# Purpose

1.1 To control the hygienic and food safety requirements for outgoing vehicle hygiene inspections.

# Scope

2.1 This procedure applies to finished product dispatch and transport.

# Responsibility

3.1 [Name of Personal Responsible]

# Definitions

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| **Hygiene** | All conditions and measures necessary to ensure the safety, soundness and suitability of food at all stages of the food chain |
| **Food Safety** | Assurance that food will not cause harm to the consumer when it is prepared and/or eaten according to its intended use |

# Instructions and Guidelines

5.1 Finished product shall have permanently legible code marks.

5.2 Distribution records shall be kept to identify initial distribution.

5.3 All transportation vehicles arriving to pick-up finished product shall be subject to a hygiene inspection by the dispatch department prior to loading the consignment.

5.4 All transportation vehicles will be fitted with a cooling unit.

5.5 During the inspection the temperature of both the product as well as environmental temperature of transportation vehicles shall be verified before loading.

Product Temperature ≤5°C

Environmental Temperature ≤6°C)

5.6 No products will be loaded if the truck temperature is not ≤ 6°C.

5.7 No product will be loaded if the product temperature is >5°C.

5.8 The inspection must be carried out in accordance with the requirements detailed on Dispatch and Transportation Records (Record 7.1).

5.9 All transportation vehicles will be fitted with a temperature logging system.

Temperatures must be recorded at each point of delivery.

5.10 Doors of the transportation vehicles will immediately be closed after product is taken from truck at each delivery point to ensure the maintenance of the cold chain.

5.11 Products need to be transferred to cold room facilities immediately after off-loading at each point of delivery to ensure the maintenance of the cold chain.

5.12 All non-conformances including damages to be recorded and reported to the dispatch manager

5.13 A non-conformance report shall be raised on non-conformances

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| **Executive Manager: [Name]** | **Date** | **Signature** |
|  | DD-MM-YYYY |  |