

Staff Report

Devens
Enterprise
Commission

Date: October 8, 2025

To: Devens Enterprise Commission

From: Neil Angus, FAICP Director

RE: Board of Health Variance Request – Sodexo (BMS) 38 Jackson Road, Devens, MA

Proposed Variance Request:

Sodexo operates BMS's cafeteria and is looking to add sushi to their menu. According to the MA State Health Code (105 CMR 590.000) and FDA Food Code, prepared food such as cooked rice is required to be refrigerated and stored properly to maintain food safety. The codes however, allow for certain additives to be used to preserve food instead of refrigeration or TCS (Time/Temperature Control for Safety), rendering them a non-TCS food item. For example: Acidification - Using vinegar as an additive to lower the pH of sushi rice helps keep the rice fresh and avoid the need for refrigeration, rendering it a non-TCS food item. Sodexo is requesting a variance from the Food Code to allow for exactly that.

Sodexo has submitted a completed variance application to the Nashoba Associated Boards of Health (health agents for Devens), along with the required application and supporting information that includes a Hazard Analysis Critical Point (HACCP) Plan and initial pH laboratory test results that verify the safe handling, storage, and monitoring procedures for the rice product. The HACCP Plan will need to be reviewed annually and if there are any changes to the acidification recipe, Sodexo would be required to submit an updated HACCP Plan and pH laboratory result to the Nashoba Board of Health for review and approval. The legal owners of the establishment assume all liability for any injury resulting from the use of acidification as a method of food preservation.

Process:

The variance request does not require a public hearing or advertisement. The DEC, acting as the local board of health for Devens, is required to review and make a decision at a properly noticed public meeting.

Recommended Action:

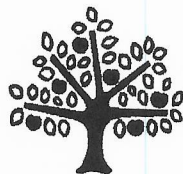
Staff has reviewed this variance request with our Health Inspector and they have no concerns as the applicant has completed all the requirements and this is fairly common for establishments that serve sushi. If the Commission is satisfied that all issues have been addressed, staff, in consultation with our health Inspector, would recommend the Commission consider a **motion to approve the variance request for using a food additive to render a TCS food as non-TCS food item, subject to the following conditions:**

1. The establishment will strictly adhere to all procedures as set forth in the submitted and approved HACCP Plan. All required records and documents including the HACCP Plan shall be maintained at the establishment.
2. Employees will be trained by the Person In Charge (PIC) on the approved HACCP procedures prior to implementation of the plan.
3. Monitoring records shall be reviewed and signed at least once per day by the PIC of the establishment and maintained on site for at least 30 days. The records shall be available to the Nashoba Board of Health and designated agents.

4. The HACCP Plan shall be reviewed and signed by an individual who is HACCP trained, at least once annually.
5. The pH of the product shall be validated (tested) at a laboratory at least once every twelve (12) months. The test results shall be forwarded to the Nashoba Public Health Department.
6. This variance is specific to the location and the current owner of the establishment set forth in the variance request application and is Not Transferable.
7. Any changes to the process (change in the recipe) or HACCP Plan as submitted & approved will render this variance null and void. This includes changes in the raw material such as rice vinegar concentration or other acidifier. The brand of vinegar may change but not the concentration or % acidity

Attachments:

- Variance Application
- HACCP Plan
- Certificate of Analysis



Nashoba Associated Boards of Health
Environmental Health Service
30 Central Avenue, Ayer, Ma. 01432

Variance Request to Use a Food Additive Application

Variance Request to Use a Food Additive Application According 105 CMR 590.000 and FDA Food Code 2013 § 3-502.11, § 8-103.10, § 8-201.13, §8-201.14, a variance and Hazard Analysis Critical Point (HACCP) Plan is required to use additives to render a TCS (Time/Temperature Control for Safety) Food as a Non-TCS food item (food that does not require refrigeration for safety). Example: Acidification - Using vinegar as an additive to lower the pH of sushi rice. To request a variance, complete the following application. Please print legibly. Incomplete application and missing documents may delay the review and decision process.

Date: 9/30/25

Name Of Establishment Bristol Myers Squibb (Sodexo cafe)

Establishment Address 38 Jackson Road Devens Ma

Applicant Name Candace Murphy

Applicant Address 38 Jackson Rd Devens

Phone Number 617-922-2701 Email Candace.murphy@Sodexo.com

Person responsible for HACCP plan and corrective action Jennifer LaCouture (Executive chef)

Phone number 978-588-6040 Email jennifer.lacouture@sodexo.com

Is this person a certified food manager? Yes ☒ No ☐

Food Products to be acidified: sushi Rice

Statement: I, attest to the accuracy of the information provided in this application and affirm to comply with the procedures set forth in the approved variance and HACCP Plan. I will review my approved HACCP Plan and submit the pH laboratory test results to the Nashoba Board of Health yearly. If the acidification recipe changes, I will submit an updated HACCP Plan and pH laboratory results to the Nashoba Board of Health for review and approval. The legal owners of the establishment assume all liability for any injury resulting from the use of acidification as a method of food preservation.

