                                          |                                                                                                                                                                                              |                                                                              | Certification Number                                                                                                                                                                                                                        |                                     |                                                                              |                                                                              |
| Dealer Address:                                       |                                                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
| <b>Hazard Analysis Critical Control Point (HACCP)</b> |                                                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
| 1.                                                    | <b>HACCP Plan</b> Yes <input type="checkbox"/> No <input type="checkbox"/> Required for Certification                                                                                        |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
| 2.                                                    | Plan Elements Identified and Adequate                                                                                                                                                        | <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> NA | Code                                                                                                                                                                                                                                        |                                     | <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> NA | Code                                                                         |
|                                                       | (a) Hazards                                                                                                                                                                                  |                                                                              | O                                                                                                                                                                                                                                           | (e) Critical Control Points         |                                                                              | K                                                                            |
|                                                       | (b) Records                                                                                                                                                                                  |                                                                              | O                                                                                                                                                                                                                                           | (f) Monitoring                      |                                                                              | K                                                                            |
|                                                       | (c) Critical Limits                                                                                                                                                                          |                                                                              | K                                                                                                                                                                                                                                           | (g) Verification Procedures         |                                                                              | O                                                                            |
|                                                       | (d) Name, Address, Signed and Dated                                                                                                                                                          |                                                                              | O                                                                                                                                                                                                                                           | (h) Corrective Action if identified |                                                                              | K                                                                            |
| 3.                                                    | <b>HACCP Training</b>                                                                                                                                                                        |                                                                              | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                    |                                     | Code O                                                                       |                                                                              |
| 4.                                                    | <b>Plan Implementation</b>                                                                                                                                                                   |                                                                              | <b>Corrective Actions Recorded (K)</b><br><b>Verification Procedures (K) (Signature)</b><br><b>Monitoring Procedures (K)</b><br><b>Records: Accurate/ Maintained (K) Format (O)</b><br><b>Initialed/Dated (O) Firm's Name on record (O)</b> |                                     |                                                                              | <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> NA |
|                                                       | (a)                                                                                                                                                                                          | Receiving                                                                    |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
|                                                       | (b)                                                                                                                                                                                          | Shellstock Storage                                                           |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
|                                                       | (c)                                                                                                                                                                                          | Processing                                                                   |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
|                                                       | (d)                                                                                                                                                                                          | Shucked Meat Storage                                                         |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
|                                                       | (e)                                                                                                                                                                                          | Other Critical Limits                                                        |                                                                                                                                                                                                                                             |                                     |                                                                              |                                                                              |
| 5.                                                    | Approved Source Control Failure                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              | C                                                                            |
| 6.                                                    | Time/Temperature Control Failure                                                                                                                                                             |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              | C                                                                            |
| 7.                                                    | Other Critical Control Failure                                                                                                                                                               |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              | C                                                                            |
|                                                       | <b>Sanitation Items</b>                                                                                                                                                                      |                                                                              |                                                                                                                                                                                                                                             | <b>Citation</b>                     | <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> NA | <b>Code</b>                                                                  |
| 8.                                                    | Safety of water for processing and ice production                                                                                                                                            |                                                                              |                                                                                                                                                                                                                                             | .02A                                |                                                                              |                                                                              |
| 9.                                                    | Condition and cleanliness of food contact surfaces                                                                                                                                           |                                                                              |                                                                                                                                                                                                                                             | .02B                                |                                                                              |                                                                              |
| 10.                                                   | Prevention of cross-contamination                                                                                                                                                            |                                                                              |                                                                                                                                                                                                                                             | .02C                                |                                                                              |                                                                              |
| 11.                                                   | Maintenance of hand-washing, hand sanitizing, and toilet facilities                                                                                                                          |                                                                              |                                                                                                                                                                                                                                             | .02D                                |                                                                              |                                                                              |
