Audit Report

1.Audit Summary

Company name	KaTech Ingredient Solutions GmbH	Site Code	4807241
Site name	KaTech Ingredient Solutions GmbH – Plant Wesenberg		
Scope of audit	Mixing and packing of dry food additives / ingredients, like polysaccharides, proteins (animal and vegetable), fibers and emulsifiers as well as salts in paper bags with in-liner and big bags		
Exclusions from scope	None		
Justification for exclusion	Not Applicable		
Audit Start Date	2021-02-15	Audit Finish Date	2021-02-16
Re-audit due date	2022-03-14	Head Office	No

Additional modules included

Modules	Result	Scope	Exclusions from Scope

2. Audit Results

Audit result	Certificated	Audit grade	A	Audit type	Announced
Previous audit grade	AA	Previous audit date	2020-02-17		
Certificate issue date	2021-03-29	Certificate expiry date	2022-04-25		

Number of non-conformities	Fundamental	0
	Critical	0
	Major	0
	Minor	10

3.Company Details

Address	Buurdieksweg 4 23858 Wesenberg		
Country	Germany	Site Telephone Number	+49 451 407020
Commercial representative Name	Patrick Schwarz	Email	Patrick.Schwarz@khpartner.com
Technical representative Name	Cyril Carrat	Email	Cyril.carrat@khpartner.com

4.Company Profile

Plant size (metres square)	<10K sq.m	No. of employees	1-50	No. of HACCP plans	1-3

Shift Pattern	2 overlapping shifts (6 AM to 8 PM)
Subcontracted processes	Yes
Other certificates held	IFS Food ver 6.1, RSPO, Kosher, Organic (EU), Halal, ISO 14001, VLOG
Regions exported to	Europe Asia Africa South America
Company registration number	DE 00441 SH EG
Major changes since last BRCGS audit	No Major changes in the last 12 months

Company Description

KaTech Ingredient Solutions GmbH - Plant Wesenberg produces dry food additives / ingredients at the location Wesenberg / Germany. Factory identification number is DE 00441 SH EG by veterinary authorities. The headquarter is located 15 km away (Aegidienstrasse 22, 23552 Lübeck, Germany). The Technical Innovation/ Product Development and Management central departments are located in Lübeck, Germany and a sourcing unit in UK (technically working as a trader) which both were audited, too. KaTech Katharina Hahn + Partner GmbH has two sister companies in England (R&D for UK, Chester) and Poland (Sales Office). The only own production site is the one in Germany. The company uses a co-producer in Hameln (Hamix), 300 km away. The company is GFSI (IFS Food) certified. All functions were audited on-site. The company produces blends but also a few pure milk powder products. The factory at Wesenberg was built in 2012. 85 persons are working for the company, whereof 45 working on-site (no temporary or part time workers) in one shift in production during 5 days / 2 overlapping shifts a week (6 AM to 8 PM). Production area including warehouse size is approx. 1.800 m². There are three production lines (mixer), and one packing line equipped with a metal detector. Transport and storage executed by an external service provider (IFS Logistics certified). A laboratory is available for quality control purposes.

5.Product Characteristics

Product categories	07 - Dairy, liquid egg 15 - Dried food and ingredients
Finished product safety rationale	Ambient stable, low water content (e.g. aw: max. 0.6), sieves in process, metal detection in process flow, long shelf life

High care	No	High risk	No	Ambient high care	No

Justification for area	According to BRC decision tree; Low risk only. All products produced are ambient stable with low water activity (typically aw <0,5, max. 0,6). Products are used in industry often heated during use. All products are only released after external pathogen analyses. Only simple process of mixing of dry ingredients.

5.Product Characteristics

Allergens handled on site	Milk Egg Sulphur dioxide and Sulphites
Product claims made e.g. IP, organic	Organic (EU), RSPO, Halal, VLOG, Kosher, KAT, Free Range Egg, Red Tractor
Product recalls in last 12 Months	No
Products in production at the time of the audit	All product are powdered and customized emulsifier systems. Products in production at the time of the audit Produced: Day 1: S5549 and S3945 (both W1), S6203 (W3). Day 2: S1719 (W2); S715, S1198, S2578, S2095 (all W3).

6.Audit Duration Details

On-site duration	16 man hours	Duration of production facility inspection	8 man hours
Reasons for deviation from typical or expected audit duration	Combined BRC/IFS audit and transfer time between office and plant.		
Next audit type selected	Announced		

Audit Duration per day

Audit Day	Date	Start Time	Finish time
1	2021-02-15	08:30	17:30
2	2021-02-16	08:30	18:30

	Auditor number	Name	Role
Auditor Number	20329	Ralph Geyer	Lead Auditor

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
Patrick Schwarz / General Manager	X		X	X
Breido Radtke / Senior Plant Manager	X	X	X	X
Cyrill Carrat / Technical Manager	X		X	X
Anne Thomsen / Quality Manager	X		X	X
Anne Christiansen / Head Quality	X		X	X
Nerys Bendett / Supplier +RM approval (via web)			X	
Alexander Maeße / Leitung R&D		X	X	
Elena Kraus / Head lab		X	X	
Christina Linsenhoff / Observer (client side)	X	X	X	X

GFSI Audit History		
Date	Scheme/Standard	Announced/Unannounced
2020-02-17	BRCGS Food Safety Issue 8 / IFS Food v6.1	Announced

Non-Conformity Summary Sheet

Critical or Major Non Conformities Against Fundamental Requirements				
No.	Clause	Detail	Critical or Major	Ant. re-audit date

Critical			
No.	Clause	Detail	Ant. Re-audit date

Major							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1	3.6.4	The alignment of the testing criteria between the specification list in Excel as of 02/21 and the purchasing specification is not always correct. Examples raw materials A25027 and A32017.	Approval check sheet has been re-structured by including the columns “Expired document date – linked to purchase spec or spec ref in SAP”, “Comments” and “Forecasted + related date”: The purchase spec expiry date from when the supplier has signed or spec expiry date (if supplier won’t sign our purchase specs) is now stated. Where the date has expired, a comment about the reason can be found now.	The summary table did not show the actual flow which was implemented as required. The adjusted table now closes the gap.	The process was clear to the people involved and was also defined in a flow chart. However, the overview chart was not in accordance with the "actually" correct flow. This has now been corrected.	2021-03-16	Ralph Geyer
2	4.4.8	Access/passage goods entrance: Both rolling doors (outside and inside to production)	The deviations were corrected immediately. Instructions regarding roll-up door regulations were defined, trained, and	The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that in the future explicit	Because of the Corona situation, we have extended the shift so that fewer employees are working at the same	2021-03-16	Ralph Geyer

Minor							
		were open at the same time.	known. A new instruction has taken place in which all essential points were trained again.	attention will be paid to incidents of this kind. Deviations and necessary measures are discussed in the HACCP team, acute incidents must be directly addressed and fixed. - Regarding the roll-up shutters/gates an investment is planned that allows opening and closing the gates only alternately.	time. This change has apparently reduced some of the perceived responsibility for operations that usually exists. Employees have been made more aware, positioning of utensils was changed and controls have been increased now.		
3	4.9.1.1	Pest control: SDS for toxic baits outdated (v3 2018).	The current MSDS was organised and loaded immediately. The MSDS was already updated during the audit, seen by the auditor.	Our monthly checklist for pest control was extended by a control for actuality of MSDS.	Since KaTech is using an external pest controller we did not check the available MSDS the existing data sheets, which are also included in the hazardous substances register for actuality so far. This will be done in future as part of our responsibility.	2021-03-16	Ralph Geyer
4	4.11.1	There were isolated minor cleaning deficiencies in production:	-The aspiration hoses of all systems are checked on a regular basis, which is included in the	A complete replacement of the hoses takes place at least once a year.	The aspiration tube had some adhesions that could not be removed.	2021-03-16	Ralph Geyer

Minor							
		- Aspiration hoses - Mixer paddle in drum W3 - Dust accumulation wall protrusion near spiral staircase W3	electronic maintenance planner. - The mixer paddle in line W3 was cleaned. - The wall ledge was cleaned	Additional controls have now been implemented -Training is given. - The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that in the future explicit attention will be paid to incidents of this kind.	Contamination of the products produced in each case excluded, as the flap to the aspiration tube is not opened until aspiration has been started and shut before the aspiration stops. Because of the Corona situation, we have extended the shift so that fewer employees are working at the same time. This change has apparently reduced some of the perceived responsibility for operations that usually exists. Employees have been made more aware and controls have been increased now.		
5	4.11.6	- Placement of brooms over and in contact with pre-weighed packaged raw materials in B1.	The deviations were corrected immediately. Instructions regarding cleaning utensils, storage	The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that	Because of the Corona situation, we have extended the shift so that fewer employees are	2021-03-16	Ralph Geyer

Minor							
			of black and white material, and roll-up door regulations were defined, trained, and known. A new instruction has taken place in which all essential points were trained again.	in the future explicit attention will be paid to incidents of this kind. Deviations and necessary measures are discussed in the HACCP team, acute incidents must be directly addressed and fixed. -The brooms have been hung in another place, outside B1. - The vacuum cleaner brushes and nozzles have been assigned a different place	working at the same time. This change has apparently reduced some of the perceived responsibility for operations that usually exists. Employees have been made more aware, positioning of utensils was changed and controls have been increased now.		
6	4.15.1	5 pallets with big bag packaging material were delivered to the goods receiving department and accepted. The pallets are intended to be moved to the warehouse in the production area, although the pallets were clearly dirty on the outside.	The goods were repacked on perfect pallets. An instruction has taken place in which the importance of clean, dry and intact pallets was trained again.	The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that in the future explicit attention will be paid to incidents of this kind.	The staff in charge for incoming goods are trained in all required aspects, also a checklist covering those aspects is implemented for each incoming consignment. This incident must have been an exception.	2021-03-16	Ralph Geyer

