



# Audit Report

### Standard - Global Standard for Storage and Distribution Issue 2: September 2010

Audit Result:CERTIFICATEDAudit Frequency18 months

| Company Details                      |                   |  |  |  |
|--------------------------------------|-------------------|--|--|--|
| BRC Site Code : 9884029              |                   |  |  |  |
| Company Name : Distrifresh B.V.      |                   |  |  |  |
| Site Name : Distrifresh B.V.         |                   |  |  |  |
| Address: Van Salmstraat 64, BOXTEL   |                   |  |  |  |
| Country : The Netherlands            | Postcode: 5281 RS |  |  |  |
| Telephone : xxxxx                    | Fax : xxxxx       |  |  |  |
| Company Representative Name : xxxxxx |                   |  |  |  |
| Email : xxxxxxx                      |                   |  |  |  |

| Additional | locations included |
|------------|--------------------|
| Address :  | None               |
|            |                    |

| Certification Body Details                              |   |  |  |
|---|---|--|--|
| Name of Certification Body : LRQA Ltd                   |   |  |  |
| Auditor Number<br>(only one – team<br>leader)<br>108100 | Auditor Names<br>xxxxxx (NL)<br>xxxxxx (NL) AUT |  |  |

| LRQA Ltd, Hiramford Middlemarch Business Park, Siskin Drive Coventry, CV3 4FJ |              |                            |                     |
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# Audit Report

| Audit Start Date:       | 2013-10-02  | Audit Finish Date:          | 2013-10-03         |  |  |  |
|-------------------------|---|-----------------------------|--------------------|--|--|--|
| Re-audit Due Date :     | 2015-04-17  | Previous Audit Date:        | 2012-04-16         |  |  |  |
| Scope Details           |   |                             |                    |  |  |  |
| Activities :            | Activities :<br>01 - Storage<br>06 - Contracted Services Contract Packing<br>Select an activity<br>Select an activity |                             |                    |  |  |  |
| Product Categories      | StorageDistribu   | ition                       |                    |  |  |  |
| 01 - Chilled and Frozen | Food  |                             |                    |  |  |  |
| Select a product catego | ry  |                             |                    |  |  |  |
| Select a product catego | ry  |                             |                    |  |  |  |
| Select a product catego | ry  |                             |                    |  |  |  |
| Scope of Audit Coole    | d storage, order  | picking and labelling of pr | e-packed, meat and |  |  |  |

other food products

Exclusions from Scope None

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| Key Personnel  |                    |                    |                     |                    |
|--|--------------------|--------------------|---------------------|--------------------|
| Name/Job Title   |                    | Present a          | t Audit (x)         | )                  |
| Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref: clause 1.1.8 | Opening<br>Meeting | Site<br>Inspection | Procedure<br>Review | Closing<br>Meeting |
| – Site Manager   | x                  | x                  |                     | x                  |
| - (central) QA Manager   | х                  | x                  | x                   | х                  |
| – QA Manager retail NL   | х                  | x                  | x                   | х                  |
| - Manager Operations   |                    | x                  | x                   |                    |
| – Head TD  |                    | x                  |                     |                    |
| – Facilities manager   |                    | x                  |                     |                    |
| – Human resource rep.  |                    | x                  |                     |                    |
| – Assistant supervisor   |                    | x                  |                     |                    |
| - Operator   |                    | x                  |                     |                    |

### **Company Profile**

Distrifresh B.V. started in 2007, located at this site in Boxtel, as part of the Vion Group.

Distrifesh is specialized in storage, transfer, order picking and labelling of pre packed food products, all temperature controlled. Activities are 90% exclusively for the Vion products and partly for other retailers. Distribution is outsourced, under responsibility of the Vion Group.

There are (FTE) employees working in 1-3 shifts. During a day shift about FTE employees, in addition with temporary employees.

Storage/operations facilities 13.000m2 and 1600 m2 for storage of crates.

Data:

- turnover at intake: xxxxx

- labelled colli: xxxxxx

- dispatch: xxxxxx

Condition of the building/last re-equipment/rebuilding:

Site built about 40 years ago, in general suitably finished, no re-building in recent years. labelling equipment installed 5 years ago. Recently the cooling equipment is revised. New equipment was installed in 2012 for site security; cameras, barrier for the plant and secured entrance with batch logging.

