

Audit - Seasonal / Peak Period Readiness

Food Safety & Quality Template · Provided by GIFSQ

Peak season breaks systems that work fine the rest of the year - temporary staff, pushed capacity, rushed suppliers. This audit checks you're ready before the rush, not during it.

Audit against what you see, not what you hope. Mark each clause C, NC or N/A on evidence - and write the evidence down; 'looked fine' isn't evidence. Every NC gets a corrective action.

1. Audit details

Field	Details
Audit title	Audit - Seasonal / Peak Period Readiness
Audit no.	[AUD-YYYY-###]
Date(s)	[YYYY-MM-DD]
Auditor(s)	[Name(s)]
Area / process audited	[Area]
Auditee(s)	[Name(s) / Title(s)]

2. Audit criteria

Reword the clauses to match your standard if you need to - but keep the numbering stable so you can trend findings over time.

Ref	Requirement	C / NC / N/A	Evidence seen	Corrective action ref
1.1	Staffing plan covers peak volumes including trained temporary staff.	[]	[]	[]
1.2	Temporary staff receive induction and task training before starting.	[]	[]	[]

Ref	Requirement	C / NC / N/A	Evidence seen	Corrective action ref
1.3	Supervision ratios are maintained during peak periods.	☐	☐	☐
2.1	Equipment capacity is verified for peak throughput; maintenance is up to date.	☐	☐	☐
2.2	Storage capacity (including temperature-controlled) is adequate for peak stock.	☐	☐	☐
3.1	Key suppliers confirm capacity; backup suppliers are approved.	☐	☐	☐
3.2	Delivery schedules and intake capacity are planned.	☐	☐	☐
4.1	Cleaning and hygiene frequencies are adjusted for higher throughput.	☐	☐	☐
4.2	Allergen and label controls hold under increased changeovers.	☐	☐	☐
4.3	Waste removal frequency is increased to match volumes.	☐	☐	☐
5.1	Previous season's issues were addressed (review of lessons learned).	☐	☐	☐

3. Summary

- Total clauses checked: ☐
- Compliant: ☐ Non-compliant: ☐ N/A: ☐
- Overall result: [Pass / Conditional pass / Fail - define your scoring rule here]
- Key strengths: ☐
- Priority corrective actions: [list CAR references]

Approval and control

Role	Name	Signature	Date
Prepared by	[Name]	[Signature]	[Date]
Reviewed by (QA)	[Name]	[Signature]	[Date]
Approved by	[Name]	[Signature]	[Date]

Keep completed forms for [Define retention period, e.g., 2 years beyond shelf life] at [defined location] - and make sure someone besides you knows where that is.

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