Minor							
7	5.5	Primary packing material (sewing thread and crepe paper) stored in supply cabinet along with cleaning equipment (vacuum cleaner brushes/nozzles).	The deviations were corrected immediately. Instructions regarding cleaning utensils, storage of black and white material, and roll-up door regulations were defined, trained, and known. A new instruction has taken place in which all essential points were trained again.	The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that in the future explicit attention will be paid to incidents of this kind. Deviations and necessary measures are discussed in the HACCP team, acute incidents must be directly addressed and fixed. -The brooms have been hung in another place, outside B1. - The vacuum cleaner brushes and nozzles have been assigned a different place	Because of the Corona situation, we have extended the shift so that fewer employees are working at the same time. This change has apparently reduced some of the perceived responsibility for operations that usually exists. Employees have been made more aware, positioning of utensils was changed and controls have been increased now.	2021-03-16	Ralph Geyer
8	6.3.1	The process of bagging is done by hand into paper bags (mostly 20-25 kg). Each bag is weighed individually and sealed only after reaching the minimum filling quantity.	Each bag is controlled individually by employees directly after filling and the filling quantity is adjusted if necessary, manually. There is already an instruction that each bag is	We implemented an extra control tick box on the production order batch card to comply with the requirements.	So far there were not any complaints from local authorities and we considered the level of documentation as OK.	2021-03-16	Ralph Geyer

Minor							
		Random individual recording of additional weighing checks is carried out monthly. There is no written justification that this sample size satisfies statistical principles.	precisely filled, never underfilled. The completion confirmation of the production batch confirms the correct operation. Deviations (too much or too little) from the production quantity are immediately detected, if any. However: a checkbox was added to the production form to confirm correct weighing for each batch.				
9	7.1.3	The company's defined performance review for staff training was not documented for all training (02/02/2021, 03/02/2021, 11/02/2021).	The effectiveness test was carried out already but not documented consistently on all training documents. Performance review will be done after training.	The verification sheet has been modified by visually highlighting the required documentation	This was a human error.	2021-03-16	Ralph Geyer
10	7.4.1	Shuttle service employee in/out without hair net and shoe covers. One employee wore his hair net in the goods receiving area in such a	The colleagues were instructed again.	The existing monthly control plan regarding the hygiene tour was expanded and defined more concretely, so that in the future explicit attention will be paid to incidents of this kind.	The good receipt area is designated as our quarantine zone, separated from the warehouse by walls and roll-up doors. Here only closed packages are handled.	2021-03-16	Ralph Geyer

Minor							
		way that not all hair was covered.		Training is given.	This area needs to allow access also for external staff (e.g. from haulier companies for load securing). However, own staff definitely must wear correct working clothes correctly.		

Comments on non-conformities
None

Additional Modules / Head Office Non-Conformity Summary Sheet

Critical			
No.	Clause	Detail	Re-audit due date

Major							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Detailed Audit Report

1. Senior management commitment

1.1 Senior management commitment and continual improvement

The company has a documented food safety and quality “01-01-Politik-13-S Qualitätspolitik” on 19-OCT-2018 (verified JAN-2021), signed by General Manger Mr. Schwarz. It is communicated to the staff by intranet/email and posting/black board. 01-01-Politik-01-S-Unternehmenspolitik issued on 21-JAN-2019, verified and signed again on 12.JAN-2021. Food safety culture: document issued 12-JAN-2021, version 3, doc. 01-01-Politik, I3-2: 5 key pillars; guidance: Ongoing plan for Food Safety Culture Implementation, Status: version 2, December 2020.

Every month a quality management team meeting is realised.

There is a procedure from “01-06-Ziele-01-SOP-Zielfestlegungen” from 1-AUG-2020 and there are documented objectives (8 pages) for: R&D, food safety culture, economic objectives, QM (non-NC complaints from customer and other, new mixer for small quantities, etc.). Objectives are measurable and include targets – signed 21-FEB-2021 by Managing Director. These are communicated to staff via head of departments and broken down to individual targets and reviewed at 3-monthly meetings. Targets widely met for 2020 including among other better economical revenue, implementation of SAP and food safety culture, OHSAS. An investment stop for the Corona period was established.

Management review meetings are held annually, the last review was for 2020 and was attended by the hole management team. The last management review has been realised on 28-JAN-2021.
Team meetings are realised on a monthly basis, there is a list of non-conformities that is monitored. Actually 8 NCs are not closed. Last meeting has been realised on 02-FEB-2021, the report is available. Whistle blower policy: issued 15-NOV-2018, version 1, “01-01-Politik-02-S”.

Records of the management review were available and included decisions and actions which are communicated to appropriate staff and completed within timescale.

There is adequate resource to maintain compliance to the Standard.

There are also regular meetings including: targets monthly (leadership team), quality (quarterly) and many more (list of meetings “01-05-Kommunikation-01-S”, 13-NOV-2019).

The company ensure that they are kept informed of scientific and technical developments, industry code of practices as applicable as well as new risks to authenticity of raw materials and relevant legislation by: internet, labs, BLL membership, training and includes also memberships of bulletins EU/RASFF, etc.

Food safety culture is the responsibility of the Managing Director and Technical Director (execution) who discussed these matters with the auditor. Work so far includes policy and already implemented several parts and future work will be evaluated during the next years. Effectiveness will be evaluated via external benchmark system. Policy described in “01-01-Politik-13.1-S” form 13-FEB-2019 (still current).

Interviews with employees confirmed that they were aware that non-conforming product issues could be reported to foreman/supervisor and quality department for action.

The company has a confidential reporting system which works in the following manner: data protection responsible with policy 15-NOV-2019 v1.

A genuine copy of BRC standard was available. They organization remains updated on changes in the standard via BRC Participate. The logo is used in accordance with the requirements.

The company have ensured certification is maintained, audit due date 2021-03-14.

The General Manager attended both the opening and closing meeting.

5 non-conformities were identified at previous audit against clauses 2.2.1, 3.2.1, 4.11.2, 4.11.6 and 5.1.2. Identified root cause analysis and provided actions seen to have been effectively addressed to prevent recurrence.

1.2 Organisational structure, responsibilities and management authority

The company have a clear organisational structure in place issued 08-APR-2020 v22 ("01-02-Verantwortlichkeiten-01.1-S") (Wesenberg), organisational chart Lübeck: version 22, document issued 14.12.2020, "01-02-Verantwortlichkeiten -01-S"). The person responsible for food safety, legality and quality is Technical manager who reports directly to General Manger. Deputisation is documented also in the organizational chart, the organization ensures that employees are aware of their responsibilities by training, education and regular meetings. Interviewed staff appeared to be aware of their responsibilities and documented work instructions are in place.

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

2 The Food Safety Plan – HACCP

The plan has been developed and maintained by a multidisciplinary team including:

Job Title	Experience	Qualifications / Training
Technical Manager / team leader	15+ years in food industry in comparable companies	HACCP, R&D, etc. trained 3-FEB-2012 by Lebensmittel.Punkt
Quality Manager / backup	15+ years in food industry in comparable companies	HACCP, R&D, etc. trained 21-OCT-2011 by Lebensmittel.Punkt
Senior Plant Manager	15+ years in food industry in comparable companies	HACCP, R&D, etc. trained 16-AUG-2011 by IKO
QS Supervisor	15+ years in food industry in comparable companies	Trained on 22-NOV-2018

SOP "HACCP Food Safety Team / Aufgaben" 01-07-HACCP-03-S, Version 8, 20-JAN-2020. Generally, two team meetings are held per year. The team has nine HACCP team members:

The company have a fully implemented and effective good safety plan based on Codex Alimentarius HACCP principles. There is one HACCP study which includes 33 product and line specific variations. The technology and general process steps are for all products the same. There are 10 product groups available. During the last year approximately 880 products have been produced, approximately 450 raw materials have been processed and products have been sold to 34 countries.
Risk analysis: (01-07-HACCP-06-S), date: 24.MAR-2020, version 16.

Each product or group of products includes a full description which includes all relevant information on food safety. The intended use of the product is identified as professional product only. The produced blended stabilizing systems are manufactured individually in consultation with food producers. The company has only B2B business.

Pre-requisites are documented within “04-11-Food Defense-03-SOP Gefahrenanalyse und Festlegung der PRPs und oPRPs” from 22-JAN-2020 v9 (verified 23-MAY-2020) and include housekeeping and hygiene, pest control, PPM, personal hygiene, staff training, purchasing, transportation arrangements, processes to prevent cross contamination and allergen controls. The pre-requisites (01-07-HACCP-12.1-F, v9, 24-MAR-2020) are reviewed as part of the HACCP review.

Relevant information has been used to conduct the hazard analysis including legal requirements, company experience, known issues from the past (e.g. RASFF, FDA), typical hazards in raw materials and foreseeable application of finished product.