| 12.                                                   | Protection from adulterants                                                                                                                                                                  |                                                                              |                                                                                                                                                                                                                                             | .02E                                |                                                                              |                                                                              |
| 13.                                                   | Proper labeling, storage, and use of toxic compounds                                                                                                                                         |                                                                              |                                                                                                                                                                                                                                             | .02F                                |                                                                              |                                                                              |
| 14.                                                   | Control of employees with adverse health conditions                                                                                                                                          |                                                                              |                                                                                                                                                                                                                                             | .02G                                |                                                                              |                                                                              |
| 15.                                                   | Exclusion of pests                                                                                                                                                                           |                                                                              |                                                                                                                                                                                                                                             | .02H                                |                                                                              |                                                                              |
| 16.                                                   | Sanitation Monitoring and Records                                                                                                                                                            |                                                                              |                                                                                                                                                                                                                                             |                                     |                                                                              | S(K/O)                                                                       |
|                                                       | <b>Additional Model Ordinance Requirements</b>                                                                                                                                               |                                                                              |                                                                                                                                                                                                                                             | <b>Citation</b>                     | <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> NA | <b>Code</b>                                                                  |
| 17.                                                   | Plants and Grounds                                                                                                                                                                           |                                                                              |                                                                                                                                                                                                                                             | .03A                                |                                                                              |                                                                              |
| 18.                                                   | Plumbing and related facilities                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             | .03B                                |                                                                              |                                                                              |
| 19.                                                   | Utilities                                                                                                                                                                                    |                                                                              |                                                                                                                                                                                                                                             | .03C                                |                                                                              |                                                                              |
| 20.                                                   | Disposal of other waste                                                                                                                                                                      |                                                                              |                                                                                                                                                                                                                                             | .03D                                |                                                                              |                                                                              |
| 21.                                                   | Equipment condition and cleaning, maintenance, and construction of non-food contact surfaces                                                                                                 |                                                                              |                                                                                                                                                                                                                                             | .03E                                |                                                                              |                                                                              |
| 22.                                                   | Shellfish storage and handling                                                                                                                                                               |                                                                              |                                                                                                                                                                                                                                             | .03F                                |                                                                              |                                                                              |
| 23.                                                   | Heat shock                                                                                                                                                                                   |                                                                              |                                                                                                                                                                                                                                             | .03G                                |                                                                              |                                                                              |
| 24.                                                   | Supervision                                                                                                                                                                                  |                                                                              |                                                                                                                                                                                                                                             | .03H                                |                                                                              |                                                                              |
| 25.                                                   | Transportation (To include only the person shipping)                                                                                                                                         |                                                                              |                                                                                                                                                                                                                                             | IX.05                               |                                                                              | K                                                                            |
| 26.                                                   | Labeling and Tagging                                                                                                                                                                         |                                                                              |                                                                                                                                                                                                                                             | X.05,.06,.07                        |                                                                              | S (K/O)                                                                      |
| 27.                                                   | Shipping Documents and Records / Written Recall Procedures                                                                                                                                   |                                                                              |                                                                                                                                                                                                                                             | X.08, .03                           |                                                                              | K                                                                            |
| <b>Dealer's Signature</b>                             |                                                                                                                                                                                              |                                                                              |                                                                                                                                                                                                                                             | <b>Inspector's Signature</b>        |                                                                              |                                                                              |

