

# Record Keeping Action Plan

Date: \_\_\_\_\_ Reviewer: \_\_\_\_\_ Field or Commodity: \_\_\_\_\_

Management Area	Best Practice	Minor Adjustment	Concerns Exist	Prioritize Changes Here	Your Plans to Reduce Risks			
					Action for Improvement	Person Responsible	Estimated Cost	Target Date
Record keeping								
Product identification								
Annual food safety self assessments								
Written recall plan								
Recall plan contents								

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Management Area	Best Practice	Minor Adjustment	Concerns Exist	Prioritize Changes Here	Your Plans to Reduce Risks			
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Notification contacts in case of a recall								
Mock recall and traceback verification								
Records of customer complaints related to food safety or quality								

# Check Sheet for Field Toilets, Hand Washing Facilities, Drinking Water and Safety Kit

Date	Toilet & Hand Washing Facilities		Water		Soap		Paper Towels		Toilet Paper		Trash Can		Drinking Water		Single Use Cups		First Aid Kit		Employee Initials
	Checked	Cleaned	Checked	Filled	Checked	Filled	Checked	Filled	Checked	Filled	Checked	Emptied	Checked	Filled	Checked	Stocked	Checked	Stocked	

Sheet Reviewed by: \_\_\_\_\_ on \_\_\_\_\_  
(Management) (Date)