

Audit Report Global Standard Food Safety Issue 9

1. Audit Summary			
Company name	Vion Scherpenzeel B.V.	Site code	8476525
Site name	Vion Scherpenzeel B.V.		
Scope of audit	Cutting, slicing, brining and curing, smoking, marinating and seasoning of (vacuum and/or bulk boxes) packed fresh or frozen pork meat and meat preparations. Freezing of pre-packed pork meat.		
Exclusions from scope	None.		
Justification for exclusion	NA		
Audit start date	2023-12-06	Audit finish date	2023-12-08
Re-audit due date	2024-12-11	Head office	No

Additional modules included			
Modules	Result	Scope	Exclusions from Scope
Choose a module	Choose an item		
Choose a module	Choose an item		

2. Audit Results					
Audit result	Certificated	Audit grade	B	Audit programme	Announced
Previous audit grade	A+		Previous audit date	2022-09-14	
Certificate issue date	Select a date		Certificate expiry date	Select a date	
Number of non-conformities			Fundamental	0	
			Critical	0	
			Major	1	
			Minor	10	

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3. Company Details			
Site address	Het Zwarte Land 13 3925 CK SCHERPENZEEL		
Country	The Netherlands	Site telephone number	
Commercial representative name		Email	
Technical representative name		Email	

4. Company Profile					
Plant size (metres square)	10-25K sq.m	No. of employees	51-500	No. of HACCP plans	1-3
Shift pattern	2 shifts 5-6 days a week				
Seasonal site	No				
Seasonal opening times (Start/end date)	Click or tap to enter a date.		Click or tap to enter a date.		
Other certificates held	ISO 9001, IKB (welfare), farming star (welfare), USDA, organic (SKAL), IFS PIA.				
Outsourced processes	No				
Outsourced process description	NA				
Regions exported to	Asia North America South America Europe Oceania Africa				

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4. Company Profile	
Company registration number	NL82EG
Major changes since last BRCGS audit	Upgrade QMS/FSMS to BRC 9. No longer deboning at this Vion-site. Start with cooking of seasoned/marinated spare-ribs.
Company Description	
<p>Vion Scherpenzeel BV belongs to the VION Food Group which produces pork and beef. VION Group is one of the biggest meat processing and selling companies in Western Europe and sales is worldwide with a focus on Europe and Asia (China, Japan, Korea). The site employs approx. 100 people working basically in a 2-shift system from Monday to Friday, occasionally production on Saturdays.</p> <p>VION Scherpenzeel BV is specialized in the production of cured and/or smoked bacon by, cutting, slicing, brining and curing, smoking, marinating and seasoning of packed (vacuum and/or bulk) fresh or frozen pork meat and meat preparations. (mostly middles). Further also freezing of prepacked pork meat. Recently stopped with deboning activities and started with cooking of seasoned/marinated spare-ribs. Also other products are produced like sliced pork meat vacuum packed in consumer packs, bulk packed in boxes (B to B), DSP Pork meat sliced in cubes, diced with white pepper and packed in bags and carton boxes to be frozen on site and deboning activities incl. packing activities are performed.</p> <p>Only pork meat is processed, and final products are based on welfare and good farming breed programmes of the pigs (EKO, GB, GF, QS, standard and FS (farming star)). Two HACCP studies are valid. The raw materials come from own slaughterhouses, which are part of the VION Group in the Europe (Netherlands, Germany) and from some other non-Vion slaughterhouses in France.</p> <p>Only B2B delivery. The storage and transport of finished products is partly outsourced (both cooled and frozen) as sister company Distrifresh is now involved in transporting from and to own VION plants. (Not in the scope of this audit). Also outsourced is the deep-freezing of some products to external cold stores, the products do not return to the site, and are therefore out of scope of BRC9.</p> <p>Furthermore, on-site cleaning of crates and pallet boxes.</p> <p>The company is under veterinary control for exporting activities (from cold store), is USA approved and has several client status e.g. (Welfare Approved), Official veterinary approval number: NL 82 EG. Packed pork products which are bought from Vion International B.V. (produced by Vion sites, mainly Vion Boxtel) are frozen after reception, stored and palletised for export in containers.</p> <p>The company is about 10000 m² and situated on an industrial area, no negative influences of processing of other companies were identified.</p>	

