



Raised by a Canadian Farmer

On-Farm Food Safety Program (2021) and
Animal Care Program (2018) Flock-Specific Records

V7.0



Production Information

Quota Period: _____

Barn #: _____

Floor #: _____

Placement Date: _____

Name of farm representative available
at placement: _____

Chick Quality Assessment

Quality Assessment	Upon Receipt of Chicks		3-4 Day-old Chicks	
	Acceptable	Not Acceptable	Acceptable	Not Acceptable
Alertness				
Vigour				
Condition				
Normality				

Water – Record all products (e.g. for cleaning, acidification/pH, probiotics, etc.) used in the water. For cleaning products, record the verification results (at least twice during the grow-out)

Product Name	Date(s) Used	Chemical Concentration Verification	
		Date	Results (e.g. ppm, pH)

Feed

Each load of feed is visually inspected and the bill checked for medications and kept in the producer's file: _____ (initial)

Record the date that control measures were used when switching from a medicated feed with a withdrawal period to feed without a withdrawal period*	Record the type and amount of ingredients (e.g. wheat) added to finished feeds	Record the dates of feed samples (if required)

* For single-bin systems record the date when the sides of the bin were knocked down to prevent feed hang-ups; for double-bin systems record the date when the switch to the feed bin without a withdrawal period occurred.

Feed Transfer Record

Date feed moved	Original farm name and bin #	Destination farm name and bin #	List any medications with withdrawal periods used in the flock	Method of transport	Sample taken	Cross-contamination prevention measures used at the original bin

Visitors Log Book

Date	Name	Has there been any previous poultry contact within the last 24 hours?

Barn Preparation Checklist

BARN CLEANING	DATE(S) COMPLETED	RECORD THE PRODUCT NAME AND/OR A DESCRIPTION OF THE PROCEDURE
Remove litter/manure from barn *If using Option #3 - Time since shipment of last flock:	*	* Location:
Dry-clean (i.e. blow down/brushing) barn, entranceway and equipment (feeders/drinkers/fans/floor/walls/barn footwear/catching equipment etc.)	*	
Mortality buckets/pails are washed with water and detergent and/or disinfectant	*	* Product name:
Barn and equipment (as per the above dry-clean list) is pressure washed with water	*	
Option 1: <input type="checkbox"/> Detergent and/or <input type="checkbox"/> disinfectant/fumigation used in the barn and on the equipment	*	* Product name(s):
Option 2: <input type="checkbox"/> Detergent and/or <input type="checkbox"/> disinfectant/fumigation used on the equipment	*	* Product name(s):
Equipment used during clean-out is cleaned	*	* Product name:
Flush, clean and/or disinfect water lines (open drinkers disinfected if applicable)	*	* <input type="checkbox"/> Flush Product name:
Inspect inside and outside of feed bin and clean if needed (min. 1/year)	*	* Description:
Downtime: Indicate the number of days from when the flock was shipped to the placement of chicks		*
Facilities Preparation	Dates(s)	
Water system checked (including filters or UV bulbs)	*	* Dates of filters/bulbs changed:
Heating system checked	*	
Stand-by generator checked	*	
Monitoring system checked	*	
Ventilation system checked	*	
Light system checked	*	
Drinkers and feeders checked individually	*	
Bedding material (checked for mold/feathers/droppings/sharp edges or harmful compounds at placement)	*	
Pest Control – Describe the pest control methods used	Dates(s)	
Describe any barn repairs	*	*Description:
Vegetation cut around building(s)	*	*
CAZ kept maintained	*	*
Rodent controls used	*	* Product:
Wild bird controls used	*	* Product:
Fly controls used	*	* Product:
Insecticides (e.g. for darkling beetles) used	*	* Product:
Other pests (names) and controls used	*	* Controls:
No pets in the RA (✓)	*	* Signature:

Medications – Complete the following table for all medications administered through feed or water

Name of Medications	Route of Administration	Water Medicator Tested			Record any control measures used in the last 2 weeks of grow-out*
		Date	Results	Corrective Actions (if any)	
	<input type="checkbox"/> feed <input type="checkbox"/> water				
	<input type="checkbox"/> feed <input type="checkbox"/> water				
	<input type="checkbox"/> feed <input type="checkbox"/> water				
	<input type="checkbox"/> feed <input type="checkbox"/> water				

*For medication with a withdrawal period used in the last 14 days. Record the date feed was minimized or the water lines flushed.

Flock Density

Floor #	# Birds at time of shipment*	Average bird weight (<input type="checkbox"/> kg or <input type="checkbox"/> lb)	Floor Area (<input type="checkbox"/> ft ² or <input type="checkbox"/> m ²)	Density at shipping (weight/floor area)

*The # birds at the time of shipment is the number of birds placed per floor minus the mortality and culls for the floor right before shipping.

Ammonia – For all densities, record the ammonia level (ppm) per floor, starting the week of day 21-27, at least once weekly

Floor #	Date	Ammonia Level	Date	Ammonia Level	Date	Ammonia Level

Deviation Chart

Complete this table when a deviation from any Standard Operating Procedures occurs including:

- Temperature levels
- Bedding quality
- Lighting program
- Medications delivered through feed or water
- Humidity or ammonia levels
- Alarms
- High mortality

Deviations only need to be recorded if they exceed upper or lower limits outlined in SOP.

Date	Description of the Deviation	Reason for the Deviation	Actions taken to Correct the Deviation

Shipping

Name of farm representative available locally to assist catching crew: _____

Feeders and waterers lifted prior to catching Light intensity reduced prior to catching

Flock evaluated for fitness prior to transport with catching supervisor Inside barn temperature: _____ °C/°F at loading

Outside temperature: _____ °C/°F at loading Catching & loading comments: _____

Number of culls left: _____ Barn temperature reduced prior to loading: _____ hours: _____

Date and time of euthanasia of leftover birds: _____

Daily Checks

I confirm that the information on these Flock-Specific records is accurate and that the following food safety and animal care checks have been performed on a daily basis (any deviations from SOP's are to be recorded in the Deviation Chart):

- Feed quality and availability
- Thermal comfort of the flock
- Ventilation system
- Ammonia levels
- Temperature levels
- Humidity levels
- Litter quality
- Water quality (mold and slime) for open drinkers
- Water availability (quality – cloudiness and discoloration – checked weekly)
- Heating system
- Lighting system
- Flock Health
- Birds inspected minimum twice daily

Signature _____

Date _____

Flock Mortality & Daily Records

Floor #:				Flocks with a Grow-Out Density between 31-38 kg/m ²					
Age	Date	Mortality	Culls	Temperature		☐ Humidity or ☐ Ammonia		Water Meter Reading	Record any Alarms ¹
				Min.	Max.	Min.	Max.		
1 ²									
2									
3									
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				Min.	Max.	Min.	Max.		
24									
25									
26									
27									
28									
29									
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1 Record all Corrective Actions in the Deviation Chart.
 2 Day 1 represents the first 24 hr period after placement.

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