



Name : \_\_\_\_\_ Date : \_\_\_\_\_

**VOLUNTEER  
SUBCONTRACTOR  
TEMPORARY EMPLOYEE  
POLICY ACKNOWLEDGEMENT  
ORIENTATION WORKBOOK**

PLEASE RETURN SIGNED FORM PACKET TO YOUR MANAGER  
OR GROUP LEAD | POLICY DESCRIPTIONS CAN BE FOUND IN  
THE TAKE HOME PACKET

January 2024



# Volunteers, Subcontractor Employees and Temporary Staffing Agencies Training

## Levy Training and Acknowledgments

Required annually. Average completion time is 30 minutes. This training includes:

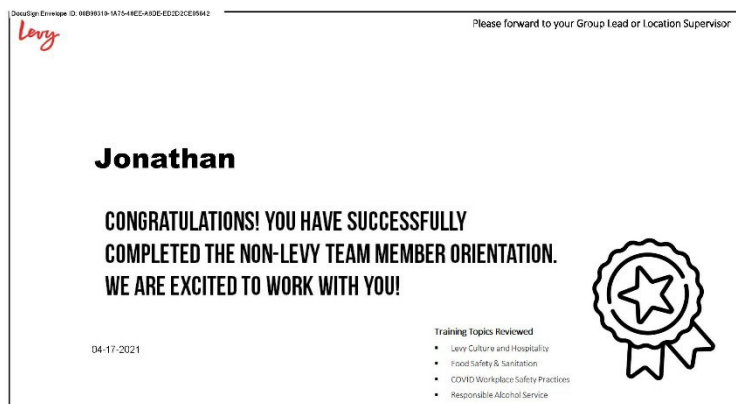
- Payment and cash handling agreement
- safety and sanitation, non-slip shoes, cut resistant gloves, OSHA
- policy against harassment and discrimination
- health reporting agreement
- liquor liability and responsible alcohol service standards (RAS)

Acknowledgments to sign:

- Fair Treatment Policy
- Payment and Cash Handling Agreement
- Health Reporting Agreement
- Safety Pledge
- Safety Basics and Policies
- Policy and Training Acknowledgement

## Instructions

- Complete the training found at: <https://npo-training.videoshowcase.net>
  - You will need this packet handy while you complete the training
  - Download the completion certificate (see sample below)
- Provide your training completion certificate to your group lead or manager
- Sample training completion certificate:



Initial: \_\_\_\_\_

Attach Creating Legends  
Certificate of Completion

## VOLUNTEER / TEMP / SUBCONTRACTOR SERVS SAFE REQUIRED TRAINING

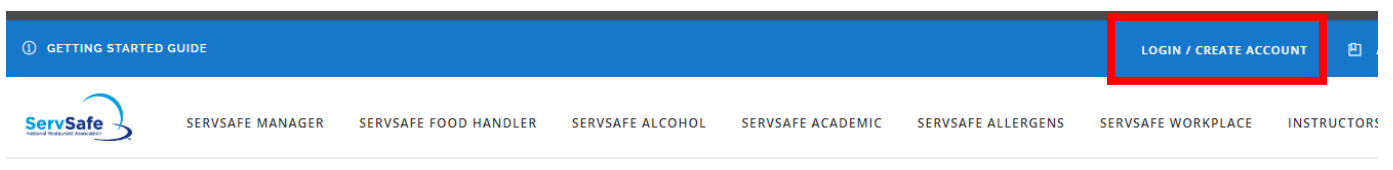
One may not sell or serve alcohol at any Levy locations unless they have completed the required training below. If you have any questions, please reach out to your Levy HR partner.

1. Watch a short Levy orientation video found at <https://npo-training.videoshowcase.net>
2. It is legally required to complete ServSafe Alcohol Certification training. This state-recognized certificate is valid for three (3) years

*If you already have a valid ServSafe Alcohol certification (or state-specific required equivalent), you do not need to complete.*

To complete ServSafe Alcohol Certification, follow the steps below:

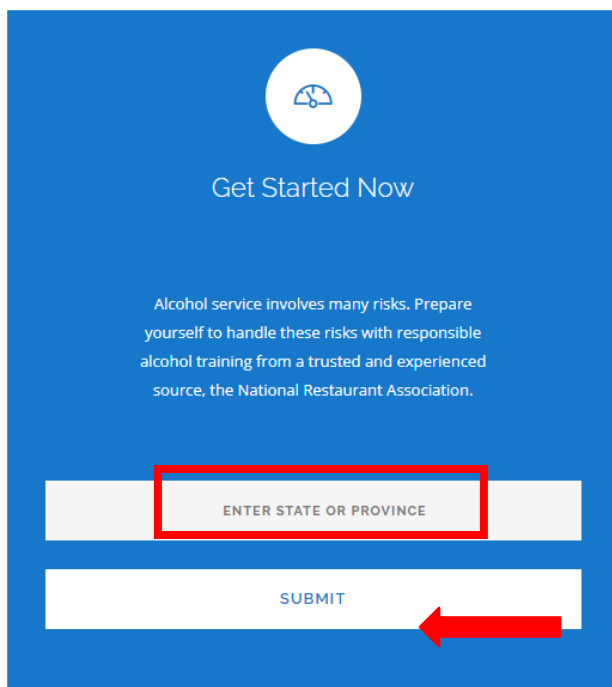
Go to [www.servsafe.com](http://www.servsafe.com) and create a profile if you do not already have one



