



## Minneapolis Healthy Corner Store Program Visual Assessment\*

Store Name: \_\_\_\_\_ Address: \_\_\_\_\_

1. Main Phone Number posted?  Y  N \_\_\_\_\_

2. Hours of Operations posted?  Y  N \_\_\_\_\_

3. What is the square footage of the entire store? \_\_\_\_\_

4. What is the square footage of the retail space? \_\_\_\_\_

5. Photos taken of store interior and exterior?  Y  N

6. Please draw the store layout (indicate aisles, entrance, register and refrigeration). If there fresh produce is sold, show location.

### Services provided by stores

Service	Yes/No	Comment/Describe
7. Accepts EBT	<input type="checkbox"/> Y <input type="checkbox"/> N	<b>Is there a sign?</b> Inside/Outside
8. Accepts WIC	<input type="checkbox"/> Y <input type="checkbox"/> N	<b>Is there a sign?</b> Inside/Outside
9. Has Kitchen or Deli Space	<input type="checkbox"/> Y <input type="checkbox"/> N	
10. Sells Heated Food	<input type="checkbox"/> Y <input type="checkbox"/> N	

### Existing Inventory of Fresh Produce and Healthy Foods

#### 11. Signage promoting fresh produce visible from:

Outside Store?  Y  N      Inside the Store?  Y  N

#### 12. Is there a scale available for weighing produce? Y N

Fresh fruits & vegetables	Quality 1= poor; 2=fair; 3=good	Price ( include unit- ex. per lb., each, etc. )	Product visible from store entrance?	Comments
13.			Yes / No	
14.			Yes / No	
15.			Yes / No	
16.			Yes / No	
17.			Yes / No	
18.			Yes / No	
19.			Yes / No	
20.			Yes / No	
21.			Yes / No	
22.			Yes / No	
23. Are there any point-of-purchase signs promoting the produce?				<b>Yes / No</b>

Other Healthy Items	Quality 1= poor; 2=fair; 3=good OR expired; not expired	Price ( include unit-ex. per lb., each, etc. )	Number of types?	Comments
<b>Beverages</b>				
24. Skim milk				
25. 1% milk				
26. 2% milk				
27. Water				
28. 100% fruit juice				
<b>Food Items</b>				
29. Whole grain or whole wheat bread				
30. Whole grain cereal				
31. Whole grain pasta				
32. Brown Rice				
33. Nuts				
34. Frozen Vegetables				
35. Canned Vegetables				
36. Frozen fruit				
37. Canned Fruit				

**How much space is devoted to (indicate number of aisles, endcaps, shelves, wireracks and refrigerator/freezers)**

Food type	# of aisles	# of end caps	# of shelves	# of wire racks	# of coolers	# of refrigerators/freezers
38. Fresh vegetables						
39. Fresh Fruit						
40. Whole grain food items						
41. Low-fat or skim dairy products						

**Available space for produce and healthy food options**

Resource	Yes	No	Don't Know
42. Unused refrigeration (not beverage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Unused freezer space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Unused shelf space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Unused counter space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Unused cooler space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Physical Description of Store (please rate the quality of the following):**

<b>Exterior</b>	<b>Quality</b> 1= poor; 2=fair; 3=good	<b>Comments</b>
47. Primary Entrance		
48. Lighting		
49. Awning		
50. Sidewalk		
51. Parking lot (if available)		
52. Public Trash Receptacles		
53. Overall cleanliness of exterior		
54. Are there any nearby schools? Yes/No		
55. Are there any nearby businesses? Yes/No		

<b>Interior</b>	<b>Quality</b> 1= poor; 2=fair; 3=good	<b>Comments</b>
56. Primary Entrance		
57. Lighting		
58. Shelving		
59. Cleanliness of Retail Area		
60. Cleanliness of Coolers		
61. Cleanliness of Receiving Area		
62. Organization of POS		

**Indicate the number, size, and type of contents of coolers and refrigeration and freezer units:**

<b>Unit</b>	<b>Approximate Size</b>	<b>Primary Contents</b>	<b>Are they full</b>	<b>Comments</b>
Example: 1 Freezer	5 ft x 2ft x 3ft	Ice cream, frozen juice	Yes / No	
63.			Yes / No	
64.			Yes / No	
65.			Yes / No	
66.			Yes / No	
67.			Yes / No	
68.			Yes / No	
69.			Yes / No	
70.			Yes / No	
71.			Yes / No	

**Does store appear to have available space for promotional materials related to healthy foods?**

<b>Resource</b>	<b>Yes</b>	<b>No</b>	<b>Don't Know</b>
72. Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. Interior next to existing Register	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Interior Wall space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. Other Counter space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76. End Caps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77. Shelves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78. Other (please describe):			

**ADDITIONAL COMMENTS:**

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**Creating a Healthier Minneapolis**  
**healthy eating + physical activity + smoke-free living**

Minneapolis Department of Health and Family Support (MDHFS)  
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\*Adapted from Delridge Corner Store Project