Signature [Signature] Print Candace Murphy

Submit the following:

(978) 772-3335 (800) 427-9762 FAX (978) 772-4947

- Completed "Variance Request to Use a Food Additive" Application.
- HACCP Plan including the pH laboratory test results

For official use only

Board of Health Meeting Information: Date: _____ Time: _____ Location: _____

Town Board of Health: _____

Reviewed By: _____

Decision Your request to use acidification as a method of food preservation has been:

- ☐ Approved
- ☐ Approved with the following conditions(s):
- ☐ Disapproved

Reason(s): This variance is approved under the following conditions:

1. The establishment will strictly adhere to all procedures as set forth in the submitted and approved HACCP Plan. All required records and documents including the HACCP Plan shall be maintained at the establishment.
2. Employees will be trained by the PIC on the approved HACCP procedures prior to implementation of the plan.
3. Monitoring records shall be reviewed and signed at least once per day by the person in charge (PIC) of the establishment and maintained on site for at least 30 days. The records shall be available to the Nashoba Board of Health and designated agents.
4. The HACCP Plan shall be reviewed and signed by an individual who is HACCP trained, at least once annually.
5. The pH of the product shall be validated (tested) at a laboratory at least once every twelve (12) months. The test results shall be forwarded to the Nashoba Public Health Department.
6. This variance is specific to the location and the current owner of the establishment set forth in the variance request application and is Not Transferable.
7. Any changes to the process (change in the recipe) or HACCP Plan as submitted & approved will render this variance null and void. This includes changes in the raw material such as rice vinegar concentration or other acidifier. The brand of vinegar may change but not the concentration or % acidity

Nashoba Associated Boards of Health

Sushi Program
BMS - Devens

Sodexo Corporate Services

Overview

- HACCP Plan
- Consumer Advisory
- Appendix
- ServSafe Certifications

HACCP PLAN

Sushi Rice - Acidification

HACCP Plan

| | |
|----------------|---|
| Facility Name | Sodexo BMS Devens Sushi HACCP Plan |
| Address | BMS-Devens 38 Jackson Road Devens, MA 01434 |
| HACCP Plan for | Sushi Rice Acidification |

| | |
|---------------|------------------------------------|
| Position | Sodexo Employee |
| Team Leader 1 | Zuri Jimenez , GM |
| Team Member 2 | Jennifer LaCouture, Executive Chef |
| Team Member 3 | Candy Murphy, Senior Area GM |
| Team Member 4 | Kathleen Pearce, REHS |

HACCP Plan

Receiving

Ingredients – short grain white rice, water, distilled white vinegar (5% acidity), sugar

Nomura & Co.Inc. is the approved source/supplier for the rice. It operates in accordance with all applicable food safety requirements. Address for 40 Broderick Road, Burlington California 94010 USA

Sysco Inc is the approved source/supplier for ingredients other than the sushi rice. It operates in accordance with all applicable food safety requirements. Address for Sysco Boston-99 Spring Street, Plympton, MA

These ingredients are delivered from an approved source operating in accordance with applicable food safety requirements. Shipment for these ingredients are delivered by truck to our back door along with other deliveries.

We will not accept shipment if any of the food items are received in a damaged or adulterated state. Employees will be trained on how to receive/inspect shipments.

Equipment

Commercial grade rice cooker, utensils, thermometer, pH meter with buffering system, log sheets, Sushi Knife (2), Colander

Storage

Ingredients are stored in dry storeroom on stainless steel shelving above the floor (by at least 6 inches). Once bags of bulk dry goods are opened, the remainder is transferred to food grade containers and covered for protection.

Labels are provided for all dry food containers before they are placed back on the shelf. The schedule for product rotation uses a first in, first out (FIFO) rule.

Employees will be trained on standard operating procedures (SOPs) regarding proper food storage.

HACCP Plan

Preparation

Assemble all ingredients and equipment. Verify rice cooker is clean and in good repair because dirty or damaged equipment can harbor bacteria and lead to foodborne illness. A culinary sink separated from other concurrent food handling activities and table for preparation of the rice will be cleaned and sanitized before handling the food. Handwashing using adequately supplied hand wash sinks. The use of utensils or single-use gloves to prevent bare hand contact with ready-to-eat food.

While the rice is cooking, combine the vinegar, sugar, and salt into a small stainless steel pot and heat the mixture until the sugar has dissolved (about 160F), stirring constantly, remove from heat, and set aside.

Employees will be trained on preparation SOP's to assure proper food handling, measuring dry ingredients, general cleanliness of work area, cleaning and sanitizing of all food equipment used as well as proper hand washing.

Formulation

Sushi Rice:

7 lbs of white short-grain Kokuho Rose Rice, labeled as sushi rice, 1 1/8 pint sushi rice seasoning + 1 1/8 gal water + enough water to wash rice until clear.