After logged in, click on ServSafe Alcohol at the top



Enter the state you're serving alcohol in and click Submit

A screenshot of the ServSafe 'Get Started Now' form. The form has a blue background and a white circular icon at the top. Below the icon is the text 'Get Started Now'. The main text reads: 'Alcohol service involves many risks. Prepare yourself to handle these risks with responsible alcohol training from a trusted and experienced source, the National Restaurant Association.' Below this text are two input fields: 'ENTER STATE OR PROVINCE' and 'SUBMIT'. The 'ENTER STATE OR PROVINCE' field is highlighted with a red rectangular box, and the 'SUBMIT' button is highlighted with a red arrow pointing to it.

Add the ServSafe Alcohol Online Course and Primary Exam – 3rd Edition to your cart



ServSafe Alcohol Online Course  
and Primary Exam-3rd Edition

NOW IN ENGLISH AND SPANISH! -

SSAOLP3

\$30.00

ADD TO CART

Click [View Your Cart](#), then [Checkout](#)

Enter payment information then select [Continue](#)

Enter **LEVY23** in the coupon code field on the shopping cart page (this coupon gives you a 32% discount)

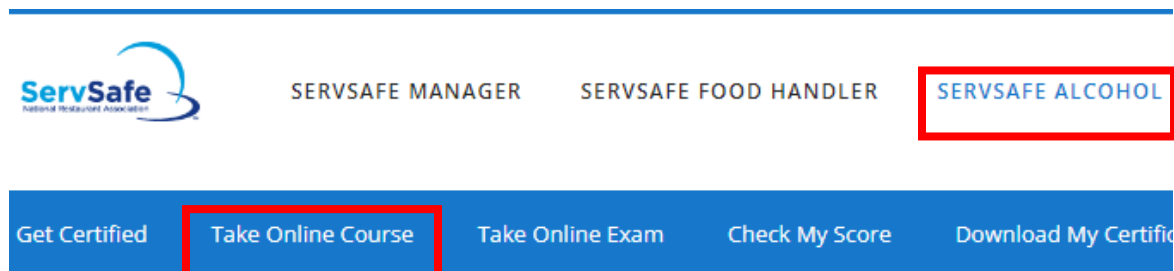
**NOTE: this coupon code is ONLY applicable to anyone working at a Levy location – these codes are tracked and cannot be shared. Any distribution of this code outside of intended purposes may result in termination of the team member and associated group/company.**

Click [Apply Coupon Code](#) and complete your payment process

To take your online course:

Click on [ServSafe Alcohol](#) at the top of the screen, scroll down and select [Take Online Course](#)

Click [Launch](#) next to the ServSafe Alcohol Course



Complete the online course. When finished click on [Take Online Exam](#).

Select the state specific alcohol exam from the dropdown options. If your state does not appear, select [Primary ServSafe Alcohol Exam](#)

Your exam access code will populate automatically, click [Continue](#) to start your exam

You will be notified if you have passed or failed immediately after the exam. After 48 hours you will be able to print your certificate any time you need it by going to Certificates, then [View/Print Certificates](#). Certificates are valid for three years.

**Acknowledgement of Receipt of the  
Statement of Anti-Discrimination, Harassment, Retaliation, and Bullying  
(*Fair Treatment Policy*)**

This will acknowledge that I have received, read, and understand the “Statement of Anti-Discrimination, Harassment, Retaliation, and Bullying” (*Fair Treatment Policy*) of Compass Group USA, Inc., which is dated January 2024. I acknowledge that it is my responsibility to also be familiar with the Company’s Code of Ethics and Code of Business Conduct.

**ACKNOWLEDGMENT OF RECEIPT  
OF THE SEXUAL HARASSMENT POLICY**

I acknowledge that I have received, read, and understand the *Sexual Harassment Policy*. I further acknowledge that I have been instructed to report any alleged incidents of sexual harassment **immediately** to my Manager, any member of management, or the HR representative. In addition, I acknowledge that it is my responsibility to be familiar with the *Fair Treatment Policy*.