Flow diagrams are in place covering relevant inputs and outputs. The following is a list of existing diagrams:

Flow diagram	Issue date	Verification method
01-07-HACCP-26-P Flow chart Linie 1 Dairy	15-JUN-2020	annual on-site check
01-07-HACCP-26.3-P Flow chart Linie 1.1 Dairy Big Bag	06-MAR-2020	annual on-site check
01-07-HACCP-27-P Flow Chart Linie 2 Savoury	06-MAR-2020	annual on-site check
01-07-HACCP-28-P Flow Chart Linie 3 Tumble Mixer	09-MAR-2020	annual on-site check
01-07-HACCP-26.1-P Flow Chart "Linie 4" (Big Bag Abfüllung)	09-MAR-2020	annual on-site check
01-07-HACCP-26.2-P Flow Chart Linie 5 Preblender	15-JUN-2020	annual on-site check
01-07-HACCP-28.1-P Flow Chart Linie 6 Ei-Linie	09-MAR-2020	annual on-site check

Process steps summary: Reception – warehousing – preparation/premix – blending – filling bag or super sacks – metal detection – pallet packing – warehousing – shipping.

The HACCP team have identified and recorded potential hazards that are reasonably expected to occur at each step of the process, and this includes raw materials. Identified hazards were determined for microbiological (listeria and salmonella from raw materials, staph. aureus from potential deficiencies in personal hygiene), chemical (pesticide residues in raw material, migration from packaging material), physical (foreign materials like paper/film pieces and metal particles from equipment) and allergens (cross contamination by dust between lines with different allergens). Auditor verified that the risk assessment was done in compliance with the standard.

A hazard analysis has been conducted based on likelihood x severity. Control measures have been identified and documented within the HACCP plan(s).

Critical control points have been determined by using the risk matrix and codex decision tree as confirmation. Critical control points identified are:

CCP	Process Step	Critical Limit	Monitoring
1	Screen check at blender inlet	damaged (sieves have 2 mm, 4mm and 10mm metal screen)	Visual before start and after end of production run.
2	Metal detection after closing bags / packaging area	3.0 mm Ferrous 3.5 mm Stainless Steel 4.5 mm non-Ferrous	Visual before start, at 10 AM, at 2 PM and after end of production run.

01-07-HACCP-07, 14-JAN-2021, version 14
Documented procedures define corrective actions expected to be implemented if critical limits are exceeded. CCPs were validated as follows:

CCP	Means of validation	Date of last Validation
1	No, validation (visual check) – just employee training	N/A – During each internal audit the sieve integrity is checked by additional employees
2	Validation by signal strength of different test pieces (Fe, non-FE, Stainless Steel), angle of coils, sensitivity (position of test pieces) and annual maintenance of equipment supplier.	verification on 11-JAN-2021 by external equipment supplier. Extensive equipment validation with detailed records was performed in 2014.

Visual Checkfors screens: work instruction AA CCP 1 (screen), 05-JUN-2018, version 7
Magnet: “Magnetgitter Zertifikat”, date 11-JAN-2021 (Sesotec), no validation possible.
Metal detector: 11-JAN-2021 (next test JAN 2022), (Sesotec); FE: 3,0 mm, VA: 3,5 mm, nonFE: 4,5 mm.
Tests have been made with and without product. Sugar is used as test material. Gelan and Xanthan are raw materials with the highest density, sugar is the most comparable material.
Flow charts have been controlled at different times and in different status. E.g. Line 1 version 10, 15-JUN-2020, Line 1.1, version 3, 06-MAR-2020; line 2, version 9, 06-MAR-2020, line 4, version 07, 06-MAR-2020, line 5 15-JUN-2020, version 5, line 6, 06-MAR-2020, version 2, line 3, 06-MAR-2020, version 8.
Controlled at least annually.

CCP records are signed by operative and verified by employees in quality department.
Verification of the HACCP plan is achieved by the HACCP team, including internal and customer audits, product analyses, review of customer complaints and withdrawals or recalls. This information is made available to the HACCP food safety team.

During the audit multiple records were sampled and considered to be properly documentation and kept.

The last HACCP review was conducted during 2nd regular HACCP meeting on 17 and 24-NOV-2020.

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

3. Food safety and quality management system

3.1 Food safety and quality manual

The company demonstrated a documented quality system manual based on the BRC requirements. The manual or their parts are made available as needed to the staff by intranet and – where necessary - still on paper. Verified procedures and work instructions were clearly legible and available in German. Some documents are also available in English language. During interviews and auditor observations these were considered to be properly understood by relevant staff.

3.2 Document Control

There is a document control procedure in place “04-01-Dokumentenmanagement-01-SOP-Dokumentenlenkung/Aufbewahrung” 10-MAR-2020, v9. Documents are controlled by date and version number in al list. A record of the reason for change is retained. A list with all controlled documents were provided and verified during the audit. Computer data is backed up daily. Document master list, dated 15-JAN-2021.

3.3 Record completion and maintenance

Records reviewed were legible and easily retrievable and are retained for 10 years which properly covers the maximum product shelf life of 5 years plus one year.

3.4 Internal audits

There is a planned programme of internal audits based upon risk for which the organization considers the following criteria: criticality, issues, history, targets. Schedule issued in accordance with the risk assessment 05-01-Interne Audits-06-S Version 3 from 10-JAN-2019. Dated Excel file demonstrates that all system requirements are covered throughout the year and that all activities are covered at least annually. For 2020 in total 12 internal audits (A-J) were planned (plan 7-JAN-2020). Risk assessment for internal audit frequency dated 10-JAN-2019 v3.

Currently there are 14 available auditors to cover all aspects of the organization and ensure independence. Auditors were demonstrably competent and evidence for this included Internal auditor Training from 15.01.2017. As of February 2021, new auditors are in training.

Audit reports include objective evidence of conformity as well as non-conformity and are reported to personnel responsible for the activity audited. Corrective actions and timescales are agreed, and completion of corrective actions are verified by monthly quality meetings.

During the audit the results of the following audit activities conducted throughout the year were reviewed:

Date	Area / Requirement	No. NCs	Action plans Y/N	Implemented Y/N	Verified Y/N
29-JUL-2020	R&D	0 NCs 5 opportunities	Y	In process	Not yet
21-OCT-2020	QA	1 NC	Y	In process	Not yet
10-SEP-2020 07-OCT-2020	Production / Warehouse	0 NCs 2 opportunities	Y	Y	Y
07-DEC-2020	Food Defense	0 NCs 5 opportunities	Y	Y	Y

In addition to the internal audit programme there is a programme of planned inspections for hygiene and housekeeping as well as fabrication. Inspections are conducted monthly, records seen for 13-AUG-2020 (inside/outside), 13-NOV-2020 (inside).

Frequencies: (inside - monthly, glass – monthly, outside area – monthly). Site inspections cover all process areas. Deviations identified are reported within the report of the inspection and transferred into a corrective action report if not directly corrected. Implemented actions are verified by next inspection.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

There is a documented supplier approval and monitoring system in place - SOP “02-02-Lieferanten-01-S Lieferantenzulassung allgemein”, 28-FEB-2019, v3 (still valid). This requires that the organization performs a risk assessment of each raw material/group of raw materials to identify potential risks to product safety, legality and quality including allergen contamination, foreign body risks, micro contamination, chemical contamination and substitution or fraud.
Current QC ingredient and supplier approval list 2021 was current as of audit date, with monthly updates. The company has 57 approved suppliers and 247 active raw materials. 22 raw materials are considered as “high” risk, due to different reasons (country of origin, fraud/claims, previous food safety issues, etc.).

Existing methods to accept raw materials are consistent with the reviewed risk assessment which includes the following means of control: visual checks, COAs, lab checks, seals check.
There is a list of approved suppliers. Supplier approval procedure:

During the audit a sample of supplier assurance records was conducted:

Item	Risk rating	Method of assessment	Valid until
Egg powder (NL)	High	FSSC Certificate (exp. 26-DEC-2021), history of issues	next review 2022
Gelar Gum (China)	High	No GFSI certificate (only ISO 22000), audited by KaTech CoA, history of issues	next review 2022
Guar gum, organic (India)	High	BRC certificate (“B”), CoA, history of issues	next review 2022
Suralose (China)	high	BRC certificate, CoA, history of issues	next review 2022
Xanthan gum (China)	high	GFSI certificate (“A”), CoA, history of issues	next review 2022

Supplier Approval Form for Supplier Approval Raw Materials: date: 21-SEP-2019, version 4, 02-02-Supplier-02-P seen.

Evidence of raw material changes being communicated to goods in department was provided via list of deliveries (different item number) in SAP and change of specifications/new specification of changed material.

Exceptions to the supplier approval process are not permitted. All suppliers need to be approved before delivery. The company runs a 2 suppliers’ strategy to have at least one alternative supplier as backup.

Materials purchased via agents/brokers are assessed in the same manner as direct suppliers. Almost all agents except BRC certificated and evidence for this included BRC certificate/database. Otherwise the source of the material was communicated.
KaTech uses 26 traders which are not certified according to a GFSI standard, but the suppliers are certified according to a GFSI Standard and/or provide information of production site for traded materials.