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5. Product Characteristics					
Product categories		03 - Raw prepared products (meat and vegetarian) 09 - Raw cured or fermented meat and fish Category Category Category Category Category Category			
Finished product safety rationale		Temperature < 4°C (meat preparations), < 7°C or < -18°C (other products), vacuum packaging (bacon), dosage nitrite (> 1 gram/litre brine / > 60 ppm on ingoing product). Sous-vide cooked spareribs are heated till 85 °C. But all need to be heated prior to consumption.			
High care	No	High risk	No	Ambient high care	No
Justification for area		Appendix 2 applied. All products (incl. sous-vide cooked spare ribs) have to undergo full cooking step prior to consumption. Also smoking process step is not considered as a sufficient heating step justification for area.			
Allergens handled on site		None Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen			
Product claims made e.g. IP, organic		IKB, FS (farming star / "beter leven") and GB (= GF + welfare) and GF (good farming) + Qualität und Sicherheit (QS) + Organic (SKAL)			
Product recalls in last 12 months		No			



<p>Products in production at the time of the audit</p>	<ul style="list-style-type: none"> • Day 1; <ul style="list-style-type: none"> ○ Intake (incl. CCP 1 temperature check) of meat (Backs), order ○ Brining, tumbling, packing in vacuum foil; in bulk boxes (Dolavs), including check metal detector ○ Brining, tumbling, smoking and packing in vacuum foil; in bulk boxes (Dolavs) ○ Freezing of pre-packed fresh meat (Koppen) from supplier Vion Boxtel ○ Marinating/seasoning of spareribs ○ Packing in vacuum foil and change-over from Sweet marinated Spareribs to Spicy marinated Spareribs. • Day 2; <ul style="list-style-type: none"> ○ Sous-vide cooking of (packed) Spareribs Sweet and Spareribs Spicy and related core temperature 85°C. ○ Packing in foil and shrinking of Beenham (BBD) ○ Tempering of Loins as preparing for slicing ○ Crate washing proces ○ Loading of _____ and related incl. CCP2 temperature check and check in records of CCP1) • Day 3; <ul style="list-style-type: none"> ○ Slicing and packing vacuum 400g of boneless 6mm Loins, including check X-ray ○ Intake of packing materials order _____ and related checks on loading department and materials on FSPZNL100087.
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6. Audit Duration Details			
Total audit duration	24 man hours	Duration of production facility inspection	12 man hours
Reasons for deviation from typical or expected audit duration	NA		
Combined audits	None		
Next audit type selected	Announced		

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
	Plant Manager	x	x		x
	QA Manager Scherpenzeel	x	x	x	x
	Manager Operations	x	x	x	x
	Group QA Manager		x	x	x
	Manager Planning		x		
	Manager zouterij Rokerij Gammon		x		
	Manager Expeditie Slice		x		
	Manager Retail en Vrieshuis		x		
Voorman Slice	Foreman Slice		x		
Voorman Expeditie	Foreman Expedition		x		
Manager snijzalen	Manager Snijzalen		x		
Medewerker zouterij	Employee Zouterij		x		
Medewerker Expeditie	Employee Expedition		x		
	Purchase NON-Food		x		

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	Employee Warehouse Non-Food		x		
	HR Manager		x		x
	HR Officer	x	x		x
	HR Administrator		x		x
	Manager TD		x		x
	Werkvoorbereider Technische Dienst		x		
	Werkvoorbereider Technische Dienst		x		



GFSI Post Farm Gate Audit History			
Date	Scheme/Standard	Announced/Unannounced	Pass/Fail
2022-09-14	BRC FOOD 8	Unannounced	Pass

Document control			
CB Report number	RQA9832747/ 4672326		
Template name	F908 Food Safety Audit Report Template		
Standard issue	9	Template issue date	2022-12-16
Directory allocation	Food	Version	1.1

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Non-Conformity Summary Sheet

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

Critical		
Clause	Detail	Re-audit date

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Major						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
4.9	Seen during the audit the performance of hooks to hang meat for the smoking process. In the crates with cleaned hooks, water rests which contains rests of detergent. (pH 12)	All hooks from the production and from the washing room were blocked and rinsed thoroughly again. The rinsing process step was correctly applied to ensure complete cleaning agent residue removal.	<p>Vion Scherpenzeel has carried out a deep analyse in order to define the root cause of this non conformance.</p> <p>The cleaning process was not effectively rinsing off the cleaning agent from the hooks.</p> <p>The rinsing phase of the cleaning process was insufficient, possibly due to inadequate water pressure or duration, used materials and storage location.</p> <p>The duration in the rinsing phase was not conducted correctly. The location of/and the crates used, were leading to incomplete removal of the cleaning agent due to the inability of the water to drain away.</p> <p>The check for residue was not conducted properly.</p>	<p>The following preventive measures are identified and implemented:</p> <p><u>Process Adjustment:</u> We started from week 49 to use different crates fully perforated. Which allowed the cleaning water to be drained straight away. The rinsing process step is intensified.</p> <p><u>Enhanced Monitoring</u> Regular residue checks and visual inspections will be implemented with a frequency of 8 checks per day spread over 16 hours during the cleaning process to visually confirm the complete removal of the cleaning agent.</p> <p>The additional residue checks are integrated and documented on the SSOP lists.</p> <p><u>Verification measures effectiveness:</u> The new way of working is followed from the beginning of the washing process until the hooks are entering the production process, see appendix 6.</p>	2023-12-24	Fully Closed



