Performance Requirements Summary
PRS# 1 Menu Planning Services
Employee:_____
Date: _____

Menu Planning Services

	Yes	No	If no, problem has been fixed
Is menu provided two weeks in advance?			
Is menu clearly posted in the Dining Facility?			
Does menu address dietary and special needs?			
Is the menu available during DFAC meetings?			
Do provided meals match menu?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirement Summary

PRS # 2 Storage Requirement

Employee:_____

Date: _____

Storage (Dry)

	Yes	No	If no, problem has been fixed
Is all food nearly stored six inches off the floor on shelves or on racks?			
Are all shelves clean and free of dust and debris?			
Are all shelves clean and swept daily beneath?			
Is proper stock rotation practiced?			
Are all food materials placed in another clean container and properly sealed and labeled after they are removed from their original containers?			
Is the dry storage area free from dampness, with a temperature between 60°F and 70°F?			
Are lighting and ventilation adequate?			
Is the storage area inspected for rodent and insect activity on a weekly basis?			
Are all chemical cleaners and pesticides stored in a separate area away from food supplies?			
Are products stored away from water and sewer lines?			
Are paper supplies stored separately from foods?			
Are "Wet Floor" signs available and used when needed?			
Are any tables, counters and equipment free from sharp corners or dangerous projections?			
Are doors and aisles kept clear of supplies?			
Are dented canned goods set on a special shelf reserved for them?			
Are the most used supplies the most accessible?			
Are heavy items on lower shelves only?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 2 Storage Requirements
Employee:_____
Date: _____

Food Storage

	Yes	No	If no, problem has been fixed
Do freezers have accurately calibrated interior and exterior thermometers?			
Are freezer units maintained at 0° or lower?			
Are products stored above floor level?			
Are all foods wrapped and covered to prevent freezer burn?			
Are freezers properly cleaned, defrosted and maintained on a regular basis?			
Are foods stored to permit adequate air circulation?			
Is there limited traffic in and out of walk-in freezers?			
Is a log of daily freezer temperatures available and up-to-date?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval:

Performance Requirements Summary
PRS # 3: Food Preparation Services
Employee:_____
Date: _____

Cold Food Production: Kitchen Area

	Yes	No	If no, problem has been fixed
Are all work areas cleaned and sanitized before and after food production?			
Are utensils and containers cleaned, sanitized, and handled properly?			
Are all ingredients refrigerated at least 24 hours prior to use?			
Are all foods promptly refrigerated after preparation or taken directly to the serving line?			
Are all fruits and vegetables thoroughly washed before being used?			
Are proper handwashing practices followed?			
Are sanitizer solutions available at all work stations?			
Is all equipment used in cold food preparation cleaned and sanitized after every use?			
Are all frozen products thawed in the proper manner?			
Are gloves being worn when cold food items are prepared?			
Are all food production sinks cleaned and sanitized between each use?			
Are handwashing sinks in an accessible location and well stocked?			
Is all equipment used in food production cleaned and sanitized at the end of each day?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 3 Food Preparation Services
Employee:_____
Date: _____

Hot Food Production

	Yes	No	If no, problem has been fixed
Are work surfaces, equipment and utensils cleaned and sanitized before each use?			
Are frozen foods thawed properly?			
Are all foods cooked to the proper temperatures?			
Are all leftovers thoroughly heated to 165°F or above within 2 hours?			
Food in warming cabinets is maintained at a 140°F or higher while being transported?			
Are food preparation sinks cleaned and sanitized after each use?			
Do employees wash their hands before preparing food?			
Are handwashing sinks accessible and in working order?			
Are towels and soap dispensers always filled and in proper working order?			
Are all spills cleaned up immediately?			
After food preparation, are all work surfaces and equipment cleaned and sanitized?			
Are floors swept and mopped on a regular schedule?			
Are sanitizing solutions available at all work stations?			
Are final cooking temperatures monitored/recorded?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS# 4 Headcount/Cashier Services
Employee:_____
Date: _____

Headcount/Cashier Services

	Yes	No	If no, problem has been fixed
Headcount (sign-in roster) is available at cashier station?			
Cashier is able to make change for cash meals?			
Headcount and requested meals are within 10% variance.			
Monthly reconciliation are completed?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 5 Food Serving
Employee:_____
Date: _____

