



Barry County Health Department
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FOOD SAFETY CHECKLIST

Date _____ Observer _____

Directions: Use this checklist daily to determine areas in your operations requiring corrective action. This is not the complete Missouri food code. The complete Food Code can be found at www.dhss.mo.gov/foodcode.

*Items required for HACCP and recommended by Barry County Health Department.

PERSONAL HYGIENE

	Yes	No	Corrective Action
• Employees wear clean and proper uniform including shoes.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Effective hair restraints are properly worn.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Fingernails are short and clean.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Jewelry is limited to a plain ring, such as wedding band and a watch and no bracelets.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Hands are washed properly, frequently, and at appropriate times.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Burns, wounds, sores or scabs, or splints and water-proof bandages on hands are bandaged and completely covered with a foodservice glove while handling food.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Eating, drinking, chewing gum, smoking, or using tobacco are allowed only in designated areas away from preparation, service, storage, and ware washing areas.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Employees use disposable tissues when coughing or sneezing and then immediately wash hands.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Employees appear in good health.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Hand sinks are unobstructed, operational, and clean.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Hand sinks are stocked with soap, disposable towels, and warm water.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• A handwashing reminder sign is posted.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Employee restrooms are operational and clean.	<input type="checkbox"/>	<input type="checkbox"/>	_____

FOOD PREPARATION

	Yes	No	Corrective Action
• All food stored or prepared in facility is from approved sources.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Food equipment utensils, and food contact surfaces are properly washed, rinsed, and sanitized before every use.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Frozen food is thawed under refrigeration, cooked to proper temperature from frozen state, or in cold running water.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Thawed food is not refrozen.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Preparation is planned so ingredients are kept out of the temperature danger zone to the extent possible.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Food is tasted using the proper procedure.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Procedures are in place to prevent cross-contamination.	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Food is handled with suitable utensils, such as single use gloves or tongs.	<input type="checkbox"/>	<input type="checkbox"/>	_____

- Food is prepared in small batches to limit the time it is in the temperature danger zone. _____
- Clean reusable towels are used only for sanitizing equipment and surfaces and not for drying hands, utensils, or floor. _____
- Food is cooked to the required safe internal temperature for the appropriate time. The temperature is tested with a calibrated food thermometer. _____
- *The internal temperature of food being cooked is monitored and documented. _____

HOT HOLDING

Yes No Corrective Action

- Hot holding unit is clean. _____
- Food is heated to the required safe internal temperature before placing in hot holding. Hot holding units are not used to reheat potentially hazardous foods. _____
- Hot holding unit is pre-heated before hot food is placed in unit. _____
- Temperature of hot food being held is at or above 140 °F. _____
- Food is protected from contamination. _____

COLD HOLDING

Yes No Corrective Action

- Refrigerators are kept clean and organized. _____
- Temperature of cold food being held is at or below 41 °F. _____
- Food is protected from contamination. _____

REFRIGERATOR, FREEZER, AND MILK COOLER

Yes No Corrective Action

- Thermometers are available and accurate. _____
- Temperature is appropriate for pieces of equipment. _____
- Food is stored 6 inches off floor or in walk-in cooling equipment. _____
- Refrigerator and freezer units are clean and neat. _____
- Proper chilling procedures are used. _____
- All food is properly wrapped, labeled, and dated. _____
- The FIFO (First In, First Out) method of inventory management is used. _____
- Ambient air temperature of all refrigerators and freezers is monitored (*and documented) at the beginning and end of each shift. _____

FOOD STORAGE AND DRY STORAGE

Yes No Corrective Action

- Temperatures of dry storage area is between 50 °F and 70 °F or State public health department requirement. _____
- All food and paper supplies are stored 6 to 8 inches off the floor. _____
- All food is labeled with name and received date. _____
- Open bags of food are stored in containers with tight fitting lids and labeled with common name. _____
- The FIFO (First In, First Out) method of inventory management is used. _____
- There are no bulging or leaking canned goods. _____

- Food is protected from contamination. _____
 - All food surfaces are clean. _____
 - Chemicals are clearly labeled and stored away from food and food-related supplies. _____
 - There is a regular cleaning schedule for all food surfaces. _____
 - Food is stored in original container or a food grade container. _____
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CLEANING AND SANITIZING

Yes No Corrective Action

- Three-compartment sink is properly set up for ware washing. _____
 - Dish machine is working properly (such as gauges and chemicals are at recommended levels). _____
 - Water is clean and free of grease and food particles. _____
 - Water temperatures are correct for wash and rinse. _____
 - If heat sanitizing, the utensils are allowed to remain immersed in 171 °F water for 30 seconds. _____
 - If using a chemical sanitizer, it is mixed correctly and a sanitizer strip is used to test chemical concentration. _____
 - Wiping cloths are stored in sanitizing solution while in use. _____
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UTENSILS AND EQUIPMENT

Yes No Corrective Action

- All small equipment and utensils, including cutting boards and knives, are cleaned and sanitized between uses. _____
 - Small equipment and utensils are washed, sanitized, and air-dried. _____
 - Work surfaces and utensils are clean. _____
 - Work surfaces are cleaned and sanitized between uses. _____
 - Thermometers are cleaned and sanitized after each use. _____
 - Thermometers are calibrated on a routine basis. _____
 - Can opener is clean. _____
 - Drawers and racks are clean. _____
 - Clean utensils are handled in a manner to prevent contamination of areas that will be in direct contact with food or a person's mouth. _____
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LARGE EQUIPMENT

Yes No Corrective Action

- Food slicer is clean. _____
 - Food slicer is broken down, cleaned, and sanitized before and after every use. _____
 - Boxes, containers, and recyclables are removed from site. _____
 - Loading dock and area around dumpsters are clean and odor-free. _____
 - Exhaust hood and filters are clean. _____
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GARBAGE STORAGE AND DISPOSAL

	Yes	No	Corrective Action
● Kitchen garbage cans are clean and kept covered.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Garbage cans are emptied as necessary.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Boxes and containers are removed from site.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Loading dock and area around dumpster are clean.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Dumpsters are clean.	<input type="checkbox"/>	<input type="checkbox"/>	_____

PEST CONTROL

	Yes	No	Corrective Action
● Outside doors have screens, are well-sealed, and are equipped with a self-closing device.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● No evidence of pests is present.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● There is a regular schedule of pest control by a licensed pest control operator.	<input type="checkbox"/>	<input type="checkbox"/>	_____

OTHER ITEMS

	Yes	No	Corrective Action
● All applicable equipment and drain lines are protected with a back flow prevention device.	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Food and food contact items are not stored under drain lines.	<input type="checkbox"/>	<input type="checkbox"/>	_____

Information provided by USDA in cooperation with FDA from the HACCP guidance document 2005

Note: Some information has been modified by the Barry County Health Department to accommodate Non-HACCP required establishments.