

Week commencing:

Monday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Friday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Tuesday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Saturday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Wednesday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Sunday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Thursday

Any problems or changes – what did you do?

Opening checks

Closing checks

Name

Signed

Our safe methods were followed and effectively supervised today.

Extra checks

We have performed the following extra checks this week

Name

Signed



4-WEEKLY REVIEW

You should regularly review the methods used in your business to check that they are up to date, and still being followed by you and your staff.

You can use the checklist below to help you. Look back over the past 4 weeks' diary entries. If you had a serious problem, or the same thing went wrong three times or more, make a note of it here, find out why and do something about it.

Did you have a serious problem or did the same thing go wrong three times or more?

Yes No

Details:

What did you do about it?

• **Did you get a new member of staff in the past 4 weeks?**

Yes No

Were they trained in your methods?

Yes No

• **Have you changed your menu?**

Yes No

Have you reviewed your safe methods?

Yes No

Any changes/new methods?

• **Have you changed supplier/bought new ingredients?**

Yes No

Do these affect any of your safe methods?

• **Are you using any new/different equipment?**

Yes No

Do these affect any of your safe methods?

• **Other changes:**