Sushi Rice Seasoning:

1 1/2 gal rice wine vinegar at 5% concentration + 1 1/2 gal mirin + 1 1/2 gal sugar + 1 1/2 qt kosher salt

In a small saucepan, combine the rice vinegar, mirin, sugar and salt.

Cook over medium heat until the sugar dissolves.

Let cool.

Stir vinegar solution into the cooked rice.

Test for correct pH

Note: Purchase vinegar from Sysco - #4040895 – 4/1 Gal SYS CLS Vinegar Distilled White 5%

HACCP Plan

Method of Cooking Rice

Measure rice and water

Rice is rinsed in a colander until the water runs clear.

Put the amount of rice per recipe into rice cooker with adequate amount of water until rice is thoroughly cooked, approximately 30 minutes

Method of Cooling Rice

Use clean spatula to empty rice cooker and put into a mixing pan no more than 4 inches deep and spread rice evenly. This will speed the cooling process and make it easier to mix the vinegar mixture into the rice.

Hazardous Analysis Plan

The critical control point, or CCP, is the point in the flow of the process at which there is control over the identified hazard, the growth of pathogens. The step in which vinegar is added to the rice is the critical control point for sushi rice. This is the step where the two hazards of concern, *B. cereus* and *S. aureus*, must be controlled to prevent illness.

The main control for the growth of *B. cereus* and *S. aureus* is acidification. In the preparation of sushi rice, vinegar is mixed thoroughly into cooked sushi rice to reduce the pH of the rice to less than 4.1. This pH threshold meets the definition of a non-TCS food, found in Table B of the FDA Model Food Code (note that water activity of cooked rice is greater than 0.88, and so is not a factor in this determination). This control is effective only when the pH of the rice is correctly monitored by using a pH meter.

If pH measurement is at 4.1 or below, hold rice at room/ambient temperature for no more than 8 hrs at 70°F - 80°F in an insulated container.

Method of Mixing Rice and Vinegar Solution

Once the rice has cooled enough but still warm, run a spatula through the rice using right and left slicing motions to separate the grains. Slowly add vinegar mixture making sure all rice is evenly coated with the vinegar mixture so that all rice reaches the appropriate pH (less or equal to 4.1). The pH will be tested within 30 minutes after acidification of the cooked rice using a calibrated pH probe. More vinegar mixture may be added if target pH is not reached.

HACCP Plan

Method(s) used for pH Measurement and Frequency, including calibration if applicable

A pH probe meter is calibrated according to manufacturer's directions before first use and thereafter calibrated daily to assure accuracy. The calibration is based on the readings from standard buffer solutions selected to provide specific pH readings.

ALWAYS CALIBRATE pH 7.00 FIRST AND THEN CALIBRATE pH 4.00

How to calibrate for pH 7.00:

1. Remove protective cap of the tester and wash the electrode with pure water and wipe dry it.
2. Press the "on/off" button to turn on the tester and immerse the probe in the 7.00 calibration solution.
3. Gently shake to eliminate air bubbles around the electrode and wait for the reading to stabilize (usually 5~10 seconds).
4. Press the "CAL" button for 5 seconds then release, the "CAL" symbol will display; then waiting pH7.0 reading flash 3 times.
5. The pH7.00 calibration procedure is completed.
6. Wash the probe again with pure water and wipe dry it.

How to calibrate for pH 4.00:

1. Immerse the electrode of the tester in the 4.00 calibration solution.
2. Gently shake to eliminate air bubbles around the electrode and wait for the reading to stabilize (usually 5~10 seconds).
3. Press the "CAL" button for 5 seconds then release, the "CAL" symbol will display; then waiting pH4.0 reading flash 3 times.
4. The pH4.00 calibration procedure is completed.
5. Wash the probe again with pure water and wipe dry it.
6. Press the "ON/OFF" button to turn off the tester and cover the protective cap.

The pH is tested within 30 minutes after adding the vinegar solution by taking ¼ cup sample of the cooked acidified rice from various locations in the batch and adding ¾ cup of distilled water in a clear plastic or metal blend cup.

Note: Purchase distilled water from Sysco – #7230086 – 6/1 PURLIFE Water Distilled

The slurry is blended for approximately 20 seconds to create a thorough mix. pH probe meter is inserted in the liquid portion of the slurry. Measurement is recorded. If target pH of 4.1 or below is not measured, more vinegar solution is added to the rice and pH is measured again.



BOH recommendations:

- Back up batteries
- pH strips

HACCP Plan

Identify Critical Control Point (CCP), Set Critical Limits (CL)

Optimum target pH of rice/vinegar solution is 4.1 or below within two hours of preparation.

Test pH after two hours of preparation if pH measurement is at 4.1 or below, will hold rice at room/ambient temperature for no more than 8 hrs.

