**Model document**

**Food chain information for poultry consigned for slaughter for human consumption**

**Part 1 - Information about producer and the official veterinarian**

A. Producer details

|  |  |
| --- | --- |
| Name of producerand the position - for example, keeper, owner, etc.  |  |
|  |
| Address of producer (farm) |  |
|  | Post code |  |
|  |
| County parish holding number |  | Tel number  |  |
|  |
| Email address |  |
|  |
| Are you a member of any assurance scheme? **YES/NO** |  |  |  |  |
| If **YES** |  |  |  |
| Name of assurance scheme |  | Membership number |  |
| B. Official veterinarian and practice details |
|  |
| Name of official veterinarian |  |
|  |
| Name and address of veterinary practice  |  |
| Post code |  |
|  |
| Email address (if known)  |  | Tel. number |  |
|  |  |  |  |

\***Destination:** Slaughterhouse name / approval number (if known):

|  |
| --- |
|  |

**Part 2 - Information about poultry being sent for slaughter**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | House 1 | House 2 | House 3 | House 4 |
| Species |  |  |  |  |
| Breed or hybrid (broilers only) |  |  |  |  |
| Age |  |  |  |  |
| Production type (free range, housed, organic etc) |  |  |  |  |
| Number of birds  |  |  |  |  |
| Batch identification reference - for example, trailer / shed no. |  |  |  |  |
| Proposed slaughter date |  |  |  |  |
| \*Maximum stocking density (broilers only) |  |  |  |  |
| \*Mortality % at 14 days |  |  |  |  |
| Mortality % to date or for broilers only: Cumulative daily mortality rate |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of medication prescribed (include vaccines and preventative medicines - coccidiostats) | Houses | Date withdrawn | Have the withdrawal periods been observed? |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Has any disease been diagnosed in this shed / house? **YES/NO** |  |  |  |  |  |
|  |  |  |  |
| If **YES** give details |  |  |  |  |
|  |  |  |  |
| Has the mortality rate been High for a reason other than disease? **YES/NO** |  |  |  |  |  |
|  |  |  |  |
| If **YES** give details |  |  |  |  |
|

|  |  |
| --- | --- |
| Is this flock required to be tested under the requirements of the Salmonella National Control Programme (NCP)? **YES/NO** |  |

 |  |  |  |
|  |  |  |  |
| If not exempted **-** Please provide**:** |  |  |  |
| Date of test |  |  Result of test:(negative or positive, including*Salmonella* type isolated if positive) |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Have any other tests been carried out on the flock for any agents with the potential to cause food-borne disease in humans? **YES/NO** |  |  |
|  |
| If **YES** Agent tested for |  | Date and result of test |  |

**Part 3 - Disease history of the holding**

|  |  |  |
| --- | --- | --- |
| Is the holding under any statutory or voluntary restrictions? **YES/NO** |  |  |
|  |
| If **YES** what restrictions apply? |  |
|  |
| **Provide the following information ONLY if previous consignments were sent to a different slaughterhouse** |
| In two previous consignments from this (these) house (s) / shed (s) please record the rejection rate |
| Reason for rejection |  | % Rejected |  |
|  |
| Reason for rejection |  | % Rejected |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Part 4 - Information / declaration on country of rearing**

|  |
| --- |
|  |

The birds spent the last rearing period of one month in the following country:

|  |
| --- |
|  |

If, under one age of month at slaughter, the whole rearing period was spent in:

(Provide appropriate name of country - for example, England / Wales

To be signed by the person responsible for completing parts 1, 2, 3 and 4

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature of producer |  | Date |  | Time |  |

**Part 5 - Slaughterhouse operator's check and comments**

I accept these birds for slaughter for human consumption

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | Date |  | Time |  |
|  |
| Comments |  |

Part 6 - Official veterinarian's check and comments

FCI checked

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | Date |  | Time |  |
|  |
| Comments |  |

# *NB: \* denotes optional requirements but see accompanying guidance note.*

# GUIDANCE FOR COMPLETION OF FOOD CHAIN INFORMATION (FCI) FOR POULTRY

## Timing

**FCI is required to be supplied at least 24 hours before the arrival of animals at slaughterhouse, except where ante mortem inspection is done at the farm. In this case the FCI and veterinary ante mortem declaration is to accompany the animals to which they relate.**

*(Regulation (EC) No 853/2004, Annex II, Section III and Regulation (EU) 2019/627 Title III, Chapter II and Chapter III.)*

Part 1, 2 and 3 to be completed by the producer.

Part 4 to be completed by the slaughterhouse operator.

Part 5 to be completed by the Official Veterinarian.

# Part 1 - Information about producer and the official veterinarian

**The producer is the person in charge of birds being sent for slaughter. This may be the owner of birds, farm manager, keeper or grower. The email address provided should be that to which you wish the results of the inspection activities to be sent.**

###### Part 2 - Information about poultry being sent for slaughter

**Provide only details relevant for birds from a particular house or shed that are being sent for slaughter.**

**~~K~~eepers who stock above 33kg/m2 will need to provide details of breed/ hybrid line and the most recent** **cumulative daily mortality rate for each house**. In addition we request that the maximum stocking density of the flock is included to this form. We would encourage all keepers, regardless of flock stocking density, to provide the information requested in this form to assist in on-going data collection and evaluation.

**Mortality % at 14 days for breeders/layers to be provided if known.**

**Details of medicines given should only cover those where withdrawal period is greater than zero. For breeders and layers the period covered is to include the last six weeks as a minimum.**

**Salmonella National Control Plan (NCP)**

**Give details of the flock test for *Salmonella* carried out under the requirements of the *Salmonella* NCP including the results of the test.**

Completion of the *Salmonella* testing details is obligatory for all poultry covered under the breeder, layer, broiler and turkey NCPs unless there is exemption for one of the specific criteria as laid out in the guidance to the NCP.

The UK guides to the [national control programmes for *Salmonella*](https://www.gov.uk/guidance/salmonella-national-control-programmes-fees) in breeders, layers, broilers and turkeys are available on the GOV.UK website.

**Also give details of any disease diagnosed or any other agents identified in the flock, if tested and results known - for example, microbial and/or chemical contaminants.**

##### Part 3 - Disease history of the holding

##### If applicable, please provide details of any disease diagnosed on your farm (for example, avian influenza, Newcastle disease) where movement restrictions have been imposed.

**Note:** the person completing Parts 1, 2 and 3 is to sign the box provided.

**Part 5 - Slaughterhouse operator's check and comments**

This check is concerned with completeness of document for obvious errors and omissions rather than making the professional evaluation of information supplied. However, when for example birds have been tested positive for *Salmonella*, the slaughterhouse operator will have to note down action taken. In order to minimise cross contamination during processing the action taken may include processing the batch before the break or last in the day.

##### Part 6 - Official veterinarian's check and comments

As part of ante-mortem inspection, the FCI may be checked either on farm or in the slaughterhouse.