

# Food Safety Incidents & Enforcement

Good Hygiene Practice  
Guide No 19

Document Name	<b>GHP Guide - Food Incidents &amp; Enforcement</b>	Document No	<b>FS/GHP/019</b>
Document Owner	<b>Food Safety</b>	Date of Issue	<b>Feb 2022</b>
Classification	<b>Internal Use</b>	Version No	<b>02</b>



# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19



HACCP Chart Reference

All Stages

## Food Safety Hazards

Customer food safety complaints can arise from several different sources, but all require thorough investigation by the Unit Manager / Head Chef in order to understand the root cause to prevent it from happening again.

Typical causes of food safety complaints include:



- **Allegations of Food Poisoning**  
Where a customer suspects illness caused by eating unfit or contaminated food



- **Foreign Body Contamination**  
The physical contamination of food by a foreign body object



- **Food Allergen / Intolerance**  
An allergic reaction or intolerance to a particular type of food consumed



- **Product Miss-labelling**  
Where a food item is incorrectly advertised / labelled as something else



- **Viruses**  
Where customers have reported food poisoning type symptoms but may be infected with a food bourn illness, e.g. Norovirus

## Legal Requirement

Food safety offenses are 'strict liability' offences in that regulators (Environmental Health Officers) do not have to prove that there was an intention to break the law, only that the food served was not of the nature, quality or fitness demanded.

However, this is offset by following the Compass food safety management system, which allows the catering unit to be found 'not guilty' if they can prove they took all reasonable steps to prevent the offence occurring.

This means that we have to investigate what steps have been taken to ensure the safety of the food and whether more could have been done.

## General Guidance

- Always take the details of any customer complaint, noting their name, contact information, date, time, food eaten and details of the complaint.
- Do not argue with the customer or admit fault or excuses for the incident.
- Report any customer complaint immediately to the Unit Manager or Head Chef.
- Undertake an investigation and upload all details to the HSE reporting system (AIR3) to ensure appropriate escalation to the Operational Management team and the your HSE Manager.
- Undertake a full investigation using the appropriate checklist to ensure the source of the complaint can be determined.

# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19



HACCP Chart Reference

All Stages

## Allegations of Food Poisoning

Food poisoning usually occurs within 2 - 36 hours of eating contaminated food, however the incubation period for some food pathogens can be several weeks - e.g. Listeria.

Symptoms normally last from 1 to 7 days and include one or more of the following: abdominal pain, diarrhoea, vomiting, feeling sick, fever, and dehydration. Most people recover from food poisoning symptoms but some, particularly the very young, elderly, sick or pregnant women could become very ill and even die consequently.

When informed by a customer of potential food poisoning, the following information must be obtained and recorded upon the Alleged Food Poisoning Checklist.

### The Incident

- The date & time the incident was reported.
- Details of the food eaten.
- Date and time the food was eaten.
- The customers symptoms and the number of people affected.
- If the food was in unit made or a retail ready food item.
- If any further complaints have been made within the last 7 days.
- Any staff sickness or illness details.



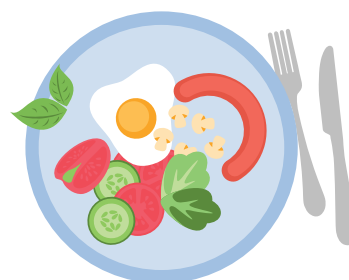
### The Customer

- The name and address of the customer.
- Their contact details to enable a reply to be given after the investigation.
- Is the customer an employee / contractor / visitor / client employee?
- If the customer is within one of the above risk groups.
- If reported to the local Environmental Health Department and their contact details.
- If the customer has visited a Doctor or attended Hospital.
- If the customer has provided a stool sample to their local GP.
- The details of each symptom, noting the date and time each symptom started and ended.
- Any similar symptoms of family, friends or colleagues whom they know.
- If they are known to have a food allergy or intolerance.
- If the customer has eaten out within the past 5 days.



### The Food

- For in-unit made food record:
  - Date and time the food was made.
  - Number of portions sold.
  - Recipe details, ingredients used.
  - Storage conditions.
  - Cooking and hot hold / service temperatures.
- For direct supplied food record:
  - Product name and manufacturers details.
  - Invoice number / order number.
  - Batch code and Use By or Best Before date.