If rice is above 4.1:

- discard if rice not made within an hour
- If rice made within hour, cool immediately or add additional vinegar, remix and re-test PH
- Verify use of correct recipe
- Verify calibration and proper use of PH Meter

Describe Corrective Action

If rice is above 4.1:

- Discard if rice not made within an hour
- If rice made within hour, cool immediately or add additional vinegar, remix and re-test pH
- Verify use of correct recipe
- Verify calibration and proper use of pH Meter

Policy & Procedures Regarding Storage of Sushi Rice

Once vinegar solution is added to the rice and the pH measures below 4.1, rice will be stored at room temperature.

Policy Regarding Remaining Sushi Rice Following Holding Time

Rice will be discarded after 8 hours.

HACCP Plan

Describe Record Keeping and Methods

Will keep the following sushi rice HACCP plan documents for two years:

pH Meter calibrated daily and logged by employee when Sushi station is open

pH log will be monitored daily by person in charge

Recipe formulation (target pH at or below 4.1) validated by Advanced Food Labs, Inc.

Food laboratory, signed and dated before account opens Sushi, 6mos after, then updated annually or when recipe modified. Maintained tests for one year.

Record of corrective action taken

HACCP plan submitted to Board of Health annually or as needed

Daily pH log for each batch of rice maintain for 30 days

Corrective Action recorder in log

Daily calibration log maintained for pH meter

Copy of log in the Appendix

Describe Employee Training

Designated employees who will be involved in making sushi rice are trained in this HACCP plan and SOP's such as hygiene, handwashing, food handling practices, cleaning and pH probe calibration and usage.

Re-trainings/reviews will be conducted as needed and with all new employees.

Record of the sushi rice HACCP training program for designated employees, also to include.

- Employee Health and Hygiene
- Cleaning and Sanitizing procedures
- Cross Contamination Prevention Procedures
- Monitoring Procedures for Acidified Rice
- Use of PH meter, calibration
- Corrective action
- Recordkeeping Requirements

Consumer Advisory

Disclosure

- A written statement that clearly identifies the raw or undercooked animal food or item that contains a raw or undercooked ingredient in **bold**.

Reminder

- A written statement that eating raw or undercooked food is associated with increased risk of foodborne illness. The reminder must include an asterisk by the menu item and a footnote.

BOH recommended consumer advisory at each station and on all signage:

- * Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness.
- *Please consume or refrigerate right away
- *Sushi may contain raw **fish**

Thank
you

Mairead Van Heest

617-981-3100

Sodexo Corporate Services

mairead.vanheest@sodexo.com

APPENDIX

Additional Notes

- Sushi Chef will be a traveling chef in the Boston area
 - Each site will have a plan review and program binder for reference and consistency
- Sushi Rice Log(rice acidification)/Daily pH Log
 - Before service starts, Advanced Food Labs will verify the pH of the rice
Advanced Food Labs, Inc.
2 Williams Street
Chelsea, MA 02150
T: (617) 269-6424 F: (617) 268-1635
www.advancedfoodlabs.com
Contact: Beatrice Manu, Laboratory Manager
- Logs will be completed daily and recorded online or on paper
 - Can be completed on Safety Culture
<https://app.safetyculture.com/inspections>
Sodexo contact is Corey Davila
Corey.Davila@sodexo.com
 - Can be completed on paper
<https://us.sodexonet.com/home/tools-x0026-resources/safety/food-safety/haccp/haccp-logs-and-record-keeping.html>
- Manager will review pH log prior to the start of service for accuracy and thoroughness
- This pH meter was selected because the tip of the meter is stored in KCl which keeps the meter more accurate



This pH meter has been purchased for each location

Recipe

The Sysco items below will be ordered

- 4040895 – 4/1Gal SYS CLS Vinegar Distilled White 5%
- 7230086 – 6/1 PURLIFE Water Distilled

| | | | |
|--|--|---|--|
| Recipe Information | | 92353 | |
| Formal Name: Seasoned White Sushi Rice | | | |
| Name: Rice-White, Sushi, Seasoned (Cwl) | | | |
| Menu Planning Group: Veg-Rice | | | |
| Preparation Information | | Shelf Life: Shelf Life: If Left Over, Do Not Reuse. | |
| Preparation Date: 23/01/2025 14:17 | | | |
| Yield: 3-3/4 - Quart | | | |
| Portions: 30-1/8 - 1/2 Cup | | | |
| <u>Type</u> | <u>Description</u> | <u>Prep Technique</u> | <u>Quantity</u> <u>UOM</u> <u>Number</u> |
| R | Seasoning-Sushi Rice (Cwl) | | 4 Ounce - Volume 92354 |
| I | Rice-Rose (Sweet), Raw | | 1-1/2 Pound 231100000 |
| I | Water | | 2 Pint 0 |
| <u>Step #</u> | <u>Preparation</u> | | |
| 1) | Prepare sub recipe according to recipe. | | |
| 2) | Wash rice 5 times or until water runs clear. | | |
| 3) | Drain in colander and let dry for 15 minutes. | | |
| 4) | Cook the rice in a rice cooker to an internal temperature of 160 degrees F | | |
| 5) | In case no rice cooker is available. | | |
| Stove top: combine rice and water. Bring to a boil. Reduce heat and simmer, covered, for 10 minutes or until liquid is absorbed. CCP-- Minimum internal temperature should be 160 degrees F. or above. | | | |
| 6) | Transfer rice to a vary large bowl. | | |
| 7) | Sprinkle sushi seasoning liquid all over the rice by drizzling over a spatula while waving spatula back and forth. | | |
| 8) | Using the spatula, in a slicing motion, gently separate the rice grains while mixing in the seasoning liquid. | | |
| 9) | Fan the rice while mixing to help it dry. | | |
| 10) | Cover the rice with a damp cloth. Keep warm during service. | | |
| 11) | Shelf Life: If left over, do not reuse. | | |

