|  |  |
| --- | --- |
| Date:  | Area/Room #: |
| Inspected by: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Cleanliness** | **Yes** | **No** | **N/A** |
| 1. Work surfaces, shelves and floors clean and tidy
 |  |  |  |
| 1. Walls and ceiling clean and good condition
 |  |  |  |
| 1. Are surfaces easy to wash down
 |  |  |  |
| 1. Equipment, utensils, crockery cleaned thoroughly after use
 |  |  |  |
| 1. Ensure 3 step process of wash, rinse and sanitize is enforced
 |  |  |  |
| 1. Sinks and drains work properly (not blocked or smelling)
 |  |  |  |
| 1. Deep cleaning carried out regularly (documented)
 |  |  |  |
| 1. Goods delivery area is clean and free of clutter
 |  |  |  |

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| **Disposal of Waste** | **Yes** | **No** | **N/A** |
| 1. Waste food and other waste removed from kitchen area daily
 |  |  |  |
| 1. Waste cooking oil and fat disposed of correctly
 |  |  |  |
| 1. Broken glass and other sharps placed in a puncture proof container and clearly marked
 |  |  |  |
| 1. Refuse bins kept at a distance from the kitchen
 |  |  |  |
| 1. Refuse bins emptied regularly
 |  |  |  |
| 1. Carts and trolleys available for moving heavy or large loads
 |  |  |  |

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| **Food Hygiene** | **Yes** | **No** | **N/A** |
| 1. Staff trained in basic food hygiene practices (training records)
 |  |  |  |
| 1. Food deliveries attended to immediately
 |  |  |  |
| 1. Is raw and cooked food stored and prepared separately
 |  |  |  |
| 1. Refrigerators and freezers clean and working properly (freezer temp

-18C or less) |  |  |  |
| 1. Temperature of food display cabinets checked regularly (documented)
 |  |  |  |

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| **Pest Control** | **Yes** | **No** | **N/A** |
| 1. Kitchen server and storage areas regularly checked for pest infestation (insects, mice, etc.)
 |  |  |  |
| 1. Fly screens in place on all opening windows and vents
 |  |  |  |
| 1. Electric fly killer units all working and maintained regularly
 |  |  |  |

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| --- | --- | --- | --- |
| **Toilets and Washing Facilities** | **Yes** | **No** | **N/A** |
| 1. Staff only washrooms
 |  |  |  |
| 1. Washrooms clean and in working order
 |  |  |  |
| 1. Hot and cold running water, soap and towels (or other hand drying

equipment) provided in washrooms |  |  |  |
| 1. Lockers for staff clothing and bags
 |  |  |  |
| 1. Area away from the kitchen staff can eat, sit and drink
 |  |  |  |
| **Ventilation** | **Yes** | **No** | **N/A** |
| 1. Cooking smells removed from room
 |  |  |  |
| 1. Supply of fresh air with no drafts
 |  |  |  |
| 1. Mechanical extract ventilation systems checked and maintained annually
 |  |  |  |

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| **Lighting** | **Yes** | **No** | **N/A** |
| 1. Is the lighting bright enough over work surfaces and cookers
 |  |  |  |
| 1. Steps, stairs and storerooms properly lit
 |  |  |  |
| 1. Light shades and diffusers clean and in good condition
 |  |  |  |

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| **Slips, Trips and Manual Handling** | **Yes** | **No** | **N/A** |
| 1. Floors in good condition (no bumps, large cracks, tripping hazards)
 |  |  |  |
| 1. Floors free of obstructions (boxes, rubbish)
 |  |  |  |
| 1. Surfaces slip resistant
 |  |  |  |
| 1. Spills cleaned up immediately
 |  |  |  |
| 1. “Wet floor” signs used when floors are wet
 |  |  |  |
| 1. Staff wearing enclosed heel and toe slip resistant shoe
 |  |  |  |
| 1. Step stools available if needed and in good condition
 |  |  |  |
| 1. Have manual handling risks been assessed and controlled (training records)
 |  |  |  |

