Audit Report **Global Standard Food Safety Issue 9**

1. Audit Summary			
Company name	H E Stringer Flavours Ltd	Site code	1462754
Site name	H.E Stringer Flavours Ltd.		
Scope of audit	The mixing and blending of Ingredients and flavourings in powder and liquid formats packed into HDPE plastic jerry cans, IBCs, and vented Aluminium Foil sacks.		
Exclusions from scope	None		
Justification for exclusion	None		
Audit start date	7/22/2024	Audit finish date	7/23/2024
Re-audit due date	10/3/2025	Head office	No

Additional modules included			
Modules	Result	Scope	Exclusions from Scope

2. Audit Results					
Audit result	Certificated	Audit grade	AA+	Audit programme	Unannounced - Voluntary
Previous audit grade	A+		Previous audit date	8/21/2023	
Certificate issue date	8/30/2024		Certificate expiry date	11/14/2025	

2. Audit Results		
Number of non-conformities	Fundamental	0
	Critical	0
	Major	0
	Minor	4

3. Company Details			
Site address	Icknield Way Industrial Estate Tring Hertfordshire HP23 4JZ		
Country	UNITED KINGDOM	Site telephone number	+44 1442822621
Commercial representative name	Lee Beesley	Email	lee.beesley@stringer-flavour.com
Technical representative name	Daniel Harper	Email	daniel.harper@stringer-flavour.com

4. Company Profile					
Plant size (metres square)	<10K sq.m	No. of employees	1-50	No. of HACCP plans	1-3
Shift pattern	Day shifts from 8:30 - 17:00, Monday to Thursday Friday 08.30 -13.00				

4. Company Profile		
Seasonal site	No	
Seasonal opening times (Start/end date)		
Other certificates held	Organic, Kosher	
Outsourced processes	No	
Outsourced process description	NA	
Regions exported to	Asia Oceania Europe Africa	
Company registration number	GB154E0232	
Major changes since last BRCGS audit	None	

Company Description

H E Stringer Flavours Ltd is a private company which manufactures flavourings for the food and

non-food industries. The market is mainly in the UK but there is a significant export business within Europe, Australia, and Asia. The business model for exports is factory gate pricing and they sell through UK based distribution companies who are responsible for client contact.

There has been a corporate restructuring of the company, with HE Stringer Ltd owning the buildings. The manufacturing arm is under HE Stringer Flavours Ltd, which is 75% owned by HE Stringer Ltd.

Site established: 1967, upgrades; 2004 & 2012/13, with significant upgrade to class L clean room blend booths and improved layout in 2018. Management team established 2002, size of 1,130m2 (whole

building is 2,400m2 and is sectioned off into totally separate units). Production volumes are approx. 130 tonnes per year, in line with SME customised production up to 1 tonne IBC.

4. Company Profile

The manufacturing processes are manual blending and mixing of dry and liquid raw materials

to achieve a desired flavour profile. The products are sold in into HDPE plastic jerry cans, 1, 2.5, 15 and 25 litre, IBCs and vented Aluminium foil sacks, depending upon the format. The company has a flexible approach to manufacturing small batches to order. The workforce is small with 18 people employed. The factory operates a single day shift Monday to Friday from 08:30 – 16.30 Monday to Thursday and 08:30-13:30 Fridays. The site holds Soil Association Organic certification since June 2013 and Kosher certification since September 2012.

GPS coordinate:51.794806,0.679476

5. Product Characteristics

Product categories	15 - Dried food and ingredients				
Finished product safety rationale	Low moisture content (5 – 7%) and high alcohol content, Propylene Glycol depending on product.				
High care	No	High risk	No	Ambient high care	No
Justification for area	Use of BRCGS decision tree confirms enclosed packing and low risk product risk zones.				
Allergens handled on site	Cereals containing gluten Nuts Mustard Celery				
Product claims made e.g. IP, organic	Kosher, Organic, Madagascan Vanilla, Sicilian Lemon				
Product recalls in last 12 months	No				
Products in production at the time of the audit	ET1029 Orange Flavouring				

5. Product Characteristics	
	WO141889 Pineapple Flavour ET16817 Natural rose Flavour ET12400 Natural raspberry Flavour

6. Audit Duration Details			
Total audit duration	18	Duration of production facility inspection	8
Reasons for deviation from typical or expected audit duration	Slow revival of documents as TM on leave Very small processing and production facility with only three compounders currently working due to summer and annual leave		
Combined audits	None		
Next audit type selected	Unannounced - Voluntary		

Present at audit

Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref: clause 1.1.11)

Name	Job title	Opening meeting	Site inspection	Procedure review	Closing meeting
Lee Beesley	Managing Director	On Site	On Site	On Site	On Site
Kevin McManus	Operations Manager	On Site	On Site	On Site	On Site
Lorna Whiteley	Accounts and Purchasing Manager	On Site		On Site	
Eddie Soloman	Production Operative		On Site		

Adam Taylor	Production and Logistics operative		On Site		
Daniel Harper	Technical Manager	On Site	On Site		
Terry Stillman	External Consultant		On Site	On Site	On Site
Tracey Turner	Executive Group Sales		On Site		

GFSI Post Farm Gate Audit History			
Date	Scheme/Standard	Announced/Unannounced	Pass/Fail
8/21/2023	BRCGS Food Safety	Unannounced	Passed
8/31/2022	BRCGS Food Safety	Unannounced	Passed
8/18/2021	BRCGS Food Safety	Unannounced	Passed

Document control	
Certification Body	
SGS United Kingdom Ltd	
Theta building	
UNITED KINGDOM	
CB Report number	GBRS 210481

Template Name	F908 Food Safety Audit Report Template		
Standard Issue	9	*Template issue date*	12/16/2022
Directory allocation		*Version*	

Non-Conformity Summary Sheet

Critical or Major Non-Conformities Against Fundamental Requirements			
Clause	Detail	Critical or Major	Re-audit date

Critical		
Clause	Detail	Re-audit date

Major						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
2.5.1	Process flow diagrams for all products in place covering all requirements except rework/reprocessing that weren't address on the process flow diagram of liquid and powder products.	Control of non-conforming # QMP11 Issue 2 updated on 19.08.24 with addressing that the rework is not performed by the company.	Review of HACCP process flows and relevant QMP/SOP by quality system team.	Rework is not conducted by the company but not clearly demonstrated on process flows or explicitly stated in QMP/SOP.	8/21/2024	Mahmoud Diab
3.5.1.1	Risk assessment of materials in place covering all raw and packaging materials, however it is not completed for some of	Risk assessment reviewed and additional potential risks accounted for.	Review effectiveness of raw material risk assessment with additional potential risks.	Risk assessment is in place and all risks from clause 3.5.1.1 considered but not demonstrated in	8/21/2024	Mahmoud Diab

Minor						
	potential risks such as: foreign-body risks, variety or species cross-contamination & substitution or fraud			the raw material risk assessment document.		
3.7.2	Corrective action procedure in place including methods of root cause analysis, however root cause analysis wasn't documented for investigation of customer complaint dated 29/05/2024.	Complaints form # QF15 was revised to include a section for root cause analysis. RCA has been applied to NCR 1053 dated 29.05.24	Refresher training for team on Root Cause Analysis.	QF15 Complaints form has section for identifying issue but not for demonstrating method to arrive at the root cause.RCA was conducted on 29/05/2024 but hadn't included in the relevant form.	8/21/2024	Mahmoud Diab
5.4.5	The site mass balance conducted twice/year; however, the frequency wasn't demonstrated in the relevant procedure.	Product withdrawal and Recall procedure # QMP26 updated to include required frequency of mass balance.	Review quality documents and ensure that events with required frequencies against BRCGS standard are made clear in documentation.	The company did not make clear in QMP26 the required frequency for conducting mass balance exercises.	8/21/2024	Mahmoud Diab

Comments on non-conformities

Additional Modules / Head Office Non-Conformity Summary Sheet

Critical		
Clause	Detail	Re-audit date

Major						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Audit team

Lead auditor		
Auditor number	**First name**	**Second name**
20934	Mahmoud Diab	Diab

Audit team				Attendance (YYYY/MM/DD, 24hr: MM)			Presence	
First name	Second name	Auditor number	Role	Audit Date	Start time	End time	Remote or physical	Professional recognition number
Mahmoud	Diab	20934	LA	2024-07-22	09:00	18:30	Physical	NA
Mahmoud	Diab	20934	LA	2024-07-23	09:00	18:30	Physical	NA

1. Senior management commitment

•Company Quality and Product Safety Policy # QP1, issue 2 dated 06.09.2022 is defines it confirms the safe, legal ,authentic and product safety and services this is signed by Managing director. This is communicated as part of staff inductions and clearly displayed on staff notice boards.

•Company product safety culture policy QP20, issue 3 dated 15/09/2023 in place. The Managing Director, Operations Manager, Technical Manager all actively involved in development of Food Safety and Quality Culture Plan. Interviewed Managing Director and Operations Manager as part of the audit process.

•The food safety and quality culture plan include the following activities:

•Staff surveys completed in 2023 which combined of 8 pages of questions which feed into the annual review during 2023.

•Continuous monitoring and evaluation of company quality objectives and plan.

•Team engagement at weekly team meetings e.g prodction, QA, Technical

•Staff development training e.g recently completed Lead auditor for Operation Manager

•Product safety culture conference is conducted annually last completed 11/10/2023 and planned for 16/10/2024 currently in planning stages.

•GMP audits conducted by team of two involving all personnel

•Awarness programme with all staff issued coloured PPE with quality cultire T-shirts.

•Last annual review of culture plan took place at the last quarelty review meeting 09.07.2024.

•The culture plan is documented, and number of areas with defined intended timescales as annually basis.

•QP2 Issue 6 dated 01/05/2024 defines the Quality system KPI's which include;

• Product quality set at 95%

• No critical/major NCs at internal and external audits

•Maximum of 5 minor NCs during external audits & not more than 20 minor in the internal

•These are documented on Monthly key performance indicator report completed by Purchasing and Accounts Manager reporting previous months performance seen evidence from Mar 2024 on the current status and communicated via the team brief.

