### What this section aims to do

- To provide Post with a checklist to ensure that the Critical Control Points identified in the analysis of food safety hazards are being implemented.
- To provide a self-inspection sheet that will record any defects found during the inspection and identify who is to undertake the remedial work and when it is to be completed.

### What you need to do

### Internal inspections

- Photocopy a sufficient number of the record sheets entitled *Form 4.1*.
- Using the form, the person identified to carry out the self-inspections in the Food Safety Policy (Section 1 of the Manual) should, on a quarterly basis, carry out a self-inspection of all food rooms.
- The remedial action should be identified and marked off on completion.
- The self inspection sheets should be submitted to the person responsible for counter signature.
- Internal audits should be filed in this section of the manual.

Pest	control
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•	The <b>pest control logbook</b> is located here:	
	p	

Pest control advice sheets should be marked off with the details of the action taken as well as the date
it was taken.

### TWO/SOST Auditor

 Copies of the audit reports from FCO Services TWO/SOST auditor relating to Food Safety issues should be filed in this section of the manual or the records folder. Dates on which the remedial action was carried out must be entered on the reports.

#### Enforcement Agencies (Environmental Health Officers/Health Inspectors)

- Record visits from Enforcement Officers on Form 4.2.
- Correspondence from Enforcement Officers should be filed in this section of the manual or the records folder.
- Reports should be marked off with the details of the action taken as well as the date it was taken. It is recommended that you write back to the EHO/Health Inspector.

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# **Section 4: Inspections**

Forms

Form number	Form title
4.1	Internal audit form: Food Hygiene
4.2	Record of Environmental Health Officer visits

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## Form 4.1: Internal Audit Form: Food Hygiene

Area		Comment	Date completed
1. Temperature control			
Fridges ≤5°C			
Freezers ≤-18°C			
Hot holding ≥63°C			
Correct chilling practices			
Water temperature ≥50°C			
Dishwasher operating correctly			
2 temperature probes available with wipes (or 'gun' in place of one probe)			
	<i>l</i> 7		
2. Contamination			
No cross contamination during storage			
No cross contamination during handling			
Glass restricted/controlled			
Food covered during storage			
Adequate spray sanitisers provided			
Correct use of sinks			
Adequate wash hand facilities			
Food containers stored off the floor			
No other cause of contamination			
	/9		
3. Stock rotation			
Foods within 'use by' dates			
Foods within 'best before' dates			
Prepared foods date coded			

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## **Section 4: Inspections**

Area		Comment	Date completed
No other stock rotation issue			
	/4		
4. Cleaning			
Rubbish bins clean and not overflowing; lidded during storage			
Equipment clean			
Structure clean			
No other cleaning issue			
	/4		
5. Personal hygiene			
Correct protective clothing being worn			
Hands being washed as appropriate			
Jewellery not worn (personal hygiene policy complied with)			
Staff facilities in good condition			
No other personal hygiene issues			
	/5		
6. Pest control			
No evidence of pest activity			
Electric fly killer functioning			
No proofing issues			
	/3		
7. Structure			
Walls in good condition			
Floors in good condition			
Ceilings in good condition			
Adequate lighting			
Adequate drainage			

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## **Section 4: Inspections**

Area		Comment	Date completed
No other structure issue			
	/6		
8. Records			
Food Safety Policy in date and displayed			
Personal hygiene policy displayed			
HACCP up to date			
Temperature records satisfactory			
Cleaning schedules satisfactory			
Food hygiene training summary complete and up to date			
Food hygiene training up to date			
Pre-employment medical questionnaires being completed			
Pest control records available and followed up			
	/9		
Total score	/47	Score %	

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## Form 4.2: Record of Environmental Health Officer/Health Inspectors visits

Local authority/organisation:						
Contact details:						
Date of visit	Date action completed	Signed				

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