**Nursery Name**:

**Certification Number**:

**Initial Facility Evaluation Date:**

***Note to auditor: As this is an Initial Facility Review, it is possible that various elements may not have occurred yet so actual historic examples may not be available for your review. In such cases please review the degree of preparedness you observe.***

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| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
| **A** | **4.0** | **General Description of Nursery** |  |  |
|  |  | Through discussion and observations, determine if the nursery description is accurate |  |  |
|  | 4.0, 4.2 | Ensure that an accurate set of maps of the production areas is accessible at the nursery.  (Nurseries certified under the Phase 1 Standard must have the isolation area location marked on their maps.) |  |  |

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| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
|  | 4.1 | Confirm that boxwood and pachysandra plant supplier contact information is attached to the Phase 1 Nursery Manual or is accessible electronically at the nursery (for example on invoices in accounts payable). |  |  |
|  | 3.0 | Confirm that the Risk Assessment Questionnaire has been completed |  |  |
| **B** | **2.0** | **Management Responsibilities** |  |  |
|  |  | Confirm the Certification Manager’s name and Phase 1 training. |  |  |
|  |  | Confirm the Crop Protection Manager’s name and Phase 1 training. |  |  |
|  |  | Confirm the Internal Auditor’s name and Phase 1 training. Does he or she understand the functions to be performed? |  |  |
|  |  | Confirm that staff positions, identified in the Phase 1 Nursery Manual, are assigned to that role. |  |  |
|  |  | Confirm that records of Phase 1 staff training are maintained |  |  |

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| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
| **C** | **4.0, 4.1, 4.2** | **Plant Identity and Certification Status** |  |  |
|  |  | Determine if boxwood and pachysandra plants can be traced to their origin (propagation on site or supplier propagator) |  |  |
|  |  | Determine if the methods of trace-back and trace forward described in the Phase 1 Nursery Manual can actually be done.  Select a random plant from inventory and ask to have it traced to its origin (documentation for trace back should be accessible or readily available). |  |  |
|  |  | Review examples of recent records related to the Nursery Manual and determine if they were completed as expected. |  |  |
| **D** | **4.1** | **Inspection of Incoming Plants** |  |  |
|  |  | Discuss with staff to verify the method of inspection is appropriate for incoming plants.  Confirm that staff positions performing incoming inspections have been trained.  Observe record formats to determine if there is adequate detail to properly document the inspection for symptomatic plants. |  |  |
| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
|  | 5.2.2 | Determine if an isolation area is available for uncertified plants |  |  |
|  | 5.2.3 | Determine if there is a procedure for handling received symptomatic boxwood and pachysandra plants that minimizes potential risk of Box Blight spread |  |  |
| **E** | 4.3 | **Shipping Inspection** |  |  |
|  | 5.5.1 | Discuss with staff to verify the method of inspection is appropriate for plants prepared for shipping. |  |  |
|  | 4.3 | Confirm shipping inspection records are maintained. |  |  |
|  | 5.5.2 | Determine the physical aspects of separating inspected plants from non-inspected plants in the shipping area. |  |  |
|  | 5.5.1 | Determine the physical aspects of separating received host plants from host prepared for shipping (separation distance is two (2) meters canopy to canopy). |  |  |
|  | 5.5.1 | Determine if there is a procedure for handling symptomatic boxwood and pachysandra plants in the shipping area that minimizes potential risk of Box Blight spread to other boxwood and pachysandra plants |  |  |
| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
|  | 4.3 | Confirm that certified and uncertified boxwood and pachysandra plants are identified on the shipping documents. |  |  |
|  | 4.3 | Confirm methods of identifying **uncertified** boxwood and pachysandra plants from other boxwood and pachysandra plants in the shipping processes and vehicle. |  |  |
|  | 4.3 | Confirm methods of communicating an uncertified status to customers |  |  |
| **H** |  | **Pest Management in Production** |  |  |
|  | 5.4.1 | Review several samples of recent pest monitoring and control records to determine if they are consistent with the stated Phase 1 Nursery Manual procedures. |  |  |
|  | 2.0  5.4.1 | Interview the persons designated as “pest scouts” or “plant inspectors” to verify their technical expertise in recognizing Box Blight symptoms. |  |  |
|  | 6.0 | Determine that there is a procedure for creating a restricted area if symptomatic boxwood and pachysandra plants are detected. |  |  |
|  | 6.1 | Confirm that sampling and testing methods are in keeping with the procedure outlined in the Phase 1 Nursery Manual and the Phase 1 Standard |  |  |
| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
|  | 6.1 | Confirm that there is a procedure to destroy boxwood and pachysandra plants confirmed cases of Box Blight and boxwood and pachysandra plants within a two (2) meter area around the infected plants |  |  |
|  | 6.1 | Determine if records are kept for sampling and testing as well as culling (destroying) infected plants. |  |  |
|  | 5.3 | Confirm the implementation of best management practices listed in the Phase 1 Nursery Manual. |  |  |
|  | 5.6, 6.1, 6.2 | Confirm the operation of stated biosecurity and sanitation policies listed in the Phase 1 Nursery Manual. |  |  |
|  | 5.6 | Confirm that there is a visitor policy in place and a visitor log is maintained if listed in the Phase 1 Nursery Manual |  |  |
| **J** | 7.1 | **Internal Audits** |  |  |
|  | 7.1 | Review a recent Internal Audit to confirm that it was conducted as described in the Phase 1 Nursery Manual, with attention to corrective actions flowing from the audit.  Given that this is an Initial Facility Evaluation, it is very likely that internal audits will not have started yet. |  |  |
| **Manual Section** | **Standard Section** | **Title / evaluation focus** | **Complete?**  **Yes/No/NA** | **Comments** |
| **K** | 7.2 | **External Audits** |  |  |
|  | 7.2 | Review the proposed method for scheduling external audits to confirm it is practical and will get the seasonal audits done on time.  Determine if the delegated staff positions understand the very significant impact of failing to schedule the required audits. |  |  |
| **L** | 1.1 | **Updates and changes to the Clean Plants Nursery Manual** |  |  |
|  | 1.1, 8.0 | Review the process of documenting modifications to procedures and the timely revisions of the Phase 1 Nursery Manual.  Confirm that the Phase 1 Nursery Manual versions are numbered. |  |  |
| Other general observations | |  | | | |
| N/A | | The auditor will list the numbers of the Corrective Action Requests produced as a result of this audit:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| N/A | | Anticipated date of the next audit is  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |