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JOHN Q. HAMM
COMMISSIONER

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ADMINISTRATIVE REGULATION
NUMBER

701

OPR: HEALTH SERVICES

FOOD SERVICE ADMINISTRATION

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes policy, organization, responsibility, and procedures for food service administration throughout the ADOC.

II. POLICY

- A. It is the policy of the ADOC to ensure each inmate is provided a wholesome and nutritious diet, which meets national standards set forth in the Recommended Dietary Allowances (RDA).
- B. It is the policy of the Office of Health Services Division (OHS) and Nutrition Services, to perform routine audits to ensure meals are prepared under sanitary conditions and served in an appetizing manner.

III. DEFINITIONS AND ACRONYMS

- A. **Facility**: An ADOC prison, community-based facility/work center, work camp, or other designated housing unit where ADOC inmates reside.
- B. **Food Service Leadership**: Food Service Supervisor (FSS), Food Service Manager I (FSM I), and Food Service Manager II (FSM II).
- C. **Master Menu**: A master menu is prepared under the supervision of the Deputy Commissioner of the OHS or their Designee. Verification and certification of the master menu will be the responsibility of the Director of Nutrition Services, who is a Registered Dietitian. The master menu provides all recommended daily dietary allowances required by the Food and Nutrition Board, National Academy

of Science. The master menu is designed to be served at all facilities, providing uniformity in items served to each inmate throughout the state.

- D. **Religious Meals**: Refer to AR 462.
- E. **Sack (Packed) Lunch**: A nutritionally adequate substitution, meeting the definition of a substantial meal, which is to provide three or more menu items at one time, one of which includes a high-quality protein such as meat, fish, eggs, peanut butter, or cheese. The meal should represent no less than 20% of the day's total nutritional requirements.
- F. **Therapeutic Diet**: A diet which includes therapeutic modifications used for individuals who require dietary/nutrient adaptations to treat conditions such as Diabetes, Kidney Disease, Cancer, etc. The therapeutic diets provided by ADOC are referred to as the: Wellness and Enhanced diets. Specific details of these diets are outlined in the OHS Diet Manual.
- G. **Vegetarian Menu**: A version of the master menu which excludes meat, Poultry, game, fish, and shellfish. ADOC follows Lacto-ovo vegetarianism guidelines which allow eggs and dairy products.

IV. **RESPONSIBILITIES**

- A. The Deputy Commissioner of the Office of Health Services is responsible for:
 - 1. Initiating Administrative Regulations, directives, policies, and procedures as relative to ADOC and the Food Service Department.
 - 2. Selecting, directing, and supervising the ADOC Director of Nutrition Services.
- B. The Director of Nutrition Services and/or Registered Dietitian is responsible for:
 - 1. Assisting in the creation and initiation of Administrative Regulations, directives, policies, and procedures as relative to ADOC and the Food Service Department.
 - 2. Develop and update the Master Menu in accordance with national guideline standards.
 - 3. When requested, assist a facility Warden and FSM with the interview and selection of new Food Service supervisors and managers.
 - 4. Provide consultation to Medical Providers regarding nutrition related concerns upon request.

- C. The Food Service Specialist is responsible for:
1. Conducting audits of facility kitchens to ensure policies and procedures are being followed.
 2. When requested, assist a facility Warden and FSM with the interview and selection of new Food Service supervisors and managers.
 3. Act as liaison for the Food Service Department with other departments within ADOC to ensure kitchens are staffed and maintained to promote safety and sanitation.
- D. The Food Service Manager II (FSM II), is assigned to facilities with a population > 500; responsible for:
1. Purchasing of products used in Food Service.
 2. Overseeing FSM I, FSS and Inmate Personnel to ensure policies and procedures followed.
 3. Ensure foods are prepared under safe and sanitary conditions.
 4. Work with Medical Services to ensure diets are implemented and followed as ordered.
- E. The Food Service Manager I (FSM I) is responsible for:
1. Performing duties of FSM II in the absence of an FSM II.
 2. Maintain order during meal preparation/service.
 3. Ensure foods are prepared under safe and sanitary conditions.
 4. Work with Medical Services to ensure diets are implemented and followed as ordered.
- F. The Food Service Supervisor (FSS) is responsible for:
1. Performing task as assigned under the supervision of an FSM II or FSM I.
 2. Maintain order during meal preparation/service.
- G. The Inmate Food Service Personnel are responsible for:
- Preparation of food for all meals under the direction and supervision of the FSM I/FSM II/FSS and/or Officer assigned to Food Service.

V. PROCEDURES

A. General Guidelines:

Normally, inmates shall be provided three meals per day, of which, at least two are hot meals, at a regular schedule during each 24-hour period with no more than 14 hours between evening meals and breakfast. However, two meals, which provide basic nutritional goals, may be allowed based on weekend/holiday food service demands.