•Quarterly management review which was last held 09.07.2024 and 01.05.2024 attended by the most senior managers such as Site managing director, Technical manager and Operations manager, checked meeting agenda and minutes which covered all the standard requirements as stated in clause 1.1.4 action log in place taken by managing director

•In addition, weekly team meetings and monthly performance review meetings in place which cover food safety legality quality issues checked for July 2, 2024 with managing director actively involved, and relevant action shared with the team by mail dated Jul 4, 2024.

•Employees are aware of the need to report any incidence of unsafe or out-of-specification product or raw materials to a designated manager to enable the resolution of issues requiring immediate action. Staff interviewed during the audit were able to demonstrate their awareness of this as well as the site quality policy and targets.

•There is a confidential reporting system is in place to enable staff to report concerns relating to product safety, integrity, quality, and legality through a confidential integrity number and email directly connected to company chairman. This is included within Staff Handbook under schedule 6 on page 25. The senior management is responsible for assessing any concern raised.

•No issues have been reported.

•Human and financial resources required were considered in the budget to ensure production of safe food in compliance with requirements of this standard.

•The company's senior management has a system in place to ensure that the site is kept informed of all relevant updates via their external consultant and working with the Managing Director, and they keep regularly updates by to UK Flavour Association, HFMA, BRCGS where any updates are communicated out via email to all departments. These are communicated to the team, reviewed by collating, and discussing in monthly meetings. Memberships are documented on QP4 sources of legislation data.

•Printed paper copy and electronic of the standard is in place and site is aware about any relevant updates or changes related to the standard via BRCGS participate which are checked on weekly basics.

•The site ensured that this recertification audit occur before the audit due date indicated on the current certificate which has due date of 03.10.2024.

•The most senior production and operations managers on site participated in the opening and closing meetings of the audit and during the procedure review as site is small management commitment is heavily involved with day-to-day management.

•The 8 minor NC from last year and all of them were closed and signed off by senior management ensured that the root cause of the non-conformity identified and has been effectively addressed, no recurrence was observed during this audit.

•The BRCGS logo and references to certification status are only used for marketing purposes e.g., website and email footer.

•The site is registered with local authority and had recent EHO communication and investigation closed following suspended odour complaint issue which was closed following investigation.

•An organisational chart is documented on QP3 Company quality and safety system, organisation 25.04.2024 issue 10 which outlines managing director and reporting structure including accounts and purchasing manager, group sales executive. operations manager, sales ops manager, Technical manager and supporting staff.

•Deputy list is included on page 4 with clear chart for absence of key personnel, e.g.:

•Managing director is covered by Deputy Operations manager.

•Customer service excutive covered by Sales ops Manager.

•Operations manager is covered by Technical manager.

•Technical Manager is covered by Manageing Director

•Job descriptions are in place for all job roles, examples reviewed for Accounts & Purchasing Manager

•Employees are aware of the need to report any incidence of unsafe or out-of-specification product or raw materials to a designated manager.

•The site use external consultant for additional technical support however the day to day management of the site remain respobility of the site with HACCP and SQT team in place

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification

2. The Food Safety Plan – HACCP

•The HACCP team is multi-disciplinary made up of Managing director, Technical Manager, Operations Manager, Accounts and Purchasing Manager, Lab technician and external support from consultant.

•HACCP team leader is L.B. HACCP training in Nov. 2014 +20 years' experience in the food industry. Other team members certs reviewed include

•Operations Manager RSPH HACCP level 3 training in Nov. 2019, Technical Manager RSPH level 3 19.11.2019

•Scope of HACCP is documented within issue 5 issue 13/12/2023, The scope of the company HACCP plan covers 3 main categories as the following;

•Liquid flavouring : Blends of flavouring preparation of pure flavouring substances definitions of EC1334/2008 positive permitted list in Annex III: FEMA/ GRAS: Substance hazard documented by the ECHA in specialist food / USP grade solvent system compromised or highly processed material stabile at ambient temps with the possible inclusions of water at a maximum level of 15% when preserved by

inhibitory substances such as alcohol. In direct warning <60oc is used where relevant to dissolve crystalline chemical in solvent cooled before addition to main mix.

•Extracts Strong infusions of vegetable materials some issued with warnings as indirect heat in alcohol and water in an enclosed vessel.

•Powder flavourings Dry blending of flavourings preparations and or Flavouring substances with no added water on a specialist food grade powder carrier system.

•Scope accurately reflects the products made onsite as reviewed during opening / closing and site inspection.

•Within HACCP issue 5 dated 13/12/2023, including list of the PRPs for the site which include pest control, training, maintainance, cleaning, allergen handling, equipment.

•The production facility is low risk dedicated clean booth rooms no high care high risk or ambient high care onsite.

•Product description is a unique formulation blend of dry and liquid ingredients the hazard and allergen statis of the raw materials is used for each works order.

•All products are ambient stable cool dry ambient storage conditions. Best Before End (BBE) are established for the sensory quality and not safety of 6-12 months from the date of manufacture this all depends on the formulation mix.

•All products are packed into food safety packagaing e.g., liquid products packed in plastic containers of 5lt, 15lt, 30lt, 1lt & 2.5lt & Powders are dry blends on a food grade carrier. Pack into ventilated aluminium sacks with different weights (3kg, 10kg, 20kg & 25kg). All stored and distributed at ambient.

•Products are sold for further processing and commonly used in the food industry at a maximum level of 0.3% by weight or if containing alcohol have a limit of 0.5% imposed by the soft drink regulations. These products are not for direct consumption.

•Comprehensive sources of information have been documented within the HACCP study including:

•Food safety act 1990.

•General Food Regulations 2004

•Food Hygiene Regulations 2006

•FSA Guidance Notes on regulations and legislation

•The UK flavour Association

•Food Safety Agency

•The Flavouring Regulations EC1334/2008

•General principles of food hygiene updated 2022

•Intended use: The products are not for direct consumption and are sold as ingredient for further processing. Intended use varies and is determined by the brand holder.

•Flavouring and extracts are not intended for baby foods or for inhaled products use.

•Dietary suitability is indicated on the product spec include production status and provenance claims e.g., organic kosher.

•Recommended storage conditions are clearly labelled on each product specification including data sheet and label which confirms any relevant handling, shipping hazard and precautions required.

•There is only 1 HACCP study, this study covers 6 flows:

•Receipt, release & storage of materials & packaging into enclosed product area.

•2A: Batch manufacture of dry flavours

•2B Dry flavour packing.

•3 Extraction.

•4 Intermediates re-packing.

•5 Liquid flavour manufacture & packing.

•6 Vanilla Drying & Separation of Seeds and Milling.

•Flow diagrams were established for the process's steps, documented and verified by food safety team by, last reviewed in 09/07/2024.

•Overall process steps were detailed and covered e.g.,

•module 1 receipt of raw materials and packagaing

•Module 2 / 2b dry flavour manufacture and packing

•Module 3 extraction

•Module 4 Intermediates

•Module 5 liquid flavour

•Module 6 vanilla processing and packing

•Dispatch to customer

•The processing steps include goods receipt of stock and primary packaging, stock segregation, decanting/weighing / mixing (liquid, powder, or steam extraction), filling, capping, labelling, packing, QA release and palletising, and finished goods to warehouse prior to despatch.

•CAR was raised since rework / reprocessing weren't identified on the process flow diagrams.

•There is no outsourcing processing or packing.

•List of Potential hazards have been identified examples include;

•Physical – Foreign body glass, rubber, plastics, wood, hard plastics

•Fraud - Malicious contamination and food fraud are covered within TACCP and VACCP studies but was found to be referenced in the HACCP study.

•Chemical & /Radiological: e.g., sanitiser residues, PG breakdown, radiological contamination

•Water supply

•Microbiological: e.g., Listeria and Salmonella.

•Allergen hazards have been considered within the study; all 14 declared allergens considered.

•Cross contamination – materials, allergens, odour

•A hazard analysis has been conducted based on FMEA (failure mode and effect analysis) likelihood of occurrence x likelihood of detection x safety = RPN (Risk Priority Number), with key acceptable where:

•= 1 to <10 = low

•10-25 medium,

•>25 significant risk.

•There are only one CCP in place Sieve/Filter, Critical limit: integrity of 1.25mm sieve for dry powders and 560micron filter for liquid applications.

•Production operative monitor the condition of the seives / filters before and after each batch and documented this on QP01.

•Corrective action include stops, segregate all stock since last good check and clean down and productive operatives are all responsible for filtering stage of process and reporting corrective actions to management for investigation.

•CCP monitoring records were checked during the site tour and review of traceability test..Interviewed production operative during site tour 1 and challenged on CCP1 and corrective actions steps.

•Validation of CL of CCP done on 24/10/2024, however there is no changes in the process.

•Verfication of HACCP system example include internal audits last conducted on 04.04.2023 daily verification and sign off from management on production documentation.

•HACCP Review process; The last annual review including PRP was conducted on 09/07/2024 review is conducted annually or when changes occur that could affect product safety, e.g., change in customer requirements, change in raw material or supplier, emergence of a new risk like know adulteration of an ingredients or other relevant, published information such as the recall of a similar product.

•HACCP is an agenda point on a quarterly basis as part of HACCP / senior management team attended by management team and managing director conducted last on 09.07.2024 & 01/05/2024 with actions logged by managing director.

•Record keeping showed site to be comprehensive with controlling food safety including schedules, audits, production documentation, review meetings and accessible and well maintained.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification

3. Food safety and quality management system

3.1 Food safety and quality manual, 3.2 Document control, 3.3 Record completion and maintenance

•Quality manual is a 3-tier system and contains policies, procedures, work instructions and record forms. This is available as controlled copy on the S drive and one hard copy.

•All procedures and work instructions were clearly legible and available in English.

•QR01 Controlled Quality document register, issue 10 dated 01/07/2024 in place which confirms document name issue number cross checked for the last update which was for QR04 internal audit register issue 5 with last update 13/12/2023 & Complaint handling & corrective action procedure QMP12, issue 3 dated 13/12/2023.

•Each document has header and footer which includes issue number, authorised by, issue date, server address, page number and title.

•Document and record control procedure # QMP2, issue # 2 dated 13/12/2023 in place & implemented

•Site's quality system and external consultant are responsible for authorisation, changes/amendments and replacement of existing documents.

•Change/ amended documents properly implemented, check change request dated 21/05/2024 for procedure # QMP03, issue # 1 and change related software refrence dated 21/05/2024, issue 2.

•Electronic documents are stored securely with access controlled by authorised access and password protection and are backed up daily through the main server.

•Product shelf life is 6-12 months at a maximum, retention periods of records are kept for 3 years.

3.4 Internal audits

•Internal audit frequency is once annually per each activity and audit schedule distributed throughout the year on the 2023-2024 schedule. This has been determined based on risk assessment with output of low medium or high all audits have been determined as low with 0-8 range.

•Examples of audits reviewed include;

•HACCP on 27/02/2024 with 0 observations / findings

•Senior Management commitment conducted on 22/04/2024 with 0 observations / findings

•Training completed on 01.07.2024 with 0 observations / findings

•Product Control completed on 17/07/2024 with 4 improvements/ 0NCs

•Food safety, fo0d defence and food fraud & QMS completed on 01/05/2024 with 2 improv. /1NCs.

•Site standard completed on 15/02/2024 with 1 improvements/ 0NCs

•Internal audits are completed by external consultant with exception of 3.4.1 and 3.4.2 which are cross audited by the site that conducted 01/05/2024

•Checked lead auditor training certificate for T.S. dated 09/10/2003 from BRCGS and recently Operations Manager completed BRCGS issue 9 Lead auditor on 22.05.2023.

•The audit reports are based on the BRCGS checklist with details of the clause requirements, objective evidence, discrepancy, NC number, auditor name and date.

•For any improvements and findings these are logged as corrective actions which feed into the QR03 CAR register which include NCR number, origin, status, action assigned to, action completed and date of closure. NCR is set agenda point at management review meetings completed on quarterly basics last reviewed on 09/07/2024.

•In-depth GMP audit covering factory, environment, processing, equipment is undertaken, conducted based on risk assessment documented on QR04 Environmental and supporting audits.

•These are conducted on weekly basis these are conducted by 2 auditors as part of the culture plan with evidence documented on QF05 weekly GMP Hygiene and housekeeping checklist reviewed examples from 18/07/2024, 16/05/2024 & 23/01/2024, closure is due to be verified at the next weekly audit, checked for GMP that conducted on May 2024 were only 2 opesrvation have raised and closed out in the 2nd week of the audit.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

•Supplier approval, monitoring and review procedure QMP27, issue 2 dated 13/12/2023 in place.

•QR02 Approved supplier register QR02 in place and includes raw materials, primary packaging materials suppliers are monitored and approved by register list managed by Accounts and Purchasing Manager.

CAR was raised where risk assessment of materials in place covering all raw and packaging materials, however it is not completed for some of potential risks such as: foreign-body risks, variety or species cross-contamination & substitution or fraud.

•Supplier approval is held on S drive and hard copy retained in file where the last approval was updated on 03/07/2024.

•Supplier are sent SAQ - QF07 form to all raw material suppliers and services on 3-year frequency and upon return are reviewed and each supplier is documented on SAQ QF06 Supplier review form,

•Suppliers register captures supplier name, supplier category type, site location, SAQ returned, certificate quality system expiry date, approval status, HACCP risk, vulnerability assessment approved by and date. product risk assessment output is calculated on the same document which is by accreditation certificate or SAQ x site location x risk assessment to provide an overall score for each supplier.

•As part of vertical trace challenged supplier approval documents for:

•Ethanol supplier last approval from dated 18/10/2023 and copy of BRCGS cert valid till 25/1/2025

•Multi Dextrien supplier last approval 16.08.2023 BRCGS cert valid till 1st Feb 20205

•Nova KETA (Flavour), supplier approval 13/07/2023 FSSC cert expiry 06/12/2024

•Alpha Terpineol, supplier approval 16/08/2023 FSSC cert expiry 20/01/2026

•Orang oil, supplier approval 19/02/2024, BRCGS cert expiry 23/05/2025

•Alumnioum Foil (powder products) supplier approval 07/09/2023 Questionnair dated 12/09/2023

•Jerykans (Liquid products), supplier approval 16/08/2023 BRCGS, cert expiry 21/11/2024

•Some brokers and agents are used by the site and in this case they are BRCGS AB cert on file and checked or the site trace back one stage to the source of the manufacturer, checked for Glycrien supplier approval dated 11/08/2023, BRCGS AB valid till 06/09/2024.

•There are currently no exceptions to the supplier approval procedure.

•No supplier audits are undertaken by the site.

•Ongoing review of suppliers of supplier and services is reviewed within SMT meetings and issues logged as meeting actions.

3.5.2 Raw material and packaging acceptance, monitoring and management procedures

•Raw material and primary packagaing are booked in and Logistics and Warehouse operative aware of the set schedule daily for incoming and out loading stock. Raw materials are checked on intake for compliance with purchase orders and certificate of analysis/compliance are conformity for any primary packagaing. The certificate of analysis is mandatory for the acceptance of raw and packaging materials.

•The site work to strict quality release system for all finished product with QA pass system in place with one customer on positive release due to micro testing being customer specific requirement.

•Procedure confirms the site controls for acceptance of raw material, packaging for processing onsite. All intake Inspections completed by Warehouse and Logistics operative with specials notes on system if are extra specific customer requirements.

•Any specification reviews are communicated to relevant employees to ensure are checking updated version upon intake, e.g., quality, warehouse & lab.

•Ongoing performance review of suppliers of supplier and services is reviewed within SMT meetings and issues logged as meeting actions

•Raw materail receiving inspection in place and record, checked for the following materials:

•Raspberry Ketone, B # 79446 delevery dated 09/02/2024

•Probelyne glycol, B # L173568 delevery dated 10/04/2024

•Ethyl acetate, B # S397142, delevery dated 31/08/2023

•Benzyle Alcohol, B # S403678, delevery dated 03/02/2024

•Cinnamic Aldhyde, B # S387917, delevery dated 13/04/2023

•Jeryckan 5lt, B # HDJ0101171, delivry date 23/08/2023

3.5.3 Management of suppliers of services

•The management of suppliers of services is conducted in the same way as suppliers of raw materials and packaging. SAQ questionnaire is completed and supplied with supporting industry specific accreditation, e.g., Laboratory: ALS UKAS 1282 for lab external testing,

•Laundry: Johnsons Appeal master.

•Pest Control: Rokill Rolling contract in place as per 4.14

•External engineering CD Lane last approved 08.05.2024

•External consultant Total Food Safety Ltd been worked with the site for 20+years

•Ongoing performance review of suppliers of services is based on risk and reviewed within SMT meetings regarding performance and issues logged as meeting actions.

3.5.4 Management of Outsourced processing

NA

3.6 Specifications

•Specifications are in place for formulated finished product, raw materials, including primary packaging e.g., jerry cans, vented bags. Specifications are managed by purchasing and technical staff and are available via an online electronic document control system.

•All specification currently held in system and if product code is changed this goes through the development process and updated to next version.

•Specification is reviewed on 3-year period in line with BRCGS requirements.

•Specification details include product description, appearance, shelf life, storage, specific gravity, dosage, micro, packagaing details to confirm food grade and supporting C of C.

•Examples of spec reviewed from the vertical trace;

•Natural flavouring specification issue 8 dated 02.08.2023.

•Raw material specification for Dextrose dated 21.04.2022

•25kgs vented sacks data spec 07.09.2020

•All specifications reviewed as part of the onsite traceability exercise were found to be adequate and within date of last review.

•No branded / outsourcing of product or process conducted by the site.

3.7 Corrective and preventive actions

•Procedure # QMP12, issue 3 dated 13/09/2023 in place. This procedure covers NC Corrective and complaints procedure .

•CAPA are issued for correcting issued in the food safety and quality management system e.g., from internal, external audits, includes complaint issues and NC for full investigation.

•QR03 CAR register which confirms, NCR number, issue, status, type of issue, product code, description, action assigned to (responsibly person) action completed including root cause analysis and verification and closure date.

•Reviewed examples of non conforming products e.g.

•NC dated 29/05/2024 that related customer complaints that received in the same date of liquid product code # ET.13420, PD: 10/08/2023, B # 000133420, the complaint related to solidified, root cause and corrective action conducted on 29/05/2024.

•CAR was raised where corrective action procedure in place including methods of root cause analysis, however root cause analysis wasn’t documented for investigation of customer complaint dated 29/05/2024.

•As part of corrective and preventative actions, corrective action and root cause is completed on QF15 N/C and site hold electronic rolling log per year which reviewed during review meetings.

•Corrective action is agenda topic which is discussed on quarterly management meeting with managing director to ensure these are managed effectively and used for ongoing improvements.

3.8 Control of non-conforming product

•QMP12, issue 3 dated 13/09/2023 in place. This procedure covers NC Corrective and complaints procedure.

•CAPA are issued for each issue from both external audits, internal NC and includes complaint issues for full investigation.

•QA HOLD labels are applied to the materials and any materials place on hold through stock system are unable to be scanned for use. As all stock is placed on 'QA Hold' designated bay area for quarantine to ensure it cannot be released for processing into production until decision from Technical manager or Managing director as defined responsibilities and timescale for decision making, records of decision including destruction or if stock can be released following investigation and internal concession agreed.

•As part of corrective and preventative actions, corrective action and root cause analysis procedure is completed on QF15N/C and logged on the QR03 CAR register which confirms responsibly person, NCR number, issue, status, type of issue, product code, description, action assigned to, action completed, root cause and verification by and closure date.

•Defined responsibility and actions/timescales are well documented.

•In event of any returns from customer stock is place on QA HOLD within designated area for investigation and final decision from managing director. No returns received to date.

•No materials noted on QA hold during site inspection.

3.9 Traceability

•Product identification and traceability procedure QMP04, issue 2 updated on 19/04/2024 in place.

•A recording system is in place using Microsoft 365 Dynamics upgrade from SAGE based ERP with all raw materials, in process materials, primary packaging and finished product coded to allow for full traceability through the system.

•The system works to unique GRN stock barcode system which is applied to each intake upon delivery. The trace system for Stringer is both manually with production records and using Microsoft 365 Dynamics for generation of product packs from sales order to pick lists, purchasing, and tracing products through the system.

•No bulk products. A few products are bonded with segregated stock and controls in place as per HRMC requirement.

•Traceability (forward and mock recall) conducted by the site on 17/07/2024 for product name: Cherry – liquid flavour product code # 13690, Work order 141072, total qty 5kg, PD: 22/05/2024, achieved within 4hrs achived 100%, and all qty already dispatched at the time of the test to one customer dated 25/05/2024, consignment # L0524856, inspection of truck # LS15TGO relevant records were maintained check for:

•Raspberry Ketone, B # 79446 delevery dated 09/02/2024

•Probelyne glycol, B # L173568 delevery dated 10/04/2024

•Ethyl acetate, B # S397142, delevery dated 31/08/2023

•Benzyle Alcohol, B # S403678, delevery dated 03/02/2024

•Cinnamic Aldhyde, B # S387917, delevery dated 13/04/2023

•Jeryckan 5lt, B # HDJ0101171, delivry date 23/08/2023

•In addition, last Organic trace test conducted on 23.05.2024

•QF01 Batch inspection sheet and CCP labelling and packaging checks dated 22/05/2024

•Analysis sheet with PASSED. Collection on 23/05/2024 Invoice No. 077608

•Traceability initiated during the audit (forward and mock recall) for 10 kg of Powder Natural flavour coconut, product code # ET13181, Work order 0140354, PD: 15/04/2024, achieved within 3hrs achived 100%, and all qty already dispatched at the time of the test to one customer dated 18/04/2024, consignment # L6624018, inspection of truck # LF65FKN relevant records were maintained check for:

•Triacetin, B # L173249 delevery dated 22/02/2024

•Natural Ethyle Heptanoate, B # SHPP4811 delevery dated 07/03/2024

•Massoia Lactone, B # L168409, delevery dated 20/02/2022

•Natural Delta Decalactone B # L172259, delevery dated 01/01/2024

•Natural Gamma Octalactone, B # L170812, delevery dated 25/09/2023

•Malto dextrin DE 19, B # 23122432, delevery dated 01/05/2024

•Alumnioum foil with PE 25 kg, B # 0002170607, delivry date 06/06/2023

•In addition, CCP monitoring, organic trace test, weight, line release, GMP conducted on 17/04/2024

On form # QF45, Analysis sheet with PASSED. Collection on 17/04/2024 Invoice No. SO025156.

•Reviewed retained sample during traceability challenge,

•Retention sample collcted and retained

•Mass balance conducted as a part of traceability challenge conducted during the audit, mass balance conducted for SIPERNET, code # S033, B # 173032924, delivery dated 22/05/2023, GRN # 10032, total qty 525 kg, where all qty consumed except qty that remaining in store as 76.08 kg e.g. grape flavour (powder) code 1813688, where qty consumed 450 gm, B # WO0142365. PD 24/01/2024.

3.10 Complaint-handling

•Customer complaints procedure QMP12, issue #3 updated on 13/12/2023, this confirms Complaints, NC and corrective actions procedure for the site. The process onsite is sales to acknowledge the complaint and QA team to investigate complaint issue. As part of the procedure QA team assign NC number and logged on QR03 register logging the following details NCR Number, origin, status, complaint type, product code, description, action assigned to, when completed, root cause using 5 whys and closure.

•Total No. of complaints are 22 since last audit till date of the current audit 12 of them related to quality & others related to packaging and delivery; however there is no food safety complaints.

•Reviewed example NC dated 29/05/2024 that related customer complaints that received in the same date of liquid product code # ET.13420, PD: 10/08/2023, B # 000133420, the complaint related to solidified, root cause and corrective action conducted on 29/05/2024.

•Monthly trending in place conducted by managing director with trending from August 2023 – July 2024 which shows total batches and NC issues which is currently at 0.6% this is shared with employees as displayed on staff notice boards. Managing Director has overall responsibility for closure of complaints, to ensure suitable systems in place to ensure full investigation and closure of issues.

3.11 Management of incidents, product withdrawal and product recall

•Product withdrawal and Recall procedure QMP26, issue #3 dated 31/08/2023 in place

•Procedure details contact details of Managing Director and Operations Manager (recall committee) both office and mobile numbers with priority of contact details and customer lists.

•Disaster definitions, risk assessment for managing of situations such as fire, flood, bomb threat, malicious sabotage, and energy. Crisis management plans cover effective management of incident and potential emergency situations e.g., flood, fire, loss of energy, loss of IT system threat cyber-attack. Within procedure details further guidance ‘emergency procedure for crisis manages for managers. Incident management team includes operations manager, production manager & QAM.

•The site has consistency plan in event of plant to be shut down and production can be temporary continued at separate site while site recovery plan in place.

•Key contact list is detailed within the procedure included the details of BRCGS CB along with other regulatory bodies such as police, DEFRA, hospital, HSE and UK Retailers. These contact details are tested as part of the recall to ensure details are accurate.

•Mock recall conducted by the site on 17/07/2024 for product name: Cherry – liquid flavour product code # 13690, Work order 141072, total qty 5kg, PD: 22/05/2024, achieved within 4hrs achived 100%, and all qty already dispatched at the time of the test to one customer dated 25/05/2024, consignment # L0524856, inspection of truck # LS15TGO relevant records were maintained.

•There have been no actual withdrawals/rcalls in the last 12 months.

•The procedure does state that in the event of a product recall the certification body should be informed immediately after the decision to issue a recall and in event of issues and corrective action within 21 days in line with issue 9 requirements.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
3.5.1.7	No exceptions
3.5.4	No outsourced processes.
3.6.3	No customer branded products onsite.
3.9.4	No rework.

4. Site standards

4.1 External standards

•The site is small building on located on a small industrial estate with small main gate which comes down after hours.

•Controlled site security system in place, there are four CCTV camera around the external of the site which are monitored by managing director and accessible via mobile phone. Small parking area for staff and visitors to the site at the front of the building. No adverse impact from surrounding building.

•Walked the permitter with operations manager on day 1 of the audit.

•The external areas are well maintained.

•Fabrication of the site is checked during weekly GMP audits, and any actions recorded.

•Visitor reporting policy onsite QP03 issue #10 dated 25/04/2024 this includes covid questionnaire and temperature checking currently still in place and visitor registration book. Managing director authorises major client visits to ensure no clashes.

•Site is controlled with designated key holders and operations hours. For visitors to the site intercom access only front door is locked at all times and collections and deliveries from rear of the building are pre booked. No external silos or intake pipes for the scope of this audit.

•Unauthorised access is not permitted, and staff will challenge visitors as part the company induction programme.

4.2 Site security and food defence

•The site is very small, so HACCP / management QST team are all involved with food defence plans they have all undertaken e.g., HACCP, Food safety training and been with site for number of years thoroughly competent in role in addition supported by external consultant. The team is multi-disciplinary team as involved from different departments e.g., technical, Purchasing, Operations, QA, Top management to ensure security assessment is undertaken to ensure product safety and very knowledgeable.

•The product defence risk assessment is in place and last reviewed in 13/12/2023. The risk assessment reviewed threats of intruders, staff, visitors, suppliers, deliveries, collections, customers with risk rating, justification, controls, and action required.

•Risk assessment table 1- 4 very low risk, 5-10 low risk, 12-15 moderate and 25 = high risk. Overall summary is calculated as low.

•The threat assessment plan and map are reviewed as minimum annually and whenever a new risk/threat emerges or there is a product security/defence incident. Product defence is reviewed as agenda point on monthly meetings last discussed in notes reviewed from 18.08.2023 and 24.04.2023.

•Staff access to the site is via keypad access / key fobs access. The front door is locked and only access via intercom system. Strict security controls in place and well controlled.

•Main gate for cars within industrial park which is closed after hours.

•There is a legal requirement for the site to be registered with the local council registration number is GB154E0232.

•4.2.4 NA No significant areas of risks identified from the risk assessment regarding monitoring and controls required.

4.3 Layout, product flow and segregation

•Production risk zone is low risk for both processing and packing with no high risk, high care or ambient high care areas with no risk from pathogen contamination..

•A number of site maps are in place on the site to ensure compliance to 4.3.2 and clearly indicating showing e.g., waste, personnel, chemical control, bonded stock, packagaing, finished product, raw materials, production flow. Maps are dated 24/10/2022. The site does not rework any stock due to the complexity of compounds. The production areas for compounding all take place in both areas all on base floor level and intake and unloading at the far end of the site

•Site plan details access points, location of staff facilities and routes to the facilities from place of work, production flow, routes for removal of waste and routes for the movement of rework, issue # 3, last updated in 24/10/2022.

•Visitor reporting policy onsite QP03 issue #10 dated 25/04/2024 this includes covid questionnaire and temperature checking currently still in place and visitor registration book. Contractors report to reception and Operations Manager ensures controls of visitors in the production facility.

•No issues noted with movement of personnel, production flow to minimise the risk of contamination.

•There is adequate storage and space for onsite operations.

•4.3.6 NA No temporary structures observed.

4.4 Building fabric, raw material handling, preparation, processing, packing and storage areas

•The site has a small processing and production facility this is segregated into booth areas and clean room due to the products handed.

•Walls are painted and no issues.

•Floors are concrete and sealed are clean, tidy condition no issues noted from production tours.

•Drains are present and well covered. No suspended ceilings or roof voids noted.

•No elevated walkways / access steps / or mezzanine floors present.

•No windows directly in open production areas as within booth compound areas. The windows surrounding the production are filmed and sealed. All drains and its covers are accessible for cleaning.

•All doors were in a good condition well controlled, and no gaps noted.

•Sufficient lighting conditions in the production facility to ensure inspection and effective cleaning. EFK tubes check to ensure shatterproof see section 4.14.

•There are suitable ventilation systems in place, no evidence of excessive dust and/or condensation.

•Strip curtains are in use in the booth compounding areas and storage product areas on the site and in good clean well fitted condition no issues noted during site tours.

•Condition of the site is monitored in weekly GMP audits conducted as team of two as part of the quality culture plan.

4.5 Utilities – water, ice, air and other gases

•Water Layout map in place issue 2 dated 23.08.2016, where 21 sample points on the map with weekly flushing in place the water testing is contracted out to Freeston Water treatment. Legionnaire control cert checked with expiry date of 31.08.20234.

•Water is sourced from Thames's water mains supplied this is used a direct ingredient in a few compounds, used for processing for the steam generator and for cleaning equipment. Water quality report on technical file from 2023 issued from Thames Water with full quality analysis.

•Taps are flushed for 2 minutes at key points, determined by risk assessment, on a weekly full sampling basis reviewed log from 21.08, 14.08 and 31.07 and showed completed.

•Reviewed last water results from testing conducted from 13/06/2024 where 5 sample points tested and all within spec.

•Reviewed last quarterly visit and sampling is carried out at third party laboratory ALS 22/05/2024

•Ice is not used or any gases in direct contact with the product.

4.6 Equipment

•The production equipment consists of simple mixing and blending vessels, agitators, pumps these are food grade 316 stainless steel. Open product is handled within compounding clean rooms some equipment is dedicated and static to specific areas and some is mobile. Checked gaskets and seals are purchased against food grade specifications and arrive with Certificate of Conformity, relating to equipment materials and food contact.

•A documented, risk-based commissioning procedure # QMP 23, V3 dated 07/04/2022 in place to ensure that food safety and integrity is maintained during the installation of new equipment to site, Installation work followed by a documented hygiene clearance procedure, however, There is no new equipments installed since last audit.

•The procedure mentioned if there is new equipment it will be inspected by an authorised member of staff before being accepted into operation.

•Documented commission process and relevant risk assessment in place includes records from last validation of new equipment that installed in 27/05/2015 for new sieves purchased commissioned on 27/04/2015 with testing in place throughout the production process with final sign off on 01.05.2015 and acceptance into production.

•Any production equipment taken out of service is stored in clean hygiene way with log issued via maintainance which is contracted out see section 4.7.

•Battery charging equipment trucks is not stored in open product areas are used for movement of stock and stored away from any production materials next to generator to prevent risk.

•A procedure # QMP31, issue 1 dated 31/08/2023 in place to manage the movement of static equipment in production areas, to ensure that food safety is managed and the integrity of the equipment is maintained.

•Mobile equipment (e.g. forklift trucks, pallet trucks, scissor lifts and ladders) demonstrated in the procedure # QMP31, issue 1 dated 31/08/2023 in place to ensure no risk to the product, records were maintained to ensure no any product contamination using form # QF01, checked records dated 22/07/2024 & dated 20/02/2024.

4.7 Maintenance

•Procedure # QMP 23, issue 3 dated 07/04/2022 in place to cover maintenance of equipment and production areas, Procedure defines the site controls of engineering onsite.

•QR06 Maintainance preventative schedule based on risk historical and manufactures recommendations details the equipment location, description, task, photos of equipment, frequency of maintainance and completed by and when.

•Due to maintenance being contracted out scheduled maintainance visits are grouped together.

•Operations Manager manages the process for maintainance with contractors via request list for both planned maintenance and breakdown for both plant and supporting areas e.g., offices, toilets.

•Maintainance is contracted out on the site.

•Contractors have to site in via reception and follow the contractor's procedure including health screening onsite before access into production areas and work permits issued.

•QF 43 Maintenance request and communication record reviewed from last requests 15/05/2024 request logged and completed on 17/05/2024 onsite for Perished Sealant from air conditions unites, report sheet completed by contractor Colin De Lane Services with hand back to production completed.

•Reports of external maintainance in place, e.g. report dated 29/04/2024 related to maintenanace related to shelf in ethanol store/coge to be re-enforced due to hold weight & report dated 09/01/2024 related to annual machenary inspection in line with Co. preventive maintenanace schedule & report dated 06/10/2023 related to LED straight.

•There is a hygiene integrity checks completed by operatives and logged on QF01 to ensure no issues before production commences, checked record dated 06/10/2023.

•No temp repairs noted during site tour. No new machinery onsite

•As part of the hand back forms are completed with contractor documented on QF19 production area post maintenance inspection including photos of tools used and approval reviewed records from 29/04/2024, 1 hour from 07:30- 08:35 with sign off from Management director.

•Monthly meetings are held, and engineering is set agenda point attended by the Managing director and Operations manager, checked for meeting dated 09/07/2024.

•Steam boiler was last serviced on 03/05/2024 and previous visit on 16/07/2024 which is related to inspection of boiler.

•Food lubricant High vacuum grease safety data sheet available , comply with EC 1907/2006 amended regulations EU 2020/878. however it is confirmed that no allergen materials.

•No dedicated engineering workshop areas in place.

4.8 Staff facilities

•Male changing area onsite with designated locker for outdoor and personal items, toilet facilities are outside of production area and in corridor before handwashing entry.

•There is one handwashing station upon entry to production hands free with soap hand towels single use and sanitizer.

•Advisory signs to prompt hand washing were found displayed on all observed hand basins.

•Further toilets areas for the office staff are located in the main corridor area.

•There is a designated area for smoking in place which outside close to main gated entry.

•Staff canteen area segregated at the front above stairwell with kitchen facility provided e.g., kettle, tea, coffee, fridges for personal food with temps monitored by QA,

•TV segregated area for chilling out including table chairs and pool table.

•There is no catering or vending machines seen onsite.

4.9 Chemical and physical product contamination control: raw material handling, preparation, processing, packing and storage areas

4.9.1 Chemical control

•Procedure # QMP21, isuue 7 dated 13/12/2023 for cleaning of production equipment & areas in place.

•Chemicals used on the site include e.g., Caflon, Isopropanol. The main chemicals used on site are sourced from Univar, Hayman Ltd and Johnson Diversey.

•Reviewed data form for IPA specification 01.06.2022 and supplier approval from 18/11/2023.

•Non-food chemicals are risk assessed and managed. Chemicals are stored in a designated washing area within wet room.

•As chemicals are used in the wet washing area site have a colour coded cap system in place and this is trained as part of Health Safety and staff inductions.

•No Strongly scented/taint-forming materials are not used

4.9.2 Metal control

•Sharp metal control on the site include knives are issued with HES 1- 4 and checked pre-start-up for every shift and procedure # QMP 22, issue # 2 dated 7/04/20222 in place to cover glass Control and breakage includes weekly checking on knives issued to staff. No needles or wires are used.

•Checked last audits conducted by operations manager from 22/07/2024 and 29/01/2024 and no issues logged.

•Staples are not used in open product areas or packaging.

4.9.3 Glass, brittle plastic, ceramics and similar materials

•The site has a number of glass procedures QPS Company Hygiene Health and Safety Policy, QMP 22, issue # 2 dated 7/04/20222 for glass Control and Breakage, QF21 Glass Breakage log. Glass control training is part of site induction process.

•For one supplier stock is received in glass with segregated locker storage in place. These are inspected for condition when used and a record, maintained on the production sheet. The items are then signed back to the store.

•No WIP (Work in Progress) or finished product is packed in glass.

•Weekly checks of glass and hard plastic are completed, part of site GMP inspections. Glass check records sampled from 21.08 and 14.08 conducted by Operations Manager documented on checklist which confirms location, number of pieces, actions and photos with circles to help aid checker.

•The site has a breakage procedure which requires any breakages to be reported to a director/ manager. Any potentially affected product is segregated, & a sample of the broken material retained.

•The last glass breakage on site from was 25/03/2021 with sample retained from broken bottle in director office for record.

•No direct glass windows in production surrounding areas are all filmed and EFK are shatterproof bulbs to prevent risk as checked under 4.14.

4.9.4 Products packed into glass or other brittle containers

NA

4.9.5 Wood

•Wood is used for storage of finished product and only permitted in storage areas and outside the compounding areas. Wood is controlled, all observed wooden pallets were intact and subjected to intake check and checked by Logistics and warehouse operative to ensure in good condition and free from any damages.

•Heat treatment certificate of wooden pallets in place dated 12/06/2024 for 50 pallets which is delivered with purchased qty.

4.9.6 Other physical contaminants

•Stock can be delivered as powders / liquids so debagging / de-boxing limited site policy in place for raw material packaging, e.g., de-boxing from secondary packaging.

•The use of single pen is low risk. These are company issued and managed by operation manager however, portable equipment clearly documented.

•4.9.6.3 No other FB contamination not covered.

4.10 Foreign-body detection and removal equipment

4.10.1 Selection and operation of foreign-body detection and removal equipment

•A risk assessment has been completed as part of the HACCP study.

•One CCP in place Sieve/Filter

•Critical limit: integrity of 1.25mm sieve for dry powders and 560micron filter.for liquid applications.

•Production operative monitor the condiction of the seives / filters before and after each batch and documented this on QP01.

•Corrective action include stops, segregate all stock since last good check and clean down and productive operatives are all responsible for filtering stage of process and reporting corrective actions to management for investigation.

•CCP monitoring records were checked during the site tour and review of traceability test. .

•Interviewed production operative during site tour 1 and challenged on CCP1 and corrective actions steps

•No issues regarding FB detection method and HACCP system.

4.10.2 Filters and sieves

•As per HACCP risk assessment CCP1 defines products to be sieved; since sieve with mesh size 1.25 for dry applications and 560 micron for liquids in place and well controlled.

•During site tour interviewed production operative on sieve checking procedure and event of issues confident operative and knowledgeable.

•Sieves with mesh size 1.25mm are used on powders while 560micron filters are used for liquid during blending depending on product.

•A risk assessment has been completed looking at sieve sizes at manufacturer and on site, risk of wear and tear from machines, filler apertures and any metal associated with packaging (e.g., lids and foils). It was concluded that sieves/filters were sufficient to control the risk of metal and foreign body contamination on liquid and powder lines. The frequency of the sieve/filter inspection is at least twice per shift if long run or start and end of the normal customised jobs.

4.10.3 Metal detectors and X-ray equipment

•No Metal detection equipment is onsite as sieve levels are lower and not improve the protection of the final product. Metal detection supporting risk assessment and justification issue 3 reviewed on 26.06.2023.

•Not applicable as sieves are present and no X-ray / metal detection onsite.

