

Audit checklist Agriculture Pig (Spotaudit)

Audit details			
Scheme participant			
QS locations audited			
Additional location information, e.g. coordinators or identification number			
Name of contact			
Spotaudit	X		
Random sample audit			
Audit of special purpose			
Parallel audit			
Date of audit (from)		Date of audit (until)	
Start of audit (hh:mm)		Ende 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 results		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 - Pig farming

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	
Name of coordinator	

Scope - Pig farming (#mandatory;##including outdoor access or open-front-stables: valid for production scopes 2001, 2002, 2008; Number of places = maximum number of places that can be used)

Production scope	Production number	Indoor [#]	Number of places	Outdoor [#] ,##	Number of places
Pig farming					
Pig production	2001				
Gilt / boar rearing	2002				
Sow and piglets production	2004				
Piglet rearing	2008				

Additional information - Pig farming

	yes	no
On farm mixer (production of own feed materials and compound feedstuff)		
Use of commercial mobile feed milling and mixing plants		
Transport (own animals, own vehicles)		
Transport less than 50 km		
Transport less than 65 km		
Transport over 65 km		

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. # = In case of a nonconformity the corrective action for this criterion has to take place within 28 days (only valid for production, food retail, QS-GAP and FIAS!) .										
2 General requirements										
2.1 General system requirements										
2.1.1 SPOT	1	P		General company data						
2.1.2	1	P		Incident and crisis management					X	
a 3 Livestock production requirements										
a 3.1 Traceability and labelling										
a 3.1.1	1	P		Purchasing and incoming goods					X	
a 3.1.2 SPOT	1	P		Verification of eligibility of delivery *						
a 3.1.3	1	P	D=K.O.	Marking and identification of livestock					X	
a 3.1.4	1	P	D=K.O.	Origin and marketing *					X	

Require ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.1.5	1	P	D=K.O.	Stock records *					X	
a 3.1.6	1	P		Livestock transport *						
a 3.2 Animal welfare farming										
a 3.2.1 SPOT	1	P	D=K.O.	Monitoring and care of livestock *						
a 3.2.2 SPOT	1	P	D=K.O.	General farming requirements *						
a 3.2.3 SPOT	1	P	D=K.O.	Handling sick and injured animals *						
a 3.2.4 SPOT	1	P		Shed floor *						
a 3.2.5 SPOT	1	P		Shed climate and noise						
a 3.2.6 SPOT	1	P		Lighting *						
a 3.2.7 SPOT	1	P	D=K.O.	Space allowances *						
a 3.2.8 SPOT	1	P	D=K.O.	Alarm system *						
a 3.2.9	1	P		Emergency power supply					X	
a 3.2.10 SPOT	1	P		Requirements on loading and unloading equipment for livestock transport						

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.2.11 Sc SPOT	1	P	D=K.O.	Activity material *						
a 3.2.12 Sc	1	P	D=K.O.	Piglet castration					X	
a 3.3 Feed and feeding										
a 3.3.1 SPOT	1	P	D=K.O.	Feed supply *						
a 3.3.2 SPOT	1	P		Hygiene of feeding facilities						
a 3.3.3 SPOT	1	P		Usage and storage of feed						
a 3.3.4	1	P	D=K.O.	Feed procurement *					X	
a 3.3.5	1	P		Assignment of compound feed deliveries (bulk) to location numbers					X	
a 3.3.6	1	P		Feed production (on-farm mixer)					X	
a 3.3.7	1	C,P		Feed production in cooperation					X	
a 3.3.8	1	P	D=K.O.	Use of service providers for feed production					X	
a 3.4 Drinking water										
a 3.4.1 SPOT	1	P	D=K.O.	Water supply *						


Require ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.4.2 SPOT	1	P		Hygiene of drinking facilities						
a 3.5 Animal health/medication										
a 3.5.1	1	P		Care contract with farm veterinarian					X	
a 3.5.2	1	P	D=K.O.	Implementation of the stock care *					X	
a 3.5.3	1	P	D=K.O.	Procurement and application of medicines and vaccines					X	
a 3.5.4 SPOT	1	P	D=K.O.	Storage of medicines and vaccines *						
a 3.5.5 SPOT	1	P	D=K.O.	Identification of treated livestock						
a 3.6 Hygiene										
a 3.6.1 SPOT	1	P		Buildings and equipment						
a 3.6.2 SPOT	1	P		Hygiene on the farm						
a 3.6.3 Sc SPOT	1	P		Handling of litter and activity material						
a 3.6.4 SPOT	1	P		Carcass storage and pick- up *						
a 3.6.5 SPOT	1	P		Pest monitoring and control *						

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.6.6	1	P		Special hygiene requirements *					X	
a 3.7 Monitoring programme										
a 3.7.1 Sc	1	P		Salmonella monitoring					X	
a 3.8 Transport of own livestock										
a 3.8.1 SPOT	1	P		Requirements for the means of transportation						
a 3.8.2	1	P	D=K.O.	Available space during livestock transport *					X	
a 3.8.3 SPOT	1	P		Cleaning and disinfection of means of transportation						
a 3.8.4	1	P		Delivery documents					X	
a 3.8.5	1	P	D=K.O.	Time intervals for feeding and watering as well as duration of transportation and resting times (for					X	
a 3.8.6	1	P		Transport papers (for livestock transport over 50 km)					X	
a 3.8.7	1	P	D=K.O.	Proof of qualification for drivers/carers (for livestock transport over 65 km)					X	
g II VLOG-Additional Module										
g II.1 Requirement (only relevant for locations registered for VLOG-Additional Module)										

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
g II.1.1 SPOT	0	P		Requirement "ohne Gentechnik"						

Company _____

Date: _____

Require ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D	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.										
e I regional windows										
e I.1 Requirement (only relevant for locations registered for Regionalfenster via their coordinator)										
e I.1.1	1			Identification of regional goods					X	
e I.1.2	1			Marking of delivery documents					X	

Company _____ Date _____

Calculation of audit result

1. Balance of subtotals

Calculation	A	B	C	D	E
(1) Number of evaluations					69
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 are only 2 C-evaluations.</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
		Percentages exceeded	Audit not passed.		
Number of K.O.		K.O.	Audit not passed.		
		General K.O./ repeated D evaluation	Audit not passed.		

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.

Note: The correction deadline is a maximum of 28 days for all FIAS requirements and the documentation requirements: 2.1.1, 2.1.2, 3.4.1 und 3.9.5 (only valid for production, food retail, QS-GAP and FIAS!)

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 (CGF,C,P)	Deadline for correction
1						

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				