Major					
			<p>Provided proof; Changed procedure, record form for residue-testing and related validation and pictures. Training and records.</p>	<p>Results are good. New way of working is implemented, we are aiming for continuously improving this process.</p> <p><u>Training and Awareness:</u> Training sessions for personnel involved in the cleaning process have been conducted using the revised cleaning procedure. During the training the critical importance of the rinsing, monitoring and verification steps are in detail explained.</p>	

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Minor						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
2.2.1	<p>PRPs are included in the HiRA P10067, v28.04.2023, as general risks. Pest Control is very limited defined, maintenance programmes are not included in the PRP.</p> <p>A document from HQ (PFOOD10000, v12.10.2022) does also not cover every PRP-requirement of BRC.</p> <p>(nevertheless, measures/monitoring for f.e. pest control/maintenance are present)</p>	<p>The P-SPZ-NL-10067 <i>Procesbeheersplan Vion Scherpenzeel</i> is reviewed.</p> <p>The part about pest control is a applicable for multiple processes within the site. All relevant processes are checked to check the reference to the pest control part.</p> <p>Secondly, the part about pest control is aligned with the central prerequisite requirements (P-FOOD-10000). The spreading of tox and the in-depth assessment are added.</p>	<p>Preventive Actions: When a standard (like BRC) is changed, the changes will be checked and if necessary the central documents (P-FOOD-10000) and site documents (P-SPZ-NL-10067) will be updated.</p> <p>Provided proof; Adapted PRP-overview.</p>	<p>All the requirements are present in the P-SPZ-NL-10067, but there may be a gap in the interpretation of the updates to PRP requirements from BRC.</p>	2023-12-24	CLOSED

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Minor						
		The risks of maintenance are part of the P-SPZ-NL-10067. To make them better visible maintenance is added as a separate process in P-SPZ-NL-10067.				

