

Recording Forms & Additional Resources

When using Safe Catering, it is essential that the outcomes of your checks / monitoring procedures are recorded at a frequency that reflects the nature and size of your business. Similarly, when checks / monitoring reveal that your procedures, have not been followed, you must also record what you have done about it (corrective actions). Recording helps you to keep an accurate check on food safety procedures within your business and enables you to demonstrate that you are controlling hazards in an effective manner.

What paperwork is needed?

Your monitoring checks may be recorded by using one or a combination of the following methods:

1. By using the Recording Forms provided in 'Safe Catering'.
2. By using Recording Forms which have been drawn up or adapted by yourself, either in paper copy or electronically.

Which of the Recording Forms provided in Safe Catering should be used?

The records provided in this manual, if correctly used, will help you to meet and support the requirements of a Food Safety Management Plan based on the HACCP principles and demonstrate it is working effectively.

When following Safe Catering the following Monitoring Records are provided and can be used:

Monitoring Record	Purpose
SC1 – Food Delivery Record	To record the monitoring of incoming deliveries
SC2 – Fridge/Cold room/Display Chill Temperature Records	To record the monitoring of the chill, refrigerator, cold display, units (and possibly the function of your freezer/s)
SC3 – Cooking/Cooling/Reheating Records	To record cooking, cooling and reheating temperatures
SC4 – Hot Hold/Display Records	To record hot holding temperatures
SC5 – Hygiene Inspection Checklist	To record your own checks of your premises
SC6 – Hygiene Training Records	To record training of your staff
SC7 – Fitness to Work Assessment Form	To record assessment of fitness to work
SC8 – All-in-one Record	To use as an alternative to SC1-4
SC9 – Customer Delivery Record	To record monitoring of food deliveries to customers

Copies of forms can be downloaded from www.food.gov.uk/business-guidance/safe-catering



SC2 – Fridge/Cold Room/Display Chill Temperature Records

Month:..... Year:.....

TEMPERATURE OF FRIDGE/COLD ROOM/DISPLAY CHILL *														COMMENTS/ACTION	SIGNED
(insert name or number of units in shaded boxes)															
UNIT															
DATE	AM	**PM	AM	**PM	AM	**PM	AM	**PM	AM	**PM	AM	**PM	AM	**PM	
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NOTE: Temperature of food must not exceed 8°C. *Some businesses may wish to record freezer temperatures. **It is recommended that fridge temperatures are checked at least once per day. Some businesses may wish to check fridges more frequently.

Manager/Supervisor check on	/ /	/ /	/ /	/ /	/ /
Initials					

SC5 – Hygiene Inspection Checklist

Simple checks of the premises which should be carried out by the Proprietor or Manager regularly*

	Satisfactory		Details of Action Taken
	Yes	No	
Hygiene of Food Rooms & Equipment			
Are food rooms and equipment in good condition and well maintained?			
Are food rooms clean and tidy and do staff clean as they go including difficult areas?			
Is equipment easy to clean and kept in a clean condition?			
Are all food and hand contact surfaces e.g. work surfaces, slicers, fridge handles, probe thermometers, in good condition and cleaned/ disinfected regularly?			
Are suitable BS EN approved cleaning chemicals available and stored correctly and are proper cleaning methods used?			
Are separate cleaning cloths used in clean areas? If they are re-used are they laundered in a boil wash?			
Food Storage			
Are deliveries appropriately stored immediately?			
Is ready-to-eat food stored above/separate from raw food in the fridges and freezers?			
Is food in fridges/freezers covered?			
Are high risk foods date coded, codes checked daily and stock rotated?			
Are dried goods stored correctly e.g. in a suitable room, off the floor, in covered containers?			
Is outer packaging removed from ready-to-eat food before being placed into a *clean area?			
Are freezers working properly?			
Are fridges and freezers defrosted regularly?			
Food Handling Practices			
Are ready-to-eat foods prepared in separate clean areas?			
Are separate utensils and equipment used for ready-to-eat foods unless disinfected in a dishwasher? Is the dishwasher in good working order and regularly serviced?			
Is wrapping and packaging used for ready-to-eat food kept in the clean area?			
Do separate staff handle ready-to-eat food or are controls being followed to ensure staff change clothing and wash hands before handling ready-to-eat food.			
Is separate **complex equipment provided for ready-to-eat food and is it located in the clean area?			
Are staff handling food as little as possible? eg Using tongs			
If colour coded equipment is provided (e.g. utensils, chopping boards), is it correctly used?			
Are high risk foods prepared in small batches and placed in the fridge immediately after handling/preparation?			
Is food cooled as quickly as possible away from raw food and other sources of contamination?			
Are vegetables/fruit/salads/ trimmed and washed thoroughly before use unless labelled as 'ready-to-eat'?			
Are ready-to-eat foods kept separate on display and screened from customers?			
Are adequate clean utensils available for self service?			
Are frozen foods defrosted safely?			
Are controls in place to prevent contamination by chemicals/foreign bodies e.g. glass, packaging materials, bolts, rust, cleaning chemicals?			

