Summary of Non Conformities, Global Food Safety Standard, Issue 7
Report: 1160407
Colorado Premium -
Bridgeview
Bridgeview, Illinois 60455
Evaluation day(s):5-06-2016
Auditor(s): Lori Ernst

At the closing meeting it isn't possible to report the likely outcome of the audit. The decision is made by the managing director, following a detailed technical review of the audit report and in advice by the certification manager.

In case of a non-conformity / non-conformities they are mentioned below:

List of Non-Conformities

Fundamental

Clause	Requirement	Detail of the non-conformity

By signing this box the auditee declares that the audit stopped based on the Fundamental non-conformity.

Signature auditor:

X _____

Auditor

X _____

Auditee Representative

* Complete new audit has to be carried out.

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List of Non-Conformities

Critical

Clause	Requirement	Detail of the non-conformity

By signing this box the auditee declares that the audit stopped based on the Critical non-conformity.

Signature auditor:

X

Auditor

Signature auditee:

X

* Complete new audit has to be carried out.

List of Non-Conformities

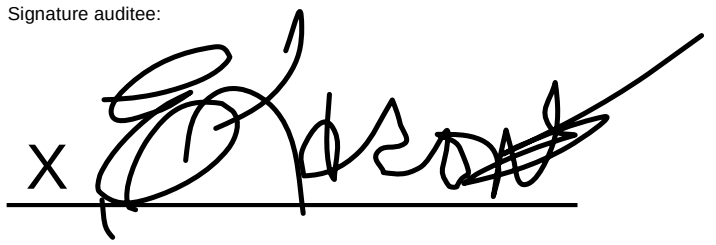
Major

Clause	Requirement	Detail of the non-conformity
2.5.1	A flow diagram shall be prepared to cover each product, product category or process. This shall set out all aspects of the food process operation within the HACCP scope, from raw material receipt through to processing, storage and distribution. As a guide, this should include the following, although this is not an exhaustive list: • plan of premises and equipment layout • raw materials including introduction of utilities and other contact materials, e.g. water, packaging • sequence and interaction of all process steps • outsourced processes and subcontracted	Flow diagram for Raw not ground intact product did not include receiving, storage, and input of ingredients for tumbled product.

	work • process parameters • potential for process delay • rework and recycling • low/high-care/high-risk area segregation • finished products, intermediate/semi-processed products, by-products and waste	
3.9.1	Identification of raw materials, including primary and any other relevant packaging, processing aids, intermediate/semi-processed products, part-used materials, finished products and materials pending investigation shall be adequate to ensure traceability.	Traceability to specific lots or boxes shipped (trim generated from the process) was not maintained. Part boxes of finished product were used in the subsequent product run to fill boxes of product. Pork product was observed in the freezer without identification.
4.9.1.1	Processes shall be in place to manage the use, storage and handling of non-food chemicals to prevent chemical contamination. These shall include as a minimum: • an approved list of chemicals for purchase • availability of material safety data sheets and specifications • confirmation of suitability for use in a food processing environment • avoidance of strongly scented products • the labelling and/or identification of containers of chemicals at all times • a designated storage area with restricted access to authorised personnel • use by trained personnel only.	Two bottles were used as secondary containers, breakroom, with original chemical label not removed, windex, that now contained Pine Sol and Clorox. Goo Gone was observed in the chemical storage area mixed with product contact cleaning utensils. Goo Gone was not an approved chemical for food contact surfaces. List of approved chemicals was not current.
4.10.3.5	The site shall establish and implement corrective action and reporting procedures in the event of the testing procedure identifying any failure of the foreign-body detector. Action shall include a combination of isolation, quarantining and re-inspection of all product produced since the last successful test.	Metal detector on the ground beef line was challenged during the facility tour. Ferrous and Non-Ferrous wands were not detected when placed on top of the product and passed through the center of the metal detector. Employee interviewed did not properly document the failure of the metal detector and did not quarantine potentially affected product.
6.2.2	Documented checks of the production line shall be carried out before commencing production and following changes of product. These shall ensure that lines have been suitably cleared and are ready for production. Documented checks shall be carried out at product changes to ensure all products and packaging from the previous production have been removed from the line	Documented checks were not maintained during product changeovers. A documented process was not in place demonstrating ground product without claims were not mixed with product with claims. Second shift documentation was not maintained for label verification or changeovers.

	before changing to the next production.	
*** Write corrective action plan and collect objective evidence. See attached guideline.**		
* 3 or more Majors or 2 Majors and more than 20 minor NC's means a complete new audit has to be carried out.		