The company has been certified for ISO 9001:2008; multisite via Vion. Beside NVWA legal registration (EG 607), SKAL, further no other recognitions or certificates.

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## **Audit Report**

### **Audit Duration Details**

Total site a audit duration 12 man hours

Time auditing the site and vehicles 6 man hours

**Reasons for deviation from typical or expected total audit duration** None

| Audit Duration per day |            |             |  |  |
|------------------------|------------|-------------|--|--|
|                        | Start time | Finish time |  |  |
| Day 1                  | 9.00       | 17.00       |  |  |
| Day 2                  | 9.00       | 13.00       |  |  |

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## Audit Report NON-CONFORMITY SUMMARY SHEET

## **List of Non Conformities**

### Critical

| No. | Requirement ref. | Detail of Non-Conformity | Corrective action taken | Revisit date |
|-----|------------------|--------------------------|-------------------------|--------------|
|     |                  |                          |                         |              |

### Major

| No. | Requirement<br>ref. | Detail of Non-Conformity | <ul> <li>(Direct) Corrective action<br/>taken</li> <li>Root cause</li> <li>Corrective actions to prevent<br/>reoccurrence</li> <li>Proposed action plan including<br/>(planned) verification</li> </ul> | Evidence<br>provided<br>Document<br>Photograph<br>Visit/Other | Reviewed<br>by |
|-----|---------------------|--------------------------|---|---|----------------|
|     |                     |                          |   |   |                |

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### Minor

| No | Requirement<br>ref. | Detail of Non-<br>Conformity  | <ul> <li>(Direct) Corrective action taken</li> <li>Root cause</li> <li>Corrective actions to prevent reoccurrence</li> <li>Proposed action plan including (planned) verification</li> </ul>  | Evidence provided<br>Document<br>Photograph<br>Visit/Other   | Reviewed<br>by |
|----|---------------------|---|--|--|----------------|
| 1  | 2.7                 | Physical damage is<br>a potential<br>hazards associated<br>with the process<br>flow steps but not<br>addressed<br>adequately in the<br>risk analysis. | <ul> <li>Corrective action: The risk physical damage<br/>'Breuk' is added the risk analyses (=<br/>'procesbeheersplan', appendix 1a).</li> <li>Root cause: wrong interpretation of the BRC S&amp;D<br/>standard. With physical damage there is a<br/>possibility of physical or microbiological<br/>contamination, these risks are part of the risk<br/>analyses. In the daily routine broken packages are<br/>always removed as CAT 3.</li> <li>Corrective actions to prevent reoccurrence:<br/>The CP 'Breuk' is added on the weekly check of all<br/>the CP's (appendix 1b). The person who performs<br/>the CP check, had a reinstruction on October 7<sup>th</sup></li> </ul> | Appendix 1a:<br>Procesbeheersplan<br>Appendix 1b: monitoring<br>CP's<br>Appendix 1c: reinstruction |                |
| 2  | 3.2.3               | No record was<br>demonstrable for<br>the verification of<br>the minor   | <ul> <li>(appendix 1c).</li> <li>Proposed action plan including (planned)<br/>verification: Every 2 month there is a verification<br/>of the monitoring.</li> <li>Corrective action: The auditor has amend the<br/>audit report (appendix 2a).</li> <li>Root cause: the auditor did check the status of<br/>the minor but in the auditor meant he had the former</li> </ul>  | monitoring CP's<br>Appendix 2a: aanvullende<br>rapportage interne audit                            |                |
|    |                     | nonconformity<br>that arose during  | the minor, but in the audit report he had the focus<br>on BRC S&D and the open majors, and therefore   |  |                |

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|                      |   | This new set also live at his new new days and in most with sort t |                 |  |  |  |