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2.7.2	The method for determine/grading hazards/risks is defined in P10001, v31.03.2023 and P10000, v17.03.2022. The Risk-level to evaluate CCPs with the decision tree is slightly different in both procedures, eg. a low chance/high effect is not defined to be evaluated whether it is a CP/CCP or not.	Reviewed (with HQ): P10001, v31.03.2023, and P10000, v17.03.2022. The difference between the documents P-VION-10001 <i>HACCP Manual</i> and P-VION-10000 <i>Hazard analysis</i> is explained by the Group QA manager to the QA manager on site.	Preventive Actions: The following preventive measures are identified and implemented: The QA manager will be trained. A day training by director QA Benelux is planned February 2 th . Also a local procedure containing all necessary input from Both P10000 and P10001 is going to be made. The initiation therefore has been made. (planned Q1-2024) Provided proof; Initiation for new Local Procedure Hazard analysis and HACCP manual P-SPZ-NL-10214 v1 Reason for making a new procedure P-SPZ-NL-10214 v1 Subjects incorporated in new procedure P-SPZ-NL-10214 v1	The Local QA manager was during the audit not able to explain the difference between the documents correctly. In P-VION-10000 all the hazards are assessed and evaluated. In P-VION-10001 the method of hazard analysis is explained.	2023-12-24	CLOSED
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3.11.4	Vion Scherpenzeel has a regulatory enforcement notice (“verscherpt toezicht”) by the Dutch Food authority Nederlandse Voedsel- en Warenautoriteit (NVWA), for the period 23 October 2023 - 2 February 2024, related to condensation on ceilings/construction and not right recorded CCP-temperature- checks. LRQA was not notified.	LRQA is notified about the decision of the NVWA to temporary increase the supervision.	<p>The following preventive measures are identified and implemented:</p> <p>On 20-12-2023 our Group QA manager contacted our account manager by LRQA and discussed this matter. There are clear agreements made regarding when and how LRQA needs to be notified. These agreements will be documented by LRQA and the auditors will be notified in regards with these agreements.</p> <p>These agreements will be added to the existing Vion crisis procedure.</p> <p>Provided proof; Notification to LRQA.</p>	As group, we notify LRQA structurally about the fines and official warnings we receive from the NVWA, and publish them on our website. In this situation we have a different interpretation of the type of incidents we need to notify, leading to the belief that this falls outside the scope of LRQA notification. The decision of the NVWA to temporary increase the supervision is because of observed process deviations. Vion made the interpretation, via the BRC-interpretation guide, that we didn't need to notify LRQA because it was process deviations with no product safety risks.	2023-12-24	Fully Closed
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4.6.2	In general, well-maintained equipment seen. Exception for conveyor belt at the Salting Line 2; slightly damaged belt, without direct contamination.	<p>Production is stopped.</p> <p>The assignment for replacement of the conveyor belt was made straight away in our asset and maintenance management software tool).</p> <p>Based on the on site assessment, the damaged sections of the conveyor belt were repaired directly.</p>	<p>A new conveyor is ordered and will be replaced before 31 January `24.</p> <p>The protocol for conveyor belts was revised (by the TD manager and QA manager) and enhanced specifying details of inspection criteria and frequency.</p> <p>This new protocol was discussed at the daily production meetings (TIER1). Also, the importance of extra focus and accurate monitoring during the SSOP checks was explained.</p> <p><u>Documentation and verifications :</u> The revised maintenance protocol for conveyor belts, outlining specific checks and timelines is reviewed. Additional verifications focused on conveyor belt conditions during routine inspections are integrated in the daily SSOP checks and in the quarterly maintenance checks.</p> <p>Provided proof; assignment to replace Z-A2 Offer for Intralox conveyor belt SSOP list Control point C.08 state of belts and machines</p>	<p>The wear and tear on the conveyor belt has exceeded the expected limits, leading to slight damage.</p> <p>Regular maintenance and inspection schedules for the conveyor belt might not have been strictly adhered to, allowing gradual wear to progress.</p> <p>During the daily inspections of the conveyor this deviation was not seen or recorded.</p>	2023-12-24	CLOSED
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4.8.4	After the plant tour in the afternoon of 06.12.2023, a part of the handwash facilities does not supply warm water anymore.	Immediately a clear notice was placed indicating the absence of warm water in the affected handwash facilities. There was an employee placed in the facility to appoint employees to the correctly working handwash facility.	<p>The following preventive measures are identified and implemented:</p> <p>Revise and strengthen the maintenance protocol for water heating systems, ensuring regular checks and preventive measures. Establish a preventive maintenance schedule, including periodic inspections of heating elements.</p> <p>Provided proof; assignment handwash facility. Pictures of the replacement and repair of the handwash facilities Pictures of the warm water (in named handwash facility)</p>	<p>There was a failure or malfunction in the water heating system serving those specific handwash facilities.</p> <p>The system had a technical issue: a faulty heating element and a malfunctioning valve.</p> <p>Lack of routine maintenance, potential wear and tear, or inadequate monitoring might have allowed the technical issue to escalate unnoticed.</p>	2023-12-24	CLOSED
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4.9.1.1	Seen on day 1, a not secured door () room), containing some chemicals.	<p>Secured the door immediately, ensuring that access to the room was restricted. Inspected the door securing mechanism to identify and rectify any issues affecting its proper functioning.</p> <p>Temporary Measures:</p> <p>Implemented a temporary securing solution: until the door mechanism was fully working, the door is closed manually by key. All chemicals were removed.</p>	<p>All cleaning agents are removed and stored properly in the chemical storage room.</p> <p> is no longer using this room, the room is now only storage for the scrub machine for internal use (for canteen cleaning, staff facility etc)</p> <p>Automatic closing system is placed on the door this way it is always closed except if you have a key. Only the responsible persons from the Facility department received a key.</p> <p><u>Training and Awareness:</u> Provided training to relevant personnel on the importance of maintaining secure access points. This topic is part of the food-defence training.</p> <p>Provided proof; Training material and records Food defense,) assignment for placing automatic closing system, Pictures of placed automatic closing system + new keys given out + locked closed door.</p>	<p>The room in cause was initially no storage room for cleaning agents.</p> <p>There was no automatic closing system not everyone had a key.</p> <p>Not all personnel was aware of the food defence regulations</p>	2023-12-24	CLOSED
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4.10.3.1	<p>Seen during the audit, packed "Beenham", passed via the shrink tunnel ("krimptunnel") and via the belt though the metal detector with a setting for bigger products. (Leg Beds) In this way no guaranteed belt stop. It was explained that metal detection is not agreed with the customer. But this is not clearly justified/documented as BRC requires.</p>	<p>Immediately halted the practice of passing "Beenham" through the metal detector with a setting for bigger products. All products that where already produced were blocked and went through the metal detector again with the correct settings.</p>	<p>The following preventive measures are identified and implemented:</p> <p>The specific metal detection settings for each product category in a centralized and easily accessible location was documented.</p> <p>To be compliant with the BRC requirements and to make sure there is a uniform process on all the departments, every batch that is produced shall be metal detected with the correct settings.</p> <p>In the specifications of the "Beenham" is stated that these products will be metal detected.</p> <p><u>Training and Awareness:</u> Increase awareness among employees about the necessity of following documented metal detection procedures.</p>	<p>The Beenham was produced on a different production line and needed to be processed (Shrunked) on another line (where the metal detector was installed) . Due to a lack of communication and a wrong decision from the line responsible the hams are transported on the same line together with the larger products via the metal detector. The intention was not to metal detect the hams at this stage but just to transport them through the shrink tunnel.</p> <p>The metal detection specifications for different products, including "Beenham," are not explicitly defined and documented according to BRC requirements.</p>	2023-12-24	Fully Closed
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			<p>Provided proof;</p> <ul style="list-style-type: none"> - adjusted product specification Beenham () adjusted specification Beenham () - form check metaaldetection gammonlijn - Procedure Controle metaaldetectie - Training material control op metal detectie update V2023-12. <p>Translated</p> <ul style="list-style-type: none"> - Proof of Training 	<p>There where gaps in the process of aligning customer requirements with internal procedures and auditorial requirement (BRC)</p>		
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4.10.3.4	At Line 2 of the Salting-department, the test of the metal detector was shown with test bars 5mm Fe/6 mm Fe/6,35mm SLS 304. The test was not performed for every bar “in the centre of the detector”. (least sensitive area) Testing in the right way shows belt stop in the right way.	Stopped the practice of testing the metal detector without specifically targeting the least sensitive area. Conducted a thorough test of the metal detector, ensuring each test bar is positioned at the least sensitive area (at the closest possible point to the centre of the metal detector).	<p>The following preventive measures are identified and implemented:</p> <p><u>Training:</u> The training protocol for metal detector testing, incorporating a step-by-step guide on positioning test bars in the least sensitive area was revised and enhanced.</p> <p>A recurring training schedule to reinforce the correct testing procedure was implemented.</p> <p><u>Documentation Update:</u> All relevant documentation, including procedures and training materials, to reflect the revised metal detector testing protocol are implemented.</p> <p>At the same time a system for regular reviews and updates to ensure continued alignment with best practices is applied.</p> <p><u>Verification:</u> Integrated specific checks on metal detector testing procedures into routine checks to verify compliance.</p>	<p>There may be a lack of understanding or oversight regarding the proper testing procedure in regard to focusing on the least sensitive area. This also due to the fact that regardless of the position of the test bar the detection was performed and the belt stopped.</p> <p>The training or documentation regarding the correct metal detector testing process might not have emphasized the critical importance of testing in the least sensitive area.</p> <p>There are gaps in the existing training materials and Procedure, leading to insufficient guidance on the proper testing protocol.</p>	2023-12-24	CLOSED
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			<p>Established a feedback loop for continuous improvement based on the monitoring and verifications findings.</p> <p>Provided proof; Procedure metaal detectie Adjusted forms metaal detective Training material control op metal detectie updateV2023-12. Translated Proof of training Pictures of the detection rods (RVS316)</p>			
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4.11.2	In general, well-maintained condensers seen. The grid of the unit in the smoking department is not well-cleaned.	Initiated a thorough cleaning of the grid of the unit in the smoking department to ensure optimal functionality. There is no product contamination identified.	<p>The following preventive measures are identified and implemented:</p> <p>New preventive maintenance and cleaning schedule.</p> <p><u>Verifications and Review:</u> Integrated regular checks focused on the cleanliness of condensers into routine inspections. Established a periodic review process for cleaning protocols, ensuring ongoing alignment with equipment specifications.</p> <p><u>Documentation and Communication:</u> Reviewed and updated the cleaning protocol for the unit in the smoking department, ensuring clear guidelines. Communicated the revised cleaning protocol to relevant personnel and emphasized the importance of adherence.</p> <p>Provided proof: Cleaned Grid, order cleaning, Ultimo adjusted Planning for Quarterly/Yearly Cleaning of</p>	<p>There may be a lack of clarity or oversight regarding the specific cleaning requirements for the unit in the smoking department or the time between the scheduled cleanings is not sufficient.</p> <p>The cleaning Frequency for this particular unit was not adequately defined or communicated.</p> <p>There may be gaps in the documentation and training processes, leading to a lack of awareness regarding the specific cleaning needs of this unit.</p>	2023-12-24	Fully Closed
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7.1.7	<p>Seen several training records and competence evaluations.</p> <p>Beside training, for temporary employee (“Uitzendkracht”) Mr. , no competence evaluation carried out since his start in 2022. It is not clearly defined when/how an “Uitzendkracht” will be reviewed for his competency.</p>	<p>Initiated a competence evaluation for Mr. to assess his skills and performance since his start in 2022. Documented any immediate training or support needs identified during the evaluation.</p>	<p><u>Updated Procedures:</u> Revised and updated HR procedures to include a well-defined process for conducting competence evaluations of temporary employees. Communicated the updated procedures to relevant stakeholders and ensure understanding.</p> <p><u>Training for HR Personnel:</u> Provide training for HR personnel responsible for overseeing competence evaluations, emphasizing the importance of consistency and fairness. Included specific guidance on handling competency reviews for temporary employees.</p> <p><u>Communication with Temporary Staff:</u> Clearly communicate to temporary employees, including Mr. , the process and expectations related to competence evaluations. Establish an open communication channel for temporary employees to express concerns or seek clarification regarding the evaluation process.</p>	<p>There may be a lack of clarity or defined procedures regarding when and how competence evaluations should be conducted for temporary employees.</p> <p>The existing policies or procedures may not sufficiently address the specific requirements for reviewing the competency of temporary employees.</p> <p>There may be gaps in the formulation or communication of HR policies, particularly regarding the performance evaluation of temporary staff in comparison to the BRC-requirements.</p>	2023-12-24	CLOSED
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			<p><u>Policy Review:</u> Conduct a review of existing HR policies to identify and address gaps related to competence evaluations for temporary employees. Clarify and document the specific criteria and timelines for evaluating the competency of temporary staff.</p> <p>Provided proof; Beoordelingsmatrix UZK Appendix 2 - Competence evaluation</p>			
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Comments on non-conformities
-