Signature auditee:



Auditee Representative

May 6, 2016

List of Non-Conformities

Minor

Clause	Requirement	Detail of the non-conformity
1.1.2	The company's senior management shall ensure that clear objectives are defined to maintain and improve the safety, legality and quality of products manufactured, in accordance with the quality policy and this Standard. These objectives shall be: • documented and include targets or clear measures of success • clearly communicated to relevant staff • monitored and results reported at least quarterly to site senior management.	Food Safety and quality objectives were not established. Goals must be reviewed a minimum of quarterly.
1.1.3	Management review meetings attended by the site's senior management shall be undertaken at appropriate planned intervals, annually as a minimum, to review the site performance against the Standard and objectives set in 1.1.2. The review process shall include the evaluation of: • previous management review action plans and time frames • results of internal, second party and/or third party audits • customer complaints and results of any customer performance reviews • incidents, corrective actions, out of specification results and non-conforming materials • review of the management of the HACCP system • resource requirements. Records of the meeting shall be documented and used to revise the objectives. The decisions and actions agreed within the review process shall be effectively communicated to appropriate staff, and actions implemented within agreed timescale.	Management meetings were held; however, meeting notes were not maintained.
1.1.4	The site shall have a demonstrable meeting programme which enables food safety, legality and quality issues to be brought to the attention of senior management at least monthly and allows	Monthly/ weekly meetings were required to feed into Senior Management meetings.

	for the resolution of issues requiring immediate action.	
1.2.1	The company shall have an organisation chart demonstrating the management structure of the company. The responsibilities for the management of activities which ensure food safety, legality and quality shall be clearly allocated and understood by the managers responsible. It shall be clearly documented who deputises in the absence of the responsible person.	Organizational chart was not current. Backup personnel for absences were not established.
2.1.1	The HACCP plan shall be developed and managed by a multi-disciplinary food safety team that includes those responsible for quality/technical, production operations, engineering and other relevant functions. The team leader shall have an in-depth knowledge of HACCP and be able to demonstrate competence and experience. The team members shall have specific knowledge of HACCP and relevant knowledge of product, process and associated hazards. In the event of the site not having appropriate in-house knowledge, external expertise may be used, but day-to-day management of the food safety system shall remain the responsibility of the company.	HACCP team list was not current. According to the HACCP Food Safety System policy the team was required to meet a minimum of quarterly. Meetings notes were not maintained at this frequency.
2.2.1	The site shall establish and maintain environmental and operational programmes necessary to create an environment suitable to produce safe and legal food products (prerequisite programmes). As a guide these may include the following, although this is not an exhaustive list: • cleaning and sanitising • pest control • maintenance programmes for equipment and buildings • personal hygiene requirements • staff training • purchasing • transportation arrangements • processes to prevent cross-contamination • allergen controls. The control measures and monitoring procedures for the prerequisite programmes must be clearly documented and shall be included within the development and reviews of the HACCP	Pre-requisite programs must be reviewed during HACCP reassessments.