| he 2012 internal   | forgot to report the status of the open minor.    |  |   |
|--------------------|---|--|---|
| udit.              |   |  |   |
|                    | Corrective actions to prevent reoccurrence:       |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    | or the open minors before the next internal addit |  |   |
|                    | Dronocod action plan including (planned)          |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    | · · · · ·   |  |   |
|                    |   |  |   |
|                    |   |  |   |
| emonstrate         | made for every function a competence matrix       | matrix   |   |
| ppropriate and     | (appendix 3a).                                    |  |   |
| ffective training  |   |  |   |
| or A.V. (assistant | Root cause: the competences of the employees is   |  |   |
| -                  |   |  |   |
|                    |   |  |   |
|                    |   |  |   |
| emonstrated.       | Corrective actions to prevent reoccurrence        | Appendix 3h: Procedure   |   |
|                    |   |  |   |
|                    | •   |  |   |
|                    |   | medewerkers  |   |
|                    | (appendix sb).                                    |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    |   |  |   |
|                    | and amend the matrix when necessary.              |  |   |
|                    | ecords that<br>emonstrate<br>ppropriate and       | udit.Corrective actions to prevent reoccurrence:<br>To prevent the missing report of open minors, the<br>group quality manager is asked to check the status<br>of the open minors before the next internal auditProposed action plan including (planned)<br>verification: on November 18 <sup>th</sup> will come to<br>Distrifresh to check the status of the open minors<br>(appendix 2b).ecords that<br> | udit.Corrective actions to prevent reoccurrence:<br>To prevent the missing report of open minors, the<br>group quality manager is asked to check the status<br>of the open minors before the next internal auditProposed action plan including (planned)<br>verification: on November 18 <sup>th</sup> will come to<br>Distrifresh to check the status of the open minors<br>(appendix 2b).Appendix 3a: Competentie<br>matrixecords that<br>emonstrate<br>ppropriate and<br>ffective training<br>or A.V. (assistant<br>apervisor) could<br>ot be<br>emonstrated.Corrective action: the HR officer and managers<br>made for every function a competence matrix<br>(appendix 3a).Appendix 3a: Competentie<br>matrixRoot cause: the competences of the employees is<br>daily assessed by its manager, but not formally<br>written down.Appendix 3b: Procedure<br>Competenties<br>matrixCorrective actions to prevent reoccurrence:<br>In procedure P-DSF-NL-10074 is described how to<br>keep the matrix correct, for existing and new staff<br>(appendix 3b).Appendix 3b: Procedure<br>Competenties<br>medewerkersProposed action plan including (planned)<br>verification: every 6 weeks the HR officer and the<br>managers assess the competence of all employeesAppendix 3b: |

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# **Audit Report**

### **Storage and Distribution**

### 1. Senior Management Commitment

### Summary

In the opening meeting the Site Manager (Management representative) shows commitment to the implementation of BRC S&D.

In the written policy (December 2010, still actual according to the MR) there is evidence that human and financial resources are budgeted.

Several indicators about process or f.e. delivery performance has been monitored. The objectives are clear, measurable and documented.

The management review was carried out annually; July 2013, over period July 2012- June 2013, according to the relevant subjects, used for evaluation of the (HACCP) plan and system.

Communication lines are described in an overview, related to all relevant departments, including Management. In HACCP-team meetings results from f.e. hygiene and internal audits are communicated to the staff.

There is an English original copy of the Standard present.

The Site Manager Operations was present at the opening and closing meeting during this certification.

The organisation structure (from July '13) including job names and responsibilities are documented as part of the system.

### No NCs raised in this section.

| 1.1   | Y | 1.1.3 | Y | Y | 1.1.6 | Y | 1.1.9 | Y | 1.2.2 | Y |
|-------|---|-------|---|---|-------|---|-------|---|-------|---|
| 1.1.1 | Y | 1.1.4 | Y | Y | 1.1.7 | Y | 1.2.0 | Y | 1.2.3 | Y |
| 1.1.2 | Y | 1.1.5 | Y | Y | 1.1.8 | Y | 1.2.1 | Y | 1.2.4 | Y |

N/A Clauses

| <u>No.</u> | Justification |
|------------|---------------|
| -          | -             |

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### 2. Hazard and Risk Analysis

### <u>Summary</u>

A fully implemented system, committed by senior management, carried out by a multidisciplinary team, led by the Plant Manager, is documented, as a result of the risk analysis, based on the principles of the Codex A. Used was legislation, hygiene codes and branch information. A pre- requisite programme has been defined as part of the hazard analysis, corresponding to the pre-requisites in practice.

Further a hazard analyses (based on the central Vion system) per process step, from intake, storage till dispatch; for physical, chemical, microbiological and allergens were mentioned and judged. Physical damage is a potential hazards associated with the process flow steps and not addressed adequately in the risk analysis (NC).

Control by several prerequisites (f.e. cleaning, maintenance, pest control).

One CCP was determined as a result of the carried out risk analysis, controlled in practice according to limits according to legislation.

CCP; temperature products at intake (limits depending on the kind of product; 2-7°C)

Part of validation is a review of the hazard and risk analysis in case of new product types.

