Part 2 (b)

Homestyle Kitchen HACCP Plan Assessment

Annual Operation Assessment

(Annual Completion)

The School Nutrition Manager and all employees should be familiar with the contents of the HACCP Plan and have ready access. This section of the HACCP Plan does not have to be printed if a current electronic copy is available and readily accessible by the manager and employees and all are able to access and use this section with ease.

This section of the HACCP Plan provides information about daily, weekly, monthly, annual, and as needed assessments to ensure the HACCP Plan is implemented and functioning as intended to prevent food safety hazards from occurring. ***This section must be completed annually.***

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# **Annual Operation Assessment**

After the *Facility Description* form is completed, the *Operation Assessment* must be performed. This assessment will typically take between one and two hours to complete. Some standards will need to be assessed in conjunction with maintenance staff. Other standards may be evaluated using the past two Environmental Health inspection reports.

Before beginning the assessment, collect the Environmental Health inspection reports for the most recent two inspections and file them in the space indicated in this section in chronological order beginning with the most recent report. If the inspection report is used to assess a standard, note directly *on Operation Assessment* form the date of the inspection report used and the violation number cited on the report. Also, thoroughly read and review *Part 1: Pre-requisite Programs* and *Part 1: Safe Food Handling Practices* to show you are completely familiar with all the standards. Continue to file copies of the current Environmental Health inspection reports. You may remove the copy of the oldest report when you file the most recent if the two most recent inspections are included in this section.

An operation assessment must be performed every year before or at the beginning of the school year. Responses can be handwritten or typed. It might take more than one day to complete the assessment. If so, record the date the assessment began and the date the assessment was completed. Completed assessments must be kept on file for at least three years plus the current year; store with other Child Nutrition records in a manner approved by the School Food Authority (SFA). Include only the current year’s *Operation Assessment* form in this section.

|  |  |
| --- | --- |
| **Facility:** |  |
| **School Food Authority (SFA):** |  |
| **Signature of Person in Charge\*:** |  |
| **Date Assessment Began:** |  |
| **Date Assessment Completed:** |  |

\* Typically, the Food Safety Team Leader is the person in charge (PIC) and will complete this annual assessment. However, in some facilities the Food Safety Team Leader/PIC will assign this task to another Food Safety Team member. If so, the name of this person must be listed on the Food Safety Team table (shown in Section 2-1) and their HACCP Responsibility must be listed as “complete Operation Assessment.”

## 

## Assessment of Menus and Recipes

|  |  |  |
| --- | --- | --- |
| Menu | | |
| A copy of the menu is filed in *Part 5: Menus and Recipes*. | **Yes** | **No** |
| Standardized quantity recipes/procedures are available for all menu items prepared in the school nutrition operations. These recipes are listed in the Menu Summary by appropriate HACCP Process Categories. Refer to *Part 5: Menus and Recipes* for details. | **Yes** | **No** |
| Menu summaries have been updated to reflect current menu items and are filed in *Part 5: Menus and Recipes*. If menu summaries are not required, standardized recipes have been updated to reflect current items and HACCP process categories.  NOTE: If all menu items (including those used for breakfast, lunch, Fresh Fruit and Vegetable Program, and After School Snack Program) have standardized recipes/procedures specifying the HACCP process category, the Menu Summary is optional. If all menu items do not have standardized recipes or processes including the HACCP process category, you must list those menu items on the Menu Summary. | **Yes** | **No** |
| Critical Control Points (CCPs) are noted on all standardized recipes/procedures and time as a public health control (TPHC) procedures are filed as applicable. | **Yes** | **No** |