3.5.2 Raw material and packaging acceptance, monitoring and management procedures

Documented procedure “03-01-Wareneingang-03-SOP Warenannahme”, 09-DEC-2020, v12, describes controls for acceptance of raw materials and packaging materials. A list of raw materials and requirements to be met for acceptance was available and observed to be followed. During the audit were sampled materials to ensure compliance with the defined requirements the results of the sample were as follows:

Material description	Defined means of control	Evidence provided	Comments
M90032 paper bag	GFSI audit, visual check, COA	CoC 29-JAN-2020	None
Big bags	GFSI audit, visual check, COA	CoC 15-NOV-2019 BRC (“AA”), exp. 06-NOV-2021	None
Xanthan	GFSI audit, visual check, COA	BRC “A”, exp. 16-FEB-2021	None
Gelan Gum	GFSI audit, visual check, COA	ISO 22000, exp. 03-JUL-2021 KaTech audit report from visit 19-NOV-2019 by HACCP Team Leader	None
Egg powder	GFSI audit, visual check, COA	FSSC 22000, exp. 26-DEC-2021	None
Gum	GFSI audit, visual check, COA	BRC “B”, exp. 14-JUN-2021	None
Sucralose	GFSI audit, visual check, COA	BRC “AA”, exp. 27-SEP-2021	None

Claims of authenticity are currently identified e.g. Organic, RSPO and VLOG.

3.5.3 Management of suppliers of services

A list of all service providers is available; suppliers are monitored based on a risk assessment. Transport companies are IFS Logistics or BRC S&D certified. Certificates were available, for example for “Spedition Bode GmbH & Co KG”, IFS Logistics certified, certificate valid until 28-DEC-2021.

Contracts with suppliers of services are available and include clear definition of expectations. Service providers are informed about hygiene requirements and have to sign in.
The procedure for approval and monitoring of service providers is described in the purchasing manual and in a new process instruction concerning complaints. Service providers include – among others – laboratory services, pest control, laundry and cleaning services.

Procedure “02-02-Lieferanten-20-P Assessment of service providers”, 13-FEB-2020, v3, describes the means to approve and monitor service suppliers which includes e.g. laboratories, pest controller, laundry services, external cleaning companies. Contracts reviewed during the audit included pest controller HYGAN. This includes service expectations.

SOP: 02-02-Lieferanten-16-SOP Anforderungen an Dienstleister und Lieferanten, version 7, 28-SEP-2020 (requirements for service providers).

3.5.4 Management of Out sourced processing

One employee from the British unit of KaTech (separate legal entity) is buying materials on behalf of KaTech Germany. She manages the sourcing and is part of the German organization structure. The

material is purchased directly by KaTech Germany. Contract with supplier was present and include clear definition of expectations. The procedure for approval and monitoring of service provider is described in the purchasing manual and instructions. Suppliers of outsourced processing have to fill in a questionnaire prior to the first supply. All suppliers had been approved prior to use.
There is an outsourced process where KaTech uses a co-producer mainly for pork gelatin products in Germany. The facility is certificated to IFS Food. The companies are monitored. KaTech only uses a very few brokers/traders and in such a case, the origin of the raw material is always known.

The organization outsources its co-producer / co-packer operation. Control of product safety, legality, quality or authenticity is maintained by audits and GFSI certification (IFS).

Reviewed outsourced activities:
Products with pork gelatine are produced at HaMix/Germany.
Certification: IFS, COID: 40929, exp. 08-APR-2021, IFS scopes 5 and 10.

Supplier questionaire: 02-02-Lieferaten-12.1-F, Hamix GmbH, signed on 04-DEC-2019.

Mixing and filling of 6 products: the last production has been realised there on 22-JAN-2021, batch code H-220121-1 -1 to -9.

Activity Outsourced	Contract Available	Defined Controls	Evidence Provided	Comments
Co-packing/co-production	Email 12-NOV-2019	Supplier audit and monitoring and training during first productions	Supplier questionnaire 04-DEC-2019, valid IFS certificate, HACCP plan 21-FEB-2020 Flow chart 08-JAN-2020	none

3.6 Specifications

Specifications are in place for raw materials including packaging and finished product. When required specifications are formally agreed with customers/suppliers. Procedure includes the requirement to review specifications when product/materials change or at least every 3 years.

Sampling of specifications was conducted as part of site inspection and traceability with following results:

Type of Specification	Description	Specification	Last review date	Comments
Raw material	A29005	11-FEB-2020	11-FEB-2020	None
Raw material	A32017	30-MAY-2016	30-MAY-2016	Expired in supplier list => NC
Raw material	A25027	12-APR-2017	12-APR-2017	Expired in supplier list => NC
Packaging material	M90032	22-FEB-2018	22-FEB-2018	Paper bag with liner
Finished product	S1120	28-SEP-2020 v4	28-SEP-2020 v4	Emulsifier system

1 Minor NC in 3.6.4:
The alignment of the testing criteria between the specification list in Excel as of 02/21 and the purchasing specification is not always correct. Examples raw materials A25027 and A32017.

3.7 Corrective and preventive actions

The organization provided evidence of documented procedure, 05-05-Korrekturmaßnahmen-02-P Prozess Abweichungen“from 21-DEC-2017. The company demonstrated that they use information from identified failures in the food safety, legality or quality of the products to make necessary corrections and prevent recurrence. The organization manages existing corrective and preventive actions via an ongoing excel file. Example seen during audit was temperature above 25 °C limit for storage in summer (storage in lower level shelves) which showed that root cause analysis was effective. Trend analysis showed no issues. No relevant trends were identified.

3.8 Control of non-conforming product

A non-conforming product procedure is in place „05-05-Korrekturmaßnahmen-02-P Prozess Abweichungen“from 05-MAY-2020 v4 which includes controls and responsibilities for out-of-specification products/materials to avoid /prevent unauthorised release.
Non-conforming materials/products are identified by direct labelling, block in IT-systems (SAP). There is no specific quarantine area. A sample was conducted to verify that physically segregated materials/products matched with the ones reported in existing records. Results demonstrate that controls are effective.
Blocked material seen in warehouse: raw material Gelar Gum from China with metal dust inside. Not food safety hazard, but quality issue. Not disposed yet due to going-on complaint process. All blocked items are blocked in the IT system and are labelled with an on-hold sign.

3.9 Traceability

A system is in place which allows the organization to trace all raw material product lots including primary packaging from their suppliers through all stages of their process until one step out of their responsibility and vice versa. The procedure “03-05-Rückverfolgung-01-P-Datenstruktur für Rückverfolgbarkeit” dated 13-AUG-2020 v2 (still valid) describes how items may be traced.

The organization provided evidence of internal traceability exercises across a range of products which included a review of the pertinent documentation and records as follows:

	Product	Date of production	Amount Produced	Amount traced	Time required / Comments
Backward	S2750	21-OCT-2020	1 batch	100%	< 2 hours Kosher
Forward	A12076	5-JUN-2020	1 batch	100%	< 2 hours Halal material

An onsite traceability test was successfully conducted on:

	Product	Date produced	BB date	Mass balance	Time required
Backward trace From finished product	S1120 Batch: W3-091120-2	09-NOV-2020	09-NOV-2021	Produced 2 bags with 25 kg/ea. 52.08 kg raw material 96% used in product,	< 2 hours, including collecting all records for vertical audit

				loss reasonable	
Forward trace From raw material	A14013	N/A	Lot PR20701	700 kg received. 566 kg used 106 kg left 28 kg waste 100% traced	15 minutes

Rework is fully traceable. If surplus material is produced, this is bagged and used in the next batch of the same product. Rework traceability information is recorded.

3.10 Complaint-handling

There is a fully documented complaint handling procedure “05-03-Reklamationen-05-SOP-Reklamationsbearbeitung” issued 22-FEB-2019, v3.
All complaints are recorded, and an investigation is conducted.
Handling of complaints is documented in a questionnaire the customer contact is filling in. Complaint records were available including results from investigations and analyses. Actions have been discussed in meetings and carried out promptly by responsible staff (e.g. technical director, senior production/operation manager). Analysis is monthly displayed in meetings of quality department, senior production/ operation management. Complaint trend analysis is done every month and in management reviews.

The organization demonstrates the means to analyse and trend complaints and in case of significant increase or serious complaint root cause is determined as part of the action plan.

Main cause of complaints is: transport damage, labelling (BBD), no specific trends.
During 2020, 26 complaints have been reported, compared to 27 in 2019. 19 were accepted by KaTech.

During the audit were reviewed records of existing complaints which demonstrates a proper documented and implemented system.

3.11 Management of incidents, product withdrawal and product recall

There is a documented crisis management procedure 01-08-Krise-03-SOP Krisenmanagement from 25-JUN-2020 v5 and includes recall procedure is included in it. An additional recall checklist is used.
The crisis management team includes: Key employees as with managing director, technical director (head of team), QM/QA, plant manager.

The recall procedure is tested at least annually to ensure effective operation at both facility and company level. The test showed that the site’s responsibilities (e.g. head of crisis management team) were properly understood and capable of being promptly enacted. Last test:

Date	Product	Batch traceability	Key timings	Corrective actions
21-OCT-2020	S6077	OK	2 hours	Not necessary

The company has confidence in its out of hours protocol as evidenced by test calls in early morning and in after hours.
Technical Director has the “red phone”. Emergency list from 07-DEC-2020 v24.