2.3.1	A full description for each product or group of products shall be developed, which includes all relevant information on food safety. As a guide, this may include the following, although this is not an exhaustive list: • composition, e.g. raw materials, ingredients, allergens, recipe • origin of ingredients • physical or chemical properties that impact food safety, e.g. pH, aw • treatment and processing, e.g. cooking, cooling • packaging system, e.g. modified atmosphere, vacuum • storage and distribution conditions, e.g. chilled, ambient • target safe shelf life under prescribed storage and usage conditions	Product descriptions were not provided for the Raw Ground plan. Review current ones for packing used and that elements were not copied and pasted incorrectly from plan to plan.
2.11.1	The HACCP food safety team shall specify and document the corrective action to be taken when monitored results indicate a failure to meet a control limit, or when monitored results indicate a trend towards loss of control. This shall include the action to be taken by nominated personnel with regard to any products that have been manufactured during the period when the process was out of control.	Reviewed CCP deviation did not fully follow for step corrective action requirements out lined in 9CFR 417.3(a).
3.2.1	The company shall have a procedure to manage documents which form part of the food safety and quality system. This shall include: • a list of all controlled documents indicating the latest version number • the method for the identification and authorisation of controlled documents • a record of the reason for any changes or amendments to documents • thesystem for the replacement of existing documents when these are updated.	A list of controlled documents was provided. Pre-operational inspection form in use was not the correct version.
3.3.1	Records shall be legible, maintained in good condition and retrievable. Any alterations to records shall be authorised and justification for alteration shall be recorded. Where records are in electronic form these shall be suitably backed up to prevent loss.	Forms were photocopied to the level that they were difficult to read. Specific Metal Detector Chart was difficult to read.

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3.4.1	There shall be a scheduled programme of internal audits throughout the year with a scope which covers the implementation of the HACCP programme, prerequisite programmes and procedures implemented to achieve this Standard. The scope and frequency of the audits shall be established in relation to the risks associated with the activity and previous audit performance; all activities shall be covered at least annually.	Internal Audit schedule was not based on risk. The Auditing / Inspection program was written to SQF requirements. Corrective actions were not documented for GMP or facility audits.
3.5.1.1	The company shall undertake a documented risk assessment of each raw material or group of raw materials to identify potential risks to product safety, legality and quality. This shall take into account the potential for: • allergen contamination • foreign body risks • microbiological contamination • chemical contamination. • substitution or fraud (see clause 5.4.2). Consideration shall also be given to the significance of a raw material to the quality of the final product. The risk assessment shall form the basis for the raw material acceptance and testing procedure and for the processes adopted for supplier approval and monitoring.	Ingredient risk assessment did not include assessment for physical, chemical or biological hazard. The risk assessment stated most items were 'low' risk but did not include how the conclusion was reached.
3.5.2	Controls on the acceptance of raw materials including packaging shall ensure that these do not compromise the safety, legality or quality of products and where appropriate any claims of authenticity.	Receiving program stated trim received without a COA would be tested by the facility. The program did not explicitly state verification requirements against a COA for tested trim or protocols to follow if incorrect product was present on received trailers.
3.6.1	Specifications for raw materials and packaging shall be adequate and accurate and ensure compliance with relevant safety and legislative requirements. The specifications shall include defined limits for relevant attributes of the material which may affect the quality or safety of the final products (e.g. chemical, microbiological or physical standards).	Butcher notes were used as processing specifications. However, butcher notes were not detailed in most cases to allow for proper trimming application. Raw material trim specifications were not defined. Specifications were not currently under a three year review process.
3.7.2	Where a non-conformity places the safety, legality or quality of products at risk this shall be investigated and recorded including: • clear documentation of the non-conformity • assessment of consequences by a suitably competent and authorised person	Reviewed corrective actions did not include root cause analysis.

	• the action to address the immediate issue • identification of the corrective action to address the immediate issue • identification of an appropriate timescale for correction • identification of personnel with appropriate authority responsible for corrective action • verification that the corrective action has been implemented and is effective • identification of the root cause of the non-conformity and implementation of any necessary corrective action.	
3.8.1	There shall be documented procedures for managing non-conforming products which include: • the requirement for staff to identify and report potentially non-conforming product • clear identification of non-conforming product, e.g. direct labelling or the use of IT systems • secure storage to prevent accidental release, e.g. isolation areas • referral to the brand owner where required • defined responsibilities for decision making on the use or disposal of products appropriate to the issue, e.g. destruction, reworking, downgrading to an alternative label or acceptance by concession • records of the decision on the use or disposal of the product • records of destruction where product is destroyed for food safety reasons.	Hold log disposition included several instances of poor quality with product then released back to stock. Non-QA, non-management personnel were releasing held product.
3.9.2	The site shall test the traceability system across the range of product groups to ensure traceability can be determined from raw material including primary packaging to finished product and vice versa, including quantity check/mass balance. This shall occur at a predetermined frequency, as a minimum annually, and results shall be retained for inspection. Full traceability should be achievable within 4 hours.	Summary of recall event for Brown Packing did not include summary of what worked and what did not work for continuous improvement of the traceability system. Traceability exercise was not performed from raw material to finished product. Packaging was not included in the traceability exercises.
3.10.1	All complaints shall be recorded, investigated and the results of the investigation of the issue recorded where sufficient information is provided. Actions appropriate to the seriousness and frequency of the problems identified shall be carried out promptly and effectively by appropriately trained staff.	Complaint investigations were not currently documented.

