

**MLY ECOSURE ACTION PLAN**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TODAY’S DATE** | 1/20/2024 | **DATE OF AUDIT** | 1/19/2024 | **ACTION PLAN DUE DATE** | 1/20/2024 | **STORE #** | 5002 |

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# AREAS OF IMPROVEMENT

List all areas that were marked as violations on your Ecosure Evaluation.

***CRITICALS***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **VIOLATION** | **CORRECTIVE ACTION TAKEN** | **DELEGATED TO** | **DUE DATE** | **COMPLETED** |
| Hand washing | Coach team proper procedure | All | ASAP | Y |
| Hierarchy not followed | Move pork to shelf by itself | Marc | ASAP | Y |
|  |  |  |  |  |
|  |  |  |  |  |

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***MAJORS***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **VIOLATION** | **CORRECTIVE ACTION TAKEN** | **DELEGATED TO** | **DUE DATE** | **COMPLETED** |
| Corrective action temp logs/ no manager signatures | Coach Team | All | ASAP | In Prog |
| Expired Bulk Product, labels not done correctly | Coach Team | All | ASAP | Y |
| No MSDS for dial soap in ladies room | Threw it away | Marc | ASAP | Y |
|  |  |  |  |  |

***MINORS***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **VIOLATION** | **CORRECTIVE ACTION TAKEN** | **DELEGATED TO** | **DUE DATE** | **COMPLETED** |
| Rotation of prep in walk in | Coach team to rotate | All | ASAP | In Prog |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

# PROGRESS MONITORING

Provide an evaluation schedule to monitor progress of completing this action plan.

## **FOLLOW-UP SCHEDULE**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE SCHEDULED** | **ACTIVITY** | **CONDUCTED BY** | **DATE COMPLETED** |
|  |  |  |  |