NORTH CAROLINA DEPARTMENT OF AGRICULTURE
AND CONSUMER SERVICES
MEAT AND POULTRY INSPECTION DIVISION
Raleigh, North Carolina

Steve Troxler, Commissioner

MPID NOTICE	**17-25**	**10-13-2025**

READY-TO-EAT QUESTIONNAIRES

I. PURPOSE

This notice provides instructions for inspection program personnel (IPP) to continue completing the Ready-to-Eat Questionnaire once per month in all State establishments with active RTE product groups. IPP will begin using the Ready-to-Eat Questionnaire Task in PHIS. This notice instructs Area Supervisors (AS) and Raleigh Office (RO) personnel of responsibilities and actions to take in response to questionnaire findings.

II. CANCELLATION

MPID Notice 03-25 dated 1/28/2025

III. REFERENCE

FSIS Notice 48-24 dated 12/17/2024

IV. BACKGROUND

A. MPID personnel perform routine inspection duties related to establishment facilities and operations as instructed in FSIS Directive 5000.1, *Verifying an Establishment's Food Safety System*, FSIS Directive 5000.4, *Performing The Pre-Operational Sanitation Standard Operating Procedures Verification Task*, FSIS Directive 5000.5, *Verification of Less Than Daily Sanitation Procedures in Meat and Poultry Processing Operations and Egg Products Establishments*, FSIS Directive 7111.1, *Verification Procedures for Lethality and Stabilization*, FSIS Directive 10240.3, *FSIS Ready-To-Eat Sampling Programs*, FSIS Directive 10240.4, *Listeria Rule Verification Activities*, and other applicable policy issuances in addition to instructions from the Raleigh Office (RO) supervisory chain.

B. The Ready-to-Eat (RTE) Questionnaire does not replace the instructions in FSIS Directive 5000.1, or instructions in any other policy issuances related to documentation of noncompliances, noncompliance record (NR) trend analyses, existing reports, NCDA&CS lab sample results, or instructions from the RO supervisory chain. Rather, the questionnaire answers will be supplemental information to be used in conjunction with those items for data analysis and decision-making.

C. For the purposes of this notice and the RTE questionnaire, physical plant modification includes any modification to the physical establishment that temporarily affects the production environment such as new equipment (removed or installed), air circulation modifiers, new construction, drilling, removal or repair of drains, removal or repair of floor coatings, removal or repair of a wall or ceiling, or exposure of areas not typically accessible for cleaning.

V. AWARENESS MEETING

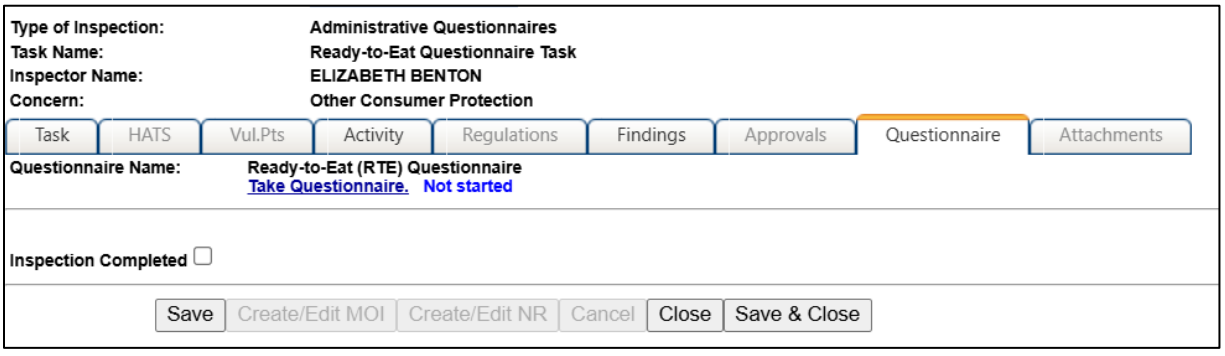
A. IPP are to make establishment management aware of this notice at the next weekly meeting. IPP are to document the discussion about this notice in a Memorandum of Interview (MOI) as instructed in FSIS Directive 5010.1, Food Safety Related Topics for Discussion During Weekly Meetings with Establishment Management.

B. In official establishments with Active RTE Product Groups, IPP are to notify the establishment of the RTE Questionnaire information contained in this notice.

