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**Gulf**of**Mexico**



## **Operations: Health**

### **Food Safety Management Program**



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## 1 Introduction

The purpose of the Food Safety Management Program is to ensure the highest standards of food safety and hygiene are achieved. This management program applies to BP GoM Region operations and associated project catering operations (e.g. where BP is the lead partner in a project).

This Program also recognizes that 'No Harm to People' can be achieved through 'Zero Defect Food' and recognizes the principles of HACCP (Hazard Analysis Critical Control Points) as a primary method of controlling food safety and is aligned with "OMS Group Element 3.4 - Health and Industrial Hygiene."

Failure to meet the two 'minimum' standards below would be deemed a **non-conformance**:

- Key Performance Indicators (KPI's)
- BP GoM Region Food Establishment Inspections

## 2 Scope

### 2.1 BP Manned and Managed Facilities

This Food Safety Management Program is intended to be applied to BP-manned and managed facilities:

- Off-site catering facilities providing food to sites where BP is the client (HOLC is exempt from bi-weekly and annual food establishment inspections since Louisiana Health Department conducts formal inspections but performance will be reviewed during quarterly QPR),
- Remote service canteens (where food is not prepared but is stored, displayed & served) where BP is the client,
- Camps where BP is the client (supply base is exempt from program requirements since base is operated by contractors), or
- Drilling and production platforms operated by BP.

### 2.2 Contracted Offshore Facilities

This Food Safety Management Program shall be used in the assessment/bridging of the following facilities when BP is not the operator to ensure the contractor is providing safe food to the workforce:

- Drilling platforms not operated by BP,
- Service vessels (e.g. crane barge, specialist function vessels), or
- Floatels where BP is the client (e.g. a vessel being used as a temporary source of accommodation).

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## 2.3 Applicability of 2013 FDA Food Code

This Program does not address the specific Food Safety parameters the caterer shall follow but requires the Caterer to develop their HACCP and ensure it meets or exceeds the 2013 FDA Food Code.

## 3 Key Responsibilities

### 3.1 Offshore Installation Manager (OIM) and Onshore Facility Manager

- Address food safety recommendations indicated in Food Establishment Inspections.
- Communicate facility food safety concerns to the Health & Industrial Hygiene Team.
- Inform the Health and Industrial Hygiene Team of changes to existing processes, controls, or procedures that have the potential to impact food safety.

### 3.2 Health & Safety Site Lead (HS SL)

- Document non-conformance foodborne illness risk factors in Tr@ction.

### 3.3 Medic

- Certified Food Protection Manager (ServSafe Manager) within three months of starting job on BP facility and refreshed every five years.
- Conduct a bi-weekly galley inspection using the Food Establishment Inspection (Appendix A) and maintain on the Health and Industrial Hygiene Collaboration Site.
- Notify the Camp Manager/Boss on identified deficiencies from the Food Establishment Inspection once completed.
- Notify Health and Industrial Hygiene Team of foodborne illness risk factors not corrected on site and if outbreak of 2 or more people showing foodborne illness symptoms.
- Inform the Health & Safety Site Lead of food non-conformance foodborne illness risk factors (RF) and ensure RF that are not corrected during inspection are documented in Tr@ction.

### 3.4 Camp Boss

- Certified Food Protection Manager (ServSafe Manager) within three months of starting job on BP facility and refreshed every five years.
- Implement food safety requirements per this program.
- Understand catering company food safety procedures.
- Complete corrective actions for deficiencies identified from the Food Establishment Inspection (Appendix A).
- Ensure KPI's are not compromised by ensuring foodborne illness risk factors identified during self-verification inspections are closed in an appropriate timeline.

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### 3.5 Catering Staff

- Certified Food Handler (ServSafe Food Handler) within three months of starting job on BP facility and refreshed every five years.
- Understand catering company food safety procedures.

### 3.6 Health and Industrial Hygiene Team

- Certified Food Protection Manager (ServSafe Manager) within three months of starting job on BP facility and refreshed every five years.
- Provide technical support on food safety related questions and review/update this SWP every five years or sooner if there are regulatory or guideline changes.
- Review completed Food Establishment Inspection (Appendix A) on a monthly basis, trend deficiencies, and communicate to contracted catering company.
- Participate in quarterly catering contractor performance reviews.
- Conduct a facility food safety inspection annually using Annual Food Establishment Inspection (Appendix B).
- Responsible to inform Health Manager of escalated non-conformance foodborne illness risk factors.