	Satisfactory		Details of Action Taken
	Yes	No	
Food Handling Practices continued			
Are staff aware of food allergy hazards?			
Are controls being followed to ensure staff wash hands after handling raw food and before touching surfaces, such as the cash register?			
Is a separate probe thermometer used for ready-to-eat foods and properly cleaned/disinfected before use?			
Personal Hygiene			
Are staff fit to work, wearing clean, suitable protective clothing and following personal hygiene rules particularly hand washing?			
Are wash hand basins clean with hot water, soap and hygienic hand drying facilities?			
Are wash hand basins used for hand washing only and is effective handwashing by staff regularly observed?			
Are staff toilets and changing facilities clean and tidy?			
Pest Control			
Are premises pest proofed and free from any signs of pests?			
Where necessary are external doors/ windows fitted with suitable flyscreens?			
Are insectocutors (if provided) properly maintained?			
Is food properly protected from risk of contamination by pests?			
Waste Control			
Is waste in food rooms stored correctly?			
Is food waste stored correctly outside and is the refuse area kept clean?			
Is unfit food clearly labelled and stored separately from other foods?			
Checks and Record Keeping			
Are all checks properly taken and recorded?			
Has appropriate corrective action been taken where necessary?			
Are record sheets up-to-date, checked and verified?			
Are equipment time/temperature combinations (page 44) regularly cross-checked?			
Review (4 weekly)			
Any new suppliers and approved list updated?			
Any new menu items and steps in Safe Catering updated?			
Any new food handling methods or equipment and steps in Safe Catering updated?			

*A 'clean area' is a room or an area within the food premises where only ready-to-eat foods are handled. No raw foods can be handled here. The clean area might be fixed in the same location on a permanent basis or may be set up on a temporary basis following a thorough cleaning and disinfection process of the entire area. A temporary clean area should include clean storage facilities for storing equipment and packaging when the temporary clean area is not in use.

**Complex equipment is the term given to those items of equipment that can be very difficult to clean. This may be because it is hard to access all parts of the equipment or because it is made up of a number of small parts and surfaces which may not be smooth or easy to clean. For these reasons complex equipment provided for use on ready-to-eat food should not be used for raw food.

Name:..... Position:..... Signed:..... Date:.....

*Tick frequency checks carried out by proprietor or manager

Weekly

Fortnightly

Monthly

SC6 – Hygiene Training Record

Name:..... Position:..... Date of employment:.....

In House Training/Instruction on Safe Catering Pack

Nature of Training	Dates	Trainer	Employee Signature
Instruction On Basic Hygiene Rules (Sec 4, Page 23)			
Training on steps used in your business (Sec 3, Pages 5 – 78)			
Purchase, Delivery/Receipt, Collection			
Storage			
Preparation And Handling			
Cold Serve/Display			
Defrosting			
Cooking			
Cooling/Freezing			
Reheating			
Hot Hold/Display			
Transport and delivery			
Physical/Chemical Contamination			
Food Allergies			
Any other Step(s) e.g. vacuum packing			
Training on general hygiene requirements (Sec 4, Pages 2 – 21)			
Cleaning			
Pest Control			
Waste			
Maintenance			
Personal Hygiene			
Training			
Advice on using a Thermometer (pages 24 – 25)			

Further Training

Nature of training e.g. CIEH/RSH/RIPH level 2/3 Award in Food Safety in Catering, in-house, refresher	Course Provider	Date Completed	Employee Signature

Copies Of Any Certificates Should Be Kept With This Form

SC7 – Fitness to work assessment form for use by employers

This form may be used for existing food handlers, for new food handlers on recruitment and for return of food handlers to work after illness.

NAME OF EMPLOYEE: DATE OF ASSESSMENT:

REASON FOR ASSESSMENT: (Tick Box)

Existing food handler

Pre-employment assessment

Return to work after illness

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

- 1. Have you suffered from diarrhoea and/or vomiting within the last 48 hours? **YES/NO**
 If **no**, have you in the last 48 hours taken any medication to control diarrhoea and/or vomiting? **YES/NO**

- 2. At present are you suffering from: **YES/NO**
 - i) infected wounds, skin infections or sores? **YES/NO**
 - ii) boils, styes or septic fingers? **YES/NO**
 - iii) discharge from eye, ear or gums/mouth? **YES/NO**

- 3. Have you ever had, or are you known to be a carrier of typhoid or paratyphoid? **YES/NO**

- 4. In the last 21 days have you been in contact with anyone, at home or abroad, who may have been suffering from typhoid or paratyphoid? **YES/NO**

If the answer to any question is 'yes', the individual should not be permitted to handle food or enter food handling areas if there is any likelihood of direct or indirect contamination. Further advice should be sought e.g. from your Environmental Health Officer and/or Doctor.

ACTION TAKEN

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OWNER/MANAGER DATE

I hereby declare that the information I have given is correct and I undertake to notify my employer/ manager if I suffer from any of the above illnesses/conditions.

EMPLOYEE DATE

SC8 - All-In-One Record Page 2 Of 2

COOKING/COOLING/REHEATING RECORDS											
FOOD	COOKING				COOLING			REHEATING		COMMENTS/ACTION	
	TIME STARTED COOKING**	TIME FINISHED COOKING	CORE TEMP.	SIGN (initials)	DATE	TIME INTO FRIDGE/BLAST CHILL/FREEZER	SIGN (initials)	DATE	CORE TEMP.		SIGN (initials)

* Core temperature above 75° C.

** It is not necessary to record the time started cooking, if the core temperature is checked.

HOT HOLD/DISPLAY RECORDS (For Food To Be Held Hot For More Than 2 Hours)						
FOOD	TIME INTO HOT HOLD	CORE TEMP* (After 2 hours on display)	CORE TEMP* (After 4 hours on display)	CORE TEMP* (After 6 hours on display)	COMMENTS/ACTIONS	SIGNED

* Keep hot food above 63° C.

Manager/Supervisor check on /	Initials /
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COMMENTS:.....