**Signature:** \_\_\_\_\_

**Please complete this Acknowledgement and return it to your Manager as soon as possible for filing.**

## PAYMENT AND CASH HANDLING AGREEMENT

***This policy is all encompassing for Company locations regardless of whether cash is accepted at the property. Because some Company locations have a policy in place to only accept electronic forms of payment, some items in this policy may not be applicable to those locations.***

1. The POS system may not be left unattended/unsecured at any time.
2. The POS system must not be left open at any time other than during an actual transaction. The team member must lock or log off their POS when leaving the vicinity. Sharing a POS login between team members is not permitted.
3. No products may be given away free to guest. Any 'gifting', gratis, or unauthorized discounting will be considered a misappropriation of funds/property.
4. Team Member will NEVER accept cash payment when working at location that does not accept cash tenders.
5. No change/exchange may be given from the drawer or a team member's personal money.
6. Team member may not accept tips or payment for products using personal electronic accounts (QR Codes, Venmo, Quickpay, Zelle, or other cash apps, personal credit, or debit card, etc.).
7. All sales must be entered into the POS immediately and payment taken upon the conclusion of the transaction. The cash drawer and/or sales ticket must be closed at the conclusion of each transaction.
8. Team member may not make any notes or record any financial transactions during their shift.
9. Locations that generate paper receipts must retain the guest signature copy for transactions above the approved limit assigned by location. The signed portion will be retained and reconciled at the end of the day.
10. Team members may not enter any tip amounts on behalf of the guest into transactions that request guests to select and enter a tip amount.
11. A receipt and/or record with location number and items purchased must be documented for all non-monetary transactions (i.e. meal vouchers, employee meals, and frequent buyer card utilization) so that all transactions can be reconciled. All physical non-monetary payments are to be marked voided upon redemption and retained for end of night payments reconciliation.
12. Team member may not issue a refund to a guest or process a void without manager/supervisor approval. All refund/void receipts must be kept, signed by team member and supervisor with an explanation written on the slip/receipt and attached to the daily documents.
13. A team member may not generate POS reports of any type during their shift.
14. At the close of the team member's shift, each team member must confirm their closing drawer before ending their shift. A POS reading must be taken by the manager/supervisor (other than the team member), at the close of each shift. Team members are required to utilize the POS report to verify all credit card receipts for signed credit card transactions, all house charge slips and any accepted vouchers (when applicable). At locations which accept cash, the team member must count and balance the cash in the drawer to the POS reading in the presence of the manager/supervisor who took the reading. Each team member must sign for their closing drawer when it is returned.

15. No personal items (purses, backpacks/bags, etc.) or counting devices (calculators, paper clips, loose coins, etc.) may be stored or placed in/around the POS area.
16. Team members may not solicit tips from a guest. If cash tips are received, they are to be placed in a central location not in view of guest. Cash Tips received are never to be placed in the team member's clothing/uniform/personal belongings upon receipt from guest.

Additional Procedures for Cash Acceptance Locations:

17. Before beginning a shift, each team member must sign for and count their drawer (cash drawer) in the presence of a manager/supervisor. Discrepancies must be reported immediately. Any issues or discrepancies/claims will not be accepted after a team member leaves the designated cash office. After confirming the drawer balance at the beginning of their shift, the team member is responsible for the drawer until the manager/supervisor assigned for the drawer at the end of their shift.
18. Team members will not exchange funds between cash drawers, nor access another team member's drawer for which he/she is not assigned.
19. Avoid taking \$50 or \$100 bills. If this is unavoidable, a manager/supervisor must verbally authorize the form of cash payment.
20. A cash variance (overage or shortage) of more than 0.5% of sales will result in a corrective action. Significant or repeated cash variances will be subject to further corrective action, up to and including termination.

TEAM MEMBER DECLARATION/AGREEMENT

I, the undersigned, have read and understand the cash handling and cash equivalent procedures detailed above. I further understand and acknowledge that the Company operates a zero-tolerance policy regarding cash handling and that failure to comply with these procedures will result in corrective action up to and including termination. I further recognize that in addition to termination of employment the Company will prosecute me if there is evidence of fraud or misappropriation of funds.

**Signature:** \_\_\_\_\_

**Date** \_\_\_\_\_



# NON-TEAM MEMBER COMPASS FOOD SAFETY BASICS AND POLICIES

To help prevent the spread of illness to our customers and other associates, the health status of each temporary associate, non-profit and subcontractor must be checked before they start work. On occasion temporary associates, non-profits and subcontractors with certain illness symptoms or conditions must not be permitted to handle food. In other cases, they may not be able to work at all. Temporary associates, non-profits and subcontractors must also be informed about our expectations related to personal hygiene practices. To that end, completion of this short orientation is required for any temporary associate, non-profit and subcontractor working in your unit BEFORE they begin work.

## Manager Instructions:

Before any temporary associate, non-profit and subcontractor begins work READ THIS FORM to them, fill in the answers to the questions, and have them sign a copy. For temporary associates, non-profits and subcontractors that work periodically, such as one day a week or a few times a month, this orientation must also be read to them and signed EACH TIME THEY WORK. Retain signed copies in a file. Retain the "Temporary Associate" file with your other personnel records.