4.10.4 Magnets

NA

4.10.5 Optical sorting equipment

NA

4.10.6 Container cleanliness – glass jars, cans and other rigid containers
NA
4.10.7 Other foreign-body detection and removal equipment
NA no other FB detection used by the site.
4.11 Housekeeping and hygiene
•The site is small team with 5 compounders at maximum working within production area all housekeeping and hygiene is managed by operation manager. •Site work to clean as you go policy all cleaning is manually conducted after each product and conducted by operative in the production areas and contractor for the office areas. Cleaning confirmation is visually and documented on the daily hygiene cleaning record on the Batch sheet, supporting line clearance. •Cleaning of production equipment and areas procedure QMP21, issue 7 dated 13/13/2023. •Operatives are trained in machinery clean down as part of the induction process and checked for new starters under 7.1. •The method, responsible person, cleaning equipment & any chemicals is detailed within procedure.. •As this is a small batch process with manual handling, there is cleaning of booth and equipment at the start and end of each job, it is strictly controlled based on production plans so no cross contamination can occur. •Form # QF22 for cleaning records and sign off reviewed for 19/07/2024, 15/03/2024 and 19/01/2024 •Swabbing validation QF33 results from clean down and validation conducted on yearly basics checked from 27/03/2024 with testing send to ALS all within spec to confirm effective housekeeping, hygiene controls in addition ATP swabbing conducted when allergens are handed see section 5.3. •Staff interviewed were trained and competent in roles reviewed cleanliness of vessels and tanks all covered and controlled. •Colour coded cleaning equipment in place; red floors and blue product contact
4.11.7 Cleaning in place (CIP)
NA
4.11.8 Environmental monitoring
•The documented environmental monitoring programme is in place, based on a risk assessment.

•The programme includes five environmental swabbing on Quarterly basics swabbing includes Enteros, Salmonella and Listeria. Schedule including sampling protocol, sample location, frequency of testing and target organisms. All swabs are sent to ALS for analysis UKAS number 1282.

•Last review of environmental swabbing conducted on 08/07/2024 this is completed within quarterly management meetings to identify trends and any immediate corrective action which form actions on the meetings minutes taken by managing director.

•Recent results from 2024 confirm all within spec currently showing downwards trend and well documented

•Reviewed last swabbing conducted;

•Quarter 1 27.02.2024 5 samples all within spec

•Quarter 2 22.04.2024 5 samples all within spec

•2023 21/09/2023, all of them were within spec

•2023 11/12/2023, all of them were within spec

•Action that has be taken in case of out of specs are deminstrated in the risk assessment.

4.12 Waste and waste disposal

•Waste removed by one licensed contractors ‘Grundon’, CBDU #147323 valid until 30/09/2023

•Waste was observed to be well managed both internally and externally. All waste is removed from production on a regular basis. Waste is stored in covered bins in production. External skips are clearly identified and located at the rear of the site and covered.

•No trademarked waste handed by the site as no customer branded products.

•Reviewed last Waste disposal collection records from 24/06/2024 with 100 units of empty drums.

4.13 Management of surplus food and products for animal feed

NA

4.14 Pest management

•Pest control is managed through an external contractor (Nurture)

•The specification confirms 8 routine visits/year, 2 EFK services visits and 2 field biologist visits based on risk assessment.

•Rolling contract on file dates 26/03/2024 with BPCA cert # M15/246 valid until 28/02/2025.

•Full site map last reviewed 30/1/2024 which included 6 exterior bait boxes, 6 EFK, 27 non-toxic boxed and 16 insect monitors.

•Reviewed last EFK bulb change from 26/03/2024 with confirmation letter included to confirm bulbs are shatterproof.

•Last routine visits from 19/06/2024 and no issues,

•Last biologist inspection from 15/05/2024 and no any issues.

•Pest control activities carried out by competent personnel and their certificates were maintained, e.g.:

•A.M.: Internal Field Biologist training dated 13.07.2023, cert # 9554.

•C.P.: RSPH level 2 certificate in pest management dated 04/11/2016.

•MSDS were maintained for the used pesticides, checked for Contrac Blox and Detex.

•Trending is conducted by the contractor on a monthly basis for rodents, bird and insects.

•Annual review meeting took place 10/11/2023 and reviewed notes and signeficant changes,

•It is confirmed that the in depth documented survey carried at a frequency based on risk assessment.

•Pest awareness is covered within staff induction as part of general training covered by managing director and checked as part of induction from 2 new starters see section 7.1

•NA 4.14.3 Contracted out.

4.15 Storage facilities

•Ambient racking storage of majority of goods in the warehouse area some liquids are stored in fridge areas these are not for food safety issues and temperatures are monitored by QA.

•Dedicated storage area for allergens and products received in glass bottles.

•Part Packaging is stored away from raw materials and finished goods in dedicated packagaing store area bottles are covered to prevent risk and controlled.

•No controlled atmosphere storage. No storage offsite or any external silos or intake pipes.

•Site works to FIFO basis and annual stock taking completed yearly the site work to GRN number for each stock item and using 365 Microsoft dynamics to review stock levels. Where product is approaching its expiry date, the Technical manager is responsible for assessing the material and extending life or authorising disposal.

4.16 Dispatch and transport

•QMP08 Finished product packagaing and delivery policy all collections are contracted out as site does not have own vehicles.

•Contracts in place as per signed supplier agreement breakdown procedure in place for security of products and maintenance of vehicles and cleaning regimes in place. All collections conducted between 1.30-4pm each day.

•There is a documented procedure in place to manage the dispatch and transport of all products these are organised by the Logistics and Warehouse operative using the online portal system.

•All stock is dispatched at ambient temperatures.

•Third party hauliers for raw materials and finished products are normally contracted by the customer. In their absence tend to use:

•D.S.V.: QF06 review dated 28/01/2024 with supplier evaluation dated 30/03/2024.

•D.X Distribution.: QF06 review dated 16/08/2023 with supplier evaluation dated 16/08/2023.

•For all collections that are via third party contractors, strict controls in place for transport of products, maintenance system and cleaning of vehicles.

•Witness loading on day 2 of audit at 02:16 pm interviewed Logistics operator on process and reviewed loading of works orders loading different kind of products such as Thame Labs consignment # L1021642

•The vehicle is inspected for sanitary condition prior to loading and documented on inspection of transport prior of loading. Traceability is maintained during transportation by despatch records as challenged when interviewed logistics and warehouse operative.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.2.4	No high-risk areas
4.3.6	There are no temporary structures
4.4.5	There are no suspended ceilings or roof voids present
4.4.6	There are no walkways, access steps or mezzanine floors over exposed lines.

4.4.7	There are no windows or roof glazing which are designed to be opened for ventilation within the production and storage areas.
4.5.3	No compress air used on site with direct contact.
4.7.3	There are no temporary repairs in place
4.8.8	There are no catering facilities provided on site.
4.9.1.2	The use of strongly scented/ taint forming chemicals is avoided
4.9.3.4	There are no glass windows that pose a risk.
4.9.4	There are no products packed in glass or brittle containers
4.9.6.3	No other FB contamination
4.10.3	No metal detection on site
4.10.4	There are no magnets.
4.10.5	There is no optical sorting equipment.
4.10.6	No glass jars cans or other rigid containers
4.10.7	No other FB equipment
4.11.7	No CIP required.
4.12.4	No trademarked waste.
4.13	No waste or surplus products are sent for processing into animal feed
4.14.4	The site does not undertake its own pest control
4.15.4	No controlled atmosphere.
4.15.5	No outside storage

4.16.3	Temperature control not required during dispatch

5. Product control

5.1 Product design/development

•New product and process development procedure is documented under QMP14, issue 2 dated 13/12/2023 in place and implemented.

•The procedure includes, project request, customer enquiry, supplier approval, raw materials HACCP, sample and shelf-life validation. The procedure confirms the restrictions in place for site on any new products, e.g., NPD as product for flavour application only, no glass packing, and site is nut free.

•New product and process development covers both product, packaging, and process development. No true new processes have been introduced recently and more towards variation of existing lines under development of flavours and profiles.

•NPD is responsible of Group Sales executive who interviewed as part of audit process which includes brief from customer, teamwork on profiles and samples, sales discussions on price volume and lead times. Approved samples are sent for nutritional, chemical, and microbiological analysis as per customer brief.

•The originator has to submit development brief QF03 and QF48 with set stages of NPD process and whole HACCP team are involved with NPD to ensure review of HACCP system and if affects any QMS including supplier approval changes and lab support staff for QC testing.

•NPD sign off is approved by the technical manager before any new products are introduced into the factory plant.

•Trials are in place to validate product formulation changes before launch as part of the NPD process.

•Shelf-life trials are conducted through end of life testing samples which are retained for the product life +2 years within QC area and accelerated shelf-life testing if required.

•One example reviewed from current development process currently this brief started by receiving request mail dated 11/04/2024 requesting hazalnut coffee syrup, enquery No. EO863-24 dated 20/05/2024 on form # QF03, asking for specifc requirements related to physical and sensory attributs, based on customer request, receipe was developed for product code # ET.194098 dated 28/05/2024, first testing conducted on 28/05/2024, accordingly product specs was developed and internally approved on 29/05/2024 with samples send to customer dated 29/05/2024; however this product waiting for final approval from customer.

5.2 Product labelling

•Product labelling is reviewed under Legality & labelling as part of the NPD process label requirements are set up with customer with approved with technical before label is locked into system as approved only permitted authorised member of staff can change labels details.

•As products go for further processing within food industry the label details confirm customer order, net contents in Kgs, batch code, product name, date of manufacture and BBE along with allergen information, HE stringer name and address and any chemical symbols for warnings. Labels are produced on site and with control in place as per 6.2 and ensure in line with legal requirements. No product is produced under any customer brand.

•For products exported label work with customer to check correct legislation requirements for exporting) currently these are all written and labelled in English and approval completed with Stringer internal team and customer for full responsibility of product label.

•5.2.4 No cooking instructions are relevant.

5.3 Management of allergens

•Allergen Handling policy QP6, issue 3 dated 19/02/2024, All allergens have been considered these are all in liquid state at low levels due to the final dosage into finished product within product specs.

