

INFRASTRUCTURAL FACILITIES/OTHER PROVISIONS OF KITCHEN: Max. Marks (100)

Name of the SHG :
 Address of SHG :
 Address of the kitchen :
 Details of AWCs (AWC No.s) catered by the SHG :
 Name of the ICDS Project :
 Name of the concerned MNPO :

A) Marks for decentralized Kitchen for SHG: No. of Kitchen x 10
 No. of SHGs catered to **10**

B) Kitchens setup in: (select any one) **5**
 i) Separate Kitchen Area in Pucca Building (5) ii) Kitchen in Shared Housing unit (3) iii) Sheds (2)

C) Hygienic condition of the Kitchen: **10**

S.N.	Item/activity	Maximum No.	No. Given
1.	Proper drainage facility	2	
2.	Proper and safe disposal of waste material		
3.	Cleanliness of surrounding area of kitchen	2	
4.	Cleanliness with in the kitchen		
5.	Installation and working condition of Exhaust Fan/Duct/Chimney in the kitchen	2	
6.	7 feet Walls of kitchen covered with	2	
	(i) white tiles		
	(ii) Washable Paint		
7.	Storage area of ingredients kept free from rodents and pests	1	

Total

D) Floor of kitchen covered by (select any one) **5**
 i) Kota stone (5) ii) Tiles etc.(3) iii) Cemented floor (2) iv) Floor uneven and not maintained (0)

E) Regular fumigation and pesticides done on- (Select any one) **5**
 i) Monthly basis (5) ii) Quarterly basis (3) iii) Half yearly basis (1)

Last fumigation done on dated _____

F) Sources of water used for cooking and drinking: (Select any one) **5**
 i) Potable (Drinking) DJB Supply (5) ii) RO/Filtration (3) iii) Tanker Supply (2) iv) Ground Water (-5)

G) Transportation of cooked food to AWC from centralized kitchen: **(10)**
 i) Whether food grade steel containers with paper seals are used for supply of cooked food? Yes (2) No (0)
 ii) Whether containers with paper seals are marked AWC wise for supply of cooked food? Yes (2) No (0)
 iii) Whether cooked food is supplied on time as per schedule? Yes (2) No (0)
 iv) Whether the food is being prepared as per the Menu/Recipe Yes (2) No (0)
 v) Whether Kitchen/SHG Board (size 5x3) displayed outside the kitchen Yes (2) No (0)

H) Average distance of kitchen from AWC- (select any one) **5**
 a) Up to 1 K.M. (5) b) Between 1 to 2 K.M. (3) c) Above 2 K.M. (2) d) Above 3 Km (1)

I) Whether quality and quantity of cooked food is ensured before the distribution? **(20)**
 i) Whether AW Centre wise distribution register are being maintained at the kitchen 5
 ii) Whether item (ingredients) wise proper stock register are maintained daily at the kitchen 5
 iii) Whether fresh, food grade, Agmark /ISI mark ingredients are being used for cooking S.N. Food 5
 iv) Whether Fortnightly food samples are taken regularly for testing and such records are maintained 5

J) Assessment of SHG Members –

Awareness of the SHG members managing kitchen regarding - 10

- i) Location of Anganwadi Centres (2)
- ii) No. of ICDS beneficiaries AWC wise (2)
- iii) General awareness of menu/recipe (2)
- iv) Medical Checkup (2)
- v) Awareness about neighborhood/community (2)

K) Availability of electronic weighing machine in the kitchen 5

Yes (5) No (0)

L) Availability of following records in the kitchen 10

- i. Raw material (item wise) stock register (2)
- ii. Display of board (3x5ft.) outside kitchen with contact No.s (2)
- iii. Records for regular fumigation and pesticides done (2)
- iv. Inspection/Visitor's register (2)
- v. SHG meeting/minutes register and saving & credit ledger (2)

M) Name and Designation of person monitoring the kitchen from MNPO:

N) Whether the kitchen is visited by Sr. functionaries of MNPO other than regular staff, if yes the details of last such visit with name and designation of visitor from MNPO.

O) Comments/Remarks, if any-

Total Marks assigned out of 100: _____

Signature:.....

Signature:.....

Name and designation of Visiting Officer

Name and designation of Visiting Officer

Date and Time of Inspection

Date and Time of Inspection