



CANDIDATE'S HACCP PLAN VERIFICATION SUMMARY

Establishment Name:		Risk Type:	
Address:		PIC/CFSM:	
City:	State:	Zip:	County:
Candidate's Name:	Date:	Standard-Trainer's Name:	

HACCP PLAN VERIFICATION SUMMARY CIRCLE YES or NO

	Record # 1	Record #2	Record # 3
	(Current date if Possible)	2 nd Selected Date	3 rd Selected Date
Required Monitoring Recorded¹	YES/NO	YES/NO	YES/NO
Accurate (Believable)²	YES/NO	YES/NO	YES/NO
Corrective Action Documented³	YES/NO	YES/NO	YES/NO

NOTES: An establishment's HACCP plan that identifies what is to be done in regards to corrective actions and has a provision on the log sheet for corrective actions to be recorded is suitable to use for this exercise. A HACCP Plan used by a food establishment can be verified through a review of records and investigating the following information:

1. Does the food establishment's HACCP documentation indicate that the required monitoring procedures were followed (frequency, initialed, dated, etc.) on the form? A "Yes" answer would indicate that ALL required monitoring was documented. If ANY required monitoring was NOT documented, a "NO" answer would be circled.
2. Does the food establishment's HACCP documentation for the selected dates appear accurate (NO dry labbing results, repeated temps). A "Yes" answer would indicate that he record appears accurate. A "NO" answer would indicate that there is inaccurate HACCP documentation.
3. Was corrective action(s) documented in accordance to the HACCP plan when critical limits were not met on the form? A "Yes" answer would indicate that ALL corrective action(s) were documented for each critical limit for that particular date **or** if not within the critical limits but the appropriate corrective action was taken. A "No" answer would indicate ANY missing documentation of corrective action(s). A "No" should also be marked if the temperature logged is not within the critical limits and an appropriate critical limit was not taken.