There have been no withdrawals / recalls in the last 12 months however the procedure states that in the event of a product recall the certification body should be informed within 3 working days of the decision to issue a recall.
Last team meeting was held in JAN-2021 about Corona Virus and UK Brexit. A customer statement was created as prerequisite and finished goods with such raw materials were reviewed. All such raw materials were produced and on stock already before the crisis in China. No suppliers are used from Hubei area. Follow-up performed on 3-FEB-2020 and the German BfR authority was taken into consideration.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
3.5.1.7	No exceptions are made for supplier approval
3.5.2.3	No live animal reception
3.5.4.1	No customer branded products produced, all clients are informed about outsourced products.

4. Site standards

4.1 External standards

The production site is situated in an industrial area, of suitable size and well maintained. Local neighboring activities (car dealer, bakery DC) did not show risks to the operations on-site. A plant tour around the perimeter was conducted and no activities were observed which may have an adverse impact on product. External areas were observed to be well maintained. All areas around the building were observed with sufficient clear areas to discourage rodent burrowing. Roads around the plant were observed to be paved and in good condition. Waste containers are maintained far from plant entrance and kept closed to prevent pest harbourage.

Building fabric was in good condition. Docking doors were observed to close properly and without evidence of bird roosting sites. Walls and floors were in good condition; pipes, vents etc were adequately proofed.

4.2 Site security and food defence

The site is totally fenced in and monitored by cameras. Generally, access to buildings is only possible via locked doors with special key cards. A visitor reporting system exists, and visitors have to wear their visitor identity card and red disposable hair nets (employees with white hair nets). All doors to offices and production area are locked and can only be operated by a chip or key.
Most of the raw materials are stored in bags, access to storage areas for raw materials and packaging materials is only possible for authorized persons. Finished products are stored in shelf storage.

FDA Registration number: none. German/EU EST / registration number: SH 00441, published in “Bundesanzeiger” in 2017. Registration letter from authority Kreis Stormarn from 6-DEC-2012.

A Food Defense risk assessment was performed (including site security, visitors, contractors, employees) and reviewed on annual basis (Food defense plan risk analysis, v9, 22-JAN-2020 (verified 23-MAY-2020), concept from was reviewed (annually)). Staff training performed on 26-FEB-2020, and also as part of the standard hygiene/basic HACCP training. There are no external storage facilities under own responsibility.

Security systems are in place. A documented risk assessment has been conducted on 22-JAN-2020 v9. The system requires annual review, but was slightly delayed due to Corona. Visitor reporting system is in place.
External storage tanks / silos are not existing.
Security procedures are part of the training program and personnel interviewed explained their responsibilities in that respect.

4.3 Layout, product flow and segregation

The factory layout, process flow and movement of personnel appeared acceptable. Contractors and visitors are made aware of company procedures by reading and signing visitor rules. Contractors are under the supervision of employees of the technical department.

The site tour demonstrated that the plant has sufficient workspace and storage capacity to enable proper hygienic conditions.

Temporary structures do not exist.

Map provided by the plant and assessed by the auditor demonstrate the following areas:

Areas	Location	Level of control
Low-risk	whole plant with open product	GMPs (mainly cleaning, cleaning monitoring, maintenance, personal hygiene, pest control, training)
Enclosed product	Raw material reception, dispatch area, storage area	GMPs (mainly cleaning, cleaning monitoring, maintenance, personal hygiene, pest control, training) Hand washing and shoe cleaning when entering low risk area.
Non-product	Maintenance workshop technical rooms dry waste room	Limited access, defined travel routes, shoe cleaning between non-food and low-risk area.

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

Fabrication of site, buildings and facilities observed to be suitable for intended purpose:

Walls	Observed to be in well maintained conditions (painted brick walls), no accumulation of dirt, condensation, or mould. Walls are included in the cleaning program.
Floors	Observed to be in well conditions (concrete), without cracks or evidence that does not resist process needs and observed in good cleaning conditions.
Drainage	There are no floor drains, since it is a dry plant, except of handwash facilities. Back flow prevention devices are installed under responsible under local utilities suppliers and waste services.
Ceilings and overheads	Maintained in good condition, included in the cleaning program. No suspended ceilings in the production area. Elevated walkways are well controlled.
Windows, roof glazing and ventilation	Observed to be in good condition. Windows which open to the outside are properly screened to prevent the ingress of pests. Glass near production areas was observed to be protected against breakage

	Mechanical ventilation system were installed. No condensation or excessive dust observed.
Doors	During the plant tour no gaps in openings to the outside area were observed. All openings were properly sealed, no gaps between walls and/or floor. Docking area doors were observed in good conditions, close fitting.
Lights	Light seems to be adequate for process needs. Where located in process areas were observed properly protected and shatter proofed. Inspection areas observed with adequate light for proper performance of their operations.

1 Minor in 4.4.8
Access/passage goods entrance:

Both rolling doors (outside and inside to production) were open at the same time.

4.5 Utilities – water, ice, air and other gases

Only potable water is used for few sanitation activities (mostly dry cleaning) and also personal hygiene. No water goes into product, Analysis of potable water of the public water main supply (Stadtwerke Reinfeld) was available.
The water distribution schematic diagram revised in February 2018 was used as a basis for water sampling. All water is potable. The microbiological and chemical analyses of drinking water from defined 2 taps are carried out according to risk analysis (every year by external accredited laboratory). SOP: “03-04-QS-60-SOP-Zapfstellenplan Wasserproben, Wesenberg”, 07-FEB-2020 v11.
Last external analyses of drinking water dated 28-JAN-2021 (2 spots, microbiology – TPC 22/36°C, coliforms, OK), performed by Limbach/CLL Lab (accredited to ISO 17025). Analysis from municipal water supplier (Stadtwerke Reinfeld/CLL) from April 15-OCT-2020 was reviewed. No issues were found. In addition, water is tested for Legionella.
The company uses compressed air to clean the lines (food contact surfaces), but no direct contact with product. Air filters in compressor (dust class 1, water class 4 according to ISO 8573-1) are installed and monitored and changed on a regular basis.
Testing sample schedule is in place and requires yearly microbiological tests conducted by external accredited lab (CLL Lübeck). Satisfactory results for pressurized air dated 09-JUN-2020 seen (frequency every 3 years).

Non-potable water is not used.
The organization doesn’t use CO_2 / N_2 for their production process.
No food contact steam is used.

4.6 Equipment

Food processing equipment observed to be industry standard. Key pieces of equipment include the blenders. Equipment is in general of appropriate design and to a good standard (not older than 5 years). Certificates, demonstrating the suitability for the intended purpose, are in place. The lines are made of stainless steel, containers and tubes are made from stainless steel, and certificates of conformity are available for plastic and rubber parts.
Equipment selection is based on suitability of materials (stainless steel, easy cleaning and performance).
Equipment in direct contact with food including blenders is food grade.
Certificate from external contractor sesotec for metal detector calibration, dated 11-JAN-2021.

4.7 Maintenance

The organization plans, tracks and record their maintenance program based on software. System has controls in place to provide corrective/preventive/deductive maintenance based on defined routines. Temporary repairs are controlled by maintenance department (usually not permitted). No such repairs were observed during the plant tour.
Example for maintenance activity: 06-JAN-2021, place where bags are turned on transport belt at W-1 line cause sometimes damaged bags.

Maintenance work is followed by documented hygiene clearance procedure “04-06-Instandhaltung-07-F Übergabeprotokoll nach Reparatur an Maschinen Produktion” 18-DEC-2013 (verified 01-AUG-2020) and hand over process to production is in place, evidence of compliance seen was signed form from technician and production leader.
There are two persons maintenance team members supported by contractors as appropriate.
Most maintenance work is given to contractors.

Start-up checks are completed by shift leader.
Food grade lubricants including allergen status were listed in file in maintenance department. E.g. Würth Mehrzweckfett III (NSF H1) and Caramba Silicon (NSF H2) used (for non-food contact). Location, identification and clear determination on where permissible for use were evaluated and considered to be satisfactory.

Engineering workshop does not exist, only a tool cart. Hygiene activities (same as for other contractors) are controlled and effective to control contamination into other areas.

During the audit were assessed maintenance routines for the following equipment:

Equipment	Routines verified	Period Reviewed	Comments
Air Filter	External company changes filters	6 months	12-DEC-2020
Compressor	External company	annually	05-FEB-2021
Bagger line W-2	Technical check and greasing	6 months	06-OCT-2020

4.8 Staff facilities

Suitable staff facilities are provided. Changing rooms are adequate for number of staff. Lockers allow for the segregation of personal items and production clothing. Clean and dirty production clothing are properly segregated.
Suitable handwashing facilities in place. Toilets are segregated. Adequate smoking facilities provided externally and include policies with respect to the use of electronic cigarettes.

A rest room is provided with appropriate stored and hygienic conditions including a fridge and a small kitchen allows to prepare/heat up food brought from employees.

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

4.9.1 Chemical control

Suppliers for the delivery of chemicals are managed by SOP 02-02-Lieferanten-11.1-P Rohwaren-zulassung CHEMICALS A14 from 20-MAR-2018 (checked 11-JAN-2021). Only approved chemicals can be purchased and used. All chemical containers were labelled properly as seen during the plant tour. The use of chemicals is reduced to employees being trained. Chemicals are locked.

Cleaning chemicals and lubricants are properly identified in the existing list of approved chemicals, properly contained and segregated with non-food grade chemicals in specified lockers located in the maintenance workshop.

Confirmation of suitability is conducted by product specifications, NSF H1 registration of other producer statements based on German legislation.