## Foreign Body Food Contamination

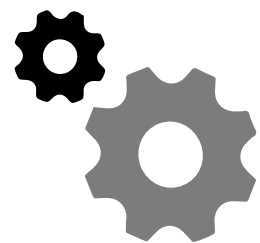
Foreign body food complaints can arise from several different sources throughout the food supply chain from the manufacture / harvesting of the product right through to the production, cooking and service within the catering unit. These commonly include:

<b>Metal</b> - screws, nuts, bolts from equipment	<b>Soil, grit, stones</b> - from raw vegetable & fruit
<b>Plastic / Cardboard</b> - from food packaging & containers	<b>Glass</b> - from glass jars, light fittings and screens
<b>Hair / Jewellery</b> - from food handlers	<b>Insects</b> - from raw vegetables or pest infestations

When informed by a customer of potential food poisoning, the following information must be obtained and recorded upon the Foreign Body Investigation Checklist (Appendix 1):

### The Incident

- The date & time the incident was reported.
- Details of the food purchased and what the foreign body was found within.
- A detailed description of type of foreign body - type / size / shape / colour etc.
- A photograph of the foreign body in the food + any associated packaging.
- Date and time the food was eaten.
- If the food was in unit made or a retail ready item.
- If the foreign body has been handed over. If so, take a photograph of it.



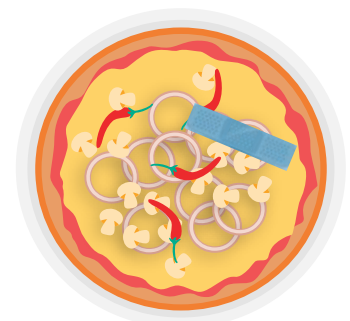
### The Customer

- The name and address of the customer.
- Their contact details to enable a reply to be given after the investigation.
- Is the customer an employee / contractor / visitor / client employee?
- If reported to the local Environmental Health Department and their contact details.
- Has the customer suffered any physical injuries from eating the foreign body.



### The Food

- For in-unit made food record:
  - Date and time the food was made.
  - Number of portions sold.
  - Recipe details, and ingredients used.
  - Location the food was made, and the equipment used.
- For direct supplied food record:
  - Product name and manufacturers details.
  - Invoice number / order number.
  - Batch code and Use By or Best Before date.
  - Packaging type and format.



# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19



HACCP Chart Reference

All Stages

## Food Allergies & Intolerances

A **food allergy** happens when the immune system triggers a reaction to a food or ingredient (allergen) that is harmless for most people, causing symptoms such as rashes and hives, swelling and in some cases difficulty in breathing. These symptoms can develop very quickly. The severity of the reaction varies from person to person and can be fatal to some people.

A **food intolerance** is an adverse reaction to food or ingredient which doesn't involve the immune system. Symptoms usually include stomach upsets, bloating and headaches. These symptoms tend to develop more slowly than food allergies and are unlikely to be fatal.

Please see **Good Hygiene Practice Guide No.13: Allergens** for further information.

If you suspect a customer is suffering from an allergic reaction, use the **Food Poisoning & Allergen Incident Checklist** (Appendix 2) ensuring the following actions are undertaken:

- Immediately call 999 to summon assistance or
- Call the appointed First Aider to take charge of the situation.
- Enquire (if possible) if the customer has any self-medication in the form of an EpiPen and help to administer the treatment.
- Do not move the customer and ensure someone remains with them at all times.
- If possible, take the following details:
  - The customers name and contact details.
  - Their specific food allergen or intolerance.
  - Details of the food purchased.
  - The amount they have eaten.
  - Details of anyone accompanying them and the food they ate.
  - If the customer enquired about the presence of allergens prior to purchase.
- Call your HSE Manager for further information and advice.

## Product Miss-labelling

Source allergen discrepancies, reporting process.

Occasionally a discrepancy between the allergen information on the Source (our menu planning system and allergen reports) and the information on the product packaging you receive into your unit may occur and must be reported immediately.

- Contact the Foodbuy Support team:
  - By phone on 0844 247 6000 or
  - Raise a helpdesk ticket via Foodbuy Online - select 'Source Discrepancy' within 'Finance and other queries'.
  - In Ireland contact the nutritionist and source owner
- Provide as much information as possible including:
  - Product description.
  - Vendor Material Code (VMC), batch code or
  - Use by date and delivered by.
  - State 'business critical' in the ticket.



The Foodbuy Support team will respond to your query within 24 hours.



## Viruses

Some viral infections such as Norovirus can be easily spread through contact with contaminated surfaces, food or water and via close person to person spread.

Symptoms normally start 24 - 48hrs after initial infection and can be very similar to those suffered following food poisoning, including: vomiting, diarrhoea, stomach cramps, headache, and mild fever.

In the event of a suspected viral outbreak, ensure the following actions are undertaken:

- Contact your HSE manager immediately for further advice.
- Liaise with your client to inform the contract cleaning team to increase the frequency of cleaning and sanitising of hand contact surfaces, shared equipment and washroom / toilet facilities.
- Increase the frequency of cleaning and sanitisation of all hand and food contact surfaces within both the kitchen and front of house areas.
- Increase the focus on good personal hygiene and hand washing.
- Use hand sanitising gels as an additional measure but not as a replacement to hand washing within both catering and public areas.
- Consider restricting the display of open food upon self-service buffets / display tables to avoid further hand to food viral spread.
- Ensure all staff report any signs of illness immediately and exclude any affected colleagues from work until 48hrs symptom free.