3.10.2	Complaint data shall be analysed for significant trends. Where there has been a significant increase in a complaint or a serious complaint, root cause analysis shall be used to implement on going improvements to product safety, legality and quality, and to avoid recurrence. This analysis shall be made available to relevant staff.	Customer complaint data was not trended.
3.11.4	In the event of a product recall, the certification body issuing the current certificate for the site against this Standard shall be informed within 3 working days of the decision to issue a recall.	Recall program contact list was not current and needs to be updated to reflect new certification body and BRC.
4.1.1	Consideration shall be given to local activities and the site environment, which may have an adverse impact on finished product integrity, and measures shall be taken to prevent contamination. Where measures have been put into place to protect the site (from potential contaminants, flooding etc.), they shall be reviewed in response to any changes.	Standing water was observed on the east and west sides of the facility.
4.1.2	The external areas shall be maintained in good order. Where buildings are surrounded by grassed or planted areas, they shall be regularly tended and well maintained. External traffic routes under site control shall be suitably surfaced and maintained in good repair to avoid contamination of the product.	External area near the dock bays were observed with weeds, trash, and other debris.
4.3.1	There shall be a map of the site which designates areas (zones) where product is at different levels of risk from contamination; that is: • high-risk areas • high-care areas • ambient high-care areas • Low-risk areas • enclosed product areas • non-product areas. See Appendix 2 for guidance on defining the production risk zones. This zoning shall be taken into account when determining the prerequisite programmes for the particular areas of the site.	Risk areas were not defined on maps.
4.3.2	The site map(s) shall define: • access points for personnel • access points for raw materials (including	Site maps were not current.

	packaging) • routes of movement for personnel • routes of movement for raw materials • routes for the removal of waste • routes for the movement of rework • location of any staff facilities including changing rooms, toilets, canteens and smoking areas • production process flow.	
4.4.5	Ceilings and overheads shall be constructed, finished and maintained to prevent the risk of product contamination.	Pipes going through ceiling in production area were not properly sealed. Holes were present where previous utilities had been removed from the overhead and not sealed.
4.4.11	Where they constitute a risk to product, bulbs and strip lights – including those on electric fly-killer devices – shall be adequately protected. Where full protection cannot be provided, alternative management such as wire-mesh screens or monitoring procedures shall be in place.	Lights in the middle restroom off the break room were not shielded or equipped with shatter shield bulbs.
4.5.2	An up-to-date schematic diagram shall be available of the water distribution system on site, including holding tanks, water treatment and water recycling as appropriate. The diagram shall be used as a basis for water sampling and the management of water quality.	Water schematic diagram did not include incoming water source.
4.5.4	Air, other gases and steam used directly in contact with, or as an ingredient in, products shall be monitored to ensure this does not represent a contamination risk. Compressed air used directly in contact with the product shall be filtered.	Bags of ice were observed in the freezer ice exposed.
4.8.6	Suitable and sufficient hand-washing facilities shall be provided at access to, and at other appropriate points within, production areas. Such hand-wash facilities shall provide as a minimum: • sufficient quantity of water at a suitable temperature • liquid soap • single use towels or suitably designed and located air driers • water taps with hand-free operation • advisory signs to prompt hand-washing.	Two sinks were present in the break room. Signage was not present to identify intended use for each of the sinks.
4.9.2.1	There shall be a documented policy for the control of the use of sharp metal implements including knives, cutting blades on equipment, needles and wires. This shall include a record of inspection for	Control of knives, utility knives, and cutting blades was not fully implemented.

