

Self Assessment Checklist

Facility _____ Date(s) _____

Completed by: _____

✓	PROCEDURES	Needs Action	CORRECTIVE ACTIONS: (Who, What, How, & When)	Date Completed
<input checked="" type="checkbox"/>	Example- Cooling	✓	<i>Correct procedure not being followed for cooling soups. Bill will retrain employees on proper procedures. Will follow-up next time soups are cooled.</i>	2/13
	Employee Training			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Certified Food Protection Manager on staff 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ All new employees have cards 			
	Employee Health			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Employees observed to assure not working ill 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Employees know foodborne illness symptoms/conditions 			
<input type="checkbox"/>	Check that records are current for: <ul style="list-style-type: none"> ▪ Applicant and Food Employee Reporting Interview Form ▪ Food Employee Reporting Agreement ▪ Record of Staff Absences due to Illness 			
	Handwashing			
<input type="checkbox"/>	Observe employee handwashing practices Handwash sinks:			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Soap & paper towels provided 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Accessible & used for no other purpose 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Water temp & pressure adequate 			
	No Bare Hand Contact w/RTE			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employee handling of RTE foods 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Utensils/tissues/single use gloves used w/ RTE foods 			
	Source			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Review products for approved source/labeling 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Review records: shellfish/raw seafood 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ _____ 			
	Receiving and Storage			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Products checked for temp, contamination & package damage at receiving 		List item / temp	
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Meat, poultry & raw foods stored below cooked & RTE foods 			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Raw foods segregated from each other 			
	Cleaning & Sanitizing			

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<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employee cleaning & sanitizing practices ▪ Food contact surfaces cleaned & sanitized at required frequency ▪ Food contact surfaces clean & sanitized between different raw foods & between raw & RTE ▪ Dishwashing equipment properly operated & maintained ▪ Test kits provided/used 			
Cooking				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employees for correct temping procedures ▪ Observe thermometer calibration/calibrate thermometers ▪ Equipment operating properly to maintain temperatures ▪ Food cooked to proper time and temp 		List item/final temp	
Cooling				
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Spot check cooling procedures for each PHF food item that is cooled 		List item/final temp	
Reheating for Hot-Holding				
<input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employees for correct temping procedures ▪ Spot check reheating procedures and temps for each food item 		List item /final temp	
Hot Holding				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employees for correct temping procedures ▪ Equipment maintaining product temp 		List item / temp	
Cold Holding				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe employee procedures for checking product temp ▪ Equipment maintaining product temp 		List item / temp	
Consumer Advisory				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe placement of consumer advisories. ▪ Menu products reviewed, any new foods needing a consumer advisory added 			
Time as a Public Health Control				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Food appropriately marked ▪ Marked food discarded, consumed or used within 4 hours 			
Donated Foods				
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Observe receiving procedures & review 			

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<input type="checkbox"/> <input type="checkbox"/>	records <ul style="list-style-type: none"> ▪ Observe processing of donated foods ▪ Donated foods stored separately <input type="checkbox"/> _____ 			
	Highly Susceptible Populations			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ No restricted foods on purchasing records & menus <input type="checkbox"/> _____ 			
	Protection From Contamination			
<input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ RTE foods protected during preparation ▪ RTE segregated during display & service 			
	Thawing			
<input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Food thawed under refrigeration, running cool water, microwave, or part of continuous cooking process 			
	Curing, Smoking, Reduced Oxygen Packing, Acidifying, Dehydrating, and Thermally Processed Low-Acid Food			
<input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ HACCP plan is current for the process ▪ HACCP plan is being followed 			

✓	Good Retail Practices	Needs Action	COMMENTS/CORRECTIVE ACTIONS (Who, What, How & When)	Date Completed
	Personal Cleanliness			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Observe food workers for: <ul style="list-style-type: none"> ▪ Clean outer garments & aprons ▪ Hair restraints worn ▪ No jewelry worn that could fall into food ▪ Single use gloves worn over artificial fingernails 			
	Toilet Facilities			
<input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Restrooms & fixtures clean & well maintained ▪ Paper towels, soap & toilet paper provided 			
	Insect, Rodent and Animal Control			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ No evidence of rodents/insects ▪ All outer openings protected ▪ No unauthorized animals allowed 			
	Pesticide/Toxic Chemicals properly used/stored			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<ul style="list-style-type: none"> ▪ Used according to label directions ▪ In-use containers labeled & used at proper concentrations ▪ Stored away from food & food contact utensils 			

	Plumbing			
<input type="checkbox"/>	▪ Hot & cold running water under pressure & available at all sinks			
<input type="checkbox"/>	▪ No cross-connections / back flow (check utility sinks & hoses)			
	Garbage – refuse disposal			
<input type="checkbox"/>	▪ Dumpsters covered & storage areas clean			
<input type="checkbox"/>	▪ In-use containers cleaned & emptied			
	Physical Facilities			
<input type="checkbox"/>	▪ Walls, floors and ceilings maintained			
<input type="checkbox"/>	▪ Food contact surfaces maintained			
<input type="checkbox"/>	▪ Lighting & ventilation adequate & maintained			
<input type="checkbox"/>	▪ Premises maintained free of litter			