**Note:** Additional cleaning must be implemented for communal areas, washrooms, toilets and bedrooms for any premises which have overnight accommodation attached. Please refer to Compass Norovirus Outbreak Cleaning Procedure for further details.



# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19

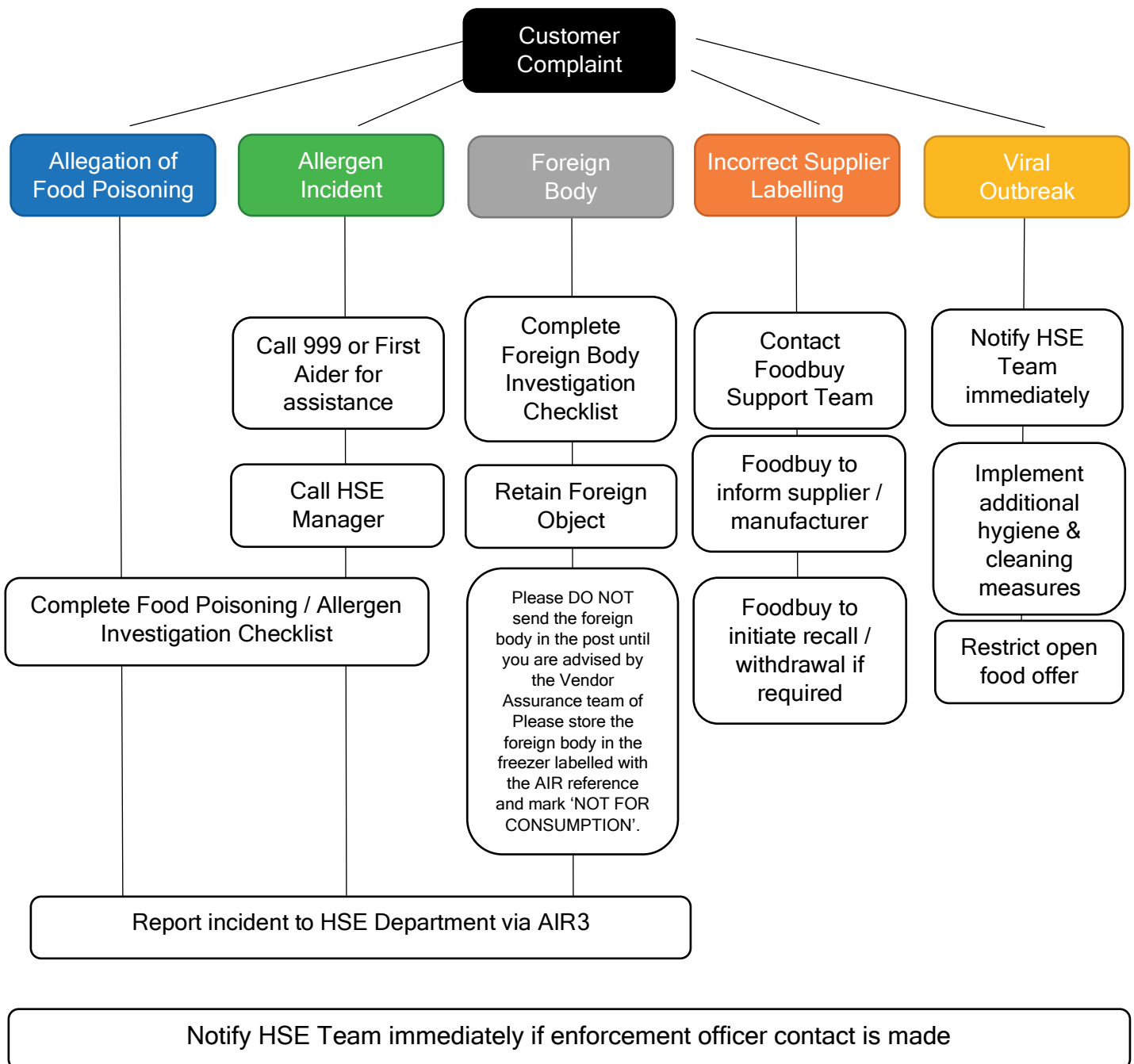


HACCP Chart Reference

All Stages

## Incident Reporting Process

If a customer food safety complaint is made the following decision tree should be used to determine the correct course of action to be taken.





## Food Samples & Analysis

It is not Compass policy to carry out food sampling routinely, however you may be required to conduct a regular sampling programme to meet specific client demands or if you are serving in a high risk environment such as hospitals or care homes.

Additionally, samples may be taken by an inspecting EHO during a routine inspection or following a customer complaint.

Before taking a food sample please contact your HSE Manager to arrange collection.

