

SOP: INSPECTION CHECK SHEET

INTRODUCTION

1. The inspection check sheet is a tool to be used during inspections at food processing plants. This inspection sheet is able to cater for a wide variety of foodstuffs, especially facilities producing foodstuffs capable to support the growth of Listeria.

AIM

2. To provide a tool to ensure all areas are inspected on a standardised method.

SCOPE

3. This document discusses the following:
- a. General information.
 - b. Documented proof.
 - c. Plant evaluation.
 - d. % Compliancy.

DISCUSSION

GENERAL INFORMATION

4. This part of the inspection tool is to confirm the details of the facility to be inspected. This part of the document comprises of the following:
- a. Name of Premises: Indicate the full name of the premises.
 - b. Address: The full address must be listed, the province must be specified.
 - c. Tel No: The contact number of the owner / manager in charge.
 - d. Contact Person Name: The name indicated is the name for the previously listed telephone number.
 - e. Date of Assessment: Indicate the date of the inspection.
 - f. EHP: Indicate the initials and surname of the EHP conducting the inspection.
 - g. HI No: Indicate the HPCSA HI registration number of the EHP conducting the inspection.
 - h. Foodstuffs Produced/Processed: List all the foodstuffs/products this facility is producing or processing.

DOCUMENTED PROOF

5. In this section the documented proof of the facility has to be inspected. Only three options are available as answers.

- a. **“Y”** would indicate that the listed document is complying to requirements and or specifications as listed in applicable legislation.
- b. **“N”** would indicate that the listed document is NOT complying to requirements and or specifications as listed in applicable legislation.
- c. **“NA”** should be indicated if a specific item is not needed or required for the specific facility being inspected.
- d. It is strongly advised that the management of the facility be informed of the required documented control needed. This would ensure access and availability to all documents. Ensure that management of the facility is aware that this part of the evaluation sheet would take some time to be inspected.

6. The following guidelines

- a. Valid Certificate of Acceptability (COA): Indicate if the current COA is valid. Confirm the following:
 - i. Correct address indicated.
 - ii. Name indicated is still valid.
 - iii. Owner/s still as indicated.
 - iv. Restrictions mentioned still valid.
- b. Other Listings/Certifications: If one of the listed items are applicable, the system documentation must be checked and verified for correctness. If HACCP or any higher listing system is claimed by the facility, an approved external auditing report must be made available. The certificate of compliance must also be made available.
- c. Copy of Legal Requirements Verified by Company. This is a list the company must provide to indicate the awareness of all legislation the facility must comply with. Management must therefore be informed in the feedback report should they have omitted any legislation.
- d. Copy of List for Raw Product Procurement. Management must indicate where all the raw materials/ products are sourced from. This will contribute to the confidence of traceability.
- e. Copy of Export List Received: A list indicating what product is exported to which country must be available. If no products are exported, “NA” must be indicated. If products are exported, yet a list is not available “N” must be indicated.
- f. Copy of Local Distribution: A list indicating what product is distributed to which local business, including the approximate amount must be available. This would be indicated with “Y”. This demonstrates that the facility do know where the products are distributed and should be able to recall effectively if necessary.

- g. Listeria Prevention Plan Available: If the facility produces foodstuffs capable of supporting the growth of Listeria, this plan must be available. Management must indicate what their plan is to prevent the presence of Listeria in the final distributable foodstuffs. The following as guidelines:
- i. Is a “kill step” in place? Either heat or cold coupled with a specific time to ensure that the intended bacteria are killed.
 - ii. What steps are taken after the “kill step” to prevent re-contamination of the product?
- h. Cleaning Schedule, Cleaning in Place (CIP): The cleaning program must indicate when cleaning is done with all the equipment intact. If the facility always detaches all equipment during cleaning procedures, the “NA” can be used. If the facility should have this option, yet omitted from the cleaning schedule the “N” must be indicated. The following should be indicated on the cleaning schedule:
- i. Date.
 - ii. Time.
 - iii. Name of the person.
 - iv. What should be cleaned (name of equipment/area).
 - v. Chemical to be used.
 - vi. Dilution.
 - vii. Application method.
 - viii. Contact time.
 - ix. PPE to be worn.
- i. Cleaning schedule, Cleaning Out of Place (COP): The cleaning program must indicate when cleaning is done with all the equipment dismantled. Refer to h (I – ix).
- j. Material Safety Data Sheets (MSDS): All chemicals available on the facility must have a MSDS. This ensure that flammables are stored separately and that spillages, dilutions and accidents are handled correctly.
- k. Maintenance Schedule
- i. Specific Area Listed and Dated? Machinery that needs maintenance in order to prevent food contamination must be listed and dates should be allocated. Previous records should also be checked to determine what maintenance was previously done on the listed equipment. Should all be in order, “Y” can be allocated. (Take note that all equipment that cools down or heats up should be listed).