B. Religious Meals:

1. The Vegetarian Menu is planned with consideration to religious preferences and will serve as the ADOC menu for those requesting a diet that meets restrictions associated with religious beliefs. The OHS reserves future rights to consult with religious services and amend this menu as needed related to product supply and demand.
2. An order from the Medical Provider is not necessary for the inmate to receive the Vegetarian Menu. If an inmate chooses to elect this diet for religious purposes, the inmate is to notify the Chaplain or designee of their wish to change their diet. The Chaplain/designee will provide the inmate with the designated form titled: Vegetarian/Religious Diet Declaration. The Chaplain/designee should maintain the original copy for their records, provide pink copy to Inmate, and yellow copy to Food Service Management. This form will act as the inmate's diet order/card to be presented in the meal service tray line.

C. Master Menu:

1. The 28-day-cycle master menu will be used at all facility's within ADOC. The master menu will be reviewed annually by the ADOC Director of Nutrition Services, the Food Service Specialist, and a representative group of the Food Service Managers. This review will be documented and maintained by the Food Service Specialist. Any additions or deletions to the master menu will be based upon nutritional value, equipment capabilities, and staff-determined inmate preferences. The master menu will also be reviewed quarterly by the Food Service Specialist to verify adherence to established basic daily servings and documented on ADOC Form 701-A, *FSS/FSM Worksheet*.
2. The master menu will be adhered to with exceptions only permitted after coordination with the Food Service Specialist. Fresh vegetables grown by facility's may be used as part of the lunch and supper meals. FSS/FSM will provide the Food Service Specialist with quantities and dates of fresh

vegetables received using copies of delivery invoices and ADOC Form 701-A, *FSS/FSM Worksheet*.

3. All inmates and staff shall consume meals prepared and served in accordance with the master menu in effect. Each staff member served at any facility will pay for those meals regardless of rank/status.

D. Sack (Packed) Lunch:

This is intended for inmates going offsite. Sack Lunches are not to be ordered in addition to a meal tray as part of a Therapeutic Diet. The exception to this being individual medical circumstances in which the medical provider has consulted with the Director of Nutrition Services and the order has been deemed necessary.

E. Therapeutic Diet:

A therapeutic diet order should be in writing, signed by the responsible medical provider, and furnished to the Food Service Supervisor or Manager. Therapeutic diets must be renewed every twelve months, if still indicated.

F. Sanitation and Maintenance:

1. The ADOC Food Service Equipment Preventative Maintenance Manual contains clear, concise instructions for the operation and cleaning of the physical plant, equipment, and utensils. All food service/maintenance personnel will become familiar with reference document.
2. The FSM will prepare and document a schedule for regular periodic cleaning of the physical plant, equipment, and utensils.
3. The FSS or FSM will conduct a weekly inspection of all food service areas including dining/food service areas and equipment. Results will be documented in the designated log. Daily refrigeration, water, and other critical control point temperatures will be checked and logged accordingly by on-duty food service personnel. FSS or FSM shall provide the Food Service Specialist with an updated/on-going list of damaged or inoperable equipment. This can be done with the provision of the designated equipment log.
4. FSM or designee will prepare a schedule of periodic preventive maintenance of the physical plant and equipment developed in conjunction with maintenance personnel. The preventive maintenance program shall include as a minimum: inspection, lubrication, replacement of parts as necessary, and any recommendations for extended equipment life as suggested by manufacturers' instructions.

5. Food Service personnel shall meet standards set forth in Alabama Administrative Code Rules 420-3-22 . All inmates assigned as Food Service personnel will be checked by the duty supervisor/manager prior to the start of each shift to ensure standards are met.

G. Security:

1. The FSS and/or FSM shall assist security personnel in scheduling supervision of inmates during meal hours. Minimal direct supervision by Food Service staff members is required.
2. Supervisory personnel are responsible for assuring that inmates working on the serving line show no favoritism to other inmates concerning portion control and are neat and clean in serving.

H. Forms:

All forms shall be filed in the office of the Food Service Specialist for a period of three years before discarding:

VI. DISPOSITION

Any forms used will be disposed of and retained according to the Departmental Records Disposition Authority (RDA).

VII. ANNEXES AND FORMS

The following annexes and forms are designed to assist the Food Service Specialist with production management in the Food Service Department of all facilities.


