

Island Health Environmental Public Health Services



September 29 2023

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Topics of Discussion

- Food Legislation in BC
- Types of permits and approvals
- Temporary Food Markets
 - Description, Limits, Market Manager Responsibility
- Special Events
 - Description, Limits
- Mobile Food Premises
- Food Safe and Market Safe
- Other

Food Legislation in BC

- Food Premises Regulation
- Food Safety Act
- Public Health Act



Other Guidance

- Provincial Guidelines (BCCDC/MoH)
 - Guidelines for the Sale of Food at Temporary Markets
 - Mobile Food Premises Guidelines
- Island Health
 - Special Events: Temporary Food Service Application

Types of Permit/Approval

FOOD PREMISES REGULATIONS

- **Health Operating Permit**
 - Application process for mobile units and commercial facilities/kitchens
 - Involves inspection process and review of plan layout
- **Health Approval**
 - For lower risk food production such as Type A mobiles and processors
- **Temporary Food Service Permit**
 - Special Events - compliance with direct health requirements of *FPR*, fewer than 14 days per calendar year

FARMER'S MARKETS

- **Letter of Confirmation**, for higher risk foods which need to be processed out of an approved commercial kitchen
- **No health approval**, only lower risk foods

When in doubt, contact your EHO

Permitted Facilities

- Examples: Restaurants, pubs, take-out food kiosks, commercial kitchen, **mobiles**
- Construction requires prior EHO review
- Operating permit issued under the FPR
 - terms and conditions (i.e. limiting the menu, imposing other requirements at the discretion of the EHO).
- EHO routinely inspects these facilities
- Annual operating fee due for each fiscal year

Approved Facilities

- Under the FPR, some food premises do not require a permit, but APPROVAL is still required

Example: Food processors, food stores

- EHO review prior to construction
- Routine inspections

Food Premises Requirements

- Appropriate water supply and wastewater disposal are required
 - Drinking Water Protection Act and Regulation
 - Sewerage System Regulation
- Other considerations: business licensing, zoning, liquor licensing, inspection by fire department, inspection by gas fitter, regulation of tobacco sales, extent of food production for the systems in place

Farmer's Markets

Temporary Food Market
(processed, PACKAGED foods)

Food for immediate consumption
(hot foods, dispense or assembled onsite)

Lower Risk

Higher Risk

Temporary Event Permit

Mobile Food Premises

Home Made Commercial Kitchen*

Commercial Kitchen *

Max. 14 days per year

Annual permit

* Making foods in a commercial kitchen allows products to be sold to a wider public audience (i.e. grocery stores, online sales, etc). Application process applies.



Temporary Food Markets

- Temporary food establishments operated in a fixed location in connection with a charitable or public event, farmers market, etc.
 - Presence/oversight of market manager
 - Vendors selling wholesome vegetables or prepackaged products
 - Limitation that no food preparation occur onsite



Temporary Food Markets: EHO Role

- EHO involvement depends on whether higher risk packaged foods are proposed.



Market Manager Responsibilities

- Provide event oversight, and meet other responsibilities as outlined in Section III of the Guidelines for Sale of Foods at Temporary Food Markets
- Maintain list of all vendors to be attending
- Determine which vendors sell only lower risk foods and which are proposing to sell higher risk foods.
- Require testing, adherence to approved products and/or imposed restrictions

Lower Risk Foods at Markets

- Home Preparation permitted, as per recommendations in the Guidelines.
- No application, but still need to consult with local Health Authority for approval
- Laboratory testing to confirm foods meet definition
 - maximum water activity (A_w) of 0.85, or
 - maximum pH of 4.6
- Lab test results to be retained on site by vendor and/or market manager
- Market managers play a role in food safety in ensuring vendors are selling what they have been approved to sell



Lower Risk Foods



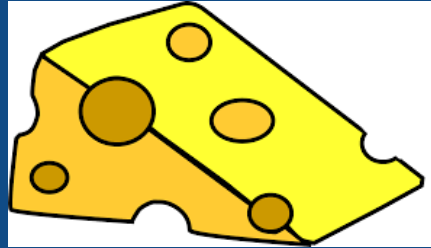
All lower risk foods except whole fresh fruits or vegetables should be prepackaged

Higher risk foods at Markets

- Sales limited to foods approved by the EHO
- Testing to be completed as required
- Preparation to occur in approved Food Premises
- All vendors to submit, along with their application, an effective food safety plan and complete product list.

