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| **DEPARTMENT OF HEALTH SERVICES**  Division of Public Health  F-01766 (07/2016) | | | **STATE OF WISCONSIN** | | | | | | | | | |
| **THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP) SHELTER REVIEW** | | | | | | | | | | | | |
| A biannual review is required of Wisconsin shelters that are authorized to use USDA Commodity Foods in meal preparation for or by guests. This on-site review is completed by the external reviewing agency after the shelter has completed a TEFAP self-assessment and has corrected any areas of non-compliance it has self-identified. | | | | | | | | | | | | |
| Shelter Name | | | | | Review date | | | | | | | |
| Street Address | | | City | | | | | | Zip Code | | | |
| Email Address for Shelter | Phone Number | | | | | Emergency Phone Number | | | | | | |
| Reviewer | | | Reviewer’s Agency | | | | | | | | | |
|  | |
| **A. Civil Rights** | |
|  | | | | **Yes** | | | **No** | | |  | | |
| 1. The Shelter displays “And Justice for All”  Comments: | | | |  | | |  | | |
|  | | | | | | | | |
| 2. Are staff and volunteers trained annually in TEFAP Civil Rights Requirements?  Comments: | | | |  | | |  | | |  | | |
|  | | | | | | | | |
| 3. Has the Shelter had any civil rights complaints? | | | |  | | | |  | | |  |  |
| If yes, describe the situation and the outcome: | | | | | | | | | | | | |
|  | |
| **B. Serving Participants** | |
|  | | | | **Yes** | | | | **No** | | | **Unable to Observe** | |
| 1. Are interactions with guests respectful? | | | |  | | | |  | | |  | |
| Comments: | | | | | | | | | | | | |
| 2.Are memberships, fees, donations or religious participation required? | | | |  | | | |  | | |  | |
|  | | | | | | | | |
| Comments: | | | | | | | | | | | | |

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| 3. How are meals prepared at the Shelter? (Check one of the following):  Guests use TEFAP commodities to prepare meals for their own households.  The Shelter prepares meals for guests.  Guests prepare some meals themselves; some meals are prepared by the Shelter. |

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| **C. Food Storage and Inventory** |
|  | | **Yes** | | **Needs**  **Attention** | | **No** |
| 1. Are the kitchen and food preparation areas clean?  Comments: | |  | |  | |  |
|  | | | | |
| 3. Are dry storage floors, walls, ceiling and shelving clean?  Comments: | |  | |  | |  |
|  | | | | |
| 4. Are there cleaning logs that record what was cleaned and when?  Comments: | |  | |  | |  |
|  | | | | |
|  | | **Yes** | **No** | |  | | |
| 5. Is there at least 4” between food and walls (both in all dry storage and in walk-in units)?  Comments: | |  |  | |
|  | | | | |
| 6. Is food stored at least 6” off of the floor (in both dry storage and walk-in units)?  Comments: | |  |  | |  | | |
|  | | | | |
| 7. Is food in dry goods areas stored at least 24” below the ceiling?  Comments: | |  |  | |  | | |
|  | | | | |
| 8. Do temperature logs regularly record interior temperatures of freezers and refrigerators?  Comments: | |  |  | |  | | |
|  | | | | |
| 9. Are recorded freezer temperatures at 0 degrees Fahrenheit or colder?  Comments: | |  |  | |  | | |
|  |  | |  | | |
| 10. Are recorded refrigerator temperatures between 35 and 41 degrees?  Comments: | |  |  | |  | | |
|  |  | |  | | |
| 11. Are recorded dry storage temperatures consistently within 50-70 degrees Fahrenheit?  Comments: | |  |  | |  | | |
|  | | | | |
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| 12. How are pests controlled?  Contracted  Self-inspection/remediation  No apparent pest control  (If self-inspection, describe the actions the Shelter takes and when): | | | | | | | |

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|  | | **Yes** | **No** |  |
| 13. Are pest inspections either logged or documented by a contracted service?  Comments: | |  |  |  |
|  | | |
| 14. Are cleaning supplies and non-food items stored separately from food stocks?  Comments: | |  |  |  |
|  | | |
| 15. Are windows, doors, walls and roof well-sealed to prevent pest entry or water damage?  Comments: | |  |  |  |
|  | | |
| 16. Are the Shelters storage areas free of freezer or refrigerator condensing units; uninsulated steam and/or hot water pipes, water heaters or other heat producing devices?  Comments: | |  |  |  |
|  | | |
| 17. How the Shelter ensure that food is protected from theft?  Comments: | |  |  |  |
|  | | |
|  |
| **D. Inventory** |
|  | | **Yes** | **No** |  |
| 1. Does the Shelter track inventory and practice “first-in, first-out” inventory?  What is the Shelter’s method of implementing this and other inventory control? | |  |  |  |
|  | |
| 2. How does the Shelter show that it meets the TEFAP 1:1 match requirement? (Check all that apply): | | | | |
| The Shelter weighs incoming food.  The Shelter uses receipts of purchased food.  Other | | | | |

3. Has the Shelter received spoiled, damaged or “shorted” commodities in the past 12 months?  Yes  No

IF yes, describe:

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| **E. Overall Comments** |