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Additional Modules / Head Office Non-Conformity Summary Sheet

Critical		
Clause	Detail	Re-audit date

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

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

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Audit team

Lead auditor		
Auditor number	First name	Second name

Audit team				Attendance (YYYY/MM/DD, 24hr: MM)			Presence	
First name	Second name	Auditor number	Role	Audit Date	Start time	End time	Remote or physical	Professional recognition number
			Lead Auditor	2023-12-06	08.50	17.20	Physical	
			Lead Auditor	2023-12-07	08.35	17.10	Physical	
			Lead Auditor	2023-12-08	07.45	16.15	Physical	

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Detailed Audit Report

1. Senior management commitment

In the opening meeting management commitment was shown to the BRC and the QMS. In the written and signed policy (10158, v05.05.2021; actual according to the MR) there is evidence that human and financial resources are budgeted. Culture and related expectations are described in the policy and further detailed in the MR, related to the goals for improvement. Top 3 defined for 2023/2024; process-improvements, PRP- improvements and measuring behavior, related to competences. Explanation was made to the VOS lean-plan, attention for people's health and safety. Monitoring goals as result of policy and culture in the X-Matrix, at least weekly and partly daily. Related goals/actions are defined and explained in the opening meeting by the General Manager. The objectives are clearly documented; beside related for culture also for market, more own employees. Monitoring during monthly BT/HACCP-meetings f.e. 16.06/10.11/05.12-2023. Internal issues can be noticed to the team and are discussed directly in the Tier1/2/3 level meeting-structures. The quarterly management reviews seen from f.e. 12.04/19.07-2023 is carried out ensuring that the stated objectives are being met and contains relevant subjects (f.e. second, third party, internal audit, objectives, verification. Conclusion was a well-functioning QMS/FSMS, output new objectives. Information about of legislation and updates BRC is adequate, collected by central Vion and discussed in BT/HACCP-meetings f.e. 16.06/10.11/05.12-2023. Seen the update 29.11.2023 about applicable legislation. Seen the documented whistle-blower procedure 10051, v22.11.2023; partly via HQ or via a external contracto: Vion Scherpenzeel has a regulatory enforcement notice ("verscherpt toezicht) by the Dutch Food authority Nederlandse Voedsel- en Warenautoriteit (NVWA), for the period 23 October 2023 - 2 February 2024, related to condensation on ceilings/construction and not right recorded CCP-temperature- checks. During the audit right performance seen for these items. The audit started in time before due date 11.12.2023. Root causes for the former NCs were evaluated and did not re-occur in the same way. Beside internal presentations, no logo use.