| | | | |
|--|---|--|--|
| Recipe Information | | 92354 | |
| Formal Name: Sushi Rice Seasoning | | | |
| Name: Seasoning-Sushi Rice (Cwl) | | | |
| Menu Planning Group: Misc. Items-Sub Recipes | | part of 92353 - Seasoned White Sushi Rice | |
| Preparation Information | | Shelf Life: Shelf Life: Use Within 2 Days. | |
| Preparation Date: 23/01/2025 14:17 | | | |
| Yield: 4 - Ounce - Volume | | | |
| <u>Type</u> | <u>Description</u> | <u>Prep Technique</u> | <u>Quantity</u> <u>UOM</u> <u>Number</u> |
| I | Rice Wine Vinegar, Unseasoned | | 1-1/3 Ounce - Volume 34213 |
| I | Wine-Rice (Mirin) | | 1-1/3 Ounce - Volume 261000000 |
| I | Granulated Sugar | | 1-1/3 Ounce - Volume 557000000 |
| I | Salt, Kosher | | 2 Teaspoon 262700000 |
| <u>Step #</u> | <u>Preparation</u> | | |
| 1) | In a small saucepan combine rice wine vinegar, mirin, sugar and salt. | | |
| 2) | Over moderate heat, constantly stir until sugar and salt dissolve. | | |
| 3) | Shelf Life: Use within 2 days. | | |

Sushi Rice (Rice Acidification) Log



Sushi Rice (Rice Acidification) Log – BMS-Devens

Acidification Parameters:

- Use Sodexo's sushi rice recipe for proper preparation of sushi rice. **Contracted sushi suppliers must adhere to their company approved recipes and HACCP program guidelines.**
- Measure and record pH of each batch of sushi rice made per "Sushi and Sashimi Guidelines". Rice pH Target range is 4.1.
- If pH is above 4.1, take corrective action by adding vinegar (one time only per batch) and record final pH reading. *
- Record the time when rice is completely used (consumed) or discarded. Discard leftovers after 8 hours.
- Calibrate pH meter **daily** and record '**accurate**' in right column. **

pH log to be available upon request and reviewed daily by unit management

| Date | Batch Number | Time of Acidification | Rice pH | pH Meter** Calibrated | Time Rice Consumed | Time Rice Discarded | Corrective Action* | Employee Initial/Sign. |
|------|--------------|-----------------------|---------|-----------------------|--------------------|---------------------|--------------------|------------------------|
| | 1 | | | | | | | |
| | 2 | | | | | | | |
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|---|----------------|
| Reviewed by: Manager or Person-in-Charge (PIC) | |
| | Signature/Date |

Employee Health Training Sign Off

Convenio sobre el Reporte de Trabajadores de Alimentos

Prevención de la Transmisión de Enfermedades a través de Alimentos por parte de los Trabajadores Infectados que Manipulan Alimentos

El propósito de este convenio es garantizar que los Trabajadores de Alimentos y los Trabajadores Condicionales notifiquen a la Persona a Cargo cuando ellos experimenten cualquiera de las condiciones indicadas, a fin de que la Persona a Cargo pueda tomar las medidas adecuadas para impedir la transmisión de enfermedades a través de los alimentos.

YO ACEPTO A INFORMAR A LA PERSONA A CARGO SOBRE:

A. LOS SÍNTOMAS DE:

diarrea; vómito; ictericia; dolor de garganta con fiebre; cortaduras o heridas con pus en manos, muñecas o una parte expuesta del cuerpo (como quemaduras por agua hirviendo y lesiones infectadas, aunque sean pequeñas).

B. DIAGNÓSTICO MÉDICO DE ESTAR ENFERMO CON:

norovirus, Escherichia coli que produce la toxina Shiga, Salmonella Typhi (la fiebre tifoidea), *Shigella* spp (infección por *Shigella* spp.), *Salmonella* no tifoidea y Hepatitis A, así como otras enfermedades que pueden ser transmitidas por alimentos de acuerdo con la 105 CMR 300.000. Contacte al Programa de Protección de Alimentos al 617-983-6712 o al Programa de Epidemiología al 617-983-6800 para información adicional.

