



UNITED STATES MARINE CORPS
MARINE CORPS BASE
PSC BOX 20004
CAMP LEJEUNE, NORTH CAROLINA 28542-0004

BO 6240.7
O&PMD/RDC/dlm
20 Jan 1984

BASE ORDER 6240.7

From: Commanding General
To: Distribution List

Subj: Environmental Health Inspections and Surveys; reporting and activity action concerning

Ref: (a) NAVMED P-117, U.S. Navy Manual of the Medical Department, Chapter 22 (NOTAL)
(b) NAVMED P-5010, Manual of Naval Preventive Medicine (NOTAL)

Encl: (1) Food Service Inspection Reporting Procedures
(2) Food Service Sanitation Inspection Form, NAVMED 6240/1

1. Purpose. To establish a standard procedure, within the guidelines of the references, for reporting environmental health inspections and surveys conducted aboard the Camp Lejeune complex and Marine Corps Air Station (Helicopter), New River.

2. Background. The Commanding Generals, Marine Corps Base; 2d Marine Division, FMF; 2d Force Service Support Group (Rein), FMFLant; 6th Marine Amphibious Brigade, FMFLant, and the Commanding Officers of Marine Corps Air Station (Helicopter), New River; Naval Hospital and Dental Clinic are responsible for the health of all personnel assigned to their commands/organizations. The Commanding Officer, Naval Hospital is responsible for environmental health surveillance and making health related recommendations to the appropriate Commanding General/Commanding Officer for corrective action. The references outline sanitary standards for Navy and Marine Corps facilities.