## Assessment of Prerequisite Programs

|  |  |  |  |
| --- | --- | --- | --- |
| Facilities | | | |
| Facility standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| The building and all fire safety, electrical, mechanical, and plumbing equipment is maintained in a safe and operating condition. | **Yes** | **No** | **N/A** |
| The kitchen is large enough to provide for the preparation and storage of food and the washing of dishes and is approved by environmental health inspectors. | **Yes** | **No** | **N/A** |
| Floors, walls, and ceilings are smooth, nonabsorbent, and in good repair. | **Yes** | **No** | **N/A** |
| Floors are covered with a non-slippery, water resistant covering and is easily cleanable. | **Yes** | **No** | **N/A** |
| Adequate floor drainage is in high moisture areas. | **Yes** | **No** | **N/A** |
| Light bulbs are shielded, coated, and/or shatter-proof in food preparation and serving areas. | **Yes** | **No** | **N/A** |
| Work areas have sufficient light. | **Yes** | **No** | **N/A** |
| Surfaces with which food or drink comes in contact are easily accessible for cleaning, nontoxic, corrosion-resistant, nonabsorbent, and free of open crevices. | **Yes** | **No** | **N/A** |
| The ventilation system meets local regulations *and* is properly constructed. | **Yes** | **No** | **N/A** |
| Linens are stored in a clean, dry area at least six inches off the floor. | **Yes** | **No** | **N/A** |
| Linens are washed in a washing machine and then dried in a dryer. | **Yes** | **No** | **N/A** |
| Soiled clothing, bedding, or other linens from outside the kitchen are not washed or dried with equipment inside the kitchen. | **Yes** | **No** | **N/A** |
| Wiping cloths are washed in a washing machine or sink not used for food preparation. Clean cloths are machine dried or line dried away from food prep and storage areas. | **Yes** | **No** | **N/A** |
| At least one garbage can with a tight-fitting lid and that is large enough to handle all garbage is in each work area. (If there is no lid, then the can must be emptied frequently and cleaned weekly or as needed.) | **Yes** | **No** | **N/A** |
| A covered waste receptacle is in the female restroom nearest the food preparation and service area. | **Yes** | **No** | **N/A** |
| Equipment | | | |
| Equipment standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Manufacturer instructions for each piece of equipment currently used in the operation are available at the site. | **Yes** | **No** | **N/A** |
| Equipment is installed according to manufacturer instructions, is in good condition, and is used as approved. | **Yes** | **No** | **N/A** |
| All equipment is maintained in a safe and operating condition and is approved by Environmental Health Inspectors. | **Yes** | **No** | **N/A** |
| Equipment preventive maintenance schedules have been determined and a copy is filed in *Part 1: Prerequisite Programs*. (See *Part 1: Prerequisite Programs* for suggestions to develop this schedule.) | **Yes** | **No** | **N/A** |
| Employees | | | |
| Employee standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. Employee Health Policy Agreements are properly signed and filed in *Part 4: Continuing Education and Professional Development.* | **Yes** | **No** | **N/A** |
| Continuing Education and Professional Development | | | |
| Continuing Education/Professional Development standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Continuing education records are reviewed and filed. | **Yes** | **No** | **N/A** |
| Pest Control | | | |
| Pest control standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| A map of the facility's interior and exterior layout is on file. | **Yes** | **No** | **N/A** |
| A licensed pest management professional (PMP) is on staff or on contract. | **Yes** | **No** | **N/A** |
| Cracks and crevices are sealed and screens are closed and in good condition. | **Yes** | **No** | **N/A** |
| Openings surrounding wiring, drainpipes, vents, and flues are caulked or sealed. | **Yes** | **No** | **N/A** |
| Windows and vents are covered with at least a 16-mesh wire screening. | **Yes** | **No** | **N/A** |
| Cracks and gaps are covered at all exterior doors and walls. | **Yes** | **No** | **N/A** |
| All pipes and electrical lines are sealed with wire mesh (copper pads) and/or caulking. | **Yes** | **No** | **N/A** |

### 

### Pest Control Assessment

|  |  |  |
| --- | --- | --- |
| **Task** | **Yes or No** | **Responsible Party** |
|  |  |  |
| A licensed pest management professional (PMP) is on staff or is on contract to service the operation. | Yes No |  |
| A map of the facility's interior and exterior layout is available and updated each year so one can mark exactly where evidence of pests was found and where bait traps were placed. | Yes No |  |
| Cracks and crevices are sealed, and screens closed and in good condition. | Yes No |  |
| All openings surrounding wiring, drainpipes, vents, and flues are caulked or sealed. | Yes No |  |
| Windows and vents are covered with at least a 16-mesh wire screening. | Yes No |  |
| Cracks and gaps are covered at all exterior doors and walls. | Yes No |  |
| Areas surrounding light switches, bulletin boards, and vent hoods are caulked and sealed. | Yes No |  |
| All pipes and electrical lines are sealed with wire mesh (copper pads) and/or caulking. | Yes No |  |
| All pesticides are dispensed and applied by a licensed pest management professional (PMP). | Yes No |  |
| Facilities treated as needed. Managers will call for additional pest control visits on an as needed basis when there are noticeable problems between regularly scheduled visits. | Yes No |  |
| All food-contact surfaces are washed, rinsed, and sanitized *after* the facility is treated. | Yes No |  |
| Instructions on product labels are followed when school nutrition employees are using pesticides. | Yes No |  |
| The building exterior and perimeter is clean and free of clutter and debris. | Yes No |  |
| Insecticides and rodent traps are properly used in and near the garbage and waste area. Indoors, it is preferable to use traps over baits because you never know where the rodent may die. | Yes No |  |
| Trapping devices or other means of pests control are properly maintained and used. |  |  |
| Pesticides are kept in their original containers and properly stored. Pesticides are never stored in food containers. | Yes No |  |