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| --- | --- | --- | --- |
| **Fire Precautions** | **Yes** | **No** | **N/A** |
| 1. Fire exits and escape routes free of obstructions
 |  |  |  |
| 1. Fire doors clearly marked
 |  |  |  |
| 1. Fire doors operate properly
 |  |  |  |
| 1. Fire extinguishers provided and tested annually
 |  |  |  |
| 1. Staff trained on fire procedures (training records)
 |  |  |  |
| 1. Fire alarms can be heard in all areas, including washrooms and storage rooms
 |  |  |  |
| 1. Staff participate in fire drills which include evacuations (training records)
 |  |  |  |

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| **Machinery and Equipment** | **Yes** | **No** | **N/A** |
| 1. Staff trained to use and clean food preparation equipment safely (training records)
 |  |  |  |
| 1. Machinery and equipment regularly inspected and maintained (document record)
 |  |  |  |
| 1. Procedure for garburators, cleaning, repair (training records/lock out- tag

out) |  |  |  |
| 1. Procedure for reporting faulty machinery or equipment and taking out of service
 |  |  |  |
| 1. Guards in place on machinery (slicers, mixers, mincers, etc.)
 |  |  |  |

| **Electrical Safety** | **Yes** | **No** | **N/A** |
| --- | --- | --- | --- |
| 1. Electrical sockets and equipment are placed away from sinks (water source) and hotplates
 |  |  |  |
| 1. Electrical equipment regularly inspected and tested
 |  |  |  |
| 1. Electrical equipment pass visual inspection
 |  |  |  |

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| **Visual Inspection of Equipment***Switch off and disconnect (unplug) equipment before inspecting. Look for danger signs.* | **Yes** | **No** | **N/A** |
| 1. Cable covering intact [wire(s) not exposed]
 |  |  |  |
| 1. Machinery and equipment regularly inspected and maintained (document record)
 |  |  |  |
| 1. Procedure for reporting faulty machinery or equipment and taking out of service
 |  |  |  |
| 1. Guards in place on machinery (slicers, mixers, mincers, etc.)
 |  |  |  |

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| **Gas Safety** | **Yes** | **No** | **N/A** |
| 1. Gas appliances regularly checked and serviced by a third party (verify documentation)
 |  |  |  |
| 1. Staff trained to use gas appliances (training records)
 |  |  |  |
| 1. Staff knows what to do in the event of a gas leak (verify procedure and

training)  |  |  |  |

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| **WHMIS 2015** | **Yes** | **No** | **N/A** |
| 1. Hazardous products clearly labelled
* Decanted product must display workplace label
 |  |  |  |
| 1. Staff has received WHMIS 2015 education and training (training records)
 |  |  |  |
| 1. Safety Data Sheets easily accessible to staff
 |  |  |  |

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| --- | --- | --- | --- |
| **Personal Protective Equipment - PPE** | **Yes** | **No** | **N/A** |
| 1. Gloves/gowns available as per Safety Data Sheet (SDS)
 |  |  |  |
| 1. Eye protection available when staff at risk of a splash and as per SDS
 |  |  |  |
| 1. Hairnets available to staff
 |  |  |  |
| 1. PPE expectations posted on entry doors to kitchen, and enforced
 |  |  |  |
| 1. Staff are trained on proper use, storage, cleaning and selection of PPE
 |  |  |  |

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| **First Aid** | **Yes** | **No** | **N/A** |
| 1. First aid kits location clearly marked
 |  |  |  |
| 1. First aid kit contains log book
 |  |  |  |

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| --- | --- | --- | --- |
| **Incident/Near Miss/Illness/Property Damage** | **Yes** | **No** | **N/A** |
| 1. Staff aware of Employee Incident Reporting
 |  |  |  |
| 1. Staff knows where to find Employee Incident Report Form
 |  |  |  |
| 1. Staff able to identify supervisor by name
 |  |  |  |