C. DIAGNÓSTICO MÉDICO PREVIO DE ALGUNA ENFERMEDAD DE LAS LISTADAS ANTERIORMENTE:

¿Ha sido usted diagnosticado(a) con alguna de las enfermedades indicadas anteriormente? _____

De ser así, ¿cuál fue la fecha del diagnóstico? _____

D. CONDICIONES DE ALTO RIESGO:

- Exposición a o sospecha de causar cualquier brote confirmado de una enfermedad indicada anteriormente en la Parte B.
- Un miembro de la familia ha sido diagnosticado con alguna de las enfermedades indicadas anteriormente en la Parte B.
- Un miembro de la familia que asiste o trabaja en un entorno que presenta un brote de una enfermedad indicada anteriormente en la Parte B

He leído (o me han explicado) y comprendo los requisitos con respecto a mis deberes según el Código de Alimentos 105 CMR 590-2013 y este convenio para cumplir con los requerimientos de reporte especificados anteriormente en conexión con los síntomas, diagnósticos, y condiciones de alto riesgo especificadas. También comprendo que, si experimento uno de los síntomas o condiciones de alto riesgo, o de ser diagnosticado(a) con una de las enfermedades anteriores, podría tener que cambiar mi trabajo o dejar de trabajar completamente hasta que dichos síntomas o enfermedades sean resueltas.

Comprendo que no cumplir con los términos de este convenio puede conllevar a que el establecimiento de alimentos o la autoridad regulatoria de alimentos tome acción, lo cual puede poner en riesgo mi empleo y puede involucrar una acción legal en mi contra.

Nombre del Trabajador de Alimentos o Trabajador Condicional (en letra de imprenta) _____

Firma del Individuo Nombrado Anteriormente _____ Fecha _____

Firma del Titular del Permiso o Representante _____ Fecha _____

Financiación para esta traducción fue proporcionada por la Beca Cooperativa FDA a la Ciudad de Melrose, MA. Este es un formato modelo creado por el Departamento de Salud Pública de Massachusetts, el cual es ofrecido como una herramienta para que la industria lo use como una ayuda en cumplimiento con la 105 CMR 590.002(E) y el Código Federal de Alimentos 2-201.11. El uso de este formato es voluntario y no es requerido por la regulación estatal. Revisado: Octubre, 2018

Food Employee Reporting Agreement

Preventing Transmission of Diseases through Food by Infected Food Employees

The purpose of this agreement is to ensure that Food Employees and Conditional Employees notify the Person in Charge when they experience any of the conditions listed so that the Person in charge can take appropriate steps to preclude the transmission of foodborne illness.

I AGREE TO REPORT TO THE PERSON IN CHARGE:

A. SYMPTOMS OF:

diarrhea, vomiting, jaundice, sore throat with fever, and lesions containing pus on the hand, wrist, or an exposed body part (such as boils and infected wounds, however small.)

B. MEDICAL DIAGNOSIS OF BEING ILL WITH:

norovirus, shiga toxin-producing *E. coli*, *S. typhi* (typhoid fever), *Shigella* spp., non-typhoidal *Salmonella*, and Hepatitis A, as well as other diseases that may be transmitted through food per 105 CMR 300.000. Contact the Food Protection Program at 617-983-6712 or The Epidemiology Program at 617-983-6800 for additional information.

C. PAST MEDICAL DIAGNOSIS OF DISEASES LISTED ABOVE:

Have you ever been diagnosed as being ill with one of the diseases listed above? _____

If you have, what was the date of the diagnosis? _____

D. HIGH-RISK CONDITIONS:

- Exposure to or suspicion of causing any confirmed outbreak of the diseases listed under Part B above.
- A household member has been diagnosed with diseases listed in Part B above.
- A household member attending or working in a setting experiencing a confirmed outbreak of one of the diseases listed in part B above.

I have read (or had explained to me) and understand the requirements concerning my responsibilities under 105 CMR 590/2013 Food Code and this agreement to comply with the reporting requirements specified above involving symptoms, diagnoses, and high-risk conditions specified. I also understand that should I experience one of the above symptoms or high-risk conditions, or should I be diagnosed with one of the above illnesses, I may be asked to change my job or to stop working altogether until such symptoms or illnesses have resolved.

I understand that failure to comply with the terms of this agreement could lead to action by the food establishment or the food regulatory authority that may jeopardize my employment and may involve legal action against me.

Food Employee or Conditional Food Employee Name (Please Print) _____


Signature of Above-named Individual _____ Date _____

Signature of Permit Holder or Representative _____ Date _____

This is a model form created by MA Department of Public Health which is offered as a tool for industry to use to aid in compliance with 105 CMR 590.002(E) and the Federal Food Code 2-201.11. The use of this form is voluntary and is not required by state regulation. Revised: October, 2018

Employee Health Training Sign Off

Employee Health Food Service Notification



The purpose of this agreement is to inform conditional employees or food employees of their responsibility to notify the person in charge when they experience any of the conditions listed so that the person in charge can take appropriate steps to preclude the transmission of foodborne illness.

