



# SQWV RECORD BOOK

**Review Date:** \_\_\_\_\_

**Reviewed By:** \_\_\_\_\_

**Next Review:** \_\_\_\_\_

## KEY INFORMATION

<b>SQWV MEMBERSHIP NO</b>	
<b>LARDER NAME</b>	
<b>ADDRESS</b>	
<b>POST CODE</b>	
<b>OS GRID REFERENCE or What3Words</b>	

## STALKER/PERMIT STALKER/UNACCOMPANIED TENANTS & CONTRACTOR DETAILS & TRAINING:

[illegible]

## EMERGENCY CONTACT DETAILS

Responsible Person (Estate Owner/Manager/Factor/Head Stalker)	
Local Vet Practice	
Divisional Veterinary Manager	
Local Animal Health Office	
Environmental Health Office	
Local Authority	
<b>LOCAL AUTHORITY LARDER REGISTRATION NUMBER</b>	
Local Police	
Fire Station	
Doctors Surgery	
Neighbour(s)	
Game Dealer	
SEPA	
Pollution hotline (24/7)	0800 80 70 60
Scottish SPCA Helpline	08707 377 722

## HYGINE HAZARD ASSESSMENT PLAN

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Cleaning &amp; Sanitisation.</b>		
Dirty/contaminated knife at gralloch		
Dirty hands at gralloch		
Dirty/contaminated hands when handling carcass		
Dirty/contaminated footwear into larder		
Dirty/contaminated clothing into larder		
Dirty/contaminated hands into larder		
Dirty floor		
Dirty work surfaces		
Dirty apron/gloves		
Drop knife onto floor		
Carcass contamination with cleaning products		

HYGINE HAZARD ASSESSMENT PLAN

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Pest Management</b>		
Flies within the larder		
Pests/vermin within the larder		
Animals and pets within the larder		

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Personal Hygiene</b>		
Infection brought into the larder by personnel which may contaminate the product		
Items brought into the larder by personnel which may cross contaminate the product including potential allergens.		

HYGINE HAZARD ASSESSMENT PLAN

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Product Storage</b>		
Contamination with by-product storage		
Contamination from other game storage		
Contamination by carcasses unsuitable for the SQWV Scheme.		

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Chilling</b>		
Transportation to the chiller being delayed		
Close contact hanging in the chiller		

HYGINE HAZARD ASSESSMENT PLAN

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Staff Training</b>		
Visitors/users to the larder not aware of larder requirements		
Contamination due to shot placement		
Unsuitable carcasses being presented to the scheme.		

Hygiene Hazard	Risk Level (High/Medium/Low)	Action Taken/Required
<b>Transportation to the Larder</b>		
Dirty vehicle/transporter/saddlery		
Carcasses exceeding chilling timeframes		
Carcasses heaped during transport		

## HYGINE HAZARD ASSESSMENT PLAN

### Chemicals In Use

Chemical	Where to be used	When to be used	Formulation	Who	Other details

### **Guidelines for completion:**

- Consider whether potential hygiene hazards highlighted apply to your operation. If so, describe how these will be minimised
- Consider what other hygiene hazards may be present in your situation and describe action required
- Detail what chemicals you work with and complete as required
- Ensure assessment form is completed/ signed off by responsible person in charge and look to review the plan before next stalking season

Name of person completing the hygiene hazard assessment	Position	Signature	Date	Date of next review



# RISK ASSESSMENT FORM

No.	Hazard	Who is at risk?	Control	Further Action	Likelihood (1 – 10)*	Severity (1 – 10)**	Person Responsible	Completion Date	Completed?
1 (eg)	Accidental discharge of firearm	Self, accompanying persons, public	Follow safety advice from sources such as Best Practice Guidance and DSC Qualifications	Ongoing training updates			Stalker, any persons in charge of firearms	Ongoing	Ongoing

\* eg Likelihood: 1 = would not happen, 10 = would always happen

\*\* eg Severity: 1 = no risk of injury/harm, 10 = fatal

# PROCEDURES TO BE FOLLOWED BY ALL EMPLOYEES BEFORE AND DURING ENTRY TO LARDERS

To be completed at the start of employment by all employees/permanent stalkers and countersigned by the line Manager.

Before entry into larder areas all employees must agree to adhere to the procedures set out below.

This record must be held on file for each member of staff with access to larders.

## Employees must report to the Manager if they:

- Feel ill, especially if you have sickness or diarrhoea, bad cold/flu, sore throat or very bad discharge from ears, nose and mouth
- Have food poisoning or are recovering from food poisoning
- Septic spots/boils or other skin infections

## Employees must:

- Wash hands before and after visiting the toilet.
- Ensure footwear is inspected prior to entering and leaving the larder, and where appropriate it is cleaned or protective covers worn to prevent gross contamination of the larder floor.
- Keep cuts and sores covered with a blue dressing.
- Not eat within the larder.
- Ensure that any essential glass (eye wear) is intact and damage free to prevent glass contamination.
- Non essential glass must not be brought into the larder.
- Not allow any animals or pests into the larder.
- Not smoking within the larder at any time.

I \_\_\_\_\_ (print name) agree to adhere to the hygiene procedures above  
at all times

Signed \_\_\_\_\_ (Employee)      Date \_\_\_\_\_

Signed \_\_\_\_\_ (Manager)      Date \_\_\_\_\_

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Signed \_\_\_\_\_ (Manager)      Date \_\_\_\_\_

## PROCEDURES TO BE FOLLOWED BY ALL VISITORS BEFORE AND DURING ENTRY TO LARDERS

Before entry into larger areas all visitors must enter their name, company (if applicable), address and signature in the visitor's declaration sheet, which must be countersigned by a member (or member's representative) of the Scottish Quality Wild Venison Scheme.

**Visitors must report to the SQWV member if they:**

- Feel ill, especially if you have sickness or diarrhoea, bad cold/flu, sore throat or very bad discharge from ears, nose and mouth
- Have food poisoning or are recovering from food poisoning
- Septic spots/boils or other skin infections

**Visitors must:**

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## Visitor Declaration Record

I have read a copy of the SQWV Scheme Standards and Larder Hygiene Policy to be followed by all visitors before, during and after entry to the larder and agree to abide by the scheme standards at all times.

By signing the Visitor Declaration Sheet, I confirm to be free from any illness or suffering from, or exhibiting, symptoms of any disease or condition likely to be transmitted through food (this includes infected wounds, skin infections, sores or diarrhoea).

[illegible]

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## CHILL TEMPERATURE RECORD

Chill Details/Location: \_\_\_\_\_

[illegible]

## CHILL TEMPERATURE RECORD

Chill Details/Location: \_\_\_\_\_

[illegible]

## CHILL TEMPERATURE RECORD

Chill Details/Location: \_\_\_\_\_

[illegible]

## CHILL TEMPERATURE RECORD

Chill Details/Location: \_\_\_\_\_

[illegible]















