The organization structure (v September 2023) is documented in the system; levels Plant Manager/Manager Operations/Department Manager/Foreman/Employee. Function descriptions are set up for all, including replacements; f.e. for Foreman Slicing vJanuary 2022.

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
-	-



2. The Food Safety Plan – HACCP

According to the principles of the Codex A., a system was implemented, committed by the Plant Manager, carried out by multi-disciplinary HACCP team members (laid down in 10001, v31.03.2023) Team Leader is the Plant Manager. All members, including the TL, trained by central QA Vion. Monthly HACCP meetings held which covers food safety, legality and quality issues based on fixed agenda; BT/HACCP-meetings f.e. 16.06/10.11/05.12-2023.

PRPs are included in the HiRA P10067, v28.04.2023, as general risks. Pest Control is very limited defined, maintenance programmes are not included in the PRP. A document from HQ (PFOOD10000, v12.10.2022) does also not cover every PRP-requirement of BRC. (nevertheless, measures/monitoring for f.e. pest control/maintenance are present) **Minor NC 2.2.1.**

Full product description including microbiological limits and shelf life is in place. The intended use of the product by the customer has been clearly defined and never is ready to eat. Product suitable for delivery B2B and consumption by general consumer groups but also vulnerable consumer groups. No claims made regarding food safety aspects. Documented within central 'Procedure Hazard analysis' (P-VION-10000)

Flow diagrams are prepared and available. Flow diagrams seen of all processes and annual verification of flow charts as reported in the combined HACCP-system verification / management review. Verification details of flowcharts are recorded in the document control system). Seen several examples of flowcharts;

- Flowchart Gemarineerde loinribs (HF- Sousvide) vNov. 2023.
- Flowchart Snij/trimlijn v8-2023.
- Flowchart opslag/Vrieshuis, v1-2023.

No rework processing and low risk operation.

The method for determine/grading hazards/risks is defined in P10001, v31.03.2023 and P10000, v17.03.2022. The Risk-level to evaluate CCPs with the decision tree is slightly different in both procedures, eg. a low chance/high effect is not defined to be evaluated whether it is a CP/CCP or not. **Minor NC 2.7.2.**

Defined kind of risks; micro/physical/chemical/radiation/allergens. Fraud/malicious contamination in the VACCP/TACCP; seen chapter 5.4/4.2.

Last updates from the HiRa; 31.03.2023, incl. validation.

The HiRa raw materials is centrally defined in Appendix from PVION10000, v17.03.2023.

Local Hira in P10067, v28.04.2023 for the process steps, incl. evaluation of PRPs.

With chance/effect 1-3 and the decision tree 2 CCPs are defined and several CPs.

CCPs;

- CCP1
 - 1A: Core temperature at reception of meat ≤ 7°C (legal limit)
 - 1B: Core temperature at reception of meat for raw materials transferred within Vion plants, ≤ 6°C
 - 1C: Core temperature at reception of meatpreparations ≤ 4°C (leagal req.)
 - 1D: Core temperature at reception of ms meat ≤ 2°C (legal req)
- CCP2
 - 2A: Temperature loading of fresh meat: ≤ 7°C
 - 2B: Temperature of vac. Packed meat and meat products (incl. returns) ≤ 6°C



When core temperature is between action limit and critical limit it is allowed to receive the batch but it must be quarantined (QA / management must be informed). Above the critical limit the batch actioning is obligate. Due to supply chain management, trailers with meat from sister companies are parked onsite and of loading of trailers is decided by planning. Records of CCP monitoring and verification show measurements are carried out by authorised persons as planned. The procedure for CCP 's identifies the corrective action to be taken when the limits are exceeded. Records are kept of adjustments made and any actions taken. CCP verification is performed by QC during the daily rounds incl. check on hygiene and processing performances. Documents validated during the vertical trace test and during the audit on site. Good control was seen.