The system has been reviewed annually according to schedule and part of the M/R.; last records from July 2013. No new products required adaption of the R.A.

### **1** MinorNC raised in this section.

| 2.0 | Y | 2.3 | Y | 2.6 | Y | 2.9  | Y | 2.12 | Y |
|-----|---|-----|---|-----|---|------|---|------|---|
| 2.1 | Y | 2.4 | Y | 2.7 | Ν | 2.10 | Y | 2.13 | Y |
| 2.2 | Y | 2.5 | Y | 2.8 | Y | 2.11 | Y |      |   |

N/A Clauses

| No. | Justification |
|-----|---------------|
| -   |               |

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### 3. Quality Management System

<u>Summary</u>

A complete management system has been documented, available for the staff. Partly central organized procedures, in addition with local procedures/working instructions. All documented in the system xxxxx. Documents are effectively controlled. Reasons for changes are adequately recorded. Document are evaluated on a yearly bases resulting in a new document version. Internal audits are performed once a year and carried out by trained auditors (Lead assessors). Report seen of audit 2013-9-19. Records are kept about conformity, actions for non-conformity are carried out. In addition inspections were carried out for hygiene/premises.

Non conformities were raised and adequately rated. Monitoring was seen in action lists. Verification is performed conform planning for major NC's. Minor NC's are verified the next audit. This was not demonstrable for the minor NC raised in 2012 (NC).

Customer requirements (mainly labelling/logistic items) are defined under responsibility of Business Development and implemented in working practices and the WMS system, under responsibility of the Manager Operation. Delivery performance/just in time/complaints are monitored related to customer satisfaction.

Purchase; the methods and frequency of assessment of supplied services has been defined and carried out. Approvals were carried out for f.e. distribution, pest control, housekeeping of offices washing clothes and maintenance.

A tracing system has been in place, to trace products from intake, storage till dispatch. The system is based on bar codes at intake and own bar codes of the Distrifresh system till best before date at labelling. A recall test was carried out 2013-09-25 and a traceability test on 2013-9-23. During the audit was tested; "articles on position 082-1 (Cordon blue)". A fast tracing (forwards/backwards was possible with system/records.)

Incident management/business continuity; several measures could be explained and are partly described, regarding to incident management. A detailed guidance ("draaiboek") is present. Non-conforming product/damages/returns are stored according to a documented procedure, in a separated marked area.

The complaint procedure was explained (Focussed on AKL99136363). No food safety items were registered. Complaints are actively used in discussions in meetings for improvement. **1 MinorNC raised in this section.** 

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| 3.1.1   | Y | 3.2.3 | Ν | 3.5.1.1 | Y | 3.7   | Y | 3.9.2  | Y |
|---------|---|-------|---|---------|---|-------|---|--------|---|
| 3.1.2   | Y | 3.2.4 | Y | 3.5.1.2 | Y | 3.7.1 | Y | 3.9.3  | Y |
| 3.1.2.1 | Y | 3.3   | Y | 3.5.2   | Y | 3.7.2 | Y | 3.9.4  | Y |
| 3.1.2.2 | Y | 3.3.1 | Y | 3.5.2.1 | Y | 3.7.3 | Y | 3.9.5  | Y |
| 3.1.2.3 | Y | 3.3.2 | Y | 3.5.2.2 | Y | 3.8   | Y | 3.10   | Y |
| 3.1.2.4 | Y | 3.4   | Y | 3.5.2.3 | Y | 3.8.1 | Y | 3.10.1 | Y |
| 3.1.3   | Y | 3.4.1 | Y | 3.5.2.4 | Y | 3.8.2 | Y | 3.10.2 | Y |
| 3.1.3.1 | Y | 3.4.2 | Y | 3.6     | Y | 3.8.3 | Y | 3.10.3 | Y |
| 3.1.3.2 | Y | 3.4.3 | Y | 3.6.1   | Y | 3.8.4 | Y |        |   |
| 3.2     | Y | 3.4.4 | Y | 3.6.2   | Y | 3.8.5 | Y |        |   |
| 3.2.1   | Y | 3.5   | Y | 3.6.3   | Y | 3.9   | Y |        |   |
| 3.2.2   | Y | 3.5.1 | Y | 3.6.4   | Y | 3.9.1 | Y |        |   |

#### N/A Clauses

Г

| <u>No.</u> | Justification |
|------------|---------------|
| -          | -             |

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### 4. Site and Building Standards

<u>Summary</u>

Suitable located, rather large building and well equipped; make a logical and safe way of processing possible. No influence from the industrial surroundings. Site security; risks are identified; a system for reporting is available. Site security is mentioned in the company rules, training of staff regarding to site security was explained.