## HEALTH INTERVIEW

**TODAY:** Are you suffering from any of the following? *NOTE: It is not necessary to report symptoms, such as diarrhea, associated with chronic medical conditions or illnesses.*

### Symptom

### Check response

- |                         |                              |                             |
|-------------------------|------------------------------|-----------------------------|
| Diarrhea?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fever?                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Vomiting?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Jaundice?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Sore throat with fever? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Boils or infected wounds of any size containing pus on hands, wrists, arms, or other exposed body area?

- Yes  No            If yes, explain: \_\_\_\_\_

**PAST:** Have you ever been diagnosed as being ill with a foodborne illness?  Yes  No

If yes, what was the date of the diagnosis? \_\_\_\_\_

### HIGH-RISK CONDITIONS:

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. Have you been exposed to or suspected of causing a confirmed outbreak of foodborne illness?                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Do you live in the same household as a person diagnosed with a foodborne illness?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do you have a household member attending or working in a setting where there is a confirmed outbreak of foodborne illness? |                              |                             |

Yes  No

**Attention Manager: All "Yes" responses (above) must be reported to your Corporate Food Safety Manager PRIOR TO the associate beginning work.**



## CLOTHING, UNIFORMS AND PERSONAL HYGIENE

While at work:

- You may not store your personal belongings (coats, purses, phones, food/drink, etc.) at your workstation. Work with the manager to find an appropriate place to store the items.
- You must wear a hair restraint. Long hair must be pulled back and away from your face. Ask the manager about the appropriate forms of hair restraints for your facility.
- You are required to wear clean outer clothing.  
You will be provided: APRON      CHEF COAT      UNIFORM      OTHER
- If OTHER, explain: INFORMATION WILL BE GIVEN BY LOCATION MANAGER OR STAND LEAD
- You may not wear jewelry (including body ornaments such as nose rings) except for a plain wedding band (no stones). Please remove all jewelry and ornaments other than a plain wedding band and store them with your personal belongings prior to starting work.
- Fingernails must be short and trimmed.

## EATING, DRINKING, AND SMOKING

- Eating (including chewing gum), drinking and smoking may only be done during breaks
- Eating and drinking may NOT be done at your workstation or anywhere in production, service, storage, or dishwashing areas.
- Please stay hydrated. If you become thirsty between breaks – leave your workstation, get a drink, throw away the cup, wash your hands and return to work.
- Breaks and meals may be taken in: INFORMATION WILL BE GIVEN BY LOCATION MANAGER OR STAND LEAD
- The designated smoking/vaping areas: INFORMATION WILL BE GIVEN BY LOCATION MANAGER OR STAND LEAD

## HAND WASHING AND GLOVE USE

Good handwashing is necessary to remove dirt and germs from your hands and arms that could get into food.

*How to wash your hands (the entire process should take approximately 20 seconds):*

- Wash hands ONLY at hand washing stations.
- Wet your hands with warm water, then apply soap.
- Scrub your hands – don't forget to scrub under your fingernails and between your fingers. Wash your arms up to your elbows, if exposed.
- Rinse your hands and arms under warm water.
- Dry your hands and arms with paper towels.

*When to wash your hands:*

- Immediately when entering, and each time you leave and return to, any food production and service area.
- Before starting work.
- Before putting on gloves and when changing gloves.
- After handling cleaning chemicals.
- After eating, drinking, smoking, or taking a break.
- After using the restroom.
- After sneezing, coughing, or blowing your nose.
- After handling raw meat, poultry, fish, or shell eggs.
- After touching the hair, face, body, or clothing.
- After handling garbage.
- After touching an open sore, cut, boil, or pimple.

*Glove use:*

Gloves serve as a barrier to protect the food from your hands- NOT your hands from the food.

- NO BARE HAND CONTACT is permitted with cooked or ready-to-eat foods. Single-use gloves must be worn, or suitable utensils must be used, when handling these foods.
- Single-use gloves must be worn whenever you are preparing or serving food in customer view.
- Single-use gloves must be changed (and hands washed) between tasks.
- Remove gloves whenever leaving your workstation. Wash hands and put on fresh gloves when returning.
- Change gloves whenever they become soiled or torn.

## FOOD SAFETY BASICS

### IMMINENT HAZARDS

Immediately notify the manager if you observe any of the following:

- Your health status changes with regards to foodborne illnesses and symptoms as described on page 1.
- Facility or temperature holding equipment has no power or suddenly loses power
- Facility or plumbing fixture has no clean (potable) running water or suddenly loses water
- Facility or plumbing fixture has no hot water or suddenly loses hot water

**IMMINENT HAZARDS Cont.**

- Sewage is present coming from drains or on the floor in a food production area
- Pest activity is observed
- Any hazard is observed that could directly affect the food such as a chemical or condensation dripping into food; broken equipment that could chip into food; rocks, twigs, or insects in salad mixes, etc.