## 4 General Requirements

GoM Region Food Safety Management Program is in conformance with the United States Health Service 2013 Food Code.

### 4.1 Catering Staff Fitness for Duty

Catering staff shall be free of medical conditions that may cause foodborne disease transmission. The following symptoms are reportable: vomiting, jaundice, diarrhea, sore throat with a fever, draining open wounds, etc. The following illnesses diagnosed by a health practitioner are reportable: Norovirus, Hepatitis A, Shigella spp., SHIGA toxin-producing E. coli, Salmonella Typhi or non-typhoidal Salmonella. Refer to [GoM Region Communicable Disease SWP](#) for outbreak prevention reporting time periods.

### 4.2 Record Keeping

The following records should be maintained for a minimum of 1 year by the Camp Boss and Caterer:

#### 4.2.1 Camp Boss

- Proof that they are following correct procedures (e.g. HACCP logs and cleaning schedules).
- Qualifications and medical fitness of staff.
- Documentation of food supply (e.g. chain of custody temperature logs).
- Caterer internal inspections.

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- Records of equipment maintenance (review with maintenance team)

#### **4.2.2 Catering Manager**

- Hazard Analysis Critical Control Point (HACCP) Plan
- Health and vaccination certificates.
- Manifest notes from suppliers.
- Pest-control documentation (i.e. proof of application).
- Training records and certificates.
- Complaints.
- Records of monitoring and inspections.

## **5 Process**

### **5.1 Key Performance Indicators (KPI's)**

A series of KPI's with related performance targets have been developed to monitor catering performance and are included in Table 1.

Failure to meet the above catering KPI's will put a Caterer in a Non-conformance situation. This in-turn would require immediate action to rectify the non-conformance.



**Table 1: Catering Services KPI's**

<b>ID</b>	<b>KPI</b>	<b>Performance Target</b>	<b>Monitoring Frequency</b>
KPI-1	<b>Meet 2013 FDA Food Code Standard</b>	FDA Food Code standards must be met & maintained.  Where, any doubt exists, reference should be made to the BP Health and Industrial Hygiene Team.	Prior to mobilization and as detailed in Table 2 -Inspection Frequency
KPI-2	<b>Health status of staff</b>	Full conformance with BP and FDA Food Code medical requirements are maintained at all times.	Prior to mobilization and as detailed in Table 2-Inspection Frequency
KPI-3	<b>Temperature Logs</b>	Temperature requirements (detailed in Appendix the edited FDA Guide 3-B and catering company HACCP) must be met & maintained. Comprehensive records must be kept at all critical stages.	Prior to mobilization and as detailed in Table 2-Inspection Frequency
KPI-4	<b>Cleaning Schedule</b>	The facility must be kept in a clean, hygienic condition. Cleaning schedules must be understood by all personnel and cleaning once complete, signed off by assigned supervision.	As detailed in Table 2- Inspection Frequency
KPI-5	<b>Training</b>	Management must be trained to Food Protection Manager and Food handlers have food handlers training. All prospective caterers must demonstrate that chefs and camp bosses are 'qualified' to this level. No exception for <u>prospective</u> caterer. Existing caterer allowed 3 months to confirm qualification.	During pre-qualification and as detailed in Table 2-Inspection Frequency
KPI-6	<b>Documented HACCP</b>	Fully developed and implemented HACCP system specific to the facility. Existing caterer allowed 3 months to confirm qualification.	During pre-qualification and as detailed in Table 2-Inspection Frequency
KPI-7	<b>Contamination Control</b>	Systems (including equipment and behaviors) must be in place to protect food from becoming contaminated, and excluding food from the food chain if indications exist to suggest contaminants that have compromised food stuffs (e.g. food thrown away after temperature control issues on boat).	During pre-qualification and as detailed in Table 2-Inspection Frequency

## 5.2 Food Establishment Inspection Program

This section of the Program defines the systematic self-verification process. To ensure the catering contractor is effectively implementing the HACCP.