Facilities for site security are installed in 2012; barriers, closed doors, reception and batch logging.

Suitable design and lay out in the process from intake, storage, order picking and transfer/dispatch. No items regarding to (possible) contamination also due to the pre packed products.

Suitable battery charging areas, storage of chemicals. Closed dock levellers are present. Well designed, constructed and maintained areas/storage facilities; walls, floors ceilings. Tap water for supplies, adequate protected lightning, protected glass.

Monitoring carried out by QA/Operations, followed by actions discussed in meetings. Sufficient suitable staff facilities are present. Suitable hand washing facilities, although no loose food has been handled.

Separated, suitable catering facilities are present.

### No NCs raised in this section.

| 4.1   | Y | 4.2.2 | Y | 4.3.6 | NA | 4.4.6  | Y | 4.5.2 | Y |
|-------|---|-------|---|-------|----|--------|---|-------|---|
| 4.1.1 | Y | 4.2.3 | Y | 4.3.7 | Y  | 4.4.7  | Y | 4.5.3 | Y |
| 4.1.2 | Y | 4.3   | Y | 4.4   | Y  | 4.4.8  | Y | 4.5.4 | Y |
| 4.1.3 | Y | 4.3.1 | Y | 4.4.1 | Y  | 4.4.9  | Y | 4.5.5 | Y |
| 4.1.4 | Y | 4.3.2 | Y | 4.4.2 | Y  | 4.4.10 | Y |       |   |
| 4.1.5 | Y | 4.3.3 | Y | 4.4.3 | NA | 4.4.11 | Y |       |   |
| 4.2   | Y | 4.3.4 | Y | 4.4.4 | Y  | 4.5    | Y |       |   |
| 4.2.1 | Y | 4.3.5 | Y | 4.4.5 | Y  | 4.5.1  | Y |       |   |

N/A Clauses

| No.   | Justification           |
|-------|-------------------------|
| 4.3.6 | No washing of equipment |
| 4.4.3 | No drainage needed      |

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### 5. Vehicle Operating Standards

<u>Summary</u>

No own transport/distribution facilities; all sub contracted; see section 3.5.

| 5.1   | NA | 5.1.5 | NA | 5.2.2 | NA | 5.3.3 | NA | 5.4.4 | NA |
|-------|----|-------|----|-------|----|-------|----|-------|----|
| 5.1.1 | NA | 5.1.6 | NA | 5.2.3 | NA | 5.4   | NA | 5.4.5 | NA |
| 5.1.2 | NA | 5.1.7 | NA | 5.3   | NA | 5.4.1 | NA | 5.4.6 | NA |
| 5.1.3 | NA | 5.2   | NA | 5.3.1 | NA | 5.4.2 | NA |       |    |
| 5.1.4 | NA | 5.2.1 | NA | 5.3.2 | NA | 5.4.3 | NA |       |    |

N/A Clauses

| No. | Justification                         |
|-----|---------------------------------------|
| All | No vehicles operated under the scope. |

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### 6. Facility Management

#### <u>Summary</u>

Adequate maintenance for racking, electrical transporters, overhead crane and cooling installations are demonstrable. Inspection racking carried out by contractors. Advised repairs are carried out and recorded. Also inspections seen for fork lift trucks (49, 53,58) carried out every thee months.

Calibration is mainly subcontracted, carried out, according to a planning. Carried out calibration was shown for weighing equipment (xxx), thermometers (xxx) all done in a yearly time scale. Also internal calibration is demonstrable conform planning. Seen for thermometers every 2 months).

Cleaning carried out according to schedules, carried out well, with suitable chemicals and monitored. Recording is appropriate. Not recorded daily inspections are carried out. Adequate systems for collection, collation and disposal of waste, including destruction of

category 3 materials. (meat rests).

Pest control has been contracted with xxxx. A record system was shown, according to a contract for at least 8 visits a year. No actions were required for the period seen (June to now). Trends are analysed.