VI. IPP RESPONSIBILITIES FOR COMPLETING QUESTIONNAIRES

A. IPP are to complete the RTE Questionnaire once a month for each State establishment producing ready-to-eat products under inspection using the Ready-to-Eat Questionnaire task in PHIS.

Task Name	Priority	Start Date	End Date	# Plan
Raw Non-Intact HACCP	4	09/01/2025	09/30/2025	1
Raw Non-Intact HACCP	4	10/01/2025	10/31/2025	2
Ready-to-Eat Questionnaire Task	3	09/01/2025	09/30/2025	5
Ready-to-Eat Questionnaire Task	3	10/01/2025	10/31/2025	5
Review of Establishment Data	3	09/01/2025	09/30/2025	3
Review of Establishment Data	3	10/01/2025	10/31/2025	5
SPS Verification	3	09/01/2025	09/30/2025	4



Ideally the questionnaire would be completed a few days after an establishment has collected food contact surface samples for *Listeria spp*. or for *Listeria monocytogenes* (*Lm*) or both in RTE Post Lethality Exposed (PLE) areas. This would allow for the establishments test results and information regarding the samples to be properly entered.

B. The RTE Questionnaire task questions are risk based, and IICs are to notify their supervisor immediately if concerns arise, including but not limited to when the answer to any of the questions suggest vulnerabilities in the food safety system that may result in increased food safety risks, as instructed in FSIS Directive 5000.1. IICs are to continue to follow the instructions related to RTE products in FSIS Directive 5000.1, FSIS Directive 5000.4, FSIS Directive 5000.5, FSIS Directive 7111.1, FSIS Directive 10240.3, FSIS Directive 10240.4, any other applicable policy issuances, along with those from their immediate supervisor.

VII. ADDITIONAL IPP RESPONSIBLITIES

A. IPP are to use the PHIS tutorials and user guides that are maintained in PHIS Help or provided through supervisory instruction as well as the instructions in FSIS Directive 5300.1, *Managing the Establishment Profile in the Public Health Information System*, for additional information on maintaining the Establishment Profile. IPP are to refer to FSIS Directive 13,000.1, *Scheduling In-Plant Inspection Tasks in PHIS*, for additional information about managing inspection tasks in PHIS.

B. IPP are to notify their supervisor when the questionnaire has already been completed for the assigned period but IPP subsequently observe vulnerabilities in the food safety system that may result in increased food safety risks and these observations change the information in the most recently completed questionnaire.

C. IPP are to review the Products page of the Establishment Profile by scheduling the next routine Update Establishment Profile task or by scheduling a directed Update Establishment Profile task if the monthly routine task has already been completed in the month when this notice was published:

1. In the Product Groups tab on the Products page, IPP are to verify that the Finished Product Category, Average Daily Volume (LB), and Days of Production/Month data fields are entered accurately and that the Active box is selected for any RTE products currently produced by the establishment; and

2. When there is a change in Product Groups, or other parameters as identified in FSIS Directive 5300.1, IPP are to make that update in the establishment profile as soon the change occurs. For example, if the establishment is not currently producing a specific RTE Product Group, IPP are to uncheck the Active box. Conversely, if the establishment resumes production of a specific RTE Product Group, IPP are to check the Active box. IPP can access a PHIS Help tutorial here: Mark a Product Group Active or Inactive; and

3. IPP are only to delete products if the establishment notifies IPP that the products will no longer be produced in the establishment on any shift.

D. IPP are to observe the conditions in the establishment during routine Sanitation Performance Standards (SPS) tasks and use these observations, and any documented noncompliance, to inform the questionnaire responses. Specifically, IPP are to observe routine traffic flow of products, equipment, machinery, and personnel to verify if the establishment always maintains separation between RTE and Raw areas. This separation can be achieved by time or space, but IPP are to carefully evaluate if the separation is effective and consult their supervisor if there is a concern. IPP are to observe overhead structures, walkways, automated/robotic machinery, conveyors, chains, sanitation crews, trash disposal, and maintenance to consider if these areas are the source of insanitary conditions or cross contamination.