- A. Annex A, *Plan "A" Food Service Facilities Available to Prepare Food*
- B. Annex B, *Plan "B" Food Service Facilities Damaged, Preventing Food Preparation*
- C. Annex C, *Plan "C" Inmate Workforce Shortage*
- D. Annex D, *Inmate Feeding Facility Back-up Table*
- E. ADOC Form 701-A *FSS/FSM Worksheet*
- F. ADOC Form 701-B, *Inmate Lunch Request*
- G. ADOC Form 701-C, *Facility Meal Evaluation Report*
- H. ADOC Form 701-D, *Daily/Weekly Meal Report*

VIII. SUPERSEDES

This Administrative Regulation supersedes AR 701, *Food Service Administration*, dated March 19, 2014, and any changes.

IX. PERFORMANCE

- A. Code of Alabama 1975 §§ 14-1-1.1
- B. American Correctional Association Standards (ACA): 1. ACA 5-ACI-5C-01, 5-ACI-5C-03, 5-ACI-5C-04, 5-ACI-5C-05, 5-ACI-5C-06, 5-ACI-5C-07, 5-ACI-5C-11



John Q. Hamm
Commissioner

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ALABAMA DEPARTMENT OF CORRECTIONS
FOOD SERVICE FACILITIES
DAMAGED, PREVENTING FOOD PREPARATION



P L A N “B “	
1.	The Food Service Specialist will contact the back-up facility and provide instructions as to the number of meals required. (See Facility Back-Up Table).
2.	All meals will be served in disposable containers during disturbances or emergencies.
3.	Lunch meals will be either cold cuts or sandwiches, as directed by the Food Service Specialist.
4.	Food will be transported in food transport containers by the back-up facility.
5.	Food Service staff assigned to the facility having the emergency will be assigned, if required, to the back-up facility, if deemed necessary by the Warden, Food Service Specialist, or the Deputy Commissioner of Health Services
6.	Food orders for the facility having the emergency will be delivered to the back-up facility and charged to the facility experiencing the emergency.
7.	If disposable containers are needed and not available in facility's or the Facility Services Division's warehouse, they will be purchased using emergency procedures by the Facility Service Division.
8.	At least one (1) FSM II or designee from another facility will be available at the back-up facility to assist with the operation.
9.	Upon resuming operations at the affected facility, the master menu meals for the day will be prepared.
10.	Any food, (raw materials), at the back-up facility previously issued for the affected facility will be transported to that facility as soon as possible, after normal operations are resumed.

NOTES:

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ALABAMA DEPARTMENT OF CORRECTIONS

INMATE FEEDING FACILITY BACK-UP TABLE



BACK-UP FACILITY

Holman CF and Fountain Annex
Fountain CF and Fountain Annex
Fountain CF and Holman CF
Easterling CF and Bullock CF
Ventress CF and Bullock CF
Ventress CF and Easterling CF
Staton CF and Elmore CF
Frank Lee WR and Elmore CF
Staton CF and Frank Lee Work Release
Kilby CF, Red Eagle WC and Staton CF
Tutwiler CF and Montgomery WF
St. Clair CF and North Alabama WR
Kilby CF
St. Clair CF and Birmingham WR
Donaldson CF and Birmingham WR
Donaldson CF and St. Clair CF
Limestone CF
Hamilton A&I
Hamilton WR/CWC
Donaldson CF
Childersburg WR/CWC
Alex City WR/CWC
Mobile WR
Loxley WR
Easterling CF
Fountain CF and Fountain Annex

SUPPORT FACILITY

Fountain CF
Holman CF
Fountain Annex
Ventress CF
Easterling CF
Bullock CF
Frank Lee WR
Staton CF
Elmore CF
Tutwiler CF
Kilby CF
Limestone CF
Red Eagle WC
Donaldson CF
St. Clair CF
Birmingham WR
North AL WR
Hamilton WR/CWC
Hamilton A&I
Bibb County CF
Alex City WR/CWC
Childersburg WR/CWC
Loxley WR
Mobile WR
Elba WR
Camden WR

FACILITY:		<i>MEALS</i>		NUMBER STAFF MEALS SERVED		NUMBER VISITORS MEALS			TOTAL NUMBER SERVED
DATE:		BREAKFAST							
The use of this form is MANDATORY and		DINNER							
Required to be completed at the end of each meal.		SUPPER							
MENU (Including leftovers from previous meals to be served)		PORTIONS					<u>LEFTOVERS</u>		COMMENTS
	PERSON ASSIGNED	Number	Portion	RECIPE	SPECIAL INSTRUCTIONS TO COOKS	COOKING TIME TO START	Amount To Be Used	Amount To Be Discarded	
		to Prepare	Size	NUMBER					
BREAKFAST									
DINNER									
SUPPER									
LUNCHES		LUNCHES ISSUED			REMARKS				
Number to Prepare:		Squad Number	Number Issued	Pick Up Time					
Made up by:									
Menu									
					<u>DISTRIBUTION</u>				
					Original - Forward to FSS/FSM responsible for your Facility/ Facility at end of workday each Tuesday.				Signature of FSS/FSM
					Carbon Copy - Retain for Facility files.				