When in use chemicals are properly identified and employees are aware and trained on their proper use.

Safety Data Sheets are made available and used as part of existing training programs.

When strongly scented or taint forming materials are used procedures are in place to reduce risk of contamination.

1 Minor NC in 4.9.1.1
Pest control: SDS for toxic baits outdated (v3 2018). A newer SDS was available on the internet.

4.9.2 Metal control

The company has implemented a visual inspection after maintenance activities. In addition, metal detectors and a magnet are in use. A knife / sharp metal policy has been implemented (01-01-Politik-07-S Messerleitlinie 01-AUG-2020, v3). Knifes are stored at the entrance in a stainless-steel holder. Missing knifes can be identified immediately. Each knife is numbered.
Snap-off-blade knives were not observed and reported to be forbidden.

The policy also confirms that packaging/ingredients which use staples is not permitted. Policies are in place to avoid the use of staples, paper clips etc.

4.9.3 Glass, brittle plastic, ceramics and similar materials

Managed via 01-07-HACCP-33-SOP from 19-MAY-2020 v7 „Verhalten bei Glasbruch oder anderer Gegenstände“ (glass policy). Glass and brittle material are minimized to reduce the risk. A glass register (01-07-HACCP-15.1-S Monatl. Glas- und Hartplastikkontrollen ,05-JAN-2021, v5) is in place and checked on monthly basis. Daily checks are documented on form for monthly checks (temperature, glass, cleanliness, sharps, etc.). Reviewed for October, November and December 2020, as well as for January 2021. Found: scoop at W3 defect (15/16-DEC-2020), broom for hazard materials in bad shape (20-JAN-2021).
Instructions for staff clothing were included and breakages are recorded on incident form.

Glass and other transparent brittle materials have been excluded wherever possible from open product areas.

The glass and hard plastic register was up to date.

4.9.4 Products packed into glass or other brittle containers

N/A - The organization does not pack products in glass or brittle containers.

4.9.5 Wood

The use of wood is reduced to wooden pallets. No tools in use with wooden handles, or other equipment out of wood has been observed. A wood handling policy has been implemented: SOP 01-01-Politik-06-S Holzleitlinie 12-APR-2016 (checked 21-JAN-2021 - still current). No other wood was found during the plant tour.
Wood use was in pallets only and these were controlled by limiting their use to the ends of lines and warehouse areas only.

4.9.6 Other physical contaminants

When unpacking raw materials / ingredients care is taken to prevent cross contamination via unpacking in incoming goods area before bringing it into the warehouse.

Writing implements comply with the standard – pens are blue plastic and metal detectable.

4.10 Foreign-body detection and removal equipment

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

A documented assessment dated 29-NOV-2016 (big bags, checked 1-AUG-2020) for general processing lines has been carried out to identify the potential use of equipment to detect or remove foreign body contamination.

4.10.2 Filters and sieves

Sieves are located at inlet of blenders. The mesh/gauge is between 2 mm, 4 mm and 10 mm - adequate to reduce of further contamination. Sieves are inspected/tested daily based on available risk assessment. Records for traceability exercise and during the plant tour have been reviewed and found compliant.

4.10.3 Metal detectors and X-ray equipment

All materials are metal detected. Metal detectors include a belt stop system with an alarm where the product cannot be automatically rejected / in-line detectors which identify the location of the contaminant to allow effective segregation of the affected product. Rejected items are isolated in a secure location. Annual external maintenance certificate from 11-JAN-2021 reviewed. Validation of metal detector was initially performed on 27-FEB-2014 and annual verification, last time also on 11-JAN-2021.

Documented procedure 01-07-HACCP-10-1-SOP v2, 09-FEB-2021. Details controls for testing of the equipment including responsibilities, operating conditions including sensitivity; methods and frequency of checks and requirement to document the obtained results. Records for tests are documented in 01-07-HACCP-24-F.

Type and size of test pieces	Frequency of verifications	Method used	Action plans when failures in the equipment
Fe= 3.0 mm NonFe= 4.5 mm SS= 3.5 mm	At startup 10 AM 2 PM After end of production	Test pieces are placed in center of 25 kg sample bag. Bag is filled with sugar to simulate dry product.	Belt stop, all product on hold since last successful test, info to supervisor and QA for further decisions.

Test observed during site tour and conducted correctly. Metal detector has been challenged during the audit.

As super sacks cannot be detected, all material filled in super sacks is detected directly before filling.

4.10.4 Magnets

Rare earth magnet grid with 8800 Gauss strengths is installed at line W-1 for super sacks (“big bags”). No other magnets are in use. Magnet is monitored daily and is considered as a PRP #24.
Inspection of the magnets is conducted via external company on annual basis (check of strength). This is required to be done annual. Records reviewed on site provided details of test results. 01-07-HACCP-47-

SOP WI Magnet v1 from 6-DEC-2016 (verified 1-AUG-2020). Last check: 11-JAN-2021 (result: 9000-9500 G).

4.10.5 Optical sorting equipment

N/A - Optical sorting equipment is not used.

4.10.6 Container cleanliness – glass jars, cans and other rigid containers

N/A - Not in use at this facility.

4.11 Housekeeping and hygiene

A team of production clean the facility after end of production. Prestart checks and equipment cleanliness were verified during the audit. Site was maintained in appropriate level of cleanliness.
Dry ice cleaning is done by external contractor.
Written cleaning methods are in place, those for “03-02-Produktion-01-gesamt-30-SOP Reinigungspläne” from 11-JUN 2019 v14. (“Reinigungsplan Produktion”) were checked during the audit for 09-NOV-2020 and 29-OCT-2020.

Cleaning records are analysed, and trend analysis are available to instigate improvements where required.

Cleaning programs were validated by micro check results. Cleaning is verified by pre-start visual inspections. Records for W-1 and W-2 were reviewed during the plant tour for 2021 and for the traceability exercise. Out of specification results have been defined and the corrective action is described in the procedure.

1 Minor NC in 4.11.1
There were isolated minor cleaning deficiencies in production:
- Aspiration hoses
- Mixer paddle in drum W3
- Dust accumulation wall protrusion near spiral staircase W3

1 Minor NC in 4.11.6
Placement of brooms over and in contact with pre-weighed packaged raw materials in B1.

4.11.7 Cleaning in place (CIP)

N/A - No wet CIP cleaning in use. The company only uses cleaning dry sugar for pipes.

4.11.8 Environmental monitoring

The facility has developed a programme which requires air sampling on a quarterly basis but is mainly carried out on a monthly base report reviewed for October 2020 to January 2021 (Yeast <5, Mould <100, TPC<100).
Acceptable limits have been defined (TPC / Y&M up to 1000) and the procedure “01-07-HACCP-19-SOP Hygienemonitoring”, dated 08-JAN-2021 v19, requires that the following actions be taken when these limits are exceeded (retesting, cleaning).
Sewers (3) monitoring (annually, listeria, salmonella in 25g (limit negative)) and aspiration every 3 years.
The last review of the programme was triggered by lab department.

Swabs (2 x yearly + after dry ice cleaning), quarterly swabs (employees, equipment, restrooms).
After dry ice cleaning every 8 weeks – swabs before new start-up.

4.12 Waste

Waste was observed to be well managed. All waste is removed from production on a regular basis. External waste collection containers/rooms housing waste are well managed. Containers are properly covered.

Waste is removed by licensed contractor. Unsafe product or trademarked waste (only for one customer – trademark printed bags) is disposed of by AW-SH and records retained.

4.13 Management of surplus food and products for animal feed

N/A: No surplus food or food waste handled as animal feed. All leftovers are disposed as trash.

Note: The company has an official registration for production of animal feed (supplements, etc.), but – if produced at all (not within last 12 months) – it is sold as suitable for human consumption (food) to the feed producers.
The recipient is properly registered with the relevant local authority – listed in registration list from 22-MAR-2017.
No outlet/employee sale of products.

4.14 Pest management

The organization has a preventive control program in place to minimize risk of infestation which includes external service provided by HYGAN.

The following is a description of the existing program
Risk analysis for pest activity: 13-JAN-2021. Last pest controller inspections were performed on 06-JAN-2021 and 10-DEC-2020.

Contract or document that describe service	signed on 18/12/18 with Hygan PC
License or permit	Technician W., approved 8-MAY-1998 by IHK Kiel, valid without exp. date.
Pest covered	rodents, crawling and flying insects, moths
No. of routine visits	8 inside/outside rodents and additional 4 general visits per year
Station map	22-JAN-2020 which matches with existing numbered pest control devices.
Type of used pest control devices	Bait stations outside (tox), non-tox bait stations inside, pheromone traps for moth and crawling insects and UV fly killers with glue papers
In-depth pest control surveys	Quarterly trend analysis is planned. Last time done by specialist: AUG-2020
Controls in case of infestation	Separation and removal of affected material, immediately info to pest controller (reaction within 24 hours).

The organization has a list of approved pest control products used including MSDS. Bait stations are robust and secured in place. Toxic rodent baits are not used in open product areas. EFKs and pheromone traps are correctly sited.
Inspection reports provide details of the inspections conducted, if any activity is reported inside or outside the facility, recommendations are provided, and actions are taken over such recommendations.

Reports are assessed every month for trending which includes catch analysis. Existing information provide evidence to support that in the last 12 months there has not been infestation.
Interviewed employees understand the signs of pest activity and are aware of the steps to be followed to inform of pest activity to designated functions.