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**.02 Shellfish Plant Inspection Standardization Procedures**

**ATTACHMENT I**

STANDARDIZATION NOMINATION FORM

|                                                  |                                                        |
|--------------------------------------------------|--------------------------------------------------------|
| TO:                                              |                                                        |
| FROM:                                            |                                                        |
| SUBJECT: REQUEST FOR STANDARDIZATION             |                                                        |
| DATE:                                            |                                                        |
| Name:                                            |                                                        |
| Title:                                           |                                                        |
| Agency Name:                                     |                                                        |
| Address:                                         |                                                        |
| City/State/Zip:                                  |                                                        |
| Telephone:                                       |                                                        |
| Fax:                                             |                                                        |
| Education: (list degree or include a transcript) |                                                        |
|                                                  | Length of Service:                                     |
|                                                  | Describe shellfish experience:                         |
|                                                  |                                                        |
|                                                  |                                                        |
| CHECK (X) BELOW COURSES ATTENDED:                | How many routine shellfish plant evaluations per year? |
| Shellfish Plant Sanitation ( )                   | 1 - 5 ( ) 6 - 10 ( ) >20 ( )                           |
| Basic Seafood HACCP Alliance Course ( )          |                                                        |
| List Other Courses                               |                                                        |

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**ATTACHMENT II  
COMPOSITE PERFORMANCE REPORT**

| <b>FIRM NAME:</b>                                                                                | <b>Candidate(O)</b> | <b>Standard(X)</b> | <b>Disagreements</b> |
|--------------------------------------------------------------------------------------------------|---------------------|--------------------|----------------------|
| #1 HACCP Plan                                                                                    |                     |                    |                      |
| #2 Plan Elements (a) Hazards                                                                     |                     |                    |                      |
| #2 Plan Elements (b) Records                                                                     |                     |                    |                      |
| #2 Plan Elements (c) Critical Limits                                                             |                     |                    |                      |
| #2 Plan Elements (d) Signed and Dated                                                            |                     |                    |                      |
| #2 Plan Elements (e) Critical Control Points                                                     |                     |                    |                      |
| #2 Plan Elements (f) Monitoring                                                                  |                     |                    |                      |
| #2 Plan Elements (g) Verification Procedures                                                     |                     |                    |                      |
| #2 Plan Elements (h) Corrective Action if identified                                             |                     |                    |                      |
| #3 HACCP Training                                                                                |                     |                    |                      |
| #4 Plan Implementation (a) Receiving                                                             |                     |                    |                      |
| #4 Plan Implementation (b) Shellstock Storage                                                    |                     |                    |                      |
| #4 Plan Implementation (c) Processing                                                            |                     |                    |                      |
| #4 Plan Implementation (d) Shucked Meat Storage                                                  |                     |                    |                      |
| #4 Plan Implementation (e) Other Critical Limits                                                 |                     |                    |                      |
| #5 Approved Source Control Failure                                                               |                     |                    |                      |
| #6 Time/Temperature Control Failure                                                              |                     |                    |                      |
| #7 Other Critical Control Failure                                                                |                     |                    |                      |
| <b>TOTAL NUMBER OF DISAGREEMENTS</b>                                                             |                     |                    |                      |
| <b>SANITATION ITEMS</b>                                                                          |                     |                    |                      |
| #8 Safety of water for processing and ice production                                             |                     |                    |                      |
| #9 Condition and cleanliness of food contact surfaces                                            |                     |                    |                      |
| #10 Prevention of cross-contamination                                                            |                     |                    |                      |
| #11 Maintenance of hand-washing, hand sanitizing, toilet facilities                              |                     |                    |                      |
| #12 Protection from adulterants                                                                  |                     |                    |                      |
| #13 Proper labeling, storage, and use of toxic compounds                                         |                     |                    |                      |
| #14 Control of employees with adverse health conditions                                          |                     |                    |                      |
| #15 Exclusion of pests                                                                           |                     |                    |                      |
| #16 Sanitation Monitoring and Records                                                            |                     |                    |                      |
| <b>TOTAL NUMBER OF DISAGREEMENTS</b>                                                             |                     |                    |                      |
| <b>ADDITIONAL MODEL ORDINANCE REQUIREMENTS</b>                                                   |                     |                    |                      |
| #17 Plants and Grounds                                                                           |                     |                    |                      |
| #18 Plumbing and related facilities                                                              |                     |                    |                      |
| #19 Utilities                                                                                    |                     |                    |                      |
| #20 Disposal of other waste                                                                      |                     |                    |                      |
| #21 Equipment condition and cleaning, maintenance, and construction of non-food contact surfaces |                     |                    |                      |
| #22 Shellfish storage and handling                                                               |                     |                    |                      |
| #23 Heat shock                                                                                   |                     |                    |                      |
| #24 Supervision                                                                                  |                     |                    |                      |
| #25 Transportation (To include only the person shipping)                                         |                     |                    |                      |
| #26 Labeling and Tagging                                                                         |                     |                    |                      |
| #27 Shipping Documents and Records / Written Recall Procedures                                   |                     |                    |                      |
| <b>TOTAL NUMBER OF DISAGREEMENTS</b>                                                             |                     |                    |                      |



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### **FIELD REQUIREMENT FOR THE SUCCESSFUL COMPLETION OF STANDARDIZATION**

In order for the *Candidate* to successfully complete standardization he/she must meet the following field standardization criteria after five (5) evaluations:

- HACCP inspection form items 1 - 7.  
Disagreements with the *standard cannot exceed an average of three (3)*.
- Sanitation inspection form items 8 - 16.  
Disagreements with the *standard cannot exceed an average of three (3)*.
- Additional Model Ordinance inspection form items 17 - 27.  
Disagreements with the *standard cannot exceed an average of four (4)*.