- ii. SOP for Maintenance Procedure in Place? Read the SOP and ensure that a step by step explanation is indicated for the previously listed equipment. If all is in place, "Y" can be allocated.
- I. Temperature Check Lists: (For the purpose of this inspection document it is expected that the facility demonstrate that temperature measurements are done and records are kept. The inspector may take temperature measurements during the walk through inspection and note it down for reporting purposes.)
 - i. Calibration Certificate of all Thermometers/Gauges: Start by requesting a list of all thermometers and gauges of the facility and ensure that each and every listed thermometer and gauge have a valid calibration certificate. (Request all certificates).
 - ii. Received Foodstuffs: A list of foodstuffs received must be provided. Verify that temperature sensitive foodstuffs are received within the legal limits as specified in R962.
 - iii. Fridge: Proof that temperatures are checked on a daily basis must be available. If the fridge temperatures comply with specifications listed in R962 or otherwise specified for the specific product "Y" is allocated.
 - iv. Freezer: Proof that temperatures are checked on a daily basis must be available. If the freezer temperatures comply with specifications listed in R962 or otherwise specified for the specific product "Y" is allocated.
 - v. Heat Treatment Areas: Proof that temperatures are checked on a daily basis must be available. If the heat treatment temperatures comply with specifications listed in R962 or otherwise specified for the specific product "Y" is allocated.
 - vi. Transport Vehicles: Proof that temperatures are checked during transportation must be available. If the transport temperatures comply with specifications listed in R962 or otherwise specified for the specific product "Y" is allocated.
 - vii. SOP for Temperature Deviations: Management of the facility must provide a SOP to demonstrate the plan that is in place should there be temperature deviations. The SOP should indicate what is deemed a temperature deviation for the facility and what steps must be taken. This must include all temperature sensitive areas e.g. fridges, freezers and heating equipment.
- m. Complaints Register: Management should demonstrate that they do take note of customer complaints. The rectification of the complaints should also be indicated. This demonstrates that management of the facility is open to improvement to satisfy the needs of the consumer.
- n. Sampling and Analysis Plan
 - i. Is a Sampling Plan Available and Implemented? Management of the facility must proof that a plan for taking various samples is available. To determine if the plan is implemented, the results of the listed samples

must be checked. On the result form dates are indicated. If the dates correlate, the plan is implemented and a "Y" is allocated.

- ii. Water – Bacteriological Results Compliant? The results must comply with SABS 241.
- iii. Water – Chemical Results Compliant? The results must comply with SABS 241.
- iv. Environmental swabs – Bacteriological Results Compliant? This is the surface swabs. If the results comply, "Y" is allocated.
- v. Environmental Swabs – Chemical Results Compliant (Pesticides)? If any of the foodstuffs received by the facility is listed, in the "Regulation Governing the maximum limits for pesticide residues that may be present in foodstuffs", the results must be available and compliance must be verified.

If the pest control contractor applies a fumigant or water based spray inside the facility, irrelevant if it is done after hours in the absence of foodstuffs, the residual chemical load on food contact surfaces must be indicated.

- vi. Raw Product – Bacteriological Results Compliant? Management of the facility must prove that samples were taken and that the received results comply with legislation.
- vii. Raw Product – Chemical Results Compliant? Management of the facility must prove that samples were taken and that the received results comply with legislation.
- viii. End Product – Bacteriological Results Compliant? Management of the facility must prove that samples were taken and that the received results comply with legislation.
- ix. End Product – Chemical Results Compliant? Management of the facility must prove that samples were taken and that the received results comply with legislation.
- x. Listeria Specific Sampling: Facilities processing or producing foodstuffs that is known to support the growth of Listeria must demonstrate a sampling plan.

1) Environmental Swabs Taken? Management to prove that environmental swab samples were taken. The amount of samples taken, coupled to the specific area where it was taken in the facility. The reference number and the laboratory sent to must be available.

2) Environmental Swabs Compliant? If the results are available, determine compliance. If compliant, "Y" is allocated. If the results are still outstanding "N" is indicated. This would serve as a reminder to the Environmental Health Practitioner (EHP) to follow up on these outstanding results.

