|  |  |
| --- | --- |
| 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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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.) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |

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

|  |  |  |  |
| --- | --- | --- | --- |
| **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 |  |  |  |