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| --- | --- | --- | --- |
| Cleaning and Sanitizing | | | |
| Cleaning and sanitizing standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| A master cleaning and sanitation schedule is in place and a copy is filed in *Part 2a: HACCP Plan Assessment - Annual Revision*. (See *Part 1: Prerequisite Programs* for samples.) | **Yes** | **No** | **N/A** |
| Cleaning and sanitizing standards for norovirus incidents outlined in Cleaning up Vomit or Fecal Events in the Food Preparation or Service Area (See *Part 1: Safe Food Handling Procedures*) have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Hazard Communications | | | |
| Hazard communications standards outlined in *Part 1: Prerequisite Programs* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Hazardous chemicals which are past dated or have not been used within one year are properly discarded. *NOTE: Check with your local environmental health department for more information about proper disposal of hazardous chemicals.* | **Yes** | **No** | **N/A** |
| Employees are educated on proper usage of hazardous chemicals in the operation. | **Yes** | **No** | **N/A** |

## Assessment for Safe Food Handling Procedures

|  |  |  |  |
| --- | --- | --- | --- |
| Purchasing and Receiving | | | |
| Purchasing and receiving standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Dry Storage | | | |
| Dry storage standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Thermometers are in the dry storage areas. | **Yes** | **No** | **N/A** |
| Refrigerated Storage | | | |
| Refrigerated storage standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Thermometers are in the refrigerated storage areas. | **Yes** | **No** | **N/A** |
| Frozen Storage | | | |
| Frozen storage standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Thermometers are in the frozen storage areas. | **Yes** | **No** | **N/A** |
| Preparation | | | |
| Preparation standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Potable water is used to make ice. | **Yes** | **No** | **N/A** |
| Holding and Serving | | | |
| Holding and serving standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Leftovers and Advance Preparation | | | |
| Leftovers and advance preparation standards outlined in *Part 1: Safe Food Handling Procedures* have been reviewed by the Food Safety Team Leader and are clearly understood. | **Yes** | **No** | **N/A** |
| Sharing Tables and Donated Foods | | | |
| Sharing table and donated food standards outlined in Sharing Tables (see *Part 1: Safe Food Handling Procedures)* have been reviewed by the Food Safety Team Leader and are clearly understood | **Yes** | **No** | **N/A** |

### Environmental Health Inspection Reports

Insert copies of the Food Environmental Health Inspection reports for at least the last 2 inspections behind this page.

Place the reports in chronological order beginning with the most recent report.

If the Registered Environmental Health Specialist does not complete a minimum of two (2) facility inspections which includes the food preparation and service areas each school year, it is the responsibility of the SFA to request the solicitation of an inspection in writing. The SFA is to retain a copy of the written communication for a period of three (3) years after the end of the fiscal year to which they pertain or as otherwise specified as prescribed in 7 CFR Parts 210, 215, 220 or 245. Insert a copy of the communication(s) submitted for the current school year behind this page in lieu of the inspection reports.

Refer to USDA Memorandum SP5-2008 for additional information.Operation Assessment Summary of Identified Problems

**School:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Person in Charge:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date Assessment Completed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note the problems identified during your assessment in the space below. Give a copy of the completed summary to the School Nutrition Administrator so they can assist you in determining how to correct the problems. Additional pages may be used, if needed.

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# **HACCP Verification**

Verification is defined as the process of evaluating the HACCP Plan to determine whether the standards are being properly implemented, monitored, and observations recorded. The facility must identify one individual who is responsible for verifying the HACCP Plan annually at the beginning of the school year if not done at the end of the previous year. Usually this will be the Person in Charge or team leader. That individual is responsible for making sure the HACCP Plan is verified. Complete the form and file it (the most recent verification) in this section. File previously completed HACCP verification reports with other School Nutrition HACCP Records and keep for at least 3 years.

