



Audit checklist Storage of Meat and Meat Products (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 - Storage meat and meat products

Name of company	
Street and house number	
Postal code and town	
Telephone/fax number	
Email address	
QS location number	
QS identification number	
Name of person responsible	

Scope - Storage meat and meat products

Production scope		Production number
	Storage of meat and meat products	87
	Own storage of meat and meat products	88



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 scheme requirements</p>										
2.1.1	1	„		Company data					X	
2.1.2	1	„		Use of QS certification mark					X	
2.1.3	1	„		Incident and crisis management					X	
2.1.4	1	„		Document handling					X	
2.1.5 SPOT	1	„		Company premises and access regulations						
2.1.6	1	„		Monitoring of test equipment					X	
2.1.7	1	„		Commissioning of service providers					X	
<p>2.2 HACCP</p>										
2.2.1	1	„	D=K.O.	HACCP-concept *					X	
2.2.2	1	„		HACCP team					X	
2.2.3	1	„		Flow chart					X	



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
2.2.4	1	„		Hazard analysis					X	
2.2.5	1	„		Control points (CP)					X	
2.2.6	1	„		Limit values for CP					X	
2.2.7	1	„		Monitoring and verification of limit values for CP					X	
2.2.8	1	„		Corrective actions for CP					X	
2.2.9	1	„		Responsibilities					X	
2.2.10	1	„		Documentation					X	
2.2.11	1	„		HACCP verification					X	
2.3 Good hygiene practice										
2.3.1	1	„		Water quality						
2.3.2	1	„		Technical/structural condition					X	
2.3.3	1	„		Room, equipment and plant hygiene					X	
2.3.4	1	„		Cleaning and disinfection					X	
2.3.5 SPOT	1	„		Foreign matter management						
2.3.6 SPOT	1	„	D=K.O.	Contamination risk						
2.3.7	1	„		Clear floor area					X	



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
2.3.8 SPOT	1	„		Staff hygiene						
2.4 Staff training										
2.4.1	1	„	D=K.O.	Hygiene training/IfSG					X	
2.4.2	1	„		Information on the QS scheme					X	
2.5 Disposal logistics/returns										
2.5.1	1	„		Technical/structural condition					X	
2.5.2	1	„		Returns management					X	
3 Storage location requirements										
3.1 Process-specific requirements										
3.1.1	1	„		Order and organization					X	
3.1.2 SPOT	1	„		Storage management						
3.1.3 SPOT	1	„	D=K.O.	Goods inspection *						
3.1.4	1	„		Transport vehicles					X	
3.1.5	1	„	D=K.O.	Product temperature					X	
3.1.6 SPOT	1	„		Clear floor area						
3.1.7	1	„		Staff rooms and sanitary facilities					X	

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.1.8	1	„		Pest monitoring/control *					X	
3.2 Dry storage										
3.2.1	1	„		Technical/structural condition					X	
3.2.2 SPOT	1	„		Room, equipment and plant hygiene						
3.2.3 SPOT	1	„		Best-before date						
3.3 Cold and frozen storage										
3.3.1	1	„		Technical/structural condition					X	
3.3.2 SPOT	1	„		Room, equipment and plant hygiene						
3.3.3 SPOT	1	„	D=K.O.	Temperature recording and monitoring *						
3.3.4 SPOT	1	„	D=K.O.	Best-before date/ use-by date						
3.4 Packaging/storage transfer										
3.4.1	1	„		Technical/structural condition					X	
3.4.2 SPOT	1	„		Room, equipment and plant hygiene						
3.4.3 SPOT	1	„		Clear floor area						
3.4.4 SPOT	1	„		Packaging material						
3.4.5	1	„	D=K.O.	Declaration of conformity/declaration of no objection					X	



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.4.6 SPOT	1	„	D=K.O.	Temperature recording and monitoring *						
3.5 Freeze and thawing										
3.5.1	1	„		Technical/structural condition					X	
3.5.2 SPOT	1	„		Room, equipment and plant hygiene						
3.5.3 SPOT	1	„		Clear floor area						
3.5.4	1	„		Process control					X	
4 Traceability and origin of goods										
4.1 Traceability method and test										
4.1.1	1	„	D=K.O.	Traceability method					X	
4.1.2 SPOT	1	„	D=K.O.	Separation and identification of QS goods/non-QS goods						
4.1.3	1	„	D=K.O.	Traceability test*					X	
4.1.4 SPOT	1	„	D=K.O.	Check of eligibility to deliver into the QS scheme within the scope of service provider						



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)	
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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.	Percentages exceeded			Audit not passed.
	K.O.	Audit not passed.		
	General K.O./ repeated D evaluation	Audit not passed.		



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				