### No NCs raised in this section.

| 6.1   | Y  | 6.2.3 | 6.3.5 | Y | 6.4.6 | Y  | 6.6.2 | Y |
|-------|----|-------|-------|---|-------|----|-------|---|
| 6.1.1 | Y  | 6.2.4 | 6.3.6 | Y | 6.4.7 | Y  | 6.6.3 | Y |
| 6.1.2 | Y  | 6.2.5 | 6.3.7 | Y | 6.5   | Y  | 6.6.4 | Y |
| 6.1.3 | NA | 6.2.6 | 6.4   | Y | 6.5.1 | Y  | 6.6.5 | Y |
| 6.1.4 | Y  | 6.3   | 6.4.1 | Y | 6.5.2 | Y  | 6.6.6 | Y |
| 6.1.5 | Y  | 6.3.1 | 6.4.2 | Y | 6.5.3 | NA | 6.6.7 | Y |
| 6.2   | Y  | 6.3.2 | 6.4.3 | Y | 6.5.4 | Y  |       |   |
| 6.2.1 | Y  | 6.3.3 | 6.4.4 | Y | 6.6   | Y  |       |   |
| 6.2.2 | Y  | 6.3.4 | 6.4.5 | Y | 6.6.1 | Y  |       |   |

N/A Clauses

| <u>No.</u>   | Justification                   |
|--------------|---------------------------------|
| <u>6.1.3</u> | No diesel                       |
| 6.5.3        | No specific conditions required |

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### 7. Good Operating Practices

### <u>Summary</u>

Goods are received from Vion or external customers and inspected at reception; f.e. visual (damaged packaging), inspection of the loading compartment and temperature (CCP). During the audit this CCP was well explained including corrective actions. Additional requirements of customers about temperature are adequately fulfilled.

Competent personal was assessed.

Six temperature controlled areas are present for the products, monitored with proper alarm settings. Data seen for august 2013. Very good temperature control assessed.

Suitable facilities to avoid contamination of products were seen. Glass/brittle procedures (PDSFNL10014) are present. Check rounds are carried out. There are some allergen containing products handled/stored; all pre-packed. Extra attention was made in case of damaged packaging; categorized waste and cleaning.

Stock rotation according procedures, based on FiFo and best before date, including the system for product release.

### No NCs raised in this section.

| 7.1   | Y | 7.2.2 | Y | 7.3.3 | NA | 7.4   | Y  | 7.5.2 | Y |
|-------|---|-------|---|-------|----|-------|----|-------|---|
| 7.1.1 | Y | 7.2.3 | Y | 7.3.4 | Y  | 7.4.1 | Y  | 7.5.3 | Y |
| 7.1.2 | Y | 7.2.4 | Y | 7.3.5 | Y  | 7.4.2 | Y  | 7.6   | Y |
| 7.1.3 | Y | 7.3   | Y | 7.3.6 | Y  | 7.4.3 | NA | 7.6.1 | Y |
| 7.2   | Y | 7.3.1 | Y | 7.3.7 | Y  | 7.5   | Y  | 7.6.2 | Y |
| 7.2.1 | Y | 7.3.2 | Y | 7.3.8 | Y  | 7.5.1 | Y  |       |   |

### N/A Clauses

| <u>No.</u> | Justification                                   |
|------------|---|
| 7.3.3      | No controlled atmosphere other than in packages |
| 7.3.4      | No potential risks identified                   |

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### 8. Personnel

<u>Summary</u>

Employees (including temporary employees) are trained, instructed and supervised under the responsibility of Supervisors, with extra attention to personnel who are engaged in activities to the CCP.

Records that demonstrate appropriate and effective training for A.V. (assistant supervisor) could not be demonstrated. (NC)

Part of the training are read working instructions. (signed for acceptance and understanding). A yearly review was carried out about the competences in relation to carried out activities per function/employee.

No handling with open food.