- 3) Product Samples Taken? Management to proof that product samples, were taken. The amount of samples taken, coupled to the specific product that was sampled. The reference nr and the laboratory send to must be available.
- 4) Product Samples Compliant? If the results are available, determine compliance. If compliant, "Y" is allocated. If the results are still outstanding "N" is indicated. This would serve as a reminder to the EHP to follow up on these outstanding results.

o. Training program

- i. Training Program Available? Management must proof that there is a training program for the employees. The frequency and topics must be indicated.
- ii. Training Register Signed: The indicated program must be accompanied with a signed register of all attendees. A list of all workers can be requested to determine if all employees attended training sessions.
- iii. Operation of Company – Operating Machinery, Health and Safety Training: Management must proof that this training is done. A program, list of personnel and signed attendance registers must be provided.
- iv. Hygienic Working Methods: Management must proof that this training is done. A program, list of personnel and signed attendance registers must be provided.
- v. Prevention of Listeria: Management must proof that this training is done. A program, list of personnel and signed attendance registers must be provided.
- vi. Wearing of PPE: Management must proof that this training is done. A program, list of personnel and signed attendance registers must be provided.
- vii. Cleaning of Facility (Complements Duty Sheet): Management must proof that this training is done. A program, list of personnel and signed attendance registers must be provided. A duty sheet can be requested to determine if the cleaning tasks allocated to a specific worker is reflected in the duty sheet.
- viii. Maintenance Personnel: Management must proof that all maintenance personnel is trained before entering the facility. This training should be compared with the maintenance register. If it corresponds, "Y" is allocated.

p. Maintenance of PPE: (do not type in the black block)

- i. Replacement Schedule: Management of the facility must demonstrate when PPE is replaced. Although it is not specified in legislation as to how frequently PPE should be replaced, it is expected that management make some sort of documented plan available.

- ii. Washing of PPE, SOP in Place? Documented proof is required if the facility is contracting the washing of PPE out. If a contract is in place and the laundry is compliant to legislation and or SANS 10146:2012, "Y" is allocated. Should this not be in place or documented proof not be available "N" is allocated.
- iii. Inspection Registers in Place? Management must demonstrate that they do regular PPE inspections. This is to ensure that the PPE is in a good condition and does not need replacement. Employee's names must be available on the register and dates when the inspections took place. If available, "Y" is allocated.
- q. Injury and Illness Register? This register must be available to determine how frequently employees get injured and or fall ill. The SOP for injured and or sick employees may also be requested. This is to demonstrate if management allow injured and or sick employees to get in contact with foodstuffs or not. If the register is in place, "y" is allocated. The rest of the details can be noted down for reporting purposes.
- r. Layout Plan: (Different colour to be used for each item)
 - i. Layout Plan Available? The approved building plans are the preferred document. A small scale hand drawn layout plan of the facility would also be acceptable if the approved plans are available.
 - ii. Product Flow Indicated? The flow of all the products must be indicated in a specific allocated colour.
 - iii. Personnel Flow Indicated? The personnel route must be indicated in a different color as the previously used.
 - iv. Zoning of Facility Indicated? Low risk area, medium and or high risk areas must be indicated on the layout plan.
 - v. Flow of Waste Water? The direction of the flow of waste water must be indicated. All drains, inside and outside, must be indicated. The connection to the main sewer must also be available on the layout plan.
- s. Product Traceability/Recall Documentation Available? Management must provide documented proof that a process is in place to trace and or recall all produced products. Determine if the facility does "fake" recalls, testing the current documented procedures.
- t. Pest Control Documents: Management must demonstrate that a pest control company is contracted and is rendering a regular service. The following can be evaluated:
 - i. Company name.
 - ii. Pest control program. (Dates and times for attending).
 - iii. Pesticides used.
 - iv. Availability of MSDS for used pesticides.

- v. Mapping of rat bait boxes. (box numbers and frequency of baiting).
- vi. Type of application (baiting, dusting, wet spray, fogging).
- vii. Type of pests present in the facility.

PLANT EVALUATION

7. Change / Break Rooms: This inspection sheet has four sets of male and female areas. The following must be indicated in order for the calculations to calculate correctly:

- a. Indicate Area in this Space: This should be completed to indicate where these facilities were. E.g. Entrance or offices or production area. This would assist the EHP to determine if there were improvements and or deterioration in the same area during the next evaluation. Should there be a change of EHP's, the next EHP would be able to take over with ease.
- b. Y if a set (male/female) was used and NA if not: As soon as one change/break room is inspected, the male and female must be inspected. In this line a "Y" must be indicated to activate the calculations. If the facility have less than four change or break rooms, "NA" must be inserted in this line to de-activate the calculations for the areas not used. If this is not done false results will be obtained.
- c. Questions 2.A. I to xiii.: All the listed questions can be answered by indicating "Y", "N" or "NA". "NA" should only be used if a listed question in "Not Applicable" to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP's are all acquainted with the related legislation.

8. Staff Entry: This section has three pre-determined areas nl. Receiving, Process plant and Dispatch. The following five is indicated as Other 1 – 5. The EHP can use the open space to indicate a specific area that was evaluated against these questions. (EHP to ensure that every area is only inspected once, thus only reflected once). The following should also be noted to ensure correct calculations:

- a. Was this area available "Y" or not "N": The EHP must indicate "Y" or "N" in this line to either activate or de-activate the calculations pre-programmed. If some or all of the "Other 1-5" was used "Y" must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.
- b. Question B. i – vi: All the listed questions can be answered by indicating "Y", "N" or "NA". "NA" should only be used if a listed question in "Not Applicable" to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP's are all acquainted with the related legislation.