Letter of Confirmation

Higher Risk Foods



Application for Sale of High Risk Food Form

BC Centre for Disease Control
As a agency of the Provincial Health Services Authority

Guideline for the Sale of Foods at Temporary Food Markets

Appendix IV - Application for Sale of Higher Risk Food at Temporary Food Markets

Application Date: _____	Applicant: _____
Mailing Address: _____	City/Postal Code _____
Phone (Day): _____	Phone (Cell): _____
Fax #: _____	E-mail: _____
Applicant's Signature: _____	

Name of Market / Event: _____ Date(s) of Event: _____
Location of Market / Event: _____ Business Hours: _____ to _____
NOTE: If selling at multiple markets - list all locations on separate page.

Market Manager: _____ Phone #: _____

Provide a complete list of your food products. List additional foods on separate page if more space needed

_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe your packaging method by checking the applicable boxes as noted below.

Plastic Wrap Bottle Pouch Vacu-packed Other _____

Have you previously received a Letter of Acceptance or Confirmation for the foods intended to be sold:
 No Yes *If yes, please provide a copy of the letter(s) with your application.*

For **EACH** food product intended to be sold at the temporary market, please include the following documents with your application form:

- a list of ingredients
- a brief description of the preparation and preservation method
- a sample of your product label
- for each food item, indicate location of processing/packaging (e.g. commercial establishment including address)
- if you have done quality assurance testing of your products, please provide a copy of your most recent lab reports where applied:
 - Bacteriology or pH or A_m

To be completed by EHO

Received by: _____
Date: _____
Objection: Yes No
If yes, attach reason(s).
Sign or mark with Health Authority stamp and return a copy of the reviewed application to the applicant.

**APPLICATION FORM IS DUE AT LEAST 30 DAYS PRIOR TO THE EVENT
AND SENT TO YOUR LOCAL HEALTH AUTHORITY**

NOTE – Applicants should plan for a 14-day processing turnaround time.

March 2016 14

Food Premises Operators as Market Vendors

- Do not require a Letter of Confirmation for processed packaged foods...BUT:
 - food safety plan for the Food Premises must cover
 - foods prepared for the market
 - safe transport and storage of food to, from, and during market and between market events.
 - copy of food safety plan to remain at the market
 - copy of permit/approval to remain at the market

Special Events



- Group of people coming together to watch, participate in, or experience something only occurring for a predetermined length of time, from a few hours to a few weeks.
 - NOT private events, where there is a defined guest list (i.e. weddings)
- May be associated with any celebration or occasion where public participation is invited or likely.
- May or may not be affiliated with temporary market.
- Food preparation is permitted onsite (FPR applies)

Limits on Special Events

- ***Maximum number of days of operation***
 - no more than 14 days per calendar year (applicable to individual, group, or business)
- ***Attendance of a Special Event Applicant at a Temporary Food Market***
 - opportunity to test business plan - 14 days = absolute maximum
- ***Special Events for Invited Guests Only are exempt...***
 - Where food is prepared/served by volunteers to members of their own organization or invited guests ONLY (i.e. Union BBQ, staff party.)
 - Exemption *does not* cover events for clientele.

Menu Limitations at Special Events

- EHO discretion applies.
- Cooking and serving of raw protein *may* be permitted, depending on
 - extent of preparation and type of foods being handled
 - Ability of the applicant to comply with Food Premises Regulation (FPR)
 - Ensure that set up is appropriate for the extent of food preparation

Application must be submitted 14 days in advance of event

Special Event Application Process

What is the purpose of the application form?

- To protect you and your customers
- To outline your temporary food service plan to ensure food is prepared, stored and served in a safe manner.

Where can a copy of the form be found?

- Local EHO office , Island Health website

How do I fill out the form?

- Finalize your menu items. What amenities would you need to serve your food? How will your space be set up to ensure no cross contamination, no other sources of contamination? Handwashing necessities are available? Source of water for cooking and cleaning?


Where do I send my completed application?