Food safety inspections are carried out according to the established schedule (see Table 2 for inspection frequencies of inspections) and comply with general site requirements for visits. Each inspection involves a walk through the catering facility, meeting with key personnel and analysis of

hazards by asking a series of questions that are appropriate for each stage of the catering process. Annual inspection also requires the identification of equipment/structure/malfunction and review of records.

**Table 2: Inspection Frequency**

<b>Checklist / Audit</b>	<b>Location</b>	<b>Frequency</b>	<b>Responsible Person</b>
Annual Food Establishment Inspection	Site	Annual	GoM Health Manager
Catering Quarterly Performance Review with PSCM	Houston/Tele-Conference	Quarterly	Health and Industrial Hygiene Team
Food Establishment Inspection	Site	Bi-Weekly	Site Medic

### **5.2.1 Annual Food Establishment Inspection**

The Annual Food Establishment Inspection is a one day self-verification and consists of 2 parts. Part 1 is a review of all the relevant paperwork and Part 2 includes a physical review of the catering facilities.

The following paperwork should be available for the Annual Inspection and copies of documentation are requested for supply to the Health and Industrial Hygiene Team at least two week prior to the Inspection:

- Contractor HACCP Plan
- Medical screening and vaccination documentation
- Food delivery records and checks for the month before the audit
- Temperature Records (1 month prior)
- Cleaning Schedules and checklists
- Pest Control Documentation and records of visits (3 months)
- Food Safety Training Records
- Complaint / comment book or records (6 months)
- Maintenance records (for the previous 6 months) e.g. refrigeration or HVAC etc
- Records of Internal Audits & Inspections (12 months)
- Completed Bi-weekly Food Establishment Inspection (3 months)
- Review non-conformance foodborne illness Tr@ction Reports

### **5.2.2 Catering Quarterly Performance Review (QPR) with Procurement**

The QPR is conducted via tele-conference and requires the review of the following records:

- Completed Food Establishment Inspections (quarter)

- Temperature records (e.g. delivery, storage, cooking, blast chilling, hot holding and display temperatures) (quarter)
- Cleaning schedules and checklists
- Food Safety training records
- Medicals / vaccination records as required by [BP Fitness-For-Duty](#)
- Review non-conformance foodborne illness risk factors

### 5.2.3 **Bi-Weekly Food Establishment Inspection**

The bi-weekly inspection is performed by the on-site Medic and stored on the Health and Hygiene Collaboration Site.

The inspection is based on observations and conversations to assess behaviours relating to food safety and appropriate use of available equipment. It should also provide self-verification that procedures are available and implemented and appropriate records are being maintained.

### 5.2.4 **Corrective Actions**

BP as the Operator is ultimately responsible for managing the Caterer. All non-conformances identified during pre-qualification, mobilization, bi-weekly and annual inspections are subject to follow-up to ensure recommendations and non-conformances are rectified, addressed and implemented.

Failure to close any non-conformances in an agreed timescale will result in escalation.

## 5.3 Reporting

Non-conformance foodborne illness risk factors that are not corrected during inspection, should be classified as an “Other Event” in Tr@ction as follows:

**Table 3: Reporting Non-Conformance Foodborne Illness RF in Tr@ction**

SCREEN	ACTION
Event Type	Select the event type: “Self Assessment”
Event Name	Complete information, “Food Establishment Inspection”
Event Description	Complete information, including non-conformance item and specific description of item.
OMS Element	Select 3.4 Health & Industrial Hygiene

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Other Event Interviewer: Finish	Check "Enter action Items Now"
Action Item	Complete information
Approver	Select GoM Industrial Hygienist responsible for Area
Priority	Select "High"
Responsible Party	Select "OIM"

## 5.4 Managing an Outbreak of Food Poisoning

### 5.4.1 **When managing a food-poisoning outbreak, the objectives should be as follows:**

- A. Prevent more people from becoming ill
- B. Provide treatment
- C. Identify:
  - 1) What food and where the food which caused the outbreak was prepared or served.
  - 2) The 'causative agent' (that is, the cause of the outbreak, such as micro-organisms or toxins in food).
  - 3) The source of the causative agent (e.g., the vehicle that brought the food, food handler).
  - 4) The people who became ill.
  - 5) Who came in contact with the people who became ill.
- D. Provide evidence for any actions needed