**Table 1. Types of HACCP verification and who is responsible**

|  |  |  |
| --- | --- | --- |
| **TYPE OF HACCP VERIFICATION** | **WHO IS RESPONSIBLE** | **FREQUENCY OF REVIEW** |
| Scientific or technical verification of critical limits at critical control points are satisfactory. | NCSU faculty  All procedures outlined in the Plan are based on the most recently adopted FDA Food Code and Food Code Supplement and RULES GOVERNING THE SANITATION OF RESIDENTIAL CARE FACILITIES 15A NCAC 18A .1600. | Once in 2006 and NC Department of Public Instruction will determine when updates are needed. Plan was updated in 2008-09, 2013-14, and 2014-15. |
| HACCP plan is functioning effectively; therefore, the Food Safety Team Leader at each site must review the HACCP plan, be certain the HACCP plan is being correctly followed, and review records. | Identified Food Safety Team Leader of PIC at each site, or designee. | Annually at the beginning of the school year (if not done at the end of the previous year). |
| HACCP plan is functioning effectively. The School Nutrition Administrator or Area Supervisor must review the HACCP plan to be certain it is being correctly followed and records are properly prepared. | School Nutrition Administrator or their designee | During each school year |
| NC Department of Public Instruction and the local health department to ensure the establishment’s HACCP system is functioning in a satisfactory fashion. | NC Department of Public Instruction School Nutrition Consultants and Specialists. | Annually or as needed during Technical Assistance and Administrative Reviews. |

**HACCP Verification**

Verification of the HACCP Plan is usually completed annually by the Person in Charge or their designee annually at the beginning of the school year if not done at the end of the previous year. File the most recently completed HACCP verification in this section. The previously conducted HACCP verification pages should be removed and kept in a separate file with other HACCP records for three years.

|  |  |
| --- | --- |
| Facility: |  |
| School Food Authority: |  |
| Signature of Person completing the HACCP Verification: |  |
| Date Completed: |  |

1. Have the following forms been completed for the most recent 10 months/school year?
   * Menu Summary (optional)
   * Recipes, including information about allergens
   * Food Safety Team
   * School Description
   * Operation Assessment
   * Monitoring Summary
2. Were there any new additions to menus/recipes during the most recent 10 months/school year?
   * Yes
   * No
3. Were there any significant changes to recipes during the most recent 10 months/school year? Significant changes would be changing from a precooked to raw product, or the addition of a TCS food to an existing recipe, etc.
   * Yes (If yes, list the new recipes or recipes with significant changes in the space below.
   * No (If no, go to question 5.)

1.

2.

3.

4.

5.

6.

7.

8.

9.

1. Have these new recipes been added to your printed or electronic standardized recipe book?
   * Yes
   * No

1. Have the recipes been evaluated for the presence of allergens and has this information been added to the recipes?

* Yes
* No

1. Check below which monitoring records your facility is required to have. Also indicate where those records are stored after the completed records are removed from the current year’s binder.

|  |  |
| --- | --- |
| **TYPE OF RECORD** | **RECORD STORAGE LOCATION** |
| * Daily -- Production Record |  |
| * Daily – Kitchen Assessment |  |
| * Daily – Hand Sink Assessment |  |
| * Daily – Refrigerator Assessment |  |
| * Daily – Freezer Assessment |  |
| * Daily – Dry Storage Assessment |  |
| * Daily – Hot-holding Unit Assessment |  |
| * Monthly -- Series of four inspection forms |  |
| * Monthly -- Pest Control |  |
| * Annual -- Operation Assessment |  |
| * Employee Illness Log(s) |  |
| * Reports from the health department for employee diagnosed with foodborne illness |  |
| * Annual - Food Safety Checklist for Employees |  |
| * Annual – Employee Health Policy Agreement |  |
| * Pest Control Reports from Pest Management Personnel |  |
| * Purchasing and Receiving Delivery Invoices/Delivery Tickets |  |
| * Environmental Health Inspection Reports |  |
| * Foodborne Illness Complaint Form(s) |  |

1. Are required monitoring records properly completed and on file? To evaluate this, randomly select the monitoring records for one week from the most recent 10 months/school year. Record the dates of the records reviewed to validate the HACCP plan:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Yes
* No

1. Were any corrective actions taken and recorded during the most recent 10 months/school year? You may use the one-week random selection in question 7 as evidence of corrective actions.

* Yes
* No

Briefly summarize the corrective actions taken during the random week selected or for other periods reviewed during this verification.

1. List all continuing education sessions offered during the school year being verified to support the HACCP plan.
2. Describe the documentation provided (if any) to supporting such education has occurred. This could be handouts, agendas, etc. If no documentation is provided, state “no documentation of continuing education.”