

Management Checklist

Date _____

Name _____

A. Certified Food Protection Manager		In	Out	N/O	N/A	Corrective actions
1	Have a Minnesota Certified Food Protection Manager. Current state certificate posted.					
2	Person in Charge on site at all times.					
B. Handwashing and personal hygiene		In	Out	N/O	N/A	Corrective actions
3	Employee illness log filled in.					
4	Employees with vomiting or diarrhea are not allowed to work.					
5	Employees follow proper hand washing procedures (20 seconds). Hands washed before putting on gloves.					
6	Handwashing sinks are not blocked and have soap, towels, hot and cold water. Handwashing sign is posted.					
7	Procedure for cleanup of vomit and diarrhea.					
C. Protect from contamination		In	Out	N/O	N/A	Corrective actions
8	All items stored at least six inches off the floor.					
9	All food items stored covered or wrapped.					
10	Equipment is clean, maintained and in good repair.					
D. Time and temperature		In	Out	N/O	N/A	Corrective actions
11	Date mark food. Label food with the date prepared.					
12	Discard food dated over seven days old.					
13	Thermometers are calibrated and used.					
14	Cooling logs used.					
E. Approved source		In	Out	N/O	N/A	Corrective actions
15	Purchase food from approved sources.					
16	Supplier records maintained on site and readily available including shellstock tags and parasite destruction letters.					
17	Products inspected for signs of tampering, broken seals and powder or liquid residue.					

Management Checklist

Date _____

Name _____

F. Chemicals		In	Out	N/O	N/A	Corrective actions
18	Toxic chemicals properly used, labeled and stored away from food, equipment, utensils, linens, single service and single use items.					
G. Proper use of utensils and equipment		In	Out	N/O	N/A	Corrective actions
19	Utensils stored with handles to the user. Equipment properly stored.					
20	3-compartment sink set-up correctly. Dishwashing machine properly working and sanitizing.					
21	Correct sanitizer test kits on-site and are used.					
H. Physical facility		In	Out	N/O	N/A	Corrective actions
22	Floors, walls and ceilings properly cleaned and maintained. Aisles clear of obstruction.					
23	Integrated Pest Management program in place.					
24	Proper lighting for all areas of the facility.					
I. Refrigerator and freezers		In	Out	N/O	N/A	Corrective actions
25	A thermometer is in every cooler, walk-in and freezer.					
26	Coolers and walk-ins are 41° F or below.					
J. Management		In	Out	N/O	N/A	Corrective actions
27	In case of emergency, employees know whom to contact: 1. Person in charge 2. Police/Fire 3. Utilities 4. Local public Health Department (call 311 - after hours call 911).					
28	Employees trained on emergency procedures.					
29	Restricted areas marked "employees only."					
30	Unauthorized people kept out of food areas.					
31	Doors to the loading dock locked when not in use.					
32	Employees trained in food safety.					
33	Cameras and alarm operating in high-risk traffic areas.					

Portions of sections B, C, D, E, F, G and H are color coded to coordinate with the *Food Protection Self Audit Picture Guide & Poster Set* from the Advanced Practice Centers and the University of Minnesota Extension office. www.NACCHO.org/Publications