

Louisiana Department of Health: Summer Feeding Site Questionnaire

Rev. 4/5/2022

Date of Plans Submission: _____

1. Name of the Site: _____
2. Does this site have an annual LDH permit? _____ List the Permit Number: _____
Name of the Permitted Establishment: _____
3. Physical address of the site: _____

4. Has this site been previously permitted by your organization for summer feeding? _____
Enter the year: _____ If yes, will the type of food service stay the same? _____
5. Agency Sponsoring the Site: _____
Sponsor Contact(s): _____
6. Sponsor Contact Number: _____ Cell Number: _____
Sponsor Contact Email Address: _____ **This is a required field.**
Email used to contact applicant with questions, schedule appointments and to provide approvals.
7. Sponsor Mailing address: _____

8. Main Office Number of Sponsor: _____ Fax Number: _____
9. Organization Operating the Site: _____
10. Name of On-site Contact Manager: _____
11. Phone Number of On-Site Manager: _____ Email of On-Site Manager: _____

About the program:

12. Type of Feeding Site (Select all that apply): **Congregate Sites:** _____ Full Prep and Service Kitchen
_____ Satellite Kitchen-Plating Food _____ Satellite Site Serving Pre-Packaged Meals
_____ Mobile Food Establishment--You must submit a LDH Mobile Food Unit Plan Review Questionnaire.
13. Only single meals are allowed for service.
14. Dates Food Service Will Occur: Start Date: _____ End Date: _____
15. Days of the Week this site will operate: _____
16. List meal(s) served. (Breakfast, Lunch, Snack, Dinner) _____
What times are they served? _____
17. What is the average daily participation? _____ How many meals does that equal for each serving time?

18. Indicate any dates that you know the site will not operate (Holidays, etc.) _____

19. Select the types of meals provided from the site: _____ Hot Meals _____ Bag/Box Lunches _____ All Shelf Stable
_____ Combo Describe Other (fill in) _____
Describe the meal (Shelf stable meal, cold milk; etc.) _____
20. For congregate dining sites, where is the hand sink for the children to use (Must have hot water, soap and paper towels.)

21. What restroom facilities are available to the children and staff? _____

For Kitchens with cooking and/or heating; handling food:

22. Identify the location of the hand sink(s) in the food prep area. Sinks must have hot water, soap, and paper towels.

23. Does the site have a grease trap? _____

24. Is there a three-compartment sink for dishwashing and sanitizing? _____

List the sanitizer you will use _____

25. What kind of equipment will be in use? Note how many of each. _____ refrigerators _____ freezers

_____ ovens _____ steam lines/warmers _____ microwave ovens _____ ice chests

For Serving Sites (All Sites--Congregate Meals): Vended food sources must have LDH Manufacturing Permits.

26. What is the food source? _____

Facility name: _____

LDH Permit Number: _____

Address: _____

Contact Name, Phone and Email: _____

27. Who delivers the meals to the site/recipients? _____

Include a written plan describing the transportation of meals from the source to the site or the recipients. Give details regarding the control of food temperature, the time of delivery, holding time before service, disposition of un-received meals. Include charts used to record temperatures and times and any other food safety charts employed.

28. Provide a menu and drawn floor plan of site. The floor plan must include plumbing fixtures, equipment, preparation and serving spaces, and restrooms.

29. Submit a **site agreement** if you are operating in a site that you do not own. The agreement should include information regarding the availability of equipment your operation will have at this site. *Ex. In a school kitchen, will you have access to the walk-in cooler?*

Mobile Food Establishments providing foods that are potentially hazardous (TCS Foods) must use Time as a Public Health Control. Time as a Public Health Control can be used for single day meals only. Provide a written plan describing the process. Describe how individual meals will be marked with discard time. Provide a list of food handled in this manner and the logs used. Include example logs in the plan. Time as a public health control contributes to food waste.

When keeping Logs include:

- The date of the log (from the permitted kitchen)
- State the time the food is removed from temperature control
- State the discard time (4 hours from the removal time)
- Include space for signatures of the persons completing each step

If you plan to close the site before the end of the permit, do not forget to inform the local health department office that you will close early.

Submit this Summer Feeding Questionnaire to the LDH office in the parish where the site is located. If the site has no annual permit, submit the LDH Plans Review Questionnaire (PRQ). If your organization has never operated at the site, submit a PRQ. If the site has changed their floor plan, you will need to submit a new PRQ. If you are operating as a mobile unit, submit the LDH Mobile Unit Plans Review Questionnaire. After receipt of your questionnaire, please allow up to two weeks for review. After receiving notice of the plans approval, request an inspection through the office to which you submitted your application.