E. IPP are to observe RTE operations and compare their observations to establishment programs to inform questionnaire responses and verify that the establishment has identified all possible post-lethality Food Contact Surfaces (FCSs) for sampling as required in 9 CFR 430.4(b)(2)(iii)(D) and 9 CFR 430.4(b)(3)(i)(D) and using the instructions in FSIS Directive 10240.4. A list of common FCSs is included in Attachment 2. As indicated in FSIS Directive 10240.4:

    1. IPP are to be aware that an establishment using Alternative 2b or 3 is required to identify and sample all possible post-lethality FCSs; however, the establishment is not required to sample them at the same frequency. The establishment may sample the sites based on risk, although all sites should be sampled over time; and

    2. If the establishment has not identified all possible FCSs for sampling, IPP are to evaluate whether the establishment can provide supporting documentation to show why the product or FCS would not be contaminated. If the establishment has not identified all possible FCSs and can't support that the other sites would not be contaminated, then the establishment would not be in compliance with 9 CFR 430.4(b)(2)(iii)(A) or 9 CFR 430.4(b)(3)(i)(A), and IPP are to issue an NR.

F. If physical plant modification has occurred in the last month in the interior production and packaging areas, as indicated in FSIS Directive 10240.4, IPP are to verify:

    1. That the establishment controls sanitation during physical plant modifications so that product does not become contaminated; and

    2. That the establishment increases verification sampling in response to physical plant modifications or other conditions that could increase risk in the establishment.

G. If the establishment does not control *Lm* during physical plant modifications or does not increase its verification sampling in response to the modifications, IPP are to issue an NR (cite only pertinent regulations, which may include 9 CFR 416.12(a), 9 CFR 416.13, 9 CFR 416.14, 9 CFR 430.4(b), and 9 CFR 430.4(c)(3)).

H. When answering the RTE Questionnaire questions regarding establishment testing, IPP are to be aware that FSIS considers presumptive positive results for *Listeria spp*. to be positive. For ANY samples the establishment collects and analyzes, IPP are to enter the total number of sample results received in the questionnaire box. These results may originate from single samples, aggregate samples, or pooled samples, as possible examples, but the focus is on the results reported by the establishment testing. The results may be for *Listeria spp*., *Lm,* or a combination of both *Listeria spp*. and *Lm*. IPP

are to report the total number and results for whatever organism is reported in the establishment sample results for their *Listeria* sampling program.

I. If the establishment has *Listeria spp*. positive test results on a FCS, as indicated in FSIS Directive 10240.4, IPP are to verify the establishment takes corrective actions using a scheduled Hazard Analysis and Critical Control Point (HACCP) Verification task or Sanitation Standard Operating Procedure (Sanitation SOP) task if they have one scheduled for that day. Alternatively, if no HACCP Verification task or Sanitation SOP task is scheduled for that day, IPP are to schedule a directed HACCP Verification task or Sanitation SOP task to verify the establishment takes corrective actions.

NOTE: Establishments that use a screening test for *Listeria spp*. for FCSs or product are not required to confirm the presence of *Lm* by microbial culture. A finding of *Listeria spp*. by an establishment on a FCS indicates conditions where *Lm* may be present, but the product is not considered adulterated. However, establishments are required to take corrective action, according to their *Listeria* control alternative (defined in FSIS Directive 10240.4), to address *Listeria spp*. positives so that product does not become adulterated.

J. If the establishment has *Listeria spp*. positive test results in a product, as indicated in FSIS Directive 10240.4, FSIS may determine that the product is adulterated because the product was produced under insanitary conditions or the establishment cannot demonstrate the product is not positive for *Lm*. A finding of *Listeria spp*. in the product can indicate that the Sanitation SOP is inadequate or that corrective actions taken in response to a previous sanitation failure may not be effective to prevent product contamination. IPP are to review the establishment's documentation in response to the positive *Listeria spp*. result to determine whether it can support that the product is not adulterated. This documentation may include testing data demonstrating that the original isolate is not positive for *Lm*, or documentation showing that the product has been reprocessed using a process validated to achieve at least a 5-log reduction in *Lm*.

K. If the establishment tests for *Lm* and receives positive *Lm* FCS or product results, IPP are to verify the establishment takes corrective actions under 9 CFR 417.3(a) or 9 CFR 417.3(b).

L. When IPP document SPS NRs, including but not limited to any of the examples from the questionnaire (e.g, roof leak, condensation, rust/peeling paint, standing water/puddling/pooling/backed up drains, cracked floors, cracked walls, damaged equipment, footbaths/foamers, pre-operational, operational, or other sanitation issues), they are to follow the instructions in FSIS Directive 5000.1 Chapter V, Section III. Documentation of SPS Verification Results including:

1. If an establishment has not complied with an SPS regulation but product is not directly contaminated, IPP need to determine whether the noncompliance requires a regulatory control action to prevent contamination or adulteration of product; and
2. If there is an imminent probability that the noncompliance will result in product adulteration if not addressed immediately, IPP are to take a regulatory control action such as retaining product or rejecting equipment and complete an NR.