**FOOD ALLERGENS**

- NEVER answer a customer question related to food ingredients or allergens. Politely tell the customer you will be happy to get the manager or chef to answer their questions.
  - ALWAYS get the manager, chef, or designated "food allergy expert", to handle the situation.
  - An incorrect or incomplete answer can put your customer at serious risk.
- **Do not alter of change recipes**
- Immediately notify management if a food allergic customer experiences an allergic reaction symptom

**PREVENTING CONTAMINATION**

- Keep raw animal species, including raw shell eggs, separated from ready-to-eat foods at all times.
- Keep all cleaning chemicals and supplies away from areas where food is being produced.
- Use cutting boards properly: red boards for raw animal species; white boards for ready-to-eat foods only; green boards for washed raw fruits, vegetables, and herbs
- Pay close attention to ensure no foreign objects fall into foods during production

**FOOD DATING**

- NEVER use a food that has an expired date mark or manufacturer's date
- All foods must be wrapped and labeled with product name and date when placed in coolers. Ask your manager about the proper labeling methods for your facility.

**FOOD TEMPERATURES**

- Cooking temperatures- the below represents the minimum internal temperature required to render the food safe to eat:
  - 145°F for whole muscle beef, pork, fish, and raw shell eggs for immediate service
  - 155°F for ground, injected, or cubed meat and fish
  - 165°F for all poultry, stuffed meat and fish and stuffed pastas
  - 165°F for foods cooked in microwave
- Keep cold foods cold and hot foods hot. Never leave temperature-controlled foods out at room temperature.
  - Cold foods must be kept with internal temperatures of 40°F and below and frozen foods frozen solid
  - Hot foods must be kept with internal temperatures of 140°F and above
- The only time foods may be held out of temperature is when a facility uses time as a control. When using time as a control:
  - Foods may be held out of temperature control for up to 4 hours. At the 4-hour mark, remaining foods must be discarded.
  - A time label on each food is required, listing both the start and end (discard) times.
- When preparing temperature-controlled foods, only work on as much food as you can handle in 30-minute blocks of time. After 30 minutes, food should be returned to the temperature-controlled unit before proceeding.

**CLEANING AND SANITIZING**

- All food contact surfaces must be cleaned using the pre-scrape, wash, rinse, sanitize, and air-dry process. This process can be accomplished manually using a 3-compartment sink, or via use of a dish machine. If you are not sure of the proper process, ask your manager to demonstrate proper methods.
- Sanitizer in wiping buckets and in the 3-compartment sink must be maintained at 200-400 ppm. If you are unsure of how to test, ask your manager to demonstrate proper testing.
- 

**ACKNOWLEDGEMENT OF COMPASS FOOD SAFETY BASICS AND POLICIES**

By signing this form, I acknowledge that I have been informed of my health and hygiene responsibilities and Compass food safety basics and policies. I agree to follow these rules while working for Compass Group and if I have questions at any time, they will be immediately directed to the manager or person in charge.

Signature: \_\_\_\_\_



## Non- Levy Team Member

### HEALTH REPORTING AGREEMENT\*

\* Applies to Non-Profit Group, Volunteers, Subcontractor or Temporary Employee

**This form must be completed at least once every 12 months.**

*The purpose of this agreement is to ensure that you notify the Levy manager or other person in charge when you experience any of the conditions listed so that management can take appropriate steps to prevent the transmission of foodborne illness.*

#### I AGREE TO REPORT TO THE MANAGER OR OTHER PERSON IN CHARGE:

##### FUTURE SYMPTOMS AND CONDITIONS:

*IMPORTANT: It is not necessary to report symptoms, such as diarrhea, associated with chronic medical conditions or illnesses.*

1. Diarrhea
2. Vomiting
3. Jaundice (yellowing of the skin and/or eyes)
4. Sore throat with fever
5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part, or other body part and the cuts, wounds, or lesions are not properly covered (*such as boils and infected wounds, how ever small*)

##### FUTURE MEDICAL DIAGNOSIS:

1. Any diagnosis of foodborne illness
2. Diagnosis of being ill with **Norovirus, Typhoid Fever (Salmonella Typhi), Shigellosis, Salmonellosis, E. coli O157:H7 or other EHEC/STEC infection, Hepatitis A infection or (California only) Amebiasis.**

##### FUTURE HIGH-RISK EXPOSURES:

1. Exposure to or suspicion of causing any confirmed outbreak of foodborne illness
2. A household member diagnosed with a foodborne illness
3. A household member attending or working in a setting experiencing a confirmed outbreak of food borne illness

#### I HAVE READ (OR HAD EXPLAINED TO ME) AND UNDERSTAND MY RESPONSIBILITIES UNDER THIS AGREEMENT TO COMPLY WITH:

1. Reporting requirements specified above involving symptoms, conditions, diagnoses, and high-risk exposures
2. Work restrictions or exclusions that are imposed upon me
3. Good hygienic practices

I UNDERSTAND THAT FAILURE TO COMPLY WITH THE TERMS OF THIS AGREEMENT MAY LEAD TO CORRECTIVE ACTION UP TO ANY INCLUDING MY REMOVAL FROM ANY LEVY FACILITY.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## NON-LEVY TEAM MEMBER SAFETY PLEDGE

**NOTE TO MANAGERS:** This version of the Associate Safety Pledge is to be used for NON-LEVY TEAM MEMBERS ONLY. It must be completed the first day of a temporary/contract associate's job assignments and will remain valid for the duration thereof. This document must be kept on file for a minimum of one year.