### 5.4.2 **The Medic should follow these steps:**

- A. Step 1 – Give OIM and Health Team a report where two or more people show one or more of the following symptoms:
  - Nausea, vomiting, diarrhoea, abdominal pain, cramps or discomfort, dizziness, headache, fever, skin rash.
- B. Step 2 – Withdraw all suspected foods when food poisoning is confirmed.
- C. Step 3
  - 1) Interview those who have eaten the same batches of food.
  - 2) Trace the people who became ill after eating, especially food handlers, and who they have come into contact with.
  - 3) Refer Food Handlers for medical assessment.
  - 4) Disinfect catering facility.

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- 5) Arrange an inspection of the catering facility to be performed by Health and Industrial Hygiene Team and/or Catering Contractor.
  - 6) Document incident in Tr@ction.

## 6 Training

There is no BP required training for catering staff or medics pertaining to this Program. External training requirements include: ServSafe Manager and Food Handler.

## 7 Definitions and Acronyms

**Biological Contaminants:** Living organisms such as viruses, bacteria, fungi, parasites or toxins produced by some of them.

**Caterer:** An individual or company that has direct responsibility for producing food for customer or employee consumption.

**Camp Boss:** Any person who supervises Food Handlers or manages elements of the food supply chain.

**Critical Control Point:** A point or procedure in a specific food system where loss of control may result in an unacceptable health risk (see HACCP)

**Critical Limit:** The maximum or minimum value to which a physical, biological, or chemical parameter must be controlled at a critical control point to minimize the risk that the identified food safety hazard may occur (see HACCP).

**Cross-contamination:** Transfer of biological contaminants from one food to another, either by direct contact or by food handlers, contact surfaces or the air.

**Disinfection:** A process to reduce the number of microorganisms to a safe level by physical or chemical means.

**Food Contamination:** The introduction or occurrence of any biological or chemical agent, foreign matter, or other substances not intentionally added to food which may compromise food safety or suitability.

**Food Handler:** Any person who directly handles packaged or unpackaged food, food equipment and utensils, or food contact surfaces.

**Food Safety:** Program that food will not cause harm to the consumer when it is prepared and/or eaten according to its intended use.

**Foodborne Illness/Poisoning:** An acute illness resulting from eating or drinking contaminated food or water. Typical symptoms include one or all of the following illnesses: abdominal pain, nausea and vomiting, diarrhea. Causes include the following factors:

- Bacteria (e.g. Salmonella, Campylobacter, Listeria monocytogenes, E.coli)
- Viruses (e.g. Hepatitis A, Norwalk)
- Toxins from bacteria, scrombrotoxic fish

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- Parasites (e.g. Giardia lamblia)
  - Molds (e.g. mycotoxin producing molds)
  - Chemicals (e.g. pesticides)
  - Metals (e.g. mercury)

**Galley:** An operation that stores, prepares, packages, serves, vends, or otherwise provides food for human consumption.

**Hazard Analysis Critical Control Points (HACCP):** A system for producing zero defect food.

**Hazard (in food safety):** A biological, chemical, or physical property that may cause an unacceptable health risk.

## 8 Key Documents/Tools/References

- Appendix A – Bi-Weekly Food Establishment Inspection
- Appendix B – Annual Food Establishment Inspection
- Appendix C – 2013 FDA Food Code
- Appendix D – Abbreviated Guide 3B 2013 FDA Food Code
- RD 3.4-0027 Health Technical Note: Food and Water Safety

### Appendix A – Bi-weekly Food Establishment Inspection



Bi Weekly Food  
Establishment Inspec

### Appendix B – Annual Food Establishment Inspection



Annual Food  
Establishment Inspec

### Appendix C – 2013 FDA Food Code



2013 FDA Food  
Code.pdf

### **Appendix D – Abbreviated Guide 3B 2013 FDA Food Code**



Abbreviated Guide  
3B 2013 FDA Food Cc