4.15 Storage facilities

Storage facilities observed to be satisfactory. Allergens segregated by storage location.

No temperature control, only monitoring. Materials shall be stored dry at ambient temperature. If reaching more than 25 °C (very rare in Northern Germany), temperature sensitive materials are moved to lower storage shelves.
Controlled atmosphere storage is not applicable.

Outside storage is not conducted.

Stock rotation is controlled by SAP IT System. Program was observed properly followed.

1 Minor NC in 4.15.1
5 pallets with big bag packaging material were delivered to the goods receiving department and accepted. The pallets are intended to be moved to the warehouse in the production area, although the pallets were clearly dirty on the outside.

4.16 Dispatch and transport

KaTech has no own trucks. Transport is done by transport service providers Bode (IFS logistics certified) and occasionally other transportation service logistics. All from KaTech selected external logistic companies are certified against IFS or BRC logistics. By customer ordered transport is under responsibility of the customer itself.

Dispatch observed to be satisfactory. Loads are inspected prior to dispatch which includes documented verification of seals, temperature, odours, visual conditions, debris, container conditions, and compatible materials.

Vehicles are checked prior to loading Checklist: 03-01-01-Warenausgang-01-F “Checkliste Warenausgang” (9-DEC-2020, v7) and SOP 03-01-01-Warenausgang-02-SOP “Warenausgang und Transport”, both from 19-MAR-2015 and SOP 03-01-01-Warenausgang-03-SOP “Rohwarenversand nach UK” dated 14-JUN-2017 (checked 1-AUG-2020).
No chilled transporters are used but signed agreement about the optimal temperature control (max. 20°C) during transport for emulsifiers. The transport company is IFS Logistics certified (also Spedition Bode). Delivery notes are stamped, and the stamp data fields filled in.

Traceability is ensured by SAP IT system and manual records. Records were available for traceability exercise.
Vehicles are provided by third party contractors.

Containers are not required to control temperature.

The documented procedures for transportation include restrictions in the loads, security measures during transit, and instructions on case of breakdowns or accidents.

Approved third party contractors are BRC S&D / IFS / GFSI certified or meet requirements which are described in contracts. Examples seen include Spedition Bode (IFS Logistics, exp. date 28-DEC-2021).

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.3.5	No temporary structures.
4.4.5	No suspended ceilings in the production area.
4.7.6	No workshop
4.8.8	No catering facilities are available on-site.
4.9.4	No products are put into glass or brittle containers.
4.10.5	No optical sorting equipment in use.
4.10.6	No brittle material containers in use which need a specific cleaning.
4.11.7	No CIP cleaning in use.
4.13	No surplus food or food waste used as animal feed is handled. All left overs are disposed as trash.
4.14.3	No own pest control activities by the company performed.
4.15.4	No controlled atmosphere storage used.
4.15.5	There is no outside storage.
4.16.3	All finished goods are ambient stable.

5. Product control

5.1 Product design/development

Product development and design procedure is in place (02-03-Produktentwicklung-01-P-Ablauf Produktentwicklung), dated v5, 6-DEC-2018 (still current).
Procedure is applicable for new, modified products and includes HACCP review and production trials. Org. chart for R&D department M-01-02 shows the structure. Software Module PWM controls process and generates a R&D project number. All raw materials will be entered into the database. Only these materials are used for R&D.
Shelf life tests are conducted following documented protocols which demonstrates compliance with relevant microbiological, chemical and organoleptic criteria.

About 500 Projects were handled in 2020. Reviewed: project 2715 – stabilizer system for block cheese. Date of first trial 11-JAN-2021. Project S6147, test production of 25 kg on 18-JAN-2021 and finalized 19-JAN-2021.
Excel spreadsheet in “special requirement customer” with customer requirements defines specific additional requirements. Recipe software creates declaration.

Further documentation:
Pilot plant food safety plan 02-03-01 from 7-JAN-2020.
Flow chart R&D, 05-APR-2019, v1.
02-03-Produktentwicklung-03-SOP, dated 13-FEB-2020, v5
Customer and Supplier processes – product conformity R&D

5.2 Product labelling

The company ensures that labels are legal for the country defined in specifications and guaranteed to customer. Standard is guarantee for European Union. For other countries, a special agreement is required, Process is followed also in case of changes to recipe, raw materials (material, supplier or country of origin); legislation. Procedure 03-02-01-Produktion gesamt-05.1-P Bereitstellung und Kennzeichnung von Primärverpackungen v3 from 1-FEB-2019. 03-02-01-Produktion-08-SOP includes also creation and approval of labels. Labels are created by R&D and Quality Management. A software is used to support labeling process. Quality creates labeling.

Evidence seen during the audit included product S1120.

The organization confirms the in cases where the label information is the responsibility of their customer or a third party, they are responsible to provide the required information to maintain accuracy and adequacy.

5.3 Management of allergens

The company has an allergen control procedure 01-07-HACCP-16.1-SOP “Allergen management” in place 14-FEB-2020 v9 (checked 6-JAN-2021) which includes assessment of raw materials to establish the presence and likelihood of contamination by allergens.

A list of allergens containing raw materials, processing aids, intermediate and finished products is held in general HACCP plan dated 7-OCT-2020 v11. Allergens on site and in some products are milk, egg and sulphites.

A risk assessment dated in OCT-2020 has been conducted to identify routes of contamination. It has been reviewed during the HACCP verification.

Allergen rework is controlled by closed packaging (bags) and like to like addition to avoid cross contamination.

Even though an allergen control procedure is in place and production is separated as best as possible, based on risk assessment for dry powder production, warnings signs for allergens are in place on labelling as appropriate.

No claims made regarding suitability of a food for allergy or food sensitivity.

Cleaning methods have been validated:

Allergen	Protein Specific Swab / Finished Product Testing etc	Date
Milk	Cleaning validation for Casein (<1 ppm) performed by accredited labs.	02+05+09-OCT-2017
Egg	Cleaning validation for egg (<0,31 ppm) performed by accredited labs.	02+05+09-OCT-2017
Sulphite	Sulphites in finished product (below 10 ppm in product mix)	N/A

Records for checks reviewed:
Milk: S6080 W-2, 0.2 ppm, week 52/2020, lab result 04-JAN-2021
Egg: S5407, W060820-1, < 0.5 ppm, 13-AUG-2020

Line start up checks are in place for product change over and changes in batches of packaging to ensure labels applied are correct for products packed. Records for 6-MAR and 7-MAR-2019 were checked.

Validation allergens after lines movements. None during the last 3 years.

5.4 Product authenticity, claims and chain of custody

Company have access information on risks of adulteration or substitution of raw materials via trade associations, government sources and private resource centres.
A vulnerability risk assessment dated FEB-2021 v12 in an Excel spreadsheet was made available to assess the potential of adulteration or substitution. Each food raw material has been assessed according to historical evidence, emerging concerns, economic factors, geographical origin, nature, availability and sophistication of routine testing. Due to the assessment the organization identified certain raw materials as being affected. Controls are in place include check of every delivery (papers) and monitoring databases (e.g. RSPO).

Product claims are in place. The status of each batch of raw materials is verified by lab (COA vs. list or database) and records maintained. Evidence of Halal/Organic/RSPO/free range egg (there is only a specification of egg powder stating it is “free range egg”. Free range egg is not labelled, but sometimes defined in specs) were demonstrated.

The organization provided copy of the documented process flow “01-02-Verantwortlichkeiten-32-S Zuständigkeiten RSPO Prozesse” 10-APR-2017 (verified 1-AUG-2020) for production of products with claims which identify potential areas for contamination or loss of identity identified and controls established. SOPs also for other claims exist (Halal, VLOG).

These claims are labelled onto finished products: Halal, RSPO, VLOG, Organic. The last traceability exercise to confirm this status was conducted on 21-OCT-2020 with satisfactory results, these are conducted every 6 months.

Tests:
Product S2750, 05-JUN-2020, Halal, MB: 100% (incl. traceability up (S2750) and down (A12076))
HALAL certificate: exp. 31-AUG-2021
Kosher Certificate: exp. 30-NOV-2021

British Protein, S358, 17-JUN-2020 (2 hours)
Red Tractor Certificate, exp. 31-MAR-2021.

5.5 Product packaging

Purchasing of food contact packaging includes the need to provide particular characteristics of the food to ensure the provided material is suitable for the intended use. Evidence seen during the audit included certificate of conformance (15-NOV-2019) for “Big Bags” (super sacks) plastic.

Obsolete packaging is managed via procedure label control, because paper bags and super sacks are having no already printed design and are all labelled individually with printed stickers.

Bags / liners for work in progress were robust and coloured (in liner in bag is blue).

1 Minor in 5.5 (SOI)
Primary packing material (sewing thread and crepe paper) stored in supply cabinet along with cleaning equipment (vacuum cleaner brushes/nozzles).

5.6 Product inspection and laboratory testing

5.6.1 Product inspection and testing

Test critical to confirm product safety, legality and quality are performed by organization (physical properties) / external laboratories (microbiology and some specific chemical parameters).

Tests include TPC, yeast & moulds, salmonella, E.coli, Enterococcus. The regime does properly consider risk. Results are recorded and reviewed regularly to identify trends.

Test results are compared against product specifications or acceptability criteria to identify compliance and relevance of reported determinations, when deviations are identified the organization treat product as non-conformity/re-evaluate test results before actions are taken.