**NOTE TO NON-LEVY TEAM MEMBERS:** Refusal to sign this document, or failure to comply with the requirements below, will result in automatic termination of your job assignment.

I affirm that I understand the following safety policies and expectations and will take an active role in contributing to the safety of my workplace and preventing workplace injuries. I understand that failure to abide by the Company's safety policies and expectations listed below can result in progressive discipline, up to and including termination of my current, and future, temporary or contract job assignments with any Compass Group USA, Inc subsidiary.

- I will pay attention to any and all safety training I receive.
- If required by the position or workplace I will wear approved clearly marked, slip-resistant shoes, or approved overshoes, at all times (unless otherwise instructed by my on-site supervisor).
- I will wear all required personal protective equipment (PPE) such as, but not limited to, rubber/vinyl aprons, rubber gloves, safety goggles, face-shield or other approved eye protection when performing any task that requires it including the mixing or handling of cleaning chemicals.
- I will follow proper lifting techniques and will ask a co-worker for assistance if an item is too heavy or large for me to lift by myself.
- I will follow the "clean as you go policy" to ensure that any spilled/dropped items do not become hazards to myself or my co-workers.
- If I know of (or am made aware of) a safety and/or health hazard or unsafe work practice, I will immediately report it to my on-site supervisor.
- I will not engage in any work practice that puts my co-workers, my customers or myself at risk of injury.
- I will inform my on-site supervisor if I am unable to perform any assigned tasks due to lack of training, experience or available safety equipment.
- Regardless of how minor it may seem I will report all accidents or injuries to my on-site supervisor and the referring agency immediately.
- In the event I am injured as the result of a work-related accident I will cooperate with any necessary investigation.

Items below this line are for Dining operations only (all sectors)

- I will wear medium-duty cut-resistant glove(s) when handling, using or cleaning knives or any other sharp item
- I will wear two heavy-duty cut-resistant gloves only while cleaning the slicer, not while using it.
- I will wear oven mitts when handling hot items.

I have read and understand the statements contained within this policy

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Policy & Training Acknowledgment

I acknowledge that I have received a copy of each of the following policies/ information and understand that by signing below, I agree to adhere to these policies. If I do not adhere to the policies provided to me, I understand that I am in violation of Company standards and violation of these policies could lead to disqualification for future Levy events. Should I have any questions or concerns, I understand I can contact my supervisor, sand lead, or HR.

- Payment and Cash Handling Policy
- Heat Illness Prevention
- Golden Rules of Safety & Sanitation
- Fair Treatment Policy and Sexual Harassment Policy
- Volunteer Health Reporting Agreement.
- Liquor Liability, Non-Slip Shoes, Cut Resistant Gloves Policy
- OSHA Training Acknowledgment & Food Safety Training
- Levy responsible alcohol training (RAS) and any local or state mandated alcohol/food safety training prior to my first event. I agree, as a condition of my continued employment to be familiar with and abide by all liquor laws.

---

Printed Name:

---

Signature

Date

**MANAGER:** By signing this form, I acknowledge that I have provided and reviewed this document with the temporary associate, non-profit or subcontractor named above.

Location or event: \_\_\_\_\_

Printed manager/stand lead name: \_\_\_\_\_

Signature of manager/stand lead: \_\_\_\_\_

Date: \_\_\_\_\_

NAME: \_\_\_\_\_

## Allergy, Sanitation & OSHA Training

### PREVENTING FOOD ALLERGY REACTIONS

- One of the 8 foods responsible for 90% of food-allergy reactions:
  - Chocolate
  - Peanuts
  - Strawberries
  - Chicken
- The Host/Hostess must immediately inform the following team member before seating a food-allergic guest:
  - Server
  - Chef
  - Manager
  - Food Runner
- Which of the following foods is high-risk menu choice for the guest with a food allergy?
  - Chicken with Wine Sauce
  - Cream Pie
  - Fried Onion Rings
  - All of the Above
- Which of the following foods are the safest choices for the guest with a food allergy?
  - Any item on the menu that do not include the allergen in the menu descriptions.
  - Anything on the menu as long as you remove the allergen.
  - All items you feel pretty sure are safe.
  - The most simply prepared foods with the fewest ingredients.
- Food allergies can be distinguished from other types of food intolerances in that the offending food causes:
  - Abdominal Cramps
  - Nausea and vomiting
  - An immunological response
  - Hives
- Which of the following could cause cross-contamination?
  - Using one pair of tongs to serve a number of different garnishes.
  - Not washing your hands or using a fresh pair of gloves before preparing the special order.

