|  |  |  |  |
| --- | --- | --- | --- |
|  | **Satisfactory** | **Unsatisfactory** | **Notes** |
| **Record Keeping / Client Resources** |  |  |  |
| Are all quarterly reports submitted? |  |  |  |
| Are pantry hours posted? |  |  |  |
| Are pantry requirements posted? |  |  |  |
|  |  |  |  |
| **Dry Storage** |  |  |  |
| Is food stored off the floor? |  |  |  |
| Are household products stored separately from food? |  |  |  |
| Is first-in-first-out practiced (using/distributing older products before newer products)? |  |  |  |
| Is pest control in place? |  |  |  |
|  |  |  |  |
| **Cold Storage** |  |  | **Temperature(s)** |
| Are all refrigerators kept between ***32-41 degrees?*** |  |  |  |
| Are all freezers kept at ***zero degrees or below?*** |  |  |  |
| Are temperature logs being used regularly? |  |  |  |
| Are walk in units clean and organized with food stored off the floor? |  |  |  |
|  |  |  |  |
| **On-Site Feeding** (Meal Programs only) |  |  |  |
| Are all areas clean and maintained? |  |  |  |
| Are sanitation practices used (hand washing, safe food practices, wearing gloves)? |  |  |  |
| Food Handler Certified/Food Safety completed? |  |  |  |
| Are 51% or more of the clients being served in need? |  |  |  |
| **USDA** (For agencies receiving USDA only) |  |  |  |
| Is the client signature form used and filed (for 3 years)? |  |  |  |
| Is the USDA “Justice for All” poster posted? |  |  |  |
| Is USDA food stored separately from non-USDA food? |  |  |  |



**Agency Self-Assessment Check-list**