Audit checklist Wholesale 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 - Wholesale 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 - Wholesale meat and meat products

Production scope		**Production number**
	Meat wholesale	80
	Central warehouse (meat and meat products)	61

Company: _____ Date: _____

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
*** = 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.**										
2	**General requirements**									
2.1	**General scheme requirements**									
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		**D=K.O.**	Conducting self-assessments						
2.1.8	1			Completion of corrective actions in the case of nonconformity					X	
2.1.9	1			Commissioning service providers					X	
2.2	**HACCP**									
2.2.1	1		**D=K.O.**	HACCP-concept *					X	

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
2.2.2	1			HACCP-team					X	
2.2.3	1			Product description					X	
2.2.4	1			Flow chart					X	
2.2.5	1			Hazard analysis					X	
2.2.6	1			Critical control points (CCP)					X	
2.2.7	1			Limit values for CCP/CP					X	
2.2.7	1			Control points (CP)					X	
2.2.9	1			Monitoring and verification of limit values for CCP/CP					X	
2.2.10	1			Corrective actions for CCP/CP					X	
2.2.11	1			Responsibilities					X	
2.2.12	1			Documentation					X	
2.2.13	1			HACCP verification					X	
2.3	**Good manufacturing and hygiene practice**									
2.3.1	1			Water quality					X	
2.3.2	1			Cleaning and disinfection					X	
2.3.3	1			Pest monitoring/control *					X	

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
2.3.4 SPOT	1			Foreign matter management						
2.3.5 SPOT	1		**D=K.O.**	Contamination risk						
2.4	**Technical/structural condition**									
2.5	**Room, equipment and plant hygiene**									
2.6	**Clear floor area**									
2.7	**Staff hygiene**									
2.7.1 SPOT	1			General rules of conduct						
2.7.2	1			Staff rooms and sanitary facilities					X	
2.7.3 SPOT	1			Hygiene sluice						
2.8	**Staff training**									
2.8.1	1		**D=K.O.**	Hygiene training/Infection Protection Act					X	
2.8.2	1			Information on the QS scheme						
3	**Process-specific requirements**									
3.1	**Incoming goods**									
3.1.1	1			Technical/structural condition					X	
3.1.2 SPOT	1			Room, equipment and plant hygiene						

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.1.3 SPOT	1			Clear floor area						
3.1.4 SPOT	1			Order and organization						
3.1.5	1			Transport vehicles delivery					X	
3.1.6 SPOT	1			Incoming goods inspection *						
3.1.7	1		**D=K.O.**	Labelling procured QS goods *					X	
3.1.8	1		**D=K.O.**	Product temperature					X	
3.1.9	1		**D=K.O.**	Returns management					X	
3.1.10	1			Complaints management					X	
3.2	**Storage**									
3.2.1	1			Technical/structural condition					X	
3.2.2 SPOT	1			Room, equipment and plant hygiene						
3.2.3 SPOT	1			Clear floor area						
3.2.4 SPOT	1			Storage management						
3.2.5	1			Best-before date					X	
3.3	**Cold storage**									
3.3.1	1			Technical/structural condition					X	

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.3.2 SPOT	1			Room, equipment and plant hygiene						
3.3.3 SPOT	1			Clear floor area						
3.3.4 SPOT	1			Storage management						
3.3.5 SPOT	1		**D=K.O.**	Temperature recording and monitoring *						
3.3.6 SPOT	1		**D=K.O.**	Best-before date/use-by date						
3.3.7	1			Species-specific product separation					X	
3.4	**Frozen storage**									
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			Storage management						
3.4.5 SPOT	1		**D=K.O.**	Temperature recording and monitoring *						
3.4.6 SPOT	1		**D=K.O.**	Best-before date						
3.5	**Packaging/redistribution**									
3.5.1	1			Technical/structural condition					X	
3.5.2 SPOT	1			Room, equipment and plant hygiene						

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.5.3 SPOT	1			Clear floor area						
3.5.4 SPOT	1			Packaging material						
3.5.5	1		**D=K.O.**	Declaration of conformity/declaration of no objection					X	
3.5.6	1			Storage of packed goods					X	
3.5.7	1			Goods storage and transport containers					X	
3.5.8 SPOT	1		**D=K.O.**	Temperature recording and monitoring *						
3.5.9 SPOT	1		**D=K.O.**	Product labelling meat/meat products						
3.6	**Picking, outgoing goods/dispatch**									
3.6.1	1			Technical/structural condition					X	
3.6.2 SPOT	1			Room, equipment and plant hygiene						
3.6.3 SPOT	1			Clear floor area						
3.6.4	1			Order and organization					X	
3.6.5 SPOT	1			Outgoing goods inspection						
3.6.6 SPOT	1		**D=K.O.**	Labelling of marketed QS goods *						
3.6.7 SPOT	1		**D=K.O.**	Product temperature						
3.7	**Further plant sections and spaces**									

Requirement no.	Factor	Filter[1]		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
3.7.1 SPOT	1			Packaging material storage						
3.7.2 SPOT	1			Cleaning and disinfection agent storage						
3.7.3	1			Disposal logistics					X	
3.7.4	1			Rinsing area					X	
3.8	**Freeze and thawing**									
3.8.1	1			Technical/structural condition					X	
3.8.2 SPOT	1			Room, equipment and plant hygiene						
3.8.3 SPOT	1			Clear floor area						
3.8.4	1			Process control					X	
4	**Traceability and origin of goods**									
4.1	**Traceability method and inspection**									
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	1		**D=K.O.**	Reconciliation of incoming goods with outgoing goods *					X	
4.1.5 SPOT	1		**D=K.O.**	Check of QS eligibility of delivery into the QS scheme of suppliers and customers						

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

***Status I:** If the 5 % target is exceeded, status I will still be assigned if there is only one C-evaluation.
****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

Number of K.O.	

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

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				