I Agree to Report to the Person in Charge:

Any Onset of the Following Symptoms, Either While at Work or Outside of Work, Including the Date of Onset:

- Diarrhea
- Vomiting
- Jaundice
- Sore throat with fever
- 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, however small)

Future Medical Diagnosis:

- Whenever diagnosed as being ill with Norovirus, typhoid fever (Salmonella Typhi), shigellosis (Shigella spp. infection), Escherichia coli O157:H7 or other STEC infection, nontyphoidal Salmonella or hepatitis A (hepatitis A virus infection)

Future Exposure to Foodborne Pathogens:

- Exposure to or suspicion of causing any confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, E. coli O157:H7 or other STEC infection, or hepatitis A.
- A household member diagnosed with Norovirus, typhoid fever, shigellosis, illness due to STEC, or hepatitis A.
- A household member attending or working in a setting experiencing a confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, E. coli O157:H7 or other STEC infection, or hepatitis A.

I have read (or had explained to me) and understand the requirements concerning my responsibilities under the **Sodexo Employee Health Policy and the Employee Health Foodservice Notification** to comply with:

1. Reporting requirements specified above involving symptoms, diagnoses, and exposure specified
2. Work restrictions or exclusions that are imposed upon me; and
3. Good hygienic practices.

I understand that failure to comply with the terms of this document could lead to constructive counseling, up to and including termination of employment:

| | | |
|--------------------------------------|-----------|------|
| | | |
| Name of Food Employee (Please print) | Signature | Date |

| | | |
|-------------------------------------|-----------|------|
| | | |
| Name of Food Manager (Please print) | Signature | Date |

Document Code: 1.2.1a Revision Date: 06/01/2022 Page No: 1 of 1



*Sushi Chef



ServSafe® CERTIFICATION

Chang JI

for successfully completing the standards set forth for the ServSafe® Food Protection Manager Certification Examination, which is accredited by the ANSI (American National Standards Institute) National Accreditation Board (ANAB)–Conference for Food Protection (CFP).

26746119
CERTIFICATE NUMBER

5687
EXAM FORM NUMBER

12/2/2024
DATE OF EXAMINATION
Local laws apply. Check with your local regulatory agency for recertification requirements.

12/2/2029
DATE OF EXPIRATION



Sherman Brown
Sherman Brown
Executive Vice President, Business Services



In accordance with Master Labor Convention 2005, Revision ADM-H 048-2013 (Regulation 3.2, amended 6/3/24)
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Contact us with questions at 233 S. Wacker Drive, Suite 3600, Chicago, IL 60606-6383 or ServSafe@restaurant.org.



