



Assessment

Workplace Assignment and Supervisor Validation

SITXFSA001A Implement food safety procedures

There are two parts to this assessment. You are to complete Part A and forward your documentation and report to Food Safety Australia, and ask your Supervisor to complete the Supervisor Validation for Part B.

If you don't work in a food business, we suggest that you might volunteer at a community or local business. If you have difficulties in accessing a food business, please contact Food Safety Australia and we will assist you.

PART A

1. Please provide a copy of your organisation's Food Safety Plan.
2. Report on how you follow all food safety policies and procedures in your organisation. Include:
 1. identifying and describing critical control points
 2. food safety monitoring processes. Provide copies of monitoring records for a whole shift or day.
 3. food storage conditions for three different food types (include raw food, cooked food and frozen food)
 4. provide an example of a practice that you have identified as inconsistent with the food safety program, describe the issue and what corrective actions you have taken or suggested. Also provide a copy of any documentation required to completed by your organisation for reporting the issue.
 5. identify three potential cross-contamination issues in your kitchen area. Describe the potential issues and what actions must be taken to ensure contamination does not occur.
 6. provide an example of how you monitor the temperature of cooked food prior to service. Provide a copy of your calibration and monitoring logs for temperature probes.
 7. describe your end-of shift or end-of day clean-up processes, including waste management and recycling if applicable
 8. describe two pieces of equipment which require a cleaning and/or maintenance program. How do you ensure that the cleaning and/or maintenance is carried out, on time?

PART B

To verify that you consistently apply your knowledge of food safety at work, we ask that your immediate Supervisor provide verification based on their observation of your work. Please ask that they complete the Supervisor Validation Form on the next page and return it to us.



PART B Supervisor Validation Form

A Note to the Supervisor:

To ensure consistency in performance and therefore to validate the participant's competence to demonstrate the required performance criteria within the workplace, Food Safety Australia seeks the input of the immediate Supervisor of the participant. Please read the following questions and provide a response based on your actual observation of the participant, over time. Your honesty is appreciated.

The following table includes a range of skills specific to implementing food safety procedures. We ask that you verify your observation of the participant in the work setting. You are not assessing the participant's skills and we would suggest that your observation of their work is ongoing over time, and not a specific activity which would make them feel uncomfortable. Please complete the table and questions, sign and date this form and return it to Food Safety Australia at the address listed at the end of this document.

Thank you for your assistance.

Participant Name: Sherelle Baxter Ives Phone: 08 92925999

Supervisor Name: Jorg Thonnissen Phone: 0411696693

Organisation Name: West Australian Caterers Pty. Ltd. Fax: 08 92010211

Organisation's Address: 79 Eton Street North Perth WA 6006

Participant's Role in Organisation: Kitchen Manager

How long have you known the participant and observed them at work? 7 years

Date: 23 / 08 / 2013

Please complete the Supervisor Comments column:

Have you observed the participant...	Supervisor Comments
1. Use a Food Safety Program, including appropriate recordkeeping?	Completed appropriate records from the food safety program (please list records checked)? Yes has been observed - and manuals have been established.
2. Wear appropriate clothing/uniform, gloves, hair-nets, aprons?	Student used? appropriate clothing/uniform, gloves, hair-nets, aprons – observed.



Have you observed the participant...	Supervisor Comments
3. Store cleaning chemicals correctly?	Where/ how? Chemicals are stored in designated room separate from food or other items.
4. Correctly use a sanitizer?	Which sanitizer? What tasks were observed? Observed participant using correct sanitizer cleaning kitchen bench before food prep. Sanitizer solution was correctly diluted and applied.
5. Clean work areas before beginning any food preparation correctly?	What was cleaned and sanitized? Observed participant using correct sanitizer cleaning kitchen bench before food prep.
6. Use correct equipment and preparation of utensils?	Which equipment and utensils? Observed correct cleaning of meat slicer and Hobart mixer and oven.
7. Correctly store packaging materials and serving materials?	How was packaging stored? Packaging is stored in designated room separate from other kitchen items.
8. Carry out waste management correctly?	How? How often? Was there any potential for cross-contamination? Yes - as per attached hygiene manual. Bins get emptied into recycle bins outside kitchen – bins cleaned and sanitized before re introducing into kitchen.
9. Use correct personal hygiene procedures- hand washing, hair, uniforms, jewellery, personal habits, etc?	How was personal hygiene controlled? Controlled procedures as per hygiene manual – similarly observed hand-washing before, during and after food handling.



Have you observed the participant...	Supervisor Comments
10. Correctly use a thermometer to test temperature of food (cooked and frozen)?	How? Did you observe them calibrating the thermometer? Has been observed – calibrating in ice water 2 minutes and using thermometer to check cold foods and hot foods.
11. Correctly store and prepare foods to prevent cross contamination?	Which foods, how? Chicken – store in separate area in coolroom – if frozen with drip tray underneath. Cooked foods stored separate – own section in coolroom marked and dated.
12. Ensure that movement around the workplace complies with Food Safety Program?	How? Kitchen is free of obstacles that could pose as accidents.

Please answer the following questions:

Does the participant know where to look for information regarding your organisation's OH&S policies and procedures? Yes / No

Can the participant describe HACCP principles, procedures and processes? Yes / No

Can you think of any occasion where the participant may not have complied with the food safety plan, legislation or workplace procedures? Yes / No

Comment: no comments to be made

General Comments: no comments to be made

Supervisor's Signature