- Event coordinator - the coordinator has a role to provide list of participants and ensure application completed and submitted in timely manner to the local EHO

What to do with the approved application?

- The “approval to operate” or permit must be displayed in a conspicuous place during the event.

Temporary Event Application Form



APPLICATION TO OPERATE
 A TEMPORARY FOOD PREMISES *(for SPECIAL EVENT FOOD SERVICE)*

- Submit completed application to the local Health Protection Office **AT LEAST 14 DAYS PRIOR TO EVENT**.
- Refer to TEMPORARY FOOD SERVICE INFORMATION sheet, and retain for reference with a copy of your application.
- **Incomplete or late applications may not be processed.** Any questions- [contact your local EHO](#).
- **No food service is to occur without a permit or written approval from an Environmental Health Officer.**

DATE(S) OF FOOD SERVICE:		TIME OF FOOD SERVICE:	
EVENT INFORMATION			
NAME OF EVENT:		LOCATION OF EVENT (e.g. NAME OF PARK):	
EVENT PHYSICAL ADDRESS (STREET / CITY):			
NAME OF EVENT COORDINATOR: <input type="checkbox"/> N/A		PHONE NUMBER/ E-MAIL:	
APPLICANT INFORMATION			
APPLICANT NAME (INDIVIDUAL and ORGANIZATION, where applicable):		PHONE NUMBER:	EMAIL:
MAILING ADDRESS:			
STREET	CITY	POSTAL CODE	
FOOD PREMISES SET UP (check/complete all that apply)			
<input type="checkbox"/> INDOORS or <input type="checkbox"/> OUTDOORS			
<input type="checkbox"/> ONSITE KITCHEN <input type="checkbox"/> ONSITE KIOSK <input type="checkbox"/> OFF SITE PREP KITCHEN- Specify:		CONTACT FOR KITCHEN/KIOSK: PHONE NUMBER:	
<input type="checkbox"/> SELF-CONTAINED MOBILE UNIT		<input type="checkbox"/> No Permit/Approval	
<input type="checkbox"/> Permit/Approval from a BC Health Authority ** Attach copy of current permit/approval**			
FOOD PREPARATION AND SERVICE			
List Foods & Beverages	List Supplier / Producer	Where is the item Prepared?	Item is served:
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold
		<input type="checkbox"/> At event <input type="checkbox"/> In permitted Kitchen	<input type="checkbox"/> Hot <input type="checkbox"/> Cold

Mobile Food Premises


- BCCDC Mobile Food Premises Guideline:
 - Any vehicle, cart or other self-contained movable structure from which food intended for public consumption is prepared/processed and/or served/provided to the public with or without charge.
 - No limit to days of operation in a calendar year
 - Apply for a permit with local Health Authority
 - Annual fee applies

Mobile Food Premises



Mobile Application Form

APPLICATION FOR FOOD FACILITY



COMPLETE ONE APPLICATION **IN FULL** FOR EACH TYPE OF SERVICE IN YOUR FACILITY -PLEASE PRINT WHERE POSSIBLE

The personal information collected relates directly to and is necessary for program operation per Section 26 of the Freedom of Information and Protection of Privacy Act. Information that appears on a license may be disclosed per Section 22(6)(1) of the Act, as it is not considered an unreasonable invasion of personal privacy.

RETURN FORM TO NEAREST HPES OFFICE: <https://www.islandhealth.ca/our-locations/health-protection-environmental-services-locations>