ServSafe Allergens™ Certificate of Completion

Awarded to

CHANG JI

Provided by the **National Restaurant Association**

Certificate Number 7546542 Date 1/2/2025

Expiration Date 1/2/2028

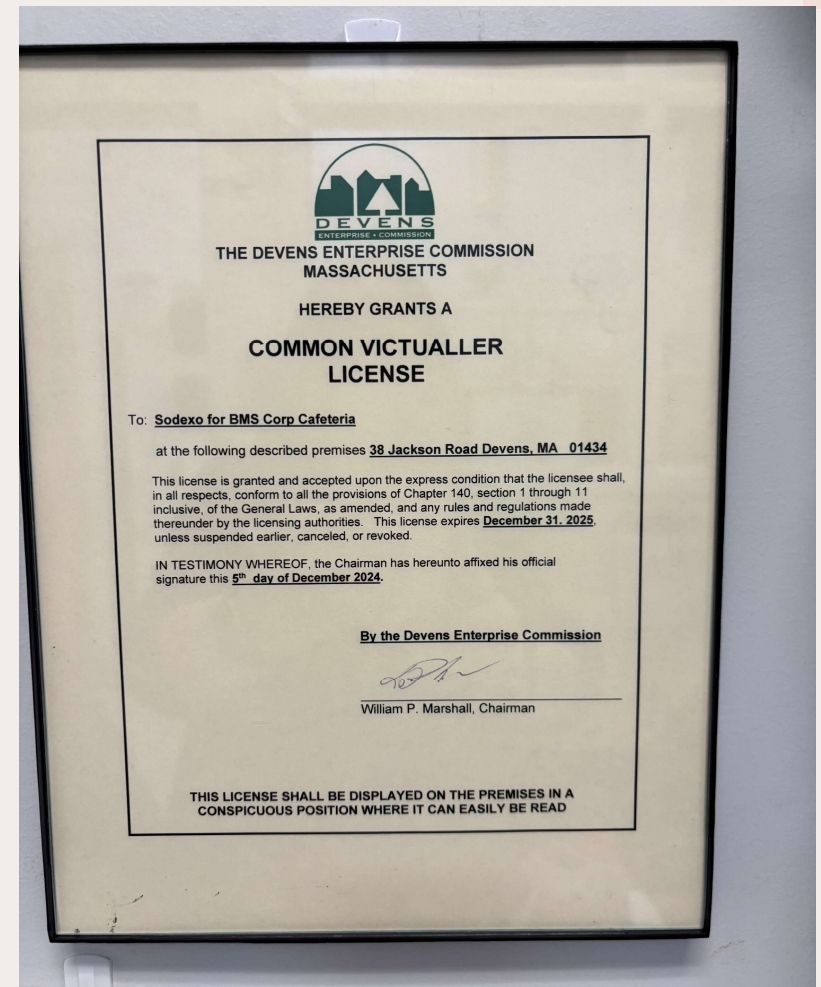
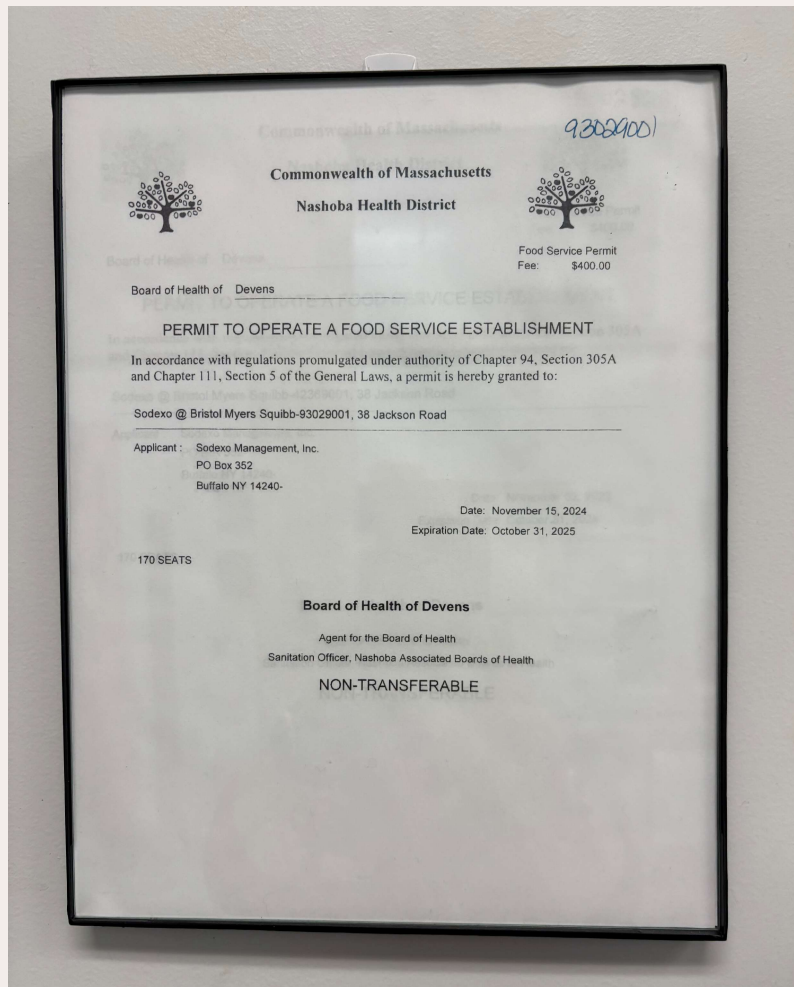


Sherman Brown
Sherman Brown
Executive Vice President, Business Services



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Food Service Permits



Consumer Advisory

[Link](#) to details on how to create a consumer advisory

Sushi & Sashimi Guidelines

<https://us.sodexonet.com/files/live/sites/sdxnet-us/files/Tools-Resources/Safety/Food-Safety/Food%20Safety%20Manual/1.2.35%20Sushi%20and%20Sashimi%20Guidelines%20-%202002-27-2024.pdf>



2 Williams Street • Chelsea, MA 02150 • www.advancedfoodlabs.com

Tel: 617-269-6424 • Fax: 617-268-1635

Certificate of Analysis

September 30, 2025

Report # 26716

Page # 1 of 1

Ordered By:

SODEXO

9801 Washington Blvd.

Gaithersburg, MD 20878

SAMPLE LOCATION:

Brystol Myers Squibb - BMS

38 Jackson Road

Devens, Massachusetts 01434

Attention: Zuri Jimenez/ Mairead Van Heest

Sample Delivery: Client

Sample Submission Date: 09/25/2025

Sample Production Date: 09/25/2025

| SAMPLE # | SAMPLE ID | SAMPLE DESCRIPTION | PRODUCTION DATE | pH ANALYSIS RESULT | METHOD |
|----------|-----------|--------------------|-----------------------|--------------------|-------------|
| 1 | AFL66287 | White Sushi Rice | 09/25/2025 9:29 AM | 4.00 | AOAC 981.12 |

Signed Electronically By:

Sulenna Aguilar

Sulenna Aguilar - Technical Manager

Beatrice Manu

Beatrice Manu - Laboratory Manager

Advanced Food Labs, Inc. is accredited to the ISO/IEC 17025:2017 standard (Accreditation No. 81002)

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