- Using the same towel or hot pad with other plates prior to using it to serve a special allergen-free meal.
  - All of the above.
- Before preparing a special order for a guest with a food allergy, what cleaning method should be used on all equipment and utensils?
    - Wipe surfaces of the equipment and utensils with damp cloth.
    - Thoroughly clean equipment and utensils with hot, soapy water.
    - Mist water on to equipment and utensils and rub vigorously with a clean, dry towel.
    - Wash equipment in hot soapy water, rinse in hot clear water and sanitize in chemical sanitizer

- If a mistake is made and the food allergen is placed on the special-order plate, to correct the situation the team member must remove the allergen and thoroughly wipe off all traces from the plate.  
True / False

- As is true in the case of foodborne illness outbreaks, food-allergic reactions can occur within 1 hour up to 24 hours after eating the offending food.  
True / False

- Anaphylactic Shock accounts for an estimated 30,000 ER visits and 150-200 deaths/year.  
True / False

- Once a special order is made, it should be clearly identified in order to prevent the wrong plate from being served.  
True / False

- If a guest tells you that he or she is experiencing an allergic reaction, the first thing team members must do is find out what mistake was made in the preparation or service of the meal.  
True / False

### SANITATION BASICS

- Which of the following steps is NOT part of the proper procedure for

washing hands?

- Rinse hands with warm water for 5 seconds
  - Apply bleach and rub hands together for 20 seconds
  - Apply hand soap and scrub hands, wrists and forearms for 20 seconds
  - Use a single-use towel to dry hands
- Which of the following is an example of proper grooming?
    - Keep fingernails short and clean.
    - Wear a clean uniform.
    - Bathe daily and wash your hair.
    - All of the above.
  - If you are preparing lemons for guests' drinks or garnish, you must:
    - Wear a cut resistant glove under a sanitation glove when cutting the lemon.
    - Thoroughly wash the lemon.
    - Place lemons in a clean, sanitized container to carry to work area.
    - All of the above.
  - Store sanitizing cloths:
    - In sanitizing solution
    - On your apron strings.
    - Hanging in the kitchen.
    - On the counter near work area.
  - When eating at your work station you should:
    - Wash your hands first.
    - Keep food and drink covered at all times.
    - Use disposable utensils.
    - I am not allowed to eat at my workstation.
  - To help prevent cross-contamination, you should:
    - Cover all food items in the refrigerator, freezer, and storage
    - Wash your hands and put on a fresh pair of sanitation gloves before beginning a new task.
    - Use a clean, sanitized cloth to clean the work area throughout your work shift.
    - All of the above.
  - Containers, boxes, crates, etc. should be placed on work surfaces for easy accessibility.

True / False

8. The temperature Danger Zones
  - a. 70°F-75°F
  - b. 50°F – 500°F
  - c. 41°F–140°F (Florida ONLY 135°F)
  - d. 41°F– 70°F
9. If you have concerns about the temperature of the food you are about to serve the guest, you should:
  - a. Toss it in the trash and ask the guest to order something else.
  - b. Serve the food to the guest and hope they do not complain.
  - c. Contact your manager/supervisor to report your concerns.
  - d. All of the above.
10. What type of symptoms or conditions should you report to your manager or chef immediately?
  - a. Diarrhea
  - b. Fever
  - c. Vomiting
  - d. Jaundice
  - e. Sore throat with fever
  - f. Boils and infected wounds of any size containing us on the hand, wrist, or other exposed body part
  - g. All the above
4. The blood borne pathogens rule defines fluids as:
  - a. Blood and blood products.
  - b. Blood, vomit and clear mucus.
  - c. Blood and saliva.
  - d. All body fluids except urine, saliva and mucus not mixed with another infection's fluid.
5. When cleaning up a broken jar of pickles from the floor, the first action is to:
  - a. Use a sponge to clean up the liquid.
  - b. Pick up the pieces of glass with your hands.
  - c. Use a broom and clean up the glass.
  - d. Pick up the pickles first with your bare hands.
6. When cleaning a machine with blades and moving parts, the first step is to:
  - a. Remove all blade guards.
  - b. Unplug or completely cut off power to the machine from the power source.
  - c. Clean with 25 PPM bleach
  - d. Scratch any dry food off with your fingernails
7. If blood comes into contact with hands, you should:
  - a. Wash your hands.
  - b. Wipe them on your apron.
  - c. Wash your hands, then sanitize the hand-washing sink with bleach.
  - d. Wipe your hands on a pre-packed bleach towel.
8. If blood comes into contact with clothes, you should:
  - a. Change them immediately and send the clothes to a professional laundry.
  - b. Change them immediately and wash the clothes yourself with lots of bleach.
  - c. Change them when you get home but wash them immediately.
  - d. Change them when you get home but wash them through a professional laundry.
9. If blood comes into contact with food:
  - a. Discard the food in the trash.
  - b. Cook the food to an internal temp of 165°F.
  - c. Cut off parts where blood contacted and dispose as medical waste.
  - d. Dispose of the entire food item as medical waste.
10. Once you finish cleaning a spill, what should you do with the protective equipment and cleaning supplies?
  - a. Put them back in their convenient holder.
  - b. Send them to a laundry to be cleaned.
  - c. Throw them out in the trash.
  - d. Dispose of them as medical waste.
11. When bandaging a small cut on another person, the minimal protective equipment is:
  - a. Finger Cots
  - b. Face Mask
  - c. Eye Shield
  - d. Disposable Gloves
12. When cleaning up a blood spill, what protective equipment should you use?
  - a. Eye shield, facemask, apron, and plastic gloves.
  - b. Respirator, apron, and plastic gloves.
  - c. Eye shield, plastic gloves, and apron.
  - d. Plastic gloves.
13. What sanitizer should be used to decontaminate blood spills?
  - a. 50 PPM Quaternary Ammonia
  - b. 5 PPM Iodine
  - c. 400 PPM Chlorine Bleach
  - d. 1% Isopropyl Alcohol
14. After cleaning the spill and disposing of the waste what is the next action?
  - a. Investigate the safety violations which led to the incident.
  - b. Document by filling out an incident report.
  - c. Get all employees immunized for Hepatitis A.
  - d. Test all employees for HIV.