### General Guidance

In order to ensure that any sample is representative of the foods served and suitable for laboratory analysis it is important to follow the steps below:

- Take 2 samples of any food, one for testing and a reference sample to be kept on site.
- Take samples of main meal dishes that include high risk, protein ingredients such as meat, fish, eggs or dairy products.
- If several batches of foods have been prepared take samples from each batch.
- Use clean sanitised serving utensils to take the samples.
- Do not handle the food directly with your hands or the internal surfaces of the container you put the food in, as this could contaminate the sample and affect the laboratory results.
- Take a sample of approx. 50 - 100g of food, ensuring it is representative of the whole item - i.e. contains all the ingredients / sauces etc from the dish.
- Ensure stews and casseroles are thoroughly stirred before any sample is taken.
- Place the food sample immediately into a sterile container - usually supplied by the laboratory undertaking the testing, and use a separate container for each individual food sample.
- Seal and label the container with the name of the food, the date of the sample and any batch number if relevant.
- Store the reference sample under frozen conditions (-18°C to -23°C), labelled and dated.
- Retain the sample for 7 days.





# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19



HACCP Chart Reference

All Stages

## Enforcement Officers

Food safety enforcement officers (Environmental Health Officers) will visit food businesses either routinely to undertake spot checks and issue a Food Hygiene Rating (FHR) (there is no such rating in ROI, however a report will be issued) or may also visit following a complaint made by a customer regarding an incident or general hygiene standards.



### General Guidance:

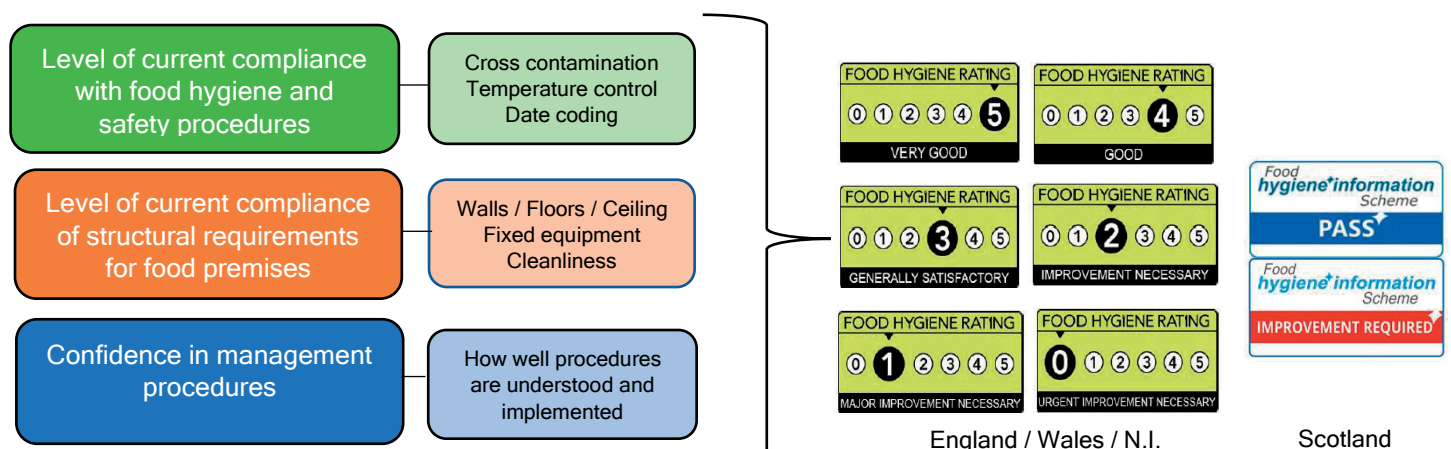
- Immediately report any enforcement officers visit to the most senior manager present within the unit.
- Report all enforcement officer visits on AIR3 - recording the officers' details and outcome of their visit.
- Upon introduction ask to see the officer's identity card, which should confirm their name, position and authority they work for.
- Establish the purpose of their visit and the areas / documentation and people they may wish to see.
- Make the officer aware that Compass have a Food Safety Primary Authority agreement with Luton Borough Council.
- Ensure they are always accompanied and make every effort to answer their questions in a positive and constructive manner.
- Do not guess the answer to any questions as this could be wrong and consequently impact the confidence they have in how food safety is managed in the unit, and ultimately the FHR issued.
- Clarify the outcome of the visit and any actions required.
- Keep a copy of any documentation issued at the time of the visit and upload to the AIR3 report.

### Food Hygiene Rating

The Food Hygiene Rating Scheme is a way for Local Authority EHO's to consistently measure the hygiene standards of customer facing food outlets and award a nationally recognised rating score.

The Food Hygiene Rating Scheme is applicable to England, Wales and Northern Ireland, with a similar system operating in Scotland but using a different scoring mechanism.

The display of the food hygiene rating notice at or near the entrance to the food establishment is mandatory in Wales and will result in a fine or prosecution if falsely displayed.



# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19

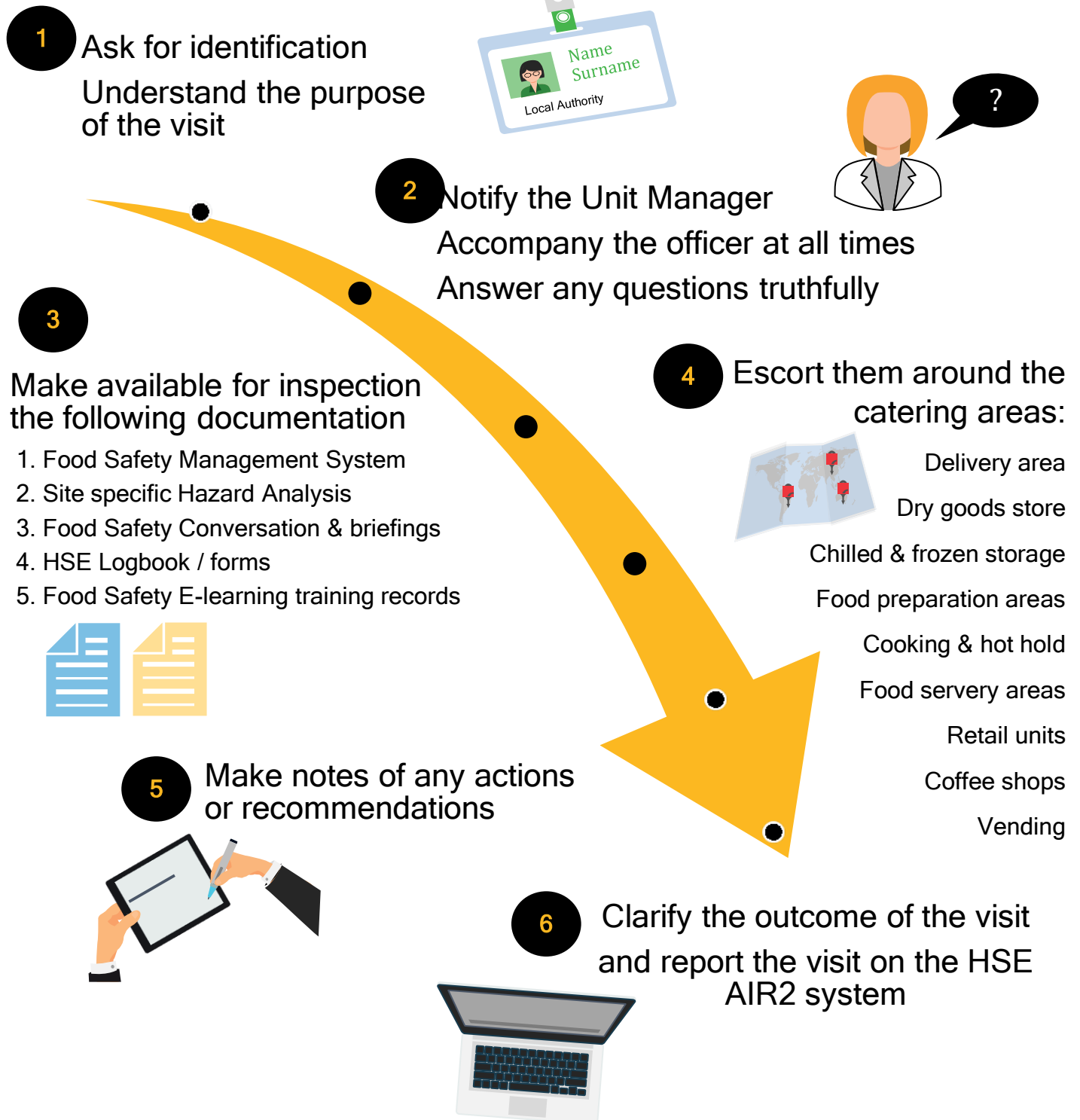


HACCP Chart Reference

All Stages

## Enforcement Officer Visit Procedure

Ensure the following steps are undertaken upon notification of an enforcement officers visit to your unit.



# Food Safety Incidents & Enforcement

Good Hygiene Practice Guide No: 19



HACCP Chart Reference

All Stages

## Enforcement Officer Action

Following an Environmental Health Officers visit a range of actions may be taken by the officer including one or more of the following:

Enforcement Action	Description	Unit Action
<p>Visit report with <b>Recommendations</b></p> <p>In ROI this will be a "Satisfactory" rating on the EHO report</p>	<p>The EHO visit report may list a number of recommended actions to be undertaken to improve food safety &amp; hygiene standards. These are not legal requirements but are considered 'best practice' and should still be undertaken.</p>	<p>Complete the listed actions before the next routine inspection.</p>
<p>Visit report with <b>Legal Requirements</b></p> <p>In ROI this will be a "Minor Non-compliance" rating on the EHO report</p>	<p>The EHO visit report may list a number of legal requirements to be undertaken to meet basic food safety &amp; hygiene standards. These are legally required and <b>must</b> be undertaken.</p> <p>These requirements may well affect the Food Hygiene Rating issued.</p>	<p>Draw up an action plan and implement within 1-2 months.</p> <p>Contact the sector HSE Manager if a Food Hygiene Rating re-application is required upon completion of the actions. (N/A in ROI)</p>
<p><b>Hygiene Improvement Notice</b></p> <p>In ROI this will be a "Unsatisfactory or High Risk Non-compliance" rating on the EHO report</p>	<p>This is a legal document which requires certain action to be taken within a specific time period as stated on the notice.</p> <p>The EHO will revisit at the end of the time period given to evaluate compliance to the notice.</p> <p>It is an offence not to comply with the notice within the time period stated and may lead to further action or prosecution.</p>	<p>Contact the sector HSE Manager for advice</p> <p>Draw up an action plan to address the issues raised and implement within the timeframe stated.</p> <p>Sector HSE Manager to verify compliance to the notice before EHO return.</p>
<p><b>Hygiene Emergency Prohibition Notice</b></p> <p><b>Remedial Action Notices (Scotland / Wales / N.I.)</b></p>	<p>These are issues which pose a serious and imminent risk to food safety and prohibit the use of any equipment or part of a catering premises deemed at risk, or the prohibition of a food handling operation.</p> <p>Compliance to the notice must be immediate and will be re-evaluated by the EHO during a return visit. In ROI these are published on the FSAI website.</p>	<p>Immediately stop the activity with which the notice applies to.</p> <p>Contact the sector HSE Manager for further advice.</p> <p>Implement the necessary changes to comply with the notice and contact the EHO to arrange a revisit.</p>

# Appendix 1

## Foreign Body Reporting Checklist

FOREIGN BODY INCIDENT REPORTING CHECKLIST		Page 1 of 4		
<b>ABOUT THE FOREIGN BODY</b>	<b>Information required</b>	<b>Details</b>		
	Identify the type of foreign body by ticking the applicable box opposite	Baking Debris	<input type="checkbox"/>	Bone/egg shell/gristle
		Cardboard	<input type="checkbox"/>	Cloth/cotton/string
		Glass	<input type="checkbox"/>	Hair
		Human (nails)	<input type="checkbox"/>	Insect/insect parts
		Metal	<input type="checkbox"/>	Packaging (not cardboard)
		Paper	<input type="checkbox"/>	Plastic
		Rubber	<input type="checkbox"/>	Soil
Stalk/pips/fruit stone		<input type="checkbox"/>	Stone/grit	
Wood		<input type="checkbox"/>	String	
Other (state)	<input type="checkbox"/>			
What date and time was the incident reported to Compass?	Date:			
	Time:	(24 hour clock)		
Record the name of the product <i>This will be the product name as described by the manufacturer on the label or as described on menu or at the point of sale.</i>	Name of product:			
Was the product made in-unit? <i>If the product was made up of several bought-in ingredients and made into a dish or menu item in the unit, state 'Yes'</i>	Yes or No?			
Have there has been any similar complaints in the last 6 months?	Yes or No? If Yes Previous Incident Number:			
Was a complaint received? <i>Record 'No' if the foreign body was found before the food product was served to a customer.</i> <i>Record 'Yes' if a customer has made a complaint or reported the foreign body.</i>	Yes or No?  If Yes, number of complainants:			
Have you retained the foreign body?  Please DO NOT send the foreign body in the post until you are advised by the Vendor Assurance team of where to post it. Instead, please store the foreign body in the freezer labelled with the AIR reference and mark 'NOT FOR CONSUMPTION'.  <b>Important – do not send anything dangerous through the post. Contact your HSE Manager who will arrange collection if necessary.</b>	Yes or No?  If Yes - Please take clear photos of the foreign body and upload them to the AIR report.  <ul style="list-style-type: none"> <li>Foreign body in the product or where found</li> <li>Foreign body removed from the product against a ruler to show the size/ dimensions (take photos from different angles if not obvious what it is)</li> </ul>			

