COLD FOOD RECORD The 'All-in-One' is an alternative to this record

MONTH: .....

Temperature of Refrigerator/Chill/Cold Display - RECOMMENDED TWICE PER DAY Function/Temperature of Freezer - RECOMMENDED ONCE PER DAY												
UNIT											**Corrective Actions**	**Initials**
DATE	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM		
1st												
2nd												
3rd												
4th												
5th												
6th												
7th												
8th												
9th												
10th												
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20th												
21st												
22nd												
23rd												
24th												
25th												
26th												
27th												
28th												
29th												
30th												
31st												

Write your Critical Limits here :

	Critical Limit	Notes
Refrigerator(s)		
Chill(s)		
Cold Display(s)		
Freezer(s)		

Corrective Action Examples:

- Recheck temperature
- Consider if food is safe to use
- Dispose of food which may be contaminated
- Review staff training
- Call the engineer

HOT TEMPERATURE RECORD

You decide how many food items you check per day. The **'All-in-One'** is an alternative to this record

		COOKING			COOLING		REHEATING	CORRECTIVE ACTION	
Date	Food Items	Time Started Cooking	Time Finished Cooking	Core Temp	Time Started Cooling	Time Finished Cooling	Core Temperature	Action Taken	Initials

Write your Critical Limits here :

	Critical Limit	Notes	Corrective Action Example:
Cooking			• Continue cooking until your specified temperature is achieved • Consider if food is safe to use/dispose of food which may be contaminated
Cooling			• Consider if food is safe to use/dispose of food which may be contaminated • Revise cooling procedure/review staff training
Reheating			• Continue reheating until your specified temperature is achieved • Review staff training

Have the corrective actions been carried out?	Date checked by Manager/Supervisor	Initials
Yes / No / Not Applicable (delete as applicable)	.....	.....

HOT HOLDING RECORD

You decide how many food items you check per day. The **'All-in-One'** is an alternative to this record.

Date	Food Items	Core Temp	Time of check	Comments / Corrective Action	Initials

Write your Critical Limits here :

	Critical Limit	Notes
Hot Hold Food		

Corrective Action Examples:
• Consider if the food is safe to use/Dispose of food which may be contaminated

WEEKLY RECORD

The following ongoing checks should be carried out by the Manager or Proprietor during each working week and should be carried out by all businesses using 'CookSafe'.

WEEK COMMENCING: .....

TRAINING Have the House Rules been followed?	**YES**	**NO**	**N/A**
New Staff training including Induction Rules			
Formal Training/Retraining Rules			
Other Training			
PERSONAL HYGIENE Have the House Rules been followed?	**YES**	**NO**	**N/A**
Hand Washing Rules			
Personal Cleanliness Rules			
Protective Clothing Rules			
Illness/Exclusion/Return to Work Rules			
CLEANING Have the House Rules been followed?	**YES**	**NO**	**N/A**
All specified equipment and areas cleaned as per cleaning schedule			
Cleaning Chemicals Rules to include contact time, application and dilution			
CROSS CONTAMINATION PREVENTION Have the House Rules been followed?	**YES**	**NO**	**N/A**
Rules on Delivery			
Rules on Storage			
Rules on Preparation			
Cooking and Cooling			
PEST CONTROL Have the House Rules been followed?	**YES**	**NO**	**N/A**
Pest Proofing, Insect Screens/Fly-killing Devices Rules			
Good Housekeeping Rules			
WASTE CONTROL Have the House Rules been followed?	**YES**	**NO**	**N/A**
Waste in Food Rooms and Waste Collection Rules			
MAINTENANCE Have the House Rules been followed?	**YES**	**NO**	**N/A**
Premises Structure Rules			
Equipment Rules			
STOCK CONTROL Have the House Rules been followed?	**YES**	**NO**	**N/A**
Rules on stock control measures			
TEMPERATURE CONTROL Have the House Rules been followed?	**YES**	**NO**	**N/A**
Rules on Temperature Control			
RECORDS	**YES**	**NO**	**N/A**
Have all necessary Temperature Checks been recorded using the correct recording form/s?			

If the answer to any of the above questions is "NO" then enter the corrective action details in the table below

HOUSE RULES DEVIATIONS OBSERVED	**CORRECTIVE ACTIONS TAKEN**

Manager/Proprietor's Signature ..... **Date** .....

MONTHLY PROBE THERMOMETER CHECK

Probe thermometer recording details

Month												
Reading in Iced Water												
Reading in Boiling Water												
Checked by												

- The readings in **iced water should be -1 °C to +1 °C,** if outside this range the unit should be replaced or returned to the manufacturer to be recalibrated.
- The reading in **boiling water should be between 99 °C and 101 °C,** if outside this range the unit should be replaced or returned to the manufacturer to be recalibrated.

Date and Details of Yearly Calibration		**Date of next Yearly Calibration**	

N.B. The electronic display unit should be checked at least once per year. Manufacturers may offer a calibration service.

REVIEW

It is essential that your HACCP based procedures are kept up to date. A review of your system must be carried out on a regular basis, ideally every six months or if any of the circumstances covered in the table below arise.

Use the table as a checklist of circumstances which may lead to a change or addition to your HACCP based system and record the changes you have made.

Date of Review .....

EXAMPLES	Applicable? yes or no	If YES, what changes are needed to your HACCP based procedures?	Summary of changes made, date and initials
Introduction of any new dish with substantially different process			
Introduction of new equipment/supplier or delivery methods			
Changes to premises layout			
Changes to House Rules			
A Local Authority inspection where deficiencies were noted			
New information available on hazards and risks			
Cleaning Chemical Changes			
Staff Changes			
Customer Complaint			
Six Monthly Review (if applicable)			
Other factors not mentioned above (detail)			