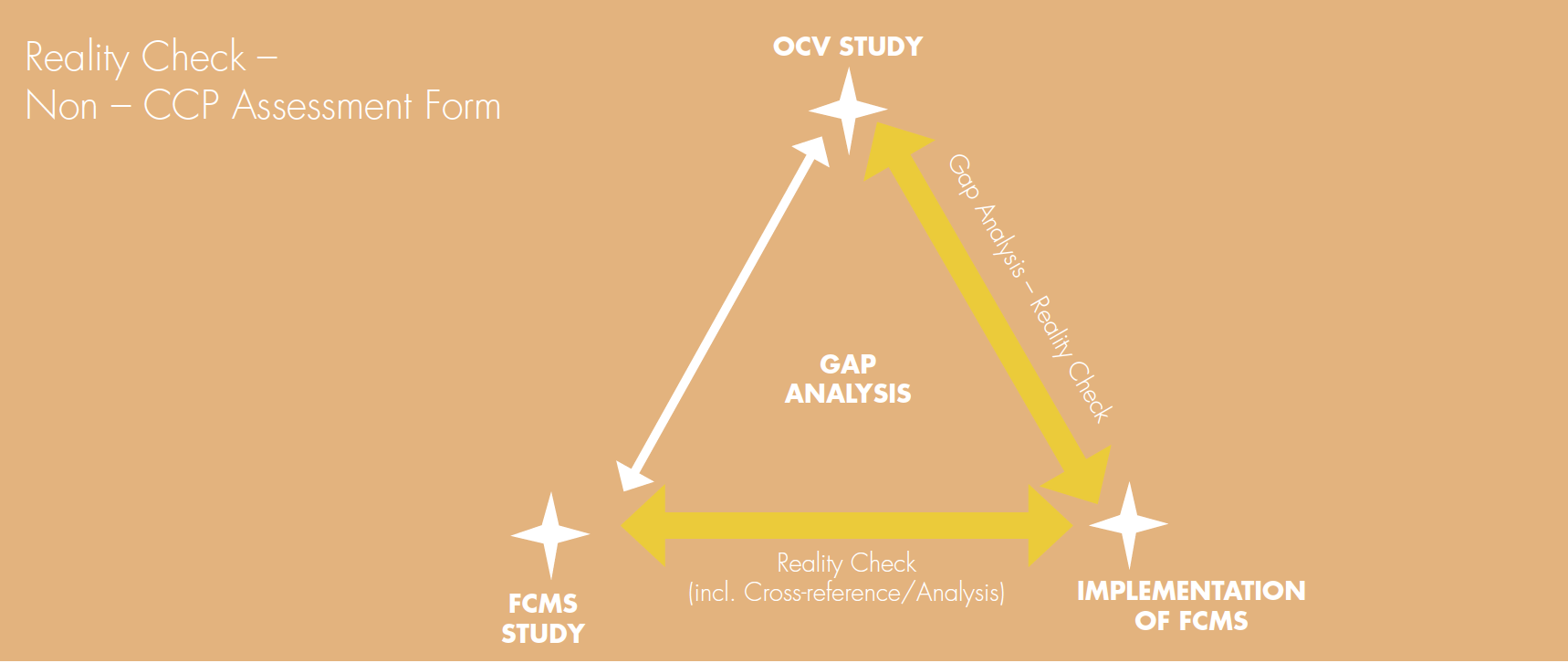
|  |
| --- |
| Other Forms |
|  |



|  |  |
| --- | --- |
| Business Name: |  |
|  |  |
| Officer: |  |
|  |  |
| Date of Reality Check: |  |
|  |  |
| Product: |  |
|  |  |
| CCP: |  |

|  |  |
| --- | --- |
|  | **Record Sources of Evidence** |
| **Has the Step been correctly identified?** (PRP/OPP etc) |  |
| **Controls and Limits** (Appropriate, achieved in practice) |  |
| **Monitoring** (Appropriate frequency, trained staff, consistent with written procedure) |  |
| **Corrective Actions** (Are these being actioned when required, consistent with written procedure) |  |
| **Records** (Accessible, correct version, completed correctly) |  |
| **Is the CCP under control?** Evidential Triangulation – record sources of evidence. |  |