**ABOUT THE COMPLAINANT**

Information required	Details																
<p>Complainant's details</p> <p><i>Note – if more than one complainant, record the details for each person using a separate 'ABOUT THE COMPLAINANT' page from this checklist.</i></p>	<p>Title:</p> <p>First Name:</p> <p>Surname:</p> <p>Home address/Contact address:</p> <p>Postcode:</p> <p>Contact Tel No:</p>																
<p>Is the complainant a:</p> <p><i>Compass employee; Agency worker; Client staff; Contractor; Customer; Employed by someone else; On a training scheme; On work experience/voluntary worker; ROE.</i></p>																	
<p>Did the complainant allege injury?</p>	<p>Yes or No?</p> <p>If 'Yes' tick which type of injury:</p> <table border="1" data-bbox="703 1384 1293 1769"> <tr> <td>Dental damage (fracture/crack/break)</td> <td><input type="checkbox"/></td> <td>Cut/abrasion</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Chemical burn or irritation</td> <td><input type="checkbox"/></td> <td>Deep puncture</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Choking/asphyxiation</td> <td><input type="checkbox"/></td> <td>Shallow puncture</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other (describe)</td> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> </tr> </table>	Dental damage (fracture/crack/break)	<input type="checkbox"/>	Cut/abrasion	<input type="checkbox"/>	Chemical burn or irritation	<input type="checkbox"/>	Deep puncture	<input type="checkbox"/>	Choking/asphyxiation	<input type="checkbox"/>	Shallow puncture	<input type="checkbox"/>	Other (describe)	<input type="checkbox"/>		<input type="checkbox"/>
Dental damage (fracture/crack/break)	<input type="checkbox"/>	Cut/abrasion	<input type="checkbox"/>														
Chemical burn or irritation	<input type="checkbox"/>	Deep puncture	<input type="checkbox"/>														
Choking/asphyxiation	<input type="checkbox"/>	Shallow puncture	<input type="checkbox"/>														
Other (describe)	<input type="checkbox"/>		<input type="checkbox"/>														
<p>Did the complainant return the foreign body to the catering manager?</p>	<p>Yes or No?</p> <p>If 'No' tick the reason why:</p> <table border="1" data-bbox="703 1962 1293 2191"> <tr> <td>Swallowed</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Lost or discarded</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Retained by customer</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sent to EHO or TSO</td> <td><input type="checkbox"/></td> </tr> </table>	Swallowed	<input type="checkbox"/>	Lost or discarded	<input type="checkbox"/>	Retained by customer	<input type="checkbox"/>	Sent to EHO or TSO	<input type="checkbox"/>								
Swallowed	<input type="checkbox"/>																
Lost or discarded	<input type="checkbox"/>																
Retained by customer	<input type="checkbox"/>																
Sent to EHO or TSO	<input type="checkbox"/>																

	Information required	Details
<b>ABOUT THE PRODUCT (not made in-unit)</b>	Record all known product details  <i><b>Note</b> – Product codes and product descriptions can be obtained from invoices/delivery notes.</i>  <i><b>Note</b> – if more than one product is involved, record the details for each product using a separate ‘ABOUT THE PRODUCT (not made in-unit) page from this checklist.</i>	Product code: Pack size: Batch code: Best before / Use by date: Invoice / delivery note number: Delivery date: Quantity delivered: Quantity affected:
	Do you have the packaging or a photograph of the packaging?	Yes or No?  Please take clear photos of the ingredient packaging if available showing all the product traceability information i.e. Best Before, Use by & Batch codes and upload them to the AIR report.
	Vendor details  <i>Record all known details</i>	Vendor name: Vendor’s depot: Vendor contact name: Tel number:
	Has the vendor been contacted about the incident?	Yes or No? If Yes: Date contacted: Name of person spoken to:
	Description of incident - Record any additional details or other information that you feel may assist in the investigation	

	Information required	Details		
	<b>ABOUT THE PRODUCT (made in-unit)</b>	Ingredient details	<b>Ingredient</b>	<b>Vendor</b>
<p><i>Record detail of each ingredient used in the product or dish made in the unit.</i></p> <p>If relevant please take clear photos of the ingredient packaging if available showing all the product traceability information i.e. Best Before, Use by &amp; Batch codes and upload them to the AIR report.</p>				
Description of incident - Record any additional details or other information that you feel may assist in the investigation				

SECTION 3: ABOUT THE PRODUCT (not made in-unit)	Information required	Details
	<p>Record all known product details</p> <p><i>Note – Product codes and product descriptions can be obtained from invoices/delivery notes.</i></p> <p><i>Note – if more than one product is involved, record the details for each product using a separate 'ABOUT THE PRODUCT (not made in-unit) page from this checklist.</i></p>	<p>Product code:</p> <p>Pack size:</p> <p>Batch code:</p> <p>Best before / Use by date:</p> <p>Invoice / delivery note number:</p> <p>Delivery date:</p> <p>Quantity delivered:</p> <p>Quantity affected:</p>
	<p>Vendor details</p> <p><i>Record all known details</i></p>	<p>Vendor name:</p> <p>Vendor's depot:</p> <p>Vendor contact name:</p> <p>Tel number:</p>
	<p>Has the vendor been contacted about the incident?</p>	<p>Yes or No?</p> <p>If Yes:</p> <p>Date contacted:</p> <p>Name of person spoken to:</p>
	<p>Record any additional details or other information that you feel may assist in the investigation</p>	