	damage and the investigation of any lost items. Snap-off-blade knives shall not be used.	
4.10.1.4	Where foreign material is detected or removed by the equipment, the source of any unexpected material shall be investigated. Information on rejected materials shall be used to identify trends and where possible instigate preventive action to reduce the occurrence of contamination by the foreign material.	Investigation into metal findings were not currently document.
4.11.1	The premises and equipment shall be maintained in a clean and hygienic condition.	Drop cords in the production area were dirty and not on the master sanitation schedule. Plastic was left over electrical controls on equipment for greater than one day. Plastic should be removed daily. SSOPs included eight items that would be monitored during operational sanitation. Not all items were monitored as required.
4.11.2	Documented cleaning procedures shall be in place and maintained for the building, plant and all equipment. Cleaning procedures shall as a minimum include the: • responsibility for cleaning • item/area to be cleaned • frequency of cleaning • method of cleaning, including dismantling equipment for cleaning purposes where required • cleaning chemicals and concentrations • cleaning materials to be used • cleaning records and responsibility for verification. The frequency and methods of cleaning shall be based on risk. The procedures shall be implemented to ensure appropriate standards of cleaning are achieved...	Master sanitation schedule did not include coolers, docks, freezers, and racks. Cleaning of the dry age room was not scheduled or documented. Daily cleaning was required for packaging machines. Cleaning was not initialed as being performed on the master sanitation schedule. SSOPs were had not been reviewed since 2014, signature of person with overall authority for the site was not current.
4.11.4	The resources for undertaking cleaning shall be available. Where it is necessary to dismantle equipment for cleaning purposes or to enter large equipment for cleaning, this shall be appropriately scheduled and, where necessary, planned for non-production periods. Cleaning staff shall be adequately trained or engineering support provided where access within equipment is required for cleaning.	Reviewed daily dilution Tests did not properly identify chemical tested. Iodine was no longer used; however, testing was documented as if the chemical was used.
4.11.6	Cleaning equipment shall be:	Used green and white scratched pads were observed in the sanitation area. A green bucket was observed with a white scrub brush and white scratch pad.

	• hygienically designed and fit for purpose • suitably identified for intended use (e.g. colour coded or labelled) • cleaned and stored in a hygienic manner to prevent contamination. Equipment used for cleaning in high-care and high-risk areas shall be visually distinctive and dedicated for use in that area.	Items were not stored in a sanitary manner.
4.15	All facilities used for the storage of ingredients, in-process product and finished products shall be suitable for its purpose.	A 'pile' of equipment and parts was observed in the corner by the cardboard bailer. The area could not be effectively cleaned and was unorganized.
4.15.1	Documented procedures to maintain product safety and quality during storage shall be developed on the basis of risk assessment, understood by relevant staff and implemented accordingly. These may include as appropriate: • managing chilled and frozen product transfer between temperature controlled areas • segregation of products where necessary to avoid cross-contamination (physical, microbiological or allergens) or taint uptake • storing materials off the floor and away from walls. • specific handling or stacking requirements to prevent product damage.	Freezer was in need of general cleaning and housekeeping. Ice buildup was observed on the floor as well as product spills and general debris.
4.15.6	The site shall facilitate correct stock rotation of raw materials, intermediate products and finished products in storage and ensure materials are used in the correct order in relation to their manufacturing date and within the prescribed shelf life.	Documented procedures were not currently established for stock rotation; FEFO and/or FIFO
4.16.1	Documented procedures to maintain product safety and quality during loading and transportation shall be developed and implemented. These may include, as appropriate: • controlling temperature of loading dock areas • the use of covered bays for vehicle loading or unloading • securing loads on pallets to prevent movement during transit • inspection of loads prior to dispatch.	Maximum pre-cool trailer temperatures were not defined.