MENU

ADOC Form 701-A
02/2025

ALABAMA DEPARTMENT OF CORRECTIONS
INMATE LUNCH REQUEST



TO: FSS/FSM

FROM: _____

Subject: Request for Bag Lunches and/or Special Meals as indicated:

1. It is requested that the following inmates be provided bag lunches/special meals as indicated:

	INMATE NAME		INMATE NAME
1.		30.	
2.		31.	
3.		32.	
4.		33.	
5.		34.	
6.		35.	
7.		36.	
8.		37.	
9.		38.	
10.		39.	
11.		40.	
12.		41.	
13.		42.	
14.		43.	
15.		44.	
16.		45.	
17.		46.	
18.		47.	
19.		48.	
20.		49.	
21.		50.	
22.		51.	
23.		52.	
24.		53.	
25.		54.	
26.		55.	
27.		56.	
28.		57.	
29.		58.	

ALABAMA DEPARTMENT OF CORRECTIONS

INMATE LUNCH REQUEST



2. The above listed inmates are entitled to subsist at the expense of the State of Alabama. Personnel is not authorized to subsist at State expense and will be charged for their meal consumption.

	EMPLOYEE NAME		EMPLOYEE NAME
1.		11.	
2.		12.	
3.		13.	
4.		14.	
5.		15.	
6.		16.	
7.		17.	
8.		18.	
9.		19.	
10.		20.	

3. The above requested meals will be consumed as:

(Check one) Breakfast _____ Dinner _____ Supper _____

4. PICK-UP DATE: _____ TIME: _____

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Acknowledgement for Receipt of Meals

1. I certify that I have received _____ Meal(s) on this date _____.

SIGNATURE _____

DISTRIBUTION	
Original:	Forward to FSS/FSM for your Facility at end of workday each Tuesday.
Carbon Copy:	Retain for Facility files.

ALABAMA DEPARTMENT OF CORRECTIONS

FACILITY MEAL EVALUATION REPORT



Employees who eat in the Facility Dining Hall for the purpose of evaluating a meal, shall not be charged the employee meal fee, but must **complete this form in duplicate.**

U-UNSATISFACTORY

S-SATISFACTORY

G-GOOD

E-EXCELLENT

FACILITY:

DATE: _____

TIME: _____

MEAL CONSUMED:

BREAKFAST

LUNCH

SUPPER

PREPARATION:

ADEQUACY OF PORTIONS:

U S G E

U S G E

APPEARANCE:

VARIETY:

U S G E

U S G E

FLAVOR:

EYE APPEAL:

U S G E

U S G E

HOT FOOD SERVED:

HOT

COLD

COLD FOOD SERVED:

HOT

COLD

APPEARANCE OF INMATE FOOD
SERVICE PERSONNEL:

ATTITUDE OF INMATE FOOD
SERVICE PERSONNEL:

SIGNATURE OF EVALUATOR:

JOB TITLE:

REMARKS (USE REVERSE SIDE IF NECESSARY)

ORIGINAL:

Will be submitted to the Central Food Services Administration office along with the FSS/FSM Daily/Weekly Meal report.

COPY:

Will be kept on file in the facility Food Service Manager's office for information and appropriate action, as necessary.

FSS/FSM SIGNATURE: _____

ALABAMA DEPARTMENT OF CORRECTIONS

DAILY/WEEKLY MEAL REPORT



TO: Foodservice Specialist, Office of Health Services

FROM: _____

(Facility)

PERIOD: _____

(Saturday-Friday)

TYPE PERSONNEL		SAT	SUN	MON	TUES	WED	THUR	FRI	DAILY TOTALS
TOTAL MEALS	BREAKFAST								
FED INMATE	DINNER								
PERSONNEL	SUPPER								

TOTAL MEALS	BREAKFAST								
FED "ON DUTY"	DINNER								
EMPLOYEES	SUPPER								

OTHERS:	BREAKFAST								
(EXPLAIN)	DINNER								
	SUPPER								

*TOTAL OF	BREAKFAST								
CASH MEALS	DINNER								
	SUPPER								

WEEKLY TOTAL	BREAKFAST		*This form is to be forwarded to Central Warehouse by each Tuesday (end of workday). Signatures will be obtained for meals sold on reverse of this form. Cash collected will be turned in to the appropriate official and receipted for in format provided.
OF MEALS FED	DINNER		
	SUPPER		

ADOC Form 701-D
02-2025

I certify that the totals contained herein are correct.

SIGNATURE: _____