9. Area: There are two pre-determined areas that must be inspected under the headings of "Receiving area" and "Process area". Area 3 – 8 can be used by the EHP if needed, remember to add the name of the area. Take note of the following:

- a. Was this area available "Y" or not "N": The EHP must indicate "Y" or "N" in this line to either activate or de-activate the calculations pre-programmed. If some or all of the "Area 3-5" was used "Y" must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.
- b. Question A – K.v: All the listed questions can be answered by indicating "Y", "N" or "NA". "NA" should only be used if a listed question in "Not Applicable" to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP's are all acquainted with the related legislation.

10. Foodstuffs Storage Areas

- a. Was this area available "Y" or not "N": The EHP must indicate "Y" or "N" in this line to either activate or de-activate the calculations pre-programmed. If some or all of the "(1) – (8)" was used "Y" must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.
- b. In the same line as "Walls, floors and ceiling:..." the block indicating "Fridge, Freezer, Dry store, (1)", only one of these listed items must be chosen at a time. Therefore one item per coulomb. There are eight coulombs available. Remember to activate the coulomb at the top of this section if it is used.
- c. Question A – E.v: All the listed questions can be answered by indicating "Y", "N" or "NA". "NA" should only be used if a listed question in "Not Applicable" to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP's are all acquainted with the related legislation.

11. General Storage Areas: The first three are pre-determined nl. "Equipment, Chemicals, Packaging", "Other 1 – 5" should be named if used.

- a. Was this area available "Y" or not "N": The EHP must indicate "Y" or "N" in this line to either activate or de-activate the calculations pre-programmed. If some or all of the "(1) – (8)" was used "Y" must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.
- b. Question A – D.v: All the listed questions can be answered by indicating "Y", "N" or "NA". "NA" should only be used if a listed question in "Not Applicable" to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP's are all acquainted with the related legislation.

12. Processing Area: "Area 1 – 8" is available and should be renamed by the EHP as needed.

- a. Was this area available "Y" or not "N": The EHP must indicate "Y" or "N" in this line to either activate or de-activate the calculations pre-programmed. If some

or all of the “(1) – (8)” was used “Y” must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.

- b. Question A – E.iii: All the listed questions can be answered by indicating “Y”, “N” or “NA”. “NA” should only be used if a listed question in “Not Applicable” to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP’s are all acquainted with the related legislation.

13. Garbage / Waste Area: “Waste area 1 – 8” is available and can be changed by the EHP as needed.

- a. Was this area available “Y” or not “N”: The EHP must indicate “Y” or “N” in this line to either activate or de-activate the calculations pre-programmed. If some or all of the “(1) – (8)” was used “Y” must be indicated in the line for the ones used. This is a critical step that must not be omitted since it has a direct influence on the total compliance %.
- b. Question A – H.vi: All the listed questions can be answered by indicating “Y”, “N” or “NA”. “NA” should only be used if a listed question in “Not Applicable” to a certain facility. These questions derive from R962 and it is expected that the EHP refer back to the legislation for specific amounts and descriptions needed for this section. It is thus taken for granted that the EHP’s are all acquainted with the related legislation.

14. After each section is completed the % of compliance will show in the line “% COMPLIANCY”. The % will show even if the top line was not activated. Ensure it is activated where necessary.

15. Click on the TAB at the bottom to move to the next sheet called “% Compliance”. When this TAB is checked before the Inspection sheet is completed you would see “0” and “#DIV/0!” and at the end it would indicate “TOTAL % COMPLIANCY ###”. Translated this means “Do not change any of this, go back and complete the Inspection check sheet and then return.”

16. Once the inspection sheet is completed the final % will be displayed and will be color coded. This is a summary of the findings.

- a. **Green** – 80% to 100%.
- b. **Blue** – 60% to 79%.
- c. **Yellow** – 40% to 59%.
- d. **Orange** – 21% to 39%.
- e. **Red** – 0% to 20%.

17. Page 13 must be used for specimens (samples) collected at the specific facility. (one sample per line).

- a. Sr No: The serial number, start at 1, 2, 3, etc.
- b. Source (where): Indicate where in the facility the sample was taken.

- c. Type (Food/Swab): Indicate if a food sample or a swab sample was taken.
- d. Name of Lab sent to: Indicate the name of the Lab and the area.
- e. Reference Number: A unique number per sample must be provided in order to trace the sample.
- f. Results: once the results were obtained this block must be completed.
- g. Comply Yes/No: Indicate if the results complied or not.

18. After completion you are kindly requested to forward this document to Agent02EOC@nicd.ac.za and cc Daniel.nkuna@health.gov.za

Kind regards

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