•The allergen onsite includes Malt extract, oat fibre, Nut (almond oil), Organic sweet nut oil, celery seed and mustard oil.

•Allergen risk assessment confirm the output of risk and conducted per raw material. Majority are outcome of low with 1 medium for one allergen.

•All allergenic raw materials have designated area within the warehouse area for storage.

•Upon start-up of new mixes pre checks in place which confirm allergen presence to ensure staff are fully aware. Utensils and equipment are inspected before and after use and a wet clean followed by a solvent rinse and recorded on batch production form.

•Visitor questionnaires include questions relating to allergens.

•The site is designated nut free where staff and visitors cannot bring these products on to site.

•ATP swabs are used after each cleaning as validation reviewed examples from

•27.03.2024 6 within spec and one retest

•27.01.2024 7 swabs all passed

•16.11.2023 7 swabs where all passed except one of them and reswabed in the same date after re-washing and result is pass.

•Allergen management training is the part of induction process and checked see section 7.1 for training records reviewed.

•No allergen claims onsite. No rework is conducted onsite.

•Site is trying to reduce the number of allergens handed onsite and reducing these overtime due to stock levels and sales volumes with mustard next to be removed within 2024/2025.

5.4 Product authenticity, claims and chain of custody

•The site is very small, so HACCP / QST team are all involved with vulnerability assessment they have all undertaken e.g., HACCP, Food safety training and thoroughly knowledge and long service in role in addition supported by external consultant. The team is cross sections as involved from different departments e.g., technical, Purchasing, Operations, QA, Top management to ensure vulnerability assessment is undertaken to ensure product safety.

•The company's has a system in place to ensure that the site is kept informed of all relevant updates via their external consultant and working with the Managing Director, and they keep regularly updates by to UK Flavour Association, HFMA, BRCGS where any updates are communicated out via email to all departments. These are communicated to the team, reviewed by collating, and discussing in monthly meetings. Memberships are documented on QP4 sources of legislation data

•Company supply chain vulnerability risk assessment issue 3 dated 09/07/2024.These are grouped by raw material e.g., flavourings, chemicals ,colours, juice concentrates. Site considered historical, economic, ease of access, testing sophistication and nature of raw materials.

•No risks have been identified due to historical data, service with the supplying company and nature of the raw materials.

•A few Provenance claims e.g. (Madagascan Vanilla Beans, Sicilian Lemon) both sourced from BRCGS certificated sites and challenged for last intake C of A Code RCP 79508 for lemon 23.07.2023 C of A for Madagascan Beans 15.08.2023 material RCP 75853.

•No Nutritional claims made on products.

•Organic audit and cert recently under taken on 09/07/2024 which shows 65 products on license number P4242 Expiry of 31.05.2025.

•Kosher audit conducted on 17.06.2024,however current certificate is valid till 07/09/2024.

•Mass balance and traceability tests are carried out frequently as part of QMS testing the last organic traceability was undertaken on 26.07.2023 as part of the organic SA audit.

•CAR was raised since the site mass balance conducted twice/year; however, the frequency wasn't demonstrated in the relevant procedure.

•The claims made on the site are for provenance and production methods with validation of C of A upon intake to check ingredient per batch and production methods for organic and kosher controls are in place onsite including training, internal audits, traceability tests to ensure claims are strictly controlled..

5.5 Product packaging

•Product packaging supplier approval is controlled under 'Supplier Approval and Control' is controlled in the same way as raw materials and managed by Purchasing and Accounts Manager and Technical Manager.

•Packaging formats include HDPE plastic jerry cans, 1, 2, 5, 15 and 25 litre and vented Aluminium foil sacks, for powder blend.

•Reviewed C of C to ensure suitable for intended use e.g., jerry cans from 17.01.2023 and sacks as part of the vertical traaceaility challenge.

•Product liners are not used by site.

•All primary Packaging is stored on site in a segregated 'packagaing store'

•Traceability for all packaging used is recorded and maintained on product control sheet detailing batch code as seen during site tour and as part of traceability challenge.

•Offline printed labels are printed to recipe for each job and all allocated and documented as per 6.2

•No trademarked packagaing used by the site.

•Obsolete packing materials is limited due to the way site is set up and the packaging and mixing to the PO / order number required procedure in place to manage obsolete packaging e.g., quarantined, shredded and scraped.

5.6 Product inspection, on-site product testing and laboratory analysis

•After compounding a sample is retained for QA testing as all stock works to quality release system as per Procedure # QMP10, issue #5 dated 19/04/2024.

•Reviewed Analysis sheet within the lab on day 2 Interviewed and witness new lab assistance reviewing Natural flavour of Vanilla flavour ET12518, B # 0142497, PD 18/06/2024 for both density and Refractive Index as well as sensory evaluation.

•Observed during interview testing for the Density meter and Specific gravity, and refractometer (Refractive Index) using by Mettler Toledo recording on the system to issue for C of A before marked as PASS for Logistics and Warehouse can proceed for release.

•In addition, colour coded system working from white, yellow, orange and red when every 4 sample is checked against retained sample within the in-house laboratory based upon COT (Colour, Odour and Taste), density, and Refractive Index (RI) and supporting QC stamp on the despatch note.

•For one specific customer works to true positive release for micro which testing is send to subcontracted lab for analysis.

•The internal lab onsite is only chemical analysis located down the main corridor next to the boardroom is within a dedicated area, away from manufacturing and storage areas. Written instructions are available in

the laboratory equipment and specific training in place as challenges for new lab assistances. Checked lab equipment devices are calibrated, and within date see section 6.4..

•Taste panel for COL testing; 4 flavourist tasters panel who are the Managing Director, Technical Manager, Deputy Technical Manager and Operations Manager, with regular evaluation and assessment as part of ongoing shelf-life evaluation. Samples are retained for shelf life + 2 years. The site ensures system of ongoing verification of shelf life in place as per scheduled programme of internal testing.

•The site used External ALS UKAS number 1282 for external lab testing. Unsatisfactory test results are acted upon in accordance with corrective and preventive actions in the Quality procedure which covered all types of non-conformities onsite.

•Checked external analysis report ~ TELY460688-1, report dated 12/07/2024, product code # ET14666, B# 141591, PD 25/06/2024 covering micro analysis & moisture content and results within specs.

5.7 Product release

•Procedure # QMP10 issue #5 dated 19/04/2024 in place and implemented.

•Currently only works to one customer for positive release process products.

•This works by lead time of 6 weeks which allows ensures production within the first two weeks for stock to be placed on QA Hold and lab analysis conducted.

•The stock cannot be released into external ALS lab analysis reviewed by technical team and as part of QA internal requirements checking density and reflectometer and C of A with will issued.

•Until QA stamp marked as ‘QA pass’ warehouse and logistics can prepare to release stock.

•This stamp makes this visually clear products are completed and released.

•Positive release is in place to ensure all micro is within set criteria and only authorised by the technical team.

5.8 Pet food and animal feed

N/A

5.9 Animal primary conversion

N/A

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
5.2.3	No specific nutritional/suitability consumer claims are made.
5.2.4	No cooking instructions
5.3.5	No rework.
5.3.7	There is no allergen status claim for the products.
5.4.4	No risk identified
5.5.2	No product liners / bags purchased for this type of product
5.8	Pet food is not produced on site
5.9	No Animal feed

6. Process control

6.1 Control of operations

•Due to the site raw materials products are blended and mixed as per formulation sheet based on the sales order from customer. Blending of ingredients can be from 2 ingredients up to 50 ingredients pending the formulation and specification breakdown.

•The formation sheet confirms ingredients to be picked including batch codes,.

•Blending / mixing instructions and total quantity of weight for each job including allergens clearly confirmed. These are strictly followed by the operators and include mixing instruction of the ingredients with speed & time with sheer mixers aggregators used for some recipe blends if required.

•The compounder is responsible for production start-up, processing CCP, labelling, weighing, clean down change overs to ensure products are produced as per set quality and safety requirements.

•Manual Packing into primary packaging

•CCP 1 of sieves are manually checked before filtration into bottles / jerry cans.

•Finished product are weigh checked to ensure compliance to legal requirements working to minimum weights and all manually conducted.

•Manually sealed and labels are applied as per 6.2 with strict controls in place and sample applied to back of sales order form.

•The product label details confirm product code and name, batch code, net quantity in Kgs, BBE Stringer name and address, allergen status, chemical warnings and manufactured in UK. The batch code is clearly labelled on the product to enable full traceability back to days of production. The shelf life of the products is dry powders and liquids from 6- 12 months which is indicated on the product label once packed

•All finished products are stored in warehouse area on pallets awaiting quality release.

•Goods required to be wrapped, strapped, and checking of goods, vehicle inspection prior to loading of goods manifest paperwork is signed by driver as seen with further details until 4.16

•After product has been formulated a small sample is taken for QA testing and analysis with the production control sheet, which is tested via onsite laboratory, including taste test to previous run every 4th batch

•or external for some products. Typical lab testing includes Specific gravity, and refractometer (Refractive Index) if the product is not within parameters stock cannot be released.

•When passed a certificate of analysis is generated by QA and QA PASSED on analysis sheets approved which is given to warehouse and Logistics operative with the batch formulation for release of stock and booking hauliers.

•Interviewed number of staff on intake checks, formulation of ingredients blending, weighing, CCP filtration, QA testing and dispatch and compliant and careful controls onsite.

•If equipment failure or deviation of the process or incorrect formulation this is picked up during QA testing and not released until resolved and within set tolerances this is recorded as part of the NC Corrective and complaints procedure CAPA are issued for full investigation.

•There is currently no product which are outside of the scope of certification.

6.2 Labelling and pack control

•QMP08 Finished product packagaing and delivery issue 1 13.11.2019.

•The site work to one product in booth area at one time to prevent any cross-contamination issues only 4-5 jobs are completed per day per operative pending on the number of ingredients per mix.

•The labelling and packing process starts from Procurement office with generation of the production pack i.e., the pick list / formation of the product and primary packagaing. The formal process of allocation of packing materials is allocated from the stock system with unique GRN barcodes for each packing materials.

•During development and sales; The product labels are set up by technical dept and locked into the system procurement can only print labels which ensure strict controls in place.