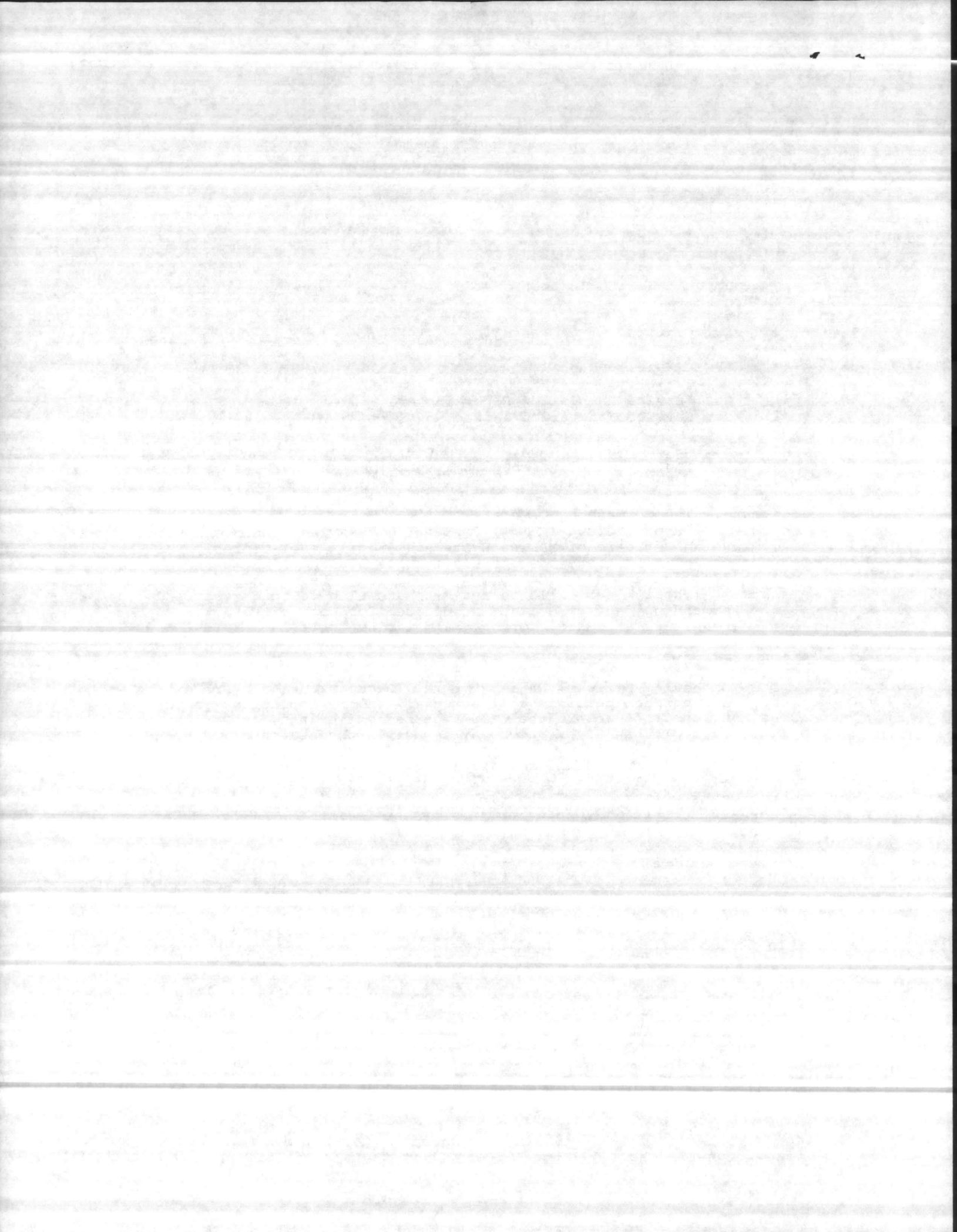
3. Action

a. The Commanding Officer, Naval Hospital (Occupational and Preventive Medicine Department) will conduct periodic environmental health inspections and surveys of all facilities and functions aboard the Camp Lejeune complex and the Marine Corps Air Station (Helicopter), New River which may impact on the health of personnel. Inspections and surveys will include, but not be limited to, the following areas: disease vector and rodent control, sanitary aspects of food and food handling, water, sewage, garbage, waste disposal, housing, berthing, recreational facilities, investigation of disease outbreaks and other related elements of the environment. The frequency of inspections and surveys will be determined by the Commanding Officer, Naval Hospital, Camp Lejeune.

b. Naval Hospital, 2d Marine Division, and 2d Force Service Support Group Preventive Medicine inspectors working with the Occupational and Preventive Medicine Department will be admitted to any facility to conduct inspections, surveys and investigations as necessary to determine the existence of, or means to correct, health hazards and environmental deficiencies. The senior inspector will contact the senior person in the facility upon arrival at the facility and prior to conducting the inspection.

c. The results of inspections and surveys conducted, with recommendations to correct any discrepancies noted, will be submitted in writing to the appropriate Commanding General/Commanding Officer with copies to the responsible officer. Inspection results submitted to a Commanding General will be sent via the appropriate command Surgeon. A copy of the results will be left with the Manager/Supervisor of the facility being inspected.

d. Within seven working days of the receipt of the report, the activity inspected will advise his command in writing of the action taken or contemplated to correct any discrepancies reported. A copy of this notification will be furnished to the Commanding Officer, Naval Hospital (Attn: Head, Occupational and Preventive Medicine Department).



FOOD SERVICE INSPECTION REPORTING PROCEDURES

1. Report of Inspections. Whenever an inspection of a food service facility is made, the preventive medicine inspector shall record the findings of the inspection on the current edition of NAVMED Form 6240/1; an example of which is contained as enclosure (2).

2. Food Service Sanitation Requirements

a. The sanitary requirements promulgated in Chapter 1, Manual of Naval Preventive Medicine (NAVMED P-5010) are set forth in section I through IX of NAVMED 6240/1.

b. A defect point system has been established whereby maximum possible defect points have been assigned to each stated requirement. The inspector shall assign the appropriate number of defect points up to the maximum possible for noncompliance with the requirements and compute a Sanitary Compliance Score (SCS) calculated as follows:

$$\text{SCS} = \frac{\text{Defect Points Possible} - \text{Defect Points Assigned}}{\text{Defect Points Possible}} \times 100$$

c. The defect points possible for a given facility shall be determined by lining out those items not applicable to the facility and totaling those items that do apply.

d. Repeat discrepancies for which no action has been taken to correct, shall be assigned double the defect points originally assigned without adding to the denominator of the SCS equation until the discrepancy has been corrected or the management has done all it can to correct the discrepancy.

e. Section X of the form is intended for a concise executive summary of the inspection or explanation of serious discrepancies. Detailed comments and recommendations can be provided to the food service management and other interested parties by a separate enclosure.

f. If the inspector considers a discrepancy to be of such magnitude as to constitute a significant danger to health, he shall assign 110 defect points to that discrepancy and carry out the procedures as described in paragraph 3a(3) below.