4.16.2	All vehicles or containers used for the dispatch of products shall be inspected prior to loading to ensure that they are fit for purpose. This shall ensure that they are: • in a suitably clean condition • free from strong odours which may cause taint to products • suitably maintained to prevent damage to products during transit • equipped to ensure any temperature requirements can be maintained. Records of inspections shall be maintained.	Trailer condition records were not provided for loading and unloading of vehicles. Outbound Truck Pre-Cool and Cold Chain Management form was used to document trailer temperatures prior to loading as well as condition of load. A load was observed to be loaded at the time of the facility tour, the documentation was not completed prior to loading of trailer when information was obtained.
4.16.5	The company shall have documented procedures for the transport of products, which shall include: • any restrictions on the use of mixed loads • requirements for the security of products during transit, particularly when vehicles are parked and unattended. • clear instructions in the case of vehicle breakdown, accident or failure of refrigeration systems which ensure the safety of the products is assessed and records maintained.	Agreements were not currently in place defining requirements for third party carriers
5.3.2	The company shall identify and list allergen-containing materials handled on site. This shall include raw materials, processing aids, intermediate and finished products, and any new product development ingredients or products.	Allergens handled during cross dock operations were not fully identified in the company's policy stating which allergens were present.
5.4.2	A documented vulnerability assessment shall be carried out on all food raw materials or groups of raw materials to assess the potential risk of adulteration or substitution. This shall take into account: • historical evidence of substitution or adulteration • economic factors which may make adulteration or substitution more attractive • ease of access to raw materials through the supply chain • sophistication of routine testing to identify adulterants • nature of the raw material. The vulnerability assessment shall be kept under	A documented vulnerability assessment had not been performed on raw materials and ingredients. Substitution related to identify preserved (claims made) should be included.

	review to reflect changing economic circumstances and market intelligence which may alter the potential risk. It shall be formally reviewed annually.	
5.4.4	Where products are labelled or claims are made on finished packs which are dependent on a status of a raw material including: • specific provenance or origin • breed/varietal claims • assured status (e.g. GlobalGAP) • genetically modified organism (GMO) status • identity preserved • named specific trademarked ingredients the status of each batch of the raw material shall be verified. The facility shall maintain purchasing records, traceability of raw material usage and final product packing records to substantiate claims. The site shall undertake documented mass balance tests at a frequency to meet the particular scheme requirements or at least every 6 months in the absence of a scheme-specific requirement.	Mass balance was not currently performed to verify claims made.
5.4.6	The process flow for the production of products where claims are made shall be documented and potential areas for contamination or loss of identity identified. Appropriate controls shall be established to ensure the integrity of the product claims.	Documented procedures were not established at product change over when claims were made on product. Specifically, ground beef changeovers to assure product segregation was maintained.
5.5	Product packaging shall be appropriate for the intended use and shall be stored under conditions to prevent contamination and minimise deterioration.	Part used packaging was observed uncovered in the dry storage areas.
5.5.1	When purchasing or specifying food contact packaging the supplier of packaging materials shall be made aware of any particular characteristics of the food (e.g. high fat content, pH or usage conditions such as microwaving) which may affect packaging suitability. Certificates of conformity or other evidence shall be available for product packaging to confirm it complies with relevant food safety legislation and is suitable for its intended use.	Suitability of packaging materials was not provided stating the materials were acceptable for intended use.
5.6.1.2	Test and inspection results shall be recorded and reviewed regularly to identify trends. The significance of external laboratory results shall be understood and acted upon accordingly. Appropriate actions shall be implemented promptly to address any unsatisfactory results or	Environmental swabbing performed on 3/23/16, Metal Detector Belt #2, had a result that failed and required a corrective action. Corrective actions were not documented. Additionally, trending was required for results. Trending was not performed.