Results for product S1120, produced on 09-NOV-2020, seen during audit.

5.6.2 Laboratory testing

Laboratory testing (chemical and physical tests) is carried out by in-house laboratory and externally (microbiology). External labs are accredited to ISO 17025, e.g. / external accredited laboratory CL Lab, for which the scope of services matches the tests conducted.

The reliability of in-house laboratory results includes recognized documented test methods, qualification of laboratory staff, and implementation of ring/proficiency tests, inclusion of laboratory equipment in calibration and maintenance programs.

A schedule of testing is in place; satisfactory results were seen for:

Test	Frequency
TPC	every batch
Viscosity	every batch
Sensory check	every batch

5.7 Product release

Product is released based on SAP based analysis plan (S 1120, last change on 29-SEP-2020) which demonstrate criteria have been met. Product release is conducted by QA based on lab results. For some products, a documented waiver with the customer exist.
Blocked material seen in warehouse: raw material Gelar Gum from China with metal dust inside. Not food safety hazard, but quality issue. Not disposed yet due to going-on complaint process. All blocked items are blocked in the IT system and are labeled with an on-hold sign.

5.8 Pet Food

Note: The company has an official registration for production of animal feed / pet food (supplements, etc.), but – if produced at all (not within last 12 months) – it is sold as suitable for human consumption (food) to the feed producers.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
5.2.3	No nutritional claim.
5.2.4	Labelling is within the responsibilities of the company.
5.2.5	No cooking instruction.
5.3.6	No “may contain” statements used.
5.3.7	No claims made in terms of allergens or sensitizing ingredients.
5.8	No pet food

6. Process control

6.1 Control of operations

Process observed to be well controlled.
Documented process specifications / work instructions are available for key processes in production.
Process specifications were assessed during the audit as well as part of the traceability study. Documents reviewed demonstrated that process specifications meet final product specifications.

Key process monitoring includes time, chemical and physical properties which are controlled by manual.
Records seen for product S1120 for week 09-NOV-2020.

Process conditions are not linked to critical safety (CCP) or quality parameters of the product. Process controls for 3 CPs are installed (check of raw materials, suitability of primary packaging, hygiene monitoring).

Metal detector check seen for week 09-NOV-2020 (all OK), signed on Friday after by head of production.
Also records for 12-FEB-2021 were checked and found to be OK.

Equipment failure is covered by non-conformance procedure. Access to key pieces of equipment such as blenders is controlled via spare part list.

6.2 Labelling and pack control

The company ensures that the correct labelling / packaging is available online by specifically prepared labels for production run and removal of old labels from production area after end of each production run.

Only the labels / packaging for the current product is available for use at the line.

Documented checks are conducted at the beginning, during and at the end of production. Records for S1120 at line W1 9-13 NOV 2021 seen during the audit.
Satisfactory control of a product changeover from product S5549 to S3945 at line W1 observed during the audit (changeover with cleaning sugar in system in between).

Online vision systems are not used.

6.3 Quantity, weight, volume and number control

Manual weighing of each pack by officially calibrated scales. Every bag is checked regarding quantity by production employees. There are 5 additional checks performed by lab. The frequency of quantity check meets the legal requirements. The scale PM PRO 23 was calibrated 19-OCT-2020, valid for one year (external calibration service).

Selected method meets legal and customer requirements.

Scales are managed by lab and technical department.

1 Minor NC in 6.3.1
The process of bagging is done by hand into paper bags (mostly 20-25 kg). Each bag is weighed individually and sealed only after reaching the minimum filling quantity. Random individual recording of additional weighing checks is carried out monthly. There is no written justification that this sample size satisfies statistical principles.

6.4 Calibration and control of measuring and monitoring devices

A list of equipment requiring calibration is held in the lab. List measure devices 22-OCT-2020 v24, 02-03-03-20.0-F reviewed.

Equipment used to monitor CCP's, product safety or legality includes:

Item	Frequency	Valid until
Scale line (PRO-023) 60 kg production	Every 2 years externally for legal reasons, and also internally checks are done	official calibration, gov. calibration certificate done 19-OCT-2020 valid until 31-DEC-2022.
Weights, 2 kg, 5kg, 10 kg, 20 kg – 2kg weight QS104	annually	OCT-2021
Metal Detector	annually	11-JAN-2021 +1 year contractor already scheduled for new check

Viscosimeter (lab) 5000 S/N 8556835	Annually, external – internal monthly	OCT-2021 (ext.) Internal last checked done 19-JAN-2021 +1year
Thermometer QS-006	annually	done 12-JAN-2021 +1 year

Reference equipment is stored in the lab (weights and metal detector test pieces).
Procedures for control of out of specification equipment are available which include documentation of actions taken.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
6.1.2	No equipment settings are critical to the safety or legality of the product
6.1.3	No specific Process monitoring, such as of temperature, time, pressure and chemical properties is implemented
6.1.4	No process parameters or product quality are controlled by in-line monitoring devices.
6.1.5	No critical processing conditions identified.
6.2.4	No online verification equipment in use.
6.3.3	No online check weigher

7. Personnel

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

Relevant personnel, including agency-supplied staff, temporary staff and contractors are trained prior to commencing work. New employees are supervised for 60 days to evaluate adherence and compliance to defined rules.

Employees engaged in activities relating to critical control points are assessed for competency and training requirements. Records for hygiene training including, labelling, CCP controls and other topics have been reviewed. Labelling controls are trained out via classroom training.

Training records assessed provide the name of the trainer, confirmation of attendance, date and duration, title of the course, results of training effectiveness. Training is provided in a language that is understood by employees – German.

During the audit the training and competency requirements were assessed for Shift Leader position which demonstrate compliance with the program requirements and expectations.

Hygiene training (including: GMO, allergens, vegan, CCPs, labelling)

Topic	Date	Frequency
General hygiene, CCPs	different days 02/03/11-02-2021	classroom training

1 Minor in 7.1.3
The company's defined performance review for staff training was not documented for all training (02/02/2021, 03/02/2021, 11/02/2021).

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

Personal hygiene rules are documented in (E.g. 04-02-Personalhygiene-01-SOP-hygiene rules for employees, 26-MAY-2020 and 04-02-Personalhygiene-05-SOP-rules for visitors, 23-MAR-2017, verified 01-AUG-2020) and compliance is checked during the plant tour and during site inspections. During the audit these were observed to be properly followed.

Hand cleaning observed to be performed appropriately.

Blue metal detectable plasters are used; a sample of each batch of plasters is checked through metal detectors recorded for each batch. Where appropriate in addition to the plaster, a glove is worn.

Use and storage of medicines are described in hygiene and visitor rules. Use of medicine is in production area not permitted.

7.3 Medical screening

Employees are made aware of and know who to notify in the case of symptoms of infection, disease or condition which would prevent a person working with open food until a doctor gives re-approval.

Visitors and contractors are aware of conditions that prevents visiting areas with open food by visitor rules and require them to inform the organization if suffers of any identified conditions according to German IfSG law by questionnaire and verbally.

Procedure 04-02-Personalhygiene-06-SOP “Vorgehen bei Infektionskrankheiten” from 18-FEB-2019 v2 describe actions to be taken in case of been in contact with an infectious disease.

7.4 Protective clothing: employees or visitors to production areas

For production areas protective white clothing is put by the company at personnel’s disposal.
Rules regarding the wearing and changing of protective clothing are described in the general hygiene instructions.
Protective clothing includes trousers, T-Shirts, smocks and 12 sets in white (daily change) and 8 sets in grey (for “free from”) are provided.
Every employee has enough clothing to change if necessary. Segregation of clean and dirty clothing takes place (separated lockers for protective clothing and private clothing).
Dirty clothing is collected separately and washed by an approved external laundering service certified to EN 14065 Standard for food industry laundry (DBL Wulff, Kiel), exp. date 17-OCT-2023. There is no home laundry at all. Disposable hairnets and snoods were used. White level 2 safety shoes have to be worn at all production and storage areas. Gloves are partly used for finished products at packing process and they are regularly replaced and controlled (procedure in glove plan – change after every third batch). They are suitable for food contact.
The use of protective clothing is defined and documented in the glove risk assessment dated 7-SEP-2017, v2 (verified 01-AUG-2020).

Gloves are controlled by visual inspections and defined change frequency. Work safety gloves are disposed if worn out or dirty.

1 Minor NC in 7.4.1
Shuttle service employee in/out without hair net and shoe covers.
One employee wore his hair net in the goods receiving area in such a way that not all hair was covered.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
7.4.6	There is no PPE which is not suitable for laundering

Template control	Food	Version	1.0

8. 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
N/A – no high risk or high care areas in the plant.
8.2 Building fabric in high-risk and high-care zones
N/A – no high risk or high care areas in the plant.
8.3 Maintenance in high-risk and high-care zones
N/A – no high risk or high care areas in the plant.
8.4 Staff facilities for high-risk and high-care zones
N/A – no high risk or high care areas in the plant.
8.5 Housekeeping and hygiene in the high-risk high-care zones
N/A – no high risk or high care areas in the plant.
8.6 Waste/Waste disposal in high risk, high care zones
N/A – no high risk or high care areas in the plant.

8.7 Protective clothing in the high-risk high-care zones
N/A – no high risk or high care areas in the plant.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
8	N/A – no high risk or high care areas in the plant.