•The product labels are applied by operatives when products are packed into primary packaging and issued product label which confirms customer order, net contents in Kgs, batch code, product name, date of manufacture and BBE along with allergen information, HE stringer name and address and any chemical symbols for warnings.

•Each label is counted for the labels are printed exactly for the products being produced against the production plan and label attached to back of product control sheet order form to ensure 6.2.2 requirements and traceability. The number of labels used is detailed on the front of production sheet with 'Quantity printed' and 'used in production' if any 'label remaining' are handed back to production supervisor within main office at end to ensure full control.

•One product is only be packed off at one time longest run of production is 2 hours for filling and packing labels are applied to back of product control sheet..

•Labelling and pack control are checked throughout the run, at start up change and line clearance under QF01 and detailed on the job bag documentation. Also, checked during production if any changes to batches of packagaing material/labels.

•Due to the way products are manufactured no true product changeovers as all products run for few hours and clean down before next production run starts and starts up documented on QP01. Reviewed documentation from traceability and interviewed operative during the site tour.

•Bar code verification is not used during production and packing process.

•Bar code scanning is only used at despatch area once packed into secondary packagaing and labels printed as per online portal.

6.3 Quantity, weight, volume and number control

•Weight control is manually filled to net weight the largest pack size is 600kgs this is completed by production operatives all formulation mixes are made to +1% to ensure minimum weight is fulfilled.

•The final products are checked and in event of underweights procedures are in place.

•Weights are all in Kgs and documented on the batch production sheet once packed into the primary packaging cross checked to ensure correct and documented by the operative to ensure meets legislation requirements.

•Operative are using calibrated scales with weekly checks in place to ensure weights are accurate and legal.

•No products are bulk packed. No automatic weighing equipment onsite.

6.4 Calibration and control of measuring and monitoring devices

•QMP18 Calibration of CCP issue 1 dated 13.11.2019 and QR09 Calibration Register defines the site equipment list in place with location list date of last calibration, date of next calibration, instrument serial number.

•Calibration of equipment is dual managed by Technical dept for scheduling and operations manager when onsite for visits and issues.

•Calibration tags observed during site tour on calibrated equipment, e.g., lab equipment, tag includes device SN, calibration date & due date

•Examples of certs reviewed from;

•Refractometer SN # B601942919, cert. dated 04/01/2024 from Mettler Toledo.

•Density meter B613283505, cert. dated 04/01/2024 from Mettler Toledo

•Torque wrench SN U030144 calibration dated 09/07/2024 valid for 5 years as mentioned in the calibartion report.

•Balance serial number EX24001M 24kgs, dated 22/7/2024 from BRASH (production)

•Balance serial number T51XW - 30kgs calibration dated 22/7/2024 from BRASH. (production)

•Balance serial number AX4202 – 4.2kgs calibration dated 22/7/2024 from BRASH. (Lab)

•Balance serial number ID1 – 15 kgs calibration dated 22/7/2024 from BRASH. (W/H)

•Weekly internal verification in place form # QF38 for scales reviewed from 15/07/2024, 20/05/2024 & 23/01/2024 no issues noted with checks conducted by ops manager.

•Equipment is traceable and calibrated with certs to standards and hard copies retained in folder

•Procedures details when out for control of out of specification and corrective action in place.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
6.1.5	No variation in processing conditions within equipment critical to safety or quality
6.1.7	NA no products outside of scope.
6.2.4	No online verification.

7. Personnel

7.1 Training: raw material handling, preparation, processing, packing and storage areas

•No agency or temporary staff used onsite. Staff inductions are completed by Managing director with hard copies of documents kept by employees.

•Staff is given an induction and handbook which including hand washing, personal hygiene, allergen, cleaning, pest control, colour coding equipment, food safety and hygiene.

•All training reviewed and logged on Breeze with modules completed dates times and durations to confirm training completed.

•All relevant personnel including external providers have received training on the site's labelling and packing processes which are designed to ensure the correct labelling and packing of products.

•There is no agency-supplied staff and or temporary staff.

•Training records including training duration is registered, the following training recoreds were reviewed

•Production and Logistics operative; GMP housekeeping 11/03/2024, Allergen training 22.01.2024, Food Safety level 2 training 06.05.2022, CCP induction dated 21/10/2015 & pest control in the same date.

•Production Operative (as interviewed from day 1 site tour) CCP training 10.12.2019, Complete compounders training 22/03/20221, allergen dated 22/01/2024, labelling and pack control dated 13/11/2019, weight control. GMP dated 03/06/2024, pest control dated 10/12/2029Chemical handling dated 18/04/2024.

•Lab assistant: Food flavour course dated 22/04/2024 for 1 week- externally, GMP dated 17/062024, Food safety dated 21/06/2023, HACCP level 2 dated 22/12/2022, Flash point training dated 01/03/2023, chemical handling training dated 02/05/2024, allergen management dated 18/01/2023, pest control dated 23/01/2023.

•New lab technicians joined in November 2022; Induction completed on 14/11/2022, Pest control training dated 23/01/2023, Allergens management dated 14/11/2023, Food safety level 2 dated 22/06/2023 externally, HACCP system dated 22/12/2022, Glass breakage 23/01/2023, Compounders powders dated 18/11/2022, QA release 01/03/2023, Sales Oper. dated 15/11/2022.

•Induction conducted for external providers such as pest control staff & maintenance and site security all of them conducted for labelling control and allergen management dated 23/10/2023.

•All personnel interviewed during the site inspection are competent to carry out activity.

•Evaluation on effectiveness of training is measured through competency quiz that follows the training and recorded within the employee induction manual and checked for example 1 of the new employees

•The company routinely review the competencies of all staff during the quarterly management meetings and ongoing development training and refresher training is in place and evidence seen of certificates on notice boards e.g., Lead auditor training for operations manager and recently undertaken Level 2 Food Safety for two new employees.

7.2 Personal hygiene: raw material handling, preparation, processing, packing and storage areas

•QP5 Issue 3 dated 26.04.2023 Hygiene Health and Safety Policy outlines the site requirements for personal hygiene e.g., PPE outlined both in production, lab. Dedicated Smoking area, personal hygiene, visitor and subcontractor controls, Food Handlers Health, Food and drink onsite, Glass contamination, Knife blades and plastics controls.

•Only permitted plain wedding ring. No strong odours, false nails, eyelashes etc.

•Hand washing stations are provided before entering to processing area, they are hand-free operated (by knee) and equipped with tap water, neutral soap, dryer and hand washing advisory signs.

•Record of plaster in place with 12 plasters in box and issued when required last entries checked from 14.01.2022 and 02.02.2022 in both cases logged out and disposed of onsite.

•Medical storage is documented within QP5 Hygiene Health and Safety Policy with confirmation not permitted in production areas.

7.3 Medical screening

•QP09 Information for contractors and visitors issue 1 19.07.2012.

•All visitors / contractors are required to complete a medical questionnaire prior to entrance to the site which auditor was asked to complete and covid questionnaire and temperature recording in place..

•Employees are informed of requirement to inform company of any illness/contact with infectious diseases at induction. Return to work declarations are reviewed by site's direct manager of the employee. Food handlers must be symptom free for 48 hours following illness before getting back to work and complete declaration.

•Medical screening for staff form# QF-31 for induction & form # QF32 for staff returning from sick leave, checked for P.M (production operative) dated 20/03/2024.

7.4 Protective clothing: employees or visitors to production areas

•The PPE on the site includes blue hairnets, blue beard snood, white coat and workboats depending on areas visited. Blue nitrile disposable gloves are used and changed frequently as appropriate, i.e., at each break, at least three times a day and more often upon each change over.

•Disposable coats are issued to visitors and disposed of after use.

•No agency or temporary staff are used on the site.

•Rules for wearing PPE are documented in QP5 Issue 3 dated 26.04.2023 and staff handbook.

•Clothing is laundered by Johnson as per contract dated 20/04/2021 and last evaluation dated 08/05/2024 with score of satisfy and renewal Apparel Master with fortnightly collection.

•Enough sets of workwear are available for each employee and protective clothing is changed daily or more often in event of spillages.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
7.2.4	No metal detection onsite.
7.4.6	The are no items of personal protective clothing used unsuitable for laundering

8. Production risk zones – high risk, high care and ambient high care production risk zones
8.1 Layout product flow and segregation in high-risk, high-care and ambient high-care zones
Not applicable
8.2 Building fabric in high-risk and high-care zones
Not applicable
8.3 Equipment and maintenance in high-risk and high-care zones
Not applicable
8.4 Staff facilities for high-risk and high-care zones
Not applicable
8.5 Housekeeping and hygiene in the high-risk high-care zones
Not applicable
8.6 Waste/Waste disposal in high risk, high care zones
Not applicable
8.7 Protective clothing in the high-risk high-care zones
Not applicable

Details of non-applicable clauses with justification

Clause/Section Ref	Justification

9. Requirements for traded products
9.1 The food safety plan - HACCP
Not applicable
9.2 Approval and performance monitoring of manufacturers/packers of traded food products
Not applicable
9.3 Specifications
Not applicable
9.4 Product inspection and laboratory testing
Not applicable
9.5 Product legality
Not applicable
9.6 Traceability
Not applicable

Module 11: Meat Supply Chain Assurance
11.1 Traceability
11.2 Approval of meat supply chain

11.3 Raw material receipt and inspection
11.4 Management of cross-contamination between species
11.5 Product testing
11.6 Training

Module 13: Meeting FSMA Requirements for Food – July 2022
Preventive Controls for Human Food: 21 CFR Part 117 (Clauses 13.1.1 – 13.1.33)
Preventive Controls for Animal Food: 21 CFR Part 507 (Clause 13.2.1)
Food Defence: 21 Part 121 (Clauses 13.3.1 – 13.3.11)
Sanitary Transportation: 21 CFR Part 1 Subpart 0 (Clauses 13.4.1 – 13.4.9)
Produce Safety: 21 Part 112 (Clauses 13.5.1 – 13.5.18)

14.1 Additional Specifier Requirements
14.1 Traceability
14.2 Environmental Monitoring
14.3 Product inspection and laboratory testing
14.4 Protective clothing: Employees or visitors to production areas