M. After documenting noncompliance with SPS or Sanitation SOP regulations, IPP are to follow the instructions in FSIS Directive 5000.1, Chapter V, Section VII. Trends of Noncompliance including:

1. Consider whether the noncompliance is associated with previous noncompliances at that establishment; and
2. Associate two or more NRs when they indicate an ongoing trend of related noncompliances or systemic problems with the establishment's food safety system.

EXAMPLE: IPP documented noncompliance with 9 CFR 416.13(b) this week at Establishment A when they observed condensation dripping from the ceiling onto product in the processing room. Upon reviewing the NR history prior to the weekly meeting, IPP noted another noncompliance with 9 CFR 416.13(b) last week that also documented condensation dripping onto product in the same area. After reviewing the establishment's proposed preventive measures from the previous noncompliance, IPP find that the establishment did not implement their proposal to add another ventilation fan in the area. IPP concluded that the establishment failed to implement the preventive measures resulting in the recurrence, so they associate the two NRs.

N. IPP are to notify their supervisor immediately if concerns arise including, but not limited to, when the answer to any of the questions indicates vulnerabilities in the food safety system that may result in increased food safety risks as instructed in FSIS Directive 5000.1. IPP are to continue to follow the instructions for RTE product in FSIS Directive 5000.1, FSIS Directive 5000.4, FSIS Directive 5000.5, FSIS Directive 7111.1, FSIS Directive 10240.3, FSIS Directive 10240.4, and any other applicable policy issuances along with those from their immediate supervisor.

VIII. SUPERVISORY PERSONNEL RESPONSIBILITIES

A. Supervisors are to inform IPP of their availability to assist if IPP have questions or concerns while completing the RTE Questionnaire. The supervisor is to play a key role in ensuring that accurate decisions are made by IPP completing the questionnaires and tasks.

B. Supervisors are to routinely review task completion reports to monitor RTE Questionnaire task completion for each establishment to ensure that these tasks are performed in a timely and complete manner and as instructed in this notice.

C. Supervisors are to verify that IPP are following the instructions in Section VI. IPP Responsibilities of this notice.

D. The Area Supervisor (AS) is to follow the instructions in FSIS Directive 5000.1, including Chapter V, Section VII. Trends of Noncompliance to determine whether IPP are correctly identifying and documenting any trends of noncompliance and whether a Food Safety Assessment (FSA) should be recommended.

IX. RALEIGH OFFICE RESPONSIBILITIES

A. Each month the RO is to run and evaluate the data generated from IPP completion of the RTE questionnaire.

B. The RO is to consider whether the establishment has had an increased frequency of *Listeria spp*. or *Lm* positives through its own testing.

C. In addition to Sanitation SOP and SPS noncompliances in RTE Post-Lethality Exposed (PLE) areas, the following responses would indicate an increased risk for *Lm* contamination:

1. Use of high pressure hoses;

2. No positive air pressure movement or air flow out of the RTE room into the Raw or other processing areas then to outside;

3. No separation between Raw and RTE products;

4. No separation between equipment, personnel, and tools for Raw and RTE PLE processing areas;

5. No color coding for equipment in production areas; or

6. No identification to maintain separation between equipment, personnel, and tools for Raw and RTE PLE production areas.

D. When the RO becomes aware that an establishment may be associated with an increased risk of producing product of public health concern, either through discussions with the Area Supervisors or through reviewing PHIS reports related to the results of this questionnaire, including findings related to B. and C. above, they are to consider options for taking immediate action. Next steps could include conducting a Public Health Risk Evaluation (PHRE) as described in FSIS Directive 5100.4, *Public Health Risk Evaluation Methodology*, conducting an FSA as described in FSIS Directive 5100.1, *Food Safety Assessment Methodology*, or taking other actions as appropriate for the situation as described in FSIS Directive 5100.3, *Administrative Enforcement Action Decision-Making and Methodology*.

X. ADDITIONAL INFORMATION

If you have any questions or need additional information, contact your supervisor.

Dr. Karen Beck
State Director

DISTRIBUTION:	**SUBJECT CATEGORY:**
MPID In-Plant and Supervisory Personnel	Processing