STATUS	NEW <input type="checkbox"/> New Facility <input type="checkbox"/> New Location <input type="checkbox"/> New Ownership		AMENDMENT <input type="checkbox"/> Change to Facility	
FOOD FACILITY	FACILITY NAME _____			
	FACILITY LOCATION ADDRESS _____			
	CITY _____		POSTAL CODE _____	
	TELEPHONE _____	FAX _____	EMAIL _____	
	MAILING ADDRESS IF DIFFERENT FROM ABOVE _____			
SEND INVOICE TO <input type="checkbox"/> SAME AS FACILITY <input type="checkbox"/> SAME AS MAILING OR _____				
FACILITY'S REGISTERED OWNER(S) OR LEASEE(S)	REGISTERED OWNER/LEASEE NAME _____			
	MAILING ADDRESS _____			
	CITY _____		PROV _____ POSTAL CODE _____	
	TELEPHONE _____	FAX _____	ALTERNATE PHONE _____	
	EMAIL _____			
FACILITY MANAGER / CONTACT	CONTACT NAME _____ POSITION _____			
	ADDRESS _____ POSTAL CODE _____			
	TELEPHONE _____		FAX _____ EMAIL _____	
	IF THE FACILITY IS PART OF A MALL, NAME OF MALL _____			
BUILDING INFORMATION	BUILDING NAME (IF DIFFERENT FROM FACILITY) _____			
	ADDRESS _____ CITY _____ POSTAL CODE _____			
OWNER OF BUILDING OR COMPLEX	REGISTERED NAME _____			
	MAILING ADDRESS _____			
	CITY _____		PROV _____ POSTAL CODE _____	
	CONTACT/AGENT NAME _____		POSITION _____	
	TELEPHONE _____		FAX _____ EMAIL _____	
FACILITY SERVICING	WATER SOURCE <input type="checkbox"/> COMMUNITY (SYSTEM NAME) _____ <input type="checkbox"/> WELL <input type="checkbox"/> OTHER SPECIFY _____			
	SEWAGE DISPOSAL <input type="checkbox"/> SEWER <input type="checkbox"/> ON-SITE SEWAGE DISPOSAL			
OPERATIONAL MONTHS	<input type="checkbox"/> JAN <input type="checkbox"/> FEB <input type="checkbox"/> MAR <input type="checkbox"/> APR <input type="checkbox"/> MAY <input type="checkbox"/> JUN <input type="checkbox"/> JUL <input type="checkbox"/> AUG <input type="checkbox"/> SEP <input type="checkbox"/> OCT <input type="checkbox"/> NOV <input type="checkbox"/> DEC			
	<input type="checkbox"/> ALL YEAR			
WILL YOUR OPERATION PREPARE FOOD/DRINK ON SITE FOR IMMEDIATE CONSUMPTION? <input type="checkbox"/> YES <input type="checkbox"/> NO				
WILL YOUR OPERATION PREPARE FOOD OFF SITE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" - LOCATION _____				
WILL YOUR OPERATION PROVIDE SEATING FOR CONSUMPTION OF PREPARED FOOD? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" - TOTAL SEATING CAPACITY _____				
WILL YOUR OPERATION BE MOBILE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" - TYPE <input type="checkbox"/> CART <input type="checkbox"/> VEHICLE <input type="checkbox"/> VESSEL				
WHAT TYPE OF FOOD PREMISES WILL YOU BE OPERATING?				
<input type="checkbox"/> RESTAURANT <input type="checkbox"/> TAKE OUT <input type="checkbox"/> MOBILE <input type="checkbox"/> CONCESSION <input type="checkbox"/> STORE				
<input type="checkbox"/> FISH PROCESSOR <input type="checkbox"/> LOUNGE/BAR <input type="checkbox"/> CARE FACILITY <input type="checkbox"/> KITCHEN				
<input type="checkbox"/> CATERER <input type="checkbox"/> OTHER _____				
WILL THE FACILITY BE RENTED OR LEASED TO OTHERS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" ENSURE THEY HAVE CONTACTED OUR OFFICE FOR NECESSARY APPROVAL				
WILL YOUR OPERATION CONDUCT BUSINESS MORE THAN 14 DAYS IN A 12 MONTH PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO				
WILL YOUR OPERATION SELL TOBACCO PRODUCTS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" <input type="checkbox"/> VENDING MACHINE <input type="checkbox"/> OVER THE COUNTER				
WILL YOUR OPERATION PROVIDE AN OUTSIDE SMOKING AREA? <input type="checkbox"/> YES <input type="checkbox"/> NO				
VERIFICATION	APPLICANT SIGNATURE _____ DATE DD / MM / YYYY _____			
	I hereby certify that the information set out by me in this application is true and correct to the best of my knowledge and belief. I acknowledge that it is an offence to supply false or inaccurate information on this application.			
	PRINT NAME _____		PROPOSED OPENING DATE _____	
	PHONE _____	ADDRESS _____	POSITION _____	PLANS INCLUDED <input type="checkbox"/> YES <input type="checkbox"/> NO
FOR OFFICIAL USE ONLY	APPLICATION PACKAGE REC'D	DATE	INITIALS	FACILITY TYPE
	PLANS APPROVED BY EHO			FACILITY #
	FACILITY APPROVED BY EHO			AMOUNT PAID
	POSTED TO HEALTHSPACE			METHOD OF PAYMENT
	OPERATING PERMIT SENT			RECEIPT #

