



Audit checklist Agriculture Hatcheries (Spotaudit)

Audit details			
Scheme participant			
QS locations audited			
Additional location information, e.g. coordinator or identification number			
Name of contact			
Regular audit	Initial audit		Follow-up audit
Spotaudit	X		
Random sample audit			
Audit of special purpose			
Parallel audit			
Date of audit (from)		Date of audit (until)	
Start of audit (hh:mm)		End of audit (hh:mm)	
Audit duration (hh:mm)			
Combined audit (norm/standard/programme)			
Certification body			
First name/surname of auditor			
Repeated D evaluation/general K.O.		Remark repeated D evaluation/general K.O.	
Comments			
Preliminary audit result			Number of agreed corrective actions

Place, date

Signature/s of auditor/s

I hereby confirm the data concerning the company and the audit.

I have received a copy of the audit report (at least front page) and of the corrective actions report.

Place, date

Signature of person responsible



Company details - Hatchery

Name of company	
Street and house number	
Postal code and town	
Telephone/fax number	
Email address	
QS location number (VVVO-No.)	
Registered production scope no.	
QS identification number	
Name of person responsible	

Scope - Hatchery

Production scope		Production number	Pre -/hatch breeding capacity
Production of day-old chicks			
	Hatchery broiler chicks	50	
	Hatchery turkey chicks	51	



Qualitätssicherung. **Vom Landwirt bis zur Ladentheke.**





Company: _____

Date: _____

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
<p>* = For this requirement the evidence or measurement tool used for evaluation of compliance with the QS requirement must be documented, regardless of the outcome of the assessment.</p>										
<p>2 General Requirements</p>										
<p>2.1 General system requirements</p>										
2.1.1 SPOT	1			General company data						
2.1.2	1			Incident and crisis management					X	
<p>2.2 Company management</p>										
2.2.1	1			Document handling					X	
2.2.2	1			Outer area					X	
<p>2.3 Self-Assessment</p>										
2.3.1	1			Absence of Salmonella					X	
2.3.2	1		D=K.O.	Microbiological tests					X	
2.3.3	1			Hygiene Concept					X	
2.3.4	1			Corrective actions					X	
2.3.5	1			Responsibilities					X	



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
2.3.6	1			Implementation and documentation of self-assessment					X	
2.4 Good hygiene practice										
2.4.1	1			Water hygiene					X	
2.4.2	1			Cleaning and disinfection					X	
2.4.3	1			Pest control					X	
2.4.4 SPOT	1			Technical/structural conditions						
2.4.5 SPOT	1			Room-, equipment- and facility hygiene						
2.5 Staff hygiene										
2.5.1 SPOT	1			General rules of conduct						
2.5.2	1			Staff rooms					X	
2.5.3 SPOT	1			Hygiene sluice						
2.6 Staff training										
2.6.1	1		D=K.O.	Hygiene- and professional training					X	
3 Requirements on handling hatching eggs and chicks										
3.1 General requirements										
3.1.1 SPOT	1		D=K.O.	Traceability						



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.1.2	1		D=K.O.	Labelling					X	
3.1.3 SPOT	1		D=K.O.	Animal welfare representative						
3.1.4 SPOT	1		D=K.O.	Handling chicks						
3.1.5 SPOT	1		D=K.O.	Debating of turkey chicks						
3.1.6 SPOT	1			Facilities for loading						
3.1.7	1			Climatic conditions in chick storage facilities					X	
3.1.8	1		D=K.O.	Transport container occupancy					X	
3.1.9 SPOT	1		D=K.O.	Identification of QS breeder flocks						
3.1.10	1		D=K.O.	Emergency power and cooling water supply, emergency plan					X	
3.2 Hatching storage and hatching process										
3.2.1 SPOT	1			Order and organisation						
3.2.2	1			Hatching egg access/ Incoming goods inspection					X	
3.2.3	1		D=K.O.	Health surveillance, salmonellae monitoring					X	
3.2.4 SPOT	1			Storage management of hatching eggs						
3.2.5	1		D=K.O.	Conditions of hatching process					X	
3.3 Animal health										



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.3.1 SPOT	1		D=K.O.	Examination of chicks						
3.3.2 SPOT	1		D=K.O.	Facility for emergency stunning and killing						
3.3.3	1		D=K.O.	Care contact with farm veterinarian					X	
3.3.4	1			Implementation of veterinary care					X	
3.3.5	1		D=K.O.	Medicines and vaccines					X	
3.4 Outgoing goods control, complaint management, packaging material										
3.4.1	1			Outgoing goods control					X	
3.4.2	1			Complaint management					X	
3.4.3	1			Packaging material					X	
3.5 Livestock transport										
3.5.1	1			Check of livestock transport company					X	
4 Further facility tools and rooms										
4.1 Washing of containers and storage of equipment										
4.1.1 SPOT	1			Crate cleaning						
4.1.2	1			Storage room of cleaning an disinfection solution					X	
4.2 Waste disposal										



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
4.2.1	1			Disposal logistics					X	
4.3 Vehicle fleet										
4.3.1 SPOT	1			Cleaning facilities for transporters						
4.3.2	1			Cleaning and disinfection of livestock transporters					X	
4.3.3	1			System of climate management					X	
5 Use of certification mark										
5.1 Use of certification mark										
5.1.1	1		D=K.O.	Use of QS certification mark					X	



Company: _____ Date _____

Calculation of audit result

1. Balance of subtotals

Calculation	A	B	C	D	E
(1) Number of evaluations					

Sum of evaluations (excluding E evaluations)	
---	--

2. Calculation of the proportion of C and D evaluations*

Proportion of C evaluations		(Number of C evaluations / sum of evaluations) * 100
Proportion of D evaluations		(Number of D evaluations / sum of evaluations) * 100
Proportion of C and D evaluations		Proportion of C + proportion of D

3. Preliminary audit result

	Percentage of C evaluations	Percentage of D evaluations	Percentage of C+D evaluations	Audit result
<p>*Status I: If the 5 % target is exceeded, status I will still be assigned if there is only one C-evaluation.</p> <p>**Status II: If the percentage with regard to the proportion of D evaluations is exceeded, status II is assigned if only one D evaluation exists and no C evaluation</p>	max. 5,0%	0,0%		QS-Status I*
	max. 10,0%	max. 3,0%	max. 10%	QS-Status II**
	max. 20%	max. 10%	max. 20%	QS-Status III
Number of K.O.		<p>Percentages exceeded</p> <p style="text-align: center;">Audit not passed.</p>		
	K.O.	<p style="text-align: center;">Audit not passed.</p>		
	General K.O./ repeated D evaluation	<p style="text-align: center;">Audit not passed.</p>		



Qualitätssicherung. Vom Landwirt bis zur Ladentheke.



Company:

Date:

Corrective actions report

I hereby confirm that the following corrective actions were agreed upon between me and the auditor.

The certification body is to be informed no later than the expiry of the deadline set out in the action plan about the implementation of a corrective action.

Place, date

Signature/s of auditor/s

Signature of person responsible

Serial no.	Requirement No.	Evaluation (C, D/K.O.)	Description of nonconformity	Agreed corrective actions	Scope	Deadline for correction
1						
2						
3						
4						
5						
6						
7						
8						



Qualitätssicherung. Vom Landwirt bis zur Ladentheke.



Company:

Date:

Review of the implementation of corrective actions

Place, date

Signature/s of auditor/s

Serial no.	Implemented	Not implemented	Comments (if any)	Date
1				
2				
3				
4				
5				
6				
7				
8				