### **OSHA'S BLOOD BORNE PATHOGENS STANDARD**

1. Which of the following are transmitted through a blood spill?
  - a. Hepatitis B and HIV
  - b. Salmonellosis. And Shigellosis.
  - c. Tendonitis and carpal tunnel syndrome
  - d. E. coli and Staphylococcus aureus
2. What government agency enforces the blood borne pathogens rule?
  - a. Local Health Department
  - b. OSHA
  - c. CDC
  - d. FDA
3. What are the universal precautions?
  - a. Assuming all body fluids have blood borne pathogens and treating each spill accordingly.
  - b. Always wear gloves at work.
  - c. Assuming individuals at high risk for HIV have HIV
  - d. The creation of an environment where body fluids are unlikely to spill.

### **e. OSHA HAZARD COMMUNICATION STANDARDS**

1. SDS stands for Safety Data Sheets and MSDS stands for Material Safety Data Sheet.  
True / False
2. The Hazard Communication Standard is designed to protect team members.  
True/False
3. Under the SDS labeling system, the required personal protective equipment is listed on the chemical label.  
True / False

4. The basic purpose of the Hazard Communication Program is to establish uniform requirements for evaluation of chemical hazards and communication of these hazards to team members.

True / False

5. The written Hazard Communication Standard Program can be reviewed by any team member at any time.

True / False

6. It is acceptable to mix chemicals together.

True / False

7. You can safely mix bleach with any other chemical.

True / False

8. An unmarked chemical container should be brought to the attention of your supervisor.

True/False

9. It is acceptable to store chemical products alongside or above food.

True/False

10. Safety information on chemical containers does not need to be read and understood.

True/False

11. If any chemical is spilled on you or if you experience an allergic reaction, flush the affected area immediately with large amounts of cool water.

True / False

12. The Material Safety Data Sheet (MSDS) and Safety Data Sheet (SDS) contain very detailed information on the chemical.

True/False

13. Chemical products and spray bottles do not need safety information labels.

True/False

- b. Dropping flatware on table
- c. Dropping a box on your foot
- d. Running into a wall

2. Which of the following is not an example of a penetrating hazard?

- a. Opening a zip-lock bag
- b. Using knife to cut vegetables
- c. Using mandolin to slice tomatoes
- d. Cleaning a slicer

3. Which of the following is not an example of a compression hazard?

- a. Hand caught between wall and cart
- b. Running over foot with cart
- c. Tripping over a pallet
- d. Catching your hand in a piece of equipment

4. Which of the following is not an example of a chemical hazard?

- a. Dispensing chemicals into spray bottles
- b. Mixing Quat sanitizer with water
- c. Cleaning with water
- d. Replacing dish washer detergent

5. Which of the following is not an example of a heat hazard?

- a. Handle of pan on stove is placed over flame
- b. Removing a lid from a pot on the stove and steam comes out
- c. Removing pan from oven and juices spill on to your arm
- d. Washing your hands in lukewarm water

6. Which of the following should you use to avoid injury from an impact hazard?

- a. Your hand
- b. Oven mitt
- c. Slip-resistant shoes

7. Which of the following should you use to avoid injury from a compression hazard?

- a. Steel-toed shoes
- a. Hard hat
- b. Cut-resistant glove

8. Which of the following should you use to avoid injury from a chemical hazard?

- a. Goggles/Gloves
- b. Helmet/Hard hat
- c. Gloves/Hard hat

9. Which of the following should you use to avoid injury from a penetration hazard?

- a. Slip-resistant shoes
- b. Cut-resistant gloves
- c. Oven mitt

10. Which of the following should you use to avoid injury from a heat hazard?

- a. Wet towel
- b. Oven mitts
- c. Bare hand

## **PERSONAL PROTECTIVE EQUIPMENT**

1. Which of the following is not an example of an impact hazard?

- a. Falling can hit your head