## Appendix 2

<b>ALLEGED FOOD POISONING / FOOD ALLERGY REPORTING CHECKLIST</b>		Page 1 of 4
SECTION 1: ABOUT THE INCIDENT	<p>How was the incident first reported to Compass?</p> <p><i>i.e. In person, By Phone, Fax, Email, Letter or Other</i></p>	
	<p>What date and time was the incident first reported to Compass?</p>	<p>Date:</p> <p>Time: (24 hour clock)</p>
	<p>What was the name(s) of the food product(s) that the complainant alleges to be the cause of their illness/allergy?</p> <p><i>This will be the product name as described by the manufacturer on the label or as described on the menu or at the point of sale.</i></p>	<p>Name of product(s):</p>
	<p>Was the product made in-unit?</p> <p><i>If the product was made up of several bought-in ingredients and made into a dish or menu item in the unit, state 'Yes'</i></p>	<p>Yes or No?</p>
	<p>How many complainants are involved?</p> <p><i>This is the number of people who allege illness, food poisoning symptoms or an allergic reaction</i></p>	<p>State number:</p>
	<p>Have any similar allegations been made about the food product(s) in the last 7 days?</p> <p>If 'Yes' provide the details</p>	<p>Yes or No?</p> <p>Details:</p>
	<p>Record the consumption details</p>	<p>Date Consumed:</p> <p>Time Consumed: (24 hour clock)</p>

**SECTION 2: ABOUT THE COMPLAINANT**

<p>Complainant's details</p> <p><b>Note</b> – if more than one complainant, record the details for each person using a separate 'ABOUT THE COMPLAINANT' page from this checklist.</p> <p><b>Status – Is the customer a:</b> <i>Compass employee; Agency worker; Client staff; Contractor; Customer; Employed by someone else; On a training scheme; On work experience, ROE.</i></p> <p><b>Is the complainant in a risk group? (alleged food poisoning incidents only):</b> <i>Elderly, Very young, Pregnant, Already ill or Immuno-suppressed</i></p>	<p>Title:</p> <p>Name:</p> <p>Contact address:</p> <p>Postcode:</p> <p>Contact Tel. No:</p> <p>Status:</p> <p>Risk group:</p>																																															
<p>Has the complainant reported the incident to an Environmental Health Officer / Trading Standards Officer?</p> <p>If 'Yes' provide details (if known):</p>	<p>Yes or No?</p> <p>Name of the EHO / TSO:</p> <p>Name of the Local Authority:</p> <p>Contact telephone No:</p>																																															
<p>Details of the complainant's symptoms: (Alleged Food Poisoning Incidents only)</p> <p><i>Record all details for each symptom reported.</i></p> <p><i>Record times in 24 hour clock</i></p>	<table border="1"> <thead> <tr> <th rowspan="2">Symptom</th> <th colspan="2">Symptom started</th> <th colspan="2">Symptom ended</th> </tr> <tr> <th>Date</th> <th>Time</th> <th>Date</th> <th>Time</th> </tr> </thead> <tbody> <tr> <td>Vomiting</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Diarrhoea</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Abdominal pain</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Headache</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Fever</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Nausea</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other (State)</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Symptom	Symptom started		Symptom ended		Date	Time	Date	Time	Vomiting					Diarrhoea					Abdominal pain					Headache					Fever					Nausea					Other (State)							
Symptom	Symptom started		Symptom ended																																													
	Date	Time	Date	Time																																												
Vomiting																																																
Diarrhoea																																																
Abdominal pain																																																
Headache																																																
Fever																																																
Nausea																																																
Other (State)																																																
<p>Has the complainant visited a doctor?</p> <p><i>E.g. when visited by the doctor</i></p>	<p>Yes or No?</p>																																															
<p>Did the complainant provide a stool sample?</p> <p><i>(Alleged Food Poisoning Incidents only)</i></p>	<p><i>If Yes, record any additional information, e.g. the result of a stool / faecal sample analysis</i></p>																																															
<p>Have any family members, colleagues or friends of the complainant suffered any similar symptoms?</p> <p><i>(Alleged Food Poisoning Incidents only)</i></p>	<p>Yes or No? If yes, record details</p>																																															

SECTION 3: ABOUT THE PRODUCT - SUPPLIER

**A: DIRECT SUPPLIED FOOD**

Record all known product details

**Note** – Product codes and product descriptions can be obtained from invoices/delivery notes.

**Note** – if more than one product is involved, record the details for each product using a separate 'ABOUT THE PRODUCT (not made in-unit) page from this checklist.

Is a sample of the product available?

Refer to Samples and Analysis in the A to Z Section of the Food Safety Manual for further guidance

Vendor's name:

Product name & code:

Pack size:

Batch code:

Best before / Use by date:

Invoice / delivery note number:

Delivery date:

Quantity delivered

Quantity affected:

Yes or No?

**B: IN UNIT MADE FOOD**

Record the date that the food was produced in the unit

**Note** – if more than one product is involved, record the details for each product using a separate 'ABOUT THE PRODUCT (not made in-unit) page from this checklist

Is a sample of the product available?

Date:

Yes / No?

SECTION 4: PRODUCTION / STORAGE / SERVICE DETAILS

Product production information:

**Note** – *Temperatures must be recorded in degrees centigrade and taken from unit temperature record sheets*

Total number of portions produced:

Total number of portions consumed:

Product temperatures:

Storage °C

Cooking °C

Service °C

Record any additional details or other information that you feel may assist in the investigation