Line Service Hot Foods: Steam Table

	Yes	No	If no, problem has been fixed
Are serving utensils handled properly?			
Is the steam table operating properly?			
Are all hot foods served and held at 140°F or higher?			
Are temperature checks taken frequently?			
Are soup kettles maintained at 140°F or higher?			
Are all spills cleaned up immediately?			
Are floor areas swept and mopped on a regular basis?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 5 Food Serving
Employee:_____
Date: _____

Line Serving Areas: Deli Bar

	Yes	No	If no, problem has been fixed
Are all deli bar items kept refrigerated prior to being placed on the deli bar?			
Are all items maintained at a temperature of 40°F?			
Are thermometers available to check product temperatures?			
Are refrigerators maintained at a temperature of 41°F or below, and do they have calibrated thermometers?			
Are floors swept and mopped on a regular schedule?			
Is all the deli bar equipment cleaned and sanitized at the end of each day?			
Are sanitizing solutions available at all work stations?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval:_____

Performance Requirements Summary
PRS# 6 Dining Room Service
Employee:_____
Date: _____

Dining Room Service

	Yes	No	If no, problem has been fixed
Aare decorations used for holidays and special days according to contract?			
Are condiments are available on each table?			
Are tables cleaned after each usage?			
Are tables and chairs are good condition?			
Are napkins available at each table?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS# 7 Administrative Service
Employee:_____
Date: _____

Administrative Service

	Yes	No	If no, problem has been fixed
Meal count by type meal and Department is provided monthly?			
Departments conduct monthly reconciliations?			
Joint Dining Facility inspections are conducted monthly?			
Is the menu available during DFAC meetings?			
Are surveys provided in the serving line?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 8 Food Service Equipment & Utensil Cleaning Services
Employee:_____
Date:_____

Dish Room / Pot and Pan Areas

	Yes	No	If no, problem has been fixed
Is a three-compartment sink used?			
Are dishes, utensils, pots and pans, pre-flushed on pre-scraped before washing?			
Are sinks clean prior to use?			
Are sanitizing chemicals used at the proper strength?			
For sanitizing in hot water, is the temperature at least 180°F and are dished and utensils immersed for at least 30 seconds?			
Are test strips used to determine sanitizer concentrations?			
Is a log book being kept of the results?			
Are dishes, pots and pans air dried and stored in the proper manner?			

Action Plan:

To Be Completed By:

_____

Supervisor's Approval:

_____

Performance Requirements Summary
PRS # 9 Facility Maintenance & Sanitation Service
Employee:_____
Date: _____

Restrooms

	Yes	No	If no, problem has been fixed
Are rest rooms clean, dry, well ventilated, well lighted, and odor free?			
Are soap and towel dispensers working properly and well stocked?			
Are trash containers covered, cleaned, and emptied on a regular basis?			
Are the sinks and faucets maintained?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 9: Facility Maintenance & Sanitation Service
Employee:_____
Date: _____

Receiving Area

	Yes	No	If no, problem has been fixed
Is the area clean of debris?			
Are incoming food shipments inspected for infestations, spoilage and foreign material?			
Are non-food supplies inspected for infestations and foreign material?			
Are all food and non-food supplies dated upon arrival?			
Are frozen and perishable products checked for proper temperatures and promptly moved to refrigerated and frozen storage?			
Are empty shipping and packing materials promptly disposed?			
Are carts and dollies available to transport supplies?			
Are carts and dollies in good repair and not being overloaded?			
Are "Wet Floor" signs available and used when needed?			
Is the receiving dock in good repair?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval: _____

Performance Requirements Summary
PRS # 9 Facility Maintenance & Sanitation Service
Employee:_____
Date: _____

Personal Hygiene

	Yes	No	If no, problem has been fixed
Is the only jewelry worn a plain gold wedding band?			
Are outer and under garments always clean?			
Are hands kept away from the hair and face while on duty?			
Are fingernails clean and short, free from false fingernails or nail polish while on duty?			
Are proper handwashing practices followed?			
Is a hair restraint worn in food preparation and serving areas?			
Are employees not eating, smoking, chewing gum, or using toothpicks while on duty?			
Are employees free of infected cuts, burns and boils?			
Are employees free of coughs, colds, or other contagious disease?			

Action Plan:

To Be Completed By: _____

Supervisor's Approval:_____