HPESFORMSAPPLICATIONFOR FOOD FACILITY - June 2019 WHITE COPY - HEALTH AUTHORITY YELLOW COPY - APPLICANT PINK COPY - TOBACCO

Mobile Unit Classification and Requirements

Table 1: Summary of Requirements Based on Type of Mobile Unit

Mobile Unit Type	Food Handling Examples	Permit or Approval	Number of Ware Washing Sinks	Handwashing Sink	Potable Water Tank Capacity (litres)	Food Safety Plan and Sanitation Plan	Food Handler Training
A	Units that dispense prepackaged foods or prepare and dispense unpackaged, nonpotentially hazardous foods, such as popcorn, cotton candy, mini-donuts, nachos OR units that dispense unpackaged hot and cold foods and beverages, such as pizza	Approval Only	2 (units that dispense pre-packaged foods do not require sinks)	Recommended	36 L (units that dispense pre-packaged foods do not require water)	May be Required (units that dispense prepackaged foods do not require a Food Safety Plan or Sanitation Plan)	Recommended
B	Units that prepare and dispense non-potentially hazardous foods and potentially hazardous foods such as hot dogs, smokies, precooked hamburgers, sandwiches, soups, chilis, and specialty coffee EXCLUDING cooking raw proteins (e.g., meat)	Permit	2	Required	36 L	Required	FOODSAFE or equivalent
C	Units that prepare and dispense any type of food and any level of food handling, including products with raw proteins, donairs, curries, stir-fry	Permit	3	Required	130 L	Required	FOODSAFE or equivalent

FOOD SAFE AND MARKET SAFE

Food Safe

- Temporary Event permit holders *must* have Food Safe Level 1
- Vendors of higher risk foods is a *must*
- Vendors of Lower risk foods is a *should*
 - Alternative is to have Market Safe
- FOODSAFE certificates expire after 5 years.
 - See www.foodsafe.ca for course information
 - Online, in-person, or by correspondence
 - Refresher course (online only, 1-3 hours)

Market Safe

- Intended for those who make, bake or grow products to sell at temporary food markets.
- Not equivalent to FOODSAFE Level 1
- Not a legal requirement
 - VIHA recommends it for vendors of lower risk foods and market managers who do not have FOODSAFE
 - some market managers require it of all vendors

Outhouses



- Not allowed under the SSR
- SSR requires all domestic sewage generating from a structure to be discharged into a municipal sewer, sewerage system, or holding tank.
- An outhouse could be permitted as a holding tank through the application process by an EHO.

Grey Water

HEALTH INFORMATION:
GREY WATER RE-USE
SEPTEMBER 2017
HEALTH PROTECTION BRANCH
MINISTRY OF HEALTH



- Considered domestic sewage and must be discharged into a municipal sewer, sewerage system, or holding tank, unless another enactment (provincial regulation or local bylaw) allows domestic sewage to be discharged onto the ground or water.

Rainwater Catchment Regulations



- For single-family residences (exempt) - we have no information.
- For a water supply system (under the DWPA/DWPR) the water supplier must obtain the necessary approvals/permits from Island Health to construct a water supply system.
- There are treatment objectives for potable rainwater harvesting

Ministry of Health Documents

GREYWATER REUSE

- [https://www2.gov.bc.ca/assets/gov/environment/waste-management/sewage/onsite-sewerage-systems/what is grey water.pdf](https://www2.gov.bc.ca/assets/gov/environment/waste-management/sewage/onsite-sewerage-systems/what_is_grey_water.pdf)

RAINWATER CATCHMENT

- https://www2.gov.bc.ca/assets/gov/environment/air-land-water/water/waterquality/how-drinking-water-is-protected-in-bc/dwog_part_b_-_14_rainwater_harvested_for_potable_use.pdf

Questions?

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