	trends.	
6.1	The site shall operate to documented procedures and/or work instructions that ensure the production of consistently safe and legal product with the desired quality characteristics, in full compliance with the HACCP food safety plan.	Observed beef and pork being trimmed/ portioned on adjacent tables. Beef and pork segregation was not fully maintained due to the close proximity of the work stations.
6.1.1	Documented process specifications and work instructions shall be available for the key processes in the production of products to ensure product safety, legality and quality. The specifications as appropriate shall include: • recipes – including identification of any allergens • mixing instructions, speed, time • equipment process settings • cooking times and temperatures • cooling times and temperatures • labelling instructions • coding and shelf life marking • any additional critical control points identified in the HACCP plan. Process specifications shall be in accordance with the agreed finished product specification.	Grass Run Farms raw materials for 85% lean and 80% lean ground beef products were testing 5% leaner than stated on finished product labels. Nutritional analysis and claims were based on the lower lean point not the higher lean point.
6.1.2	Process monitoring, such as of temperature, time, pressure and chemical properties, shall be implemented, adequately controlled and recorded to ensure that product is produced within the required process specification.	Corn Beef area was decommissioned for approximately half of the year. protocols were not established for equipment cleaning at the time the operation was decommissioned nor were protocols established for re-commissioning of equipment to assure potential food safety concerns were mitigated.
6.2.1	There shall be a formal process for the allocation of packaging materials to packing lines and control in the packing area which ensures that only the packaging for immediate use is available to the packaging machines. Where off -line coding or printing of packaging materials occurs, checks shall be in place that only correctly printed material is available at the packaging machines.	A documented process was not currently in place for allocation of packaging materials to the lines, assuring only correct packaging was available for use.
6.3.1	The frequency and methodology of quantity checking shall meet the requirements of appropriate legislation governing quantity verification, and records of checks shall be retained.	Net weights were being documented. Two instances of average weights being under the stated label weight were identified. The facility had identified the issue but it was not fully corrected.
6.4.2	All identified measuring devices, including new equipment, shall be checked and where necessary adjusted:	Calibrations for Scales and Fat Analyzer were not current.

	• at a predetermined frequency, based on risk assessment • to a defined method traceable to a recognised national or international Standard where possible. Results shall be documented. Equipment shall be readable and be of a suitable accuracy for the measurements it is required to perform.	
7.1	The company shall ensure that all personnel performing work that affects product safety, legality and quality are demonstrably competent to carry out their activity, through training, work experience or qualification.	Reviewed training documents demonstrated training but it was unclear if all required personnel received specific training.
7.1.2	Where personnel are engaged in activities relating to critical control points, relevant training and competency assessment shall be in place.	Personnel trained against CCP requirements did not match those performing CCP monitoring and verification functions.
7.1.5	Records of all training shall be available. This shall include as a minimum: • the name of the trainee and confirmation of attendance • the date and duration of the training • the title or course contents, as appropriate • the training provider. Where training is undertaken by agencies on behalf of the company, records of the training shall be available.	Training records did not include duration.
7.4.1	The company shall document and communicate to all employees (including agency and temporary personnel), contractors or visitors the rules regarding the wearing of protective clothing in specified work areas (e.g. high-care or high-risk areas). This shall also include policies relating to the wearing of protective clothing away from the production environment (e.g. removal before entering toilets, use of canteen and smoking areas).	An employee was observed wearing a white frock outside. Several employees were observed obtaining packaging materials, boxes, while wearing food contact protective clothing including white frocks, aprons, sleeves, and gloves.
7.4.3	Laundering of protective clothing shall take place by an approved contracted or in-house laundry using defined criteria to validate the effectiveness of the laundering process. The laundry must operate procedures which ensure:	Barrels of clean red aprons were observed being stored in an unsanitary manner. Aprons were observed touching the wall, one was observed touching the floor and were staged near dirty laundry. Validation of laundry efficacy was not provided.

	• adequate segregation between dirty and cleaned clothes • effective cleaning of the protective clothing • protective clothing for high-risk or high-care areas is commercially sterile following the washing and drying process • cleaned clothes are supplied protected from contamination until use (e.g. by the use of covers or bags). Washing of protective clothing by the employee is exceptional but shall be acceptable where the protective clothing is to protect the employee from the products handled and the clothing is worn in enclosed product or low-risk areas only.	

Signature auditee:

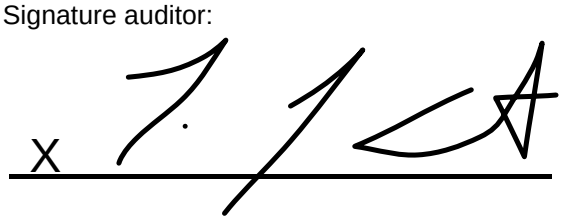
X 

Auditee Representative

May 6, 2016

The auditor declares he / she does not have a conflict of interest with this auditee and the audit has been carried out independently and impartially.

Signature auditor:

X 

Auditor

May 6, 2016