3. Correction of Violations

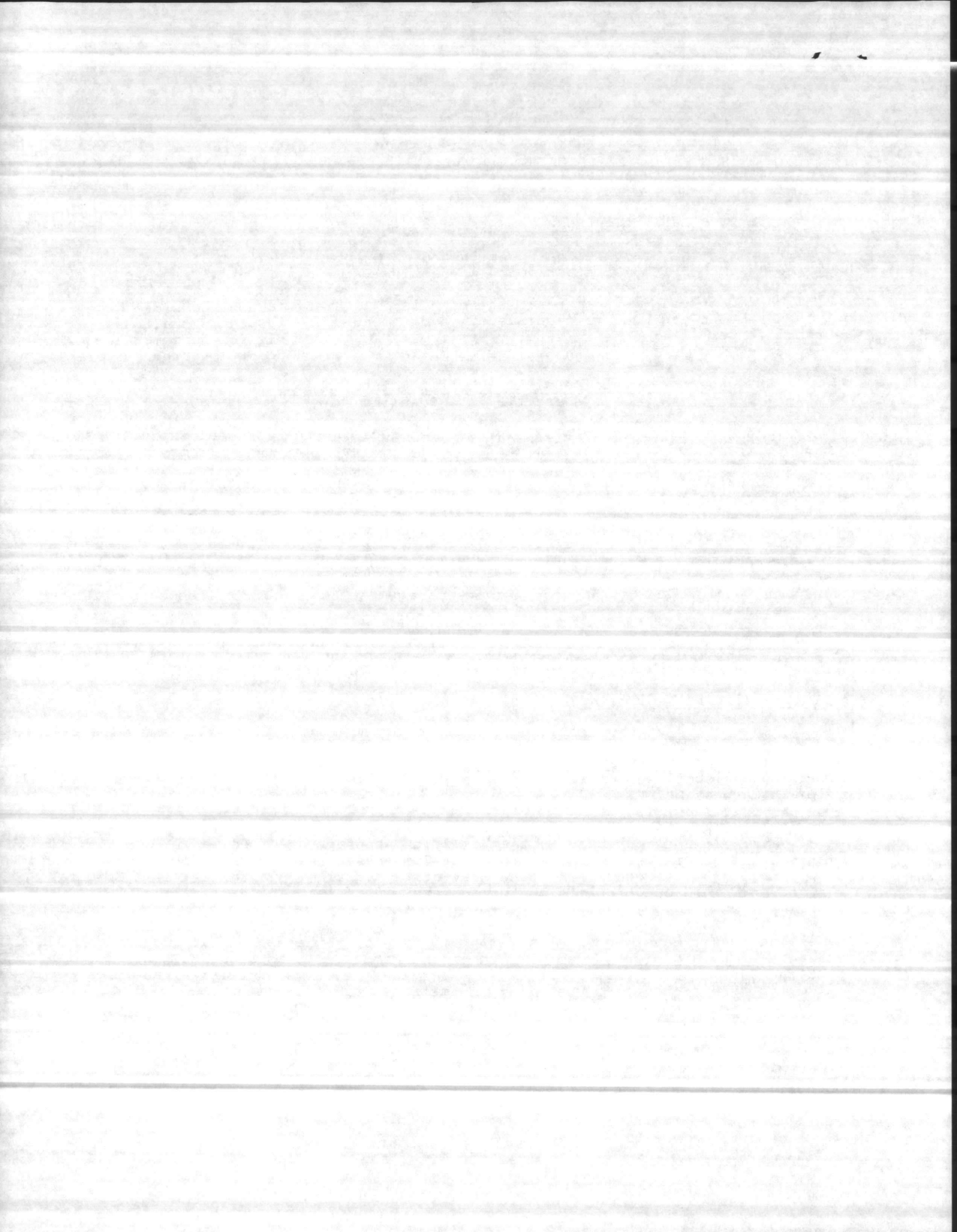
a. Correction of the Violations shall be accomplished within the following periods:

(1) When the SCS is 85 or more, all item violations up to and including 4 defect points shall be corrected as soon as possible, but in any event, by the time of the next inspection.

(2) When the SCS is 84 or below, all violations must be corrected within seven days. If not corrected in that time, the appropriate food service manager, must submit a written report to the appropriate Commanding General/Commanding Officer with a copy to the Head, Occupational and Preventive Medicine Department, Naval Hospital and appropriate Group or Division Surgeon explaining the reasons for the delay.

(3) When the SCS is less than 70, the Head, Occupational and Preventive Medicine Department, Naval Hospital shall promptly notify the appropriate Commanding General via Group/Division Surgeon or Commanding Officer (as appropriate) and recommend that the facility immediately cease food service operations until re-inspection determined that the significant unsanitary conditions have been eliminated.

(4) Regardless of the SCS, immediate action shall be taken to correct all violations assigned five or more defect points. In addition, the appropriate food service manager shall submit a written report to the appropriate Commanding General/Commanding Officer within seven days of the inspection, with a copy to the Head, Occupational and Preventive Medicine Department, Naval Hospital explaining what action has been taken to correct these deficiencies.

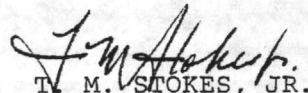


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e. Specific guidelines on reporting procedures, correction of deficiencies, point assessment for discrepancies and administrative criteria for submitting reports of food service inspections are contained in enclosure (1). The preventive medicine inspector will use enclosure (2) or current forms that may be prescribed to evaluate and assign a grade to each facility inspected.

f. When an immediate health hazard is noted by the preventive medicine inspector, correction of the hazard must be addressed immediately. The criteria for recommending immediate cessation of food service operations within facilities due to satisfactory and health hazardous sanitary conditions, is addressed in enclosure (1).

4. Concurrence. Having received the concurrence of the Commanding Generals, 2d Marine Division, FMF; 2d Force Service Support Group (Rein), FMFLant and 6th Marine Amphibious Brigade, FMFLant and the Commanding Officers, Marine Corps Air Station (Helicopter), New River; Naval Hospital and Naval Dental Clinic this order is applicable to those commands.


T. M. STOKES, JR.
Chief of Staff

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