### 1 MinorNC raised in this section.

| 8.1   | Y | 8.1.4 | Y | 8.2.3 | Y  | 8.2.7  | NA |
|-------|---|-------|---|-------|----|--------|----|
| 8.1.1 | Y | 8.2   | Y | 8.2.4 | Y  | 8.2.8  | NA |
| 8.1.2 | Ν | 8.2.1 | Y | 8.2.5 | NA | 8.2.9  | NA |
| 8.1.3 | Y | 8.2.2 | Y | 8.2.6 | NA | 8.2.10 | NA |

N/A Clauses

| <u>No.</u> | Justification  |
|------------|--|
| 8.2.5-     | No additional requirement since no open food is present. |
| 8.2.10     |  |

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# **Audit Report**

### Wholesale Module

#### 9. Purchasing – Branded Products

<u>Summary</u> No wholesale activities.

| 9     | NA | 9.1.2 | NA |
|-------|----|-------|----|
| 9.1   | NA | 9.1.3 |    |
| 9.1.1 | NA |       |    |

**10.** Requirements for the purchasing and management of wholesaler own brand products and Wholesaler exclusive brands.

| <u>immary</u>           |  |
|-------------------------|--|
| o wholesale activities. |  |
|                         |  |

| 10.1   | NA | 10.2.1 | NA | 10.2.5 | NA | 10.3.2 | NA | 10.4.3 | NA |
|--------|----|--------|----|--------|----|--------|----|--------|----|
| 10.1.1 | NA | 10.2.2 | NA | 10.2.6 | NA | 10.4   | NA |        |    |
| 10.1.2 | NA | 10.2.3 | NA | 10.3   | NA | 10.4.1 | NA |        |    |
| 10.2   | NA | 10.2.4 | NA | 10.3.1 | NA | 10.4.2 | NA |        |    |

### **Contracted Services Module**

#### **11. Contractual Arrangements**

Summary

Contracted services for Vion and other customers (f.e. xxx, xxxx and xxx) are demonstrable. Details were communicated to QA (for risk assessment per process step) and Operations. (Assistant) Supervisors are trained in details, under responsibility of the Manager Operations. Details about f.e. labelling products available for Employees by photos on their monitors. **No NCs raised in this section.** 

| 11   | Y | 11.3 | Y | 11.6 | Y |
|------|---|------|---|------|---|
| 11.1 | Y | 11.4 | Y |      |   |
| 11.2 | Y | 11.5 | Y |      |   |

### 12. Product Inspection

<u>Summary</u> No contracted services regarding to product inspection.

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| 12   | NA | 12.3 | NA | 12.6 | NA |
|------|----|------|----|------|----|
| 12.1 | NA | 12.4 | NA |      |    |
| 12.2 | NA | 12.5 | NA |      |    |

### 13. Contract Packing (Repacking, Assembly Packing)

### Summary

Contract packing exists of labeling meat products. Risk assessment has been carried out for this process step. Products are delivered to the labelling department with bar coded crate labeling and printed with the required information on labels supplied by the customer. Information to be printed on the labels, f.e. best before date conform the original best before date from the bar code. The tested traceability system is based on the bar codes and internal labelling. Details about f.e. labelling products available for Employees by photos on their monitors.

### No NCs raised in this section.

| 13   | Y | 13.3 | Y | 13.6 | Y | 13.9  | Y |
|------|---|------|---|------|---|-------|---|
| 13.1 | Y | 13.4 | Y | 13.7 | Y | 13.10 | Y |
| 13.2 | Y | 13.5 | Y | 13.8 | Y |       |   |

#### 14. Quantity Control Inspection

Summary

No contracted services regarding to quality control inspection.

| 14   | NA | 14.3 | NA | 14.6 | NA |
|------|----|------|----|------|----|
| 14.1 | NA | 14.4 | NA |      |    |
| 14.2 | NA | 14.5 | NA |      |    |

#### 15. Contract Chilling/Freezing/Tempering and Defrost Operations

| Summar | y |
|--------|---|
|        |   |

No contracted services regarding to Chilling/Freezing/Tempering and Defrost Operations.

| 15   | NA | 15.3 | NA |
|------|----|------|----|
| 15.1 | NA | 15.4 | NA |
| 15.2 | NA |      |    |

#### 16. Contract Cleaning of baskets, roll cages and other distribution containers

| Summary                           |  |
|-----------------------------------|--|
| No contracted services, cleaning. |  |

| 16   | NA | 16.3 | NA | 16.6 | NA |
|------|----|------|----|------|----|
| 16.1 | NA | 16.4 | NA | 16.7 | NA |
| 16.2 | NA | 16.5 | NA |      |    |

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#### Waste recovery and recycling

Summary

No contracted services regarding to Waste recovery and recycling.

| 17   | NA | 17.3 | NA | 17.6 | NA |
|------|----|------|----|------|----|
| 17.1 | NA | 17.4 | NA | 17.7 | NA |
| 17.2 | NA | 17.5 | NA |      |    |

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