CP's (food safety control measures at PRP-level) identified amongst several others (36 in total)
(Procesbeheersplan P-PSZ-NL 10067 v28.04.2023):

- Product contamination (product own / foreign materials – slaughter /handling / lubricants / pest control / personal hygiene / etc.);
- Cross contamination with pathogens via knife or machines/ equipment
- Control contamination with condensed water from cooling systems;
- Temperature control during processing (trimmings: < 6°C);
- Hygiene recipients (crates, pallet boxes, etc.);
- Procurement of raw materials according to specification (incl. additives);
- Control product age (< 5 days after slaughter);
- Control printing shelf life date;
- Control dosage nitrite as preservative in brine injection (> 60-150 ppm ingoing product);
- Control vacuum packed products (visual inspection);
- Control preparation and injection brine solution (bacon); Control cooling down after smoking process (< 5h < 7°C);
- Control temperature during transportation;
- Control metal contamination (knife integrity verification, metal detection);
- Control contamination of other foreign materials (X-ray);
- CP on exchange of nitrite free and brine with nitrite as new product is developed without nitrite

Each department has Pre-SSOP forms and SSOP forms to record findings and actions. Good management seen.

The HACCP system is verified through daily checks and daily verification of all forms, internal audits, check of all CCP's + CP's + PRP's during the yearly system verification.

Verification as part of quarterly MR; f.e. 12.04/19.07-2023.

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



3. Food safety and quality management system

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

The company has a quality manual which states the company's commitment to quality and food safety. The quality manual (last update 04.12.2023) is the total of all quality documents: system procedures, working procedures, work instructions, registration forms. Furthermore, the VOS system is applied with MMM (multi moment measuring). IT-system used for document control (HR and VOS have its own document control management system). The quality manual is available on the computer for all key functions (password protected).

Authorization of documents based on system functionality. Some documents available in relevant languages as several employees of different origin are working for the company. All secured kir.

Most record forms are handwritten, although a project on housekeeping and inspection currently with digital recordings. Also records from the weighing system to guide traceability. And records on external pest contractor and external lab are available in their applications. More and more digitalization. Company uses lean drivers in excel sheets to record production efficiency (stops, changeovers, brake downs, etc). Records are archived for 5 years according to procedure. Maximum product shelf-life applied is 2 years. All electronic data are secured by daily back-ups, arranged by HQ.

3.4 Internal audits

A schedule (v23.02.2023) for internal audits is available for 2022/2023; 4 audit moments per year, frequency minimum 1 times a year for all processes. (ref. PVION10011, v27.11.2023)

Seen the internal audit report about all processing (f.e. 27.01/20.11-2023) carried by qualified auditor Vion, (training LRQA in April 2022); 20.11.2023.

Further divided hygiene/fabrication/glass rounds 12xY, but in addition detailed daily evaluations of these items. Seen f.e. records 09.08.2023. Conformance as well as non-conformance has been recorded. Where necessary action points were defined for CA. Corrective actions are handled on an Excel-overview.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

Risk identification / risk assessment related to raw materials setup centrally by HQ in Bostel resulting in product specifications specifying relevant aspects to quality and food safety (CP). As the meat suppliers are all within the Vion company, all approved suppliers. In case of incidental other suppliers, these are low risk (fresh meat). Additives and seasoning is supplied by well-known and fully certified approved suppliers. No high-risk food suppliers identified for this organization. For packing material, Approval of suppliers based on GFSI-certification. All suppliers of packaging materials have to be approved by the central Vion office entered into the system before they are allowed to deliver. Supplier questionnaires used too. Some additives from the brine delivered by trading companies. List suppliers' additives Vion Food NL (S-MMI-10190), List of approved transporters (S-MMI-10013) and 'List of approved cold stores in use by VION (S-MMI-10199), yearly demonstrably reviewed by Vion HQ. Reviewed during the audit according to the last updated evaluation 06.12.2023.

- o (foil, BRC Packaging-certified)
- o) (several ingredients, FSSC- certified)
- o Vion Emstek (meat IFS-certified)

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3.5.2 Raw material and packaging acceptance, monitoring and management procedures

Evaluated intakes during the audit without remarks;

- Intake on day 1; (incl. CCP 1 temperature check) of meat (Backs), order
- Intake on day 3; packing materials order and related checks on loading department and materials on FSPZNL100087

3.5.3 Management of suppliers of services

Supplier approval, monitoring and evaluation process documented in List of approved transporters (S-MMI-10013) and 'List of approved cold stores in use by VION (S-MMI-10199).

Seen the last updated evaluation 06.12.2023.

Monitoring was shown for contracted services;

- Pest control \
- Laundry services \
- Contract cleaning (
- Maintenance (f.e. ...)
- Transport Distrifresh and (both BRC S&D)
- Waste (
- Laboratory testing \

No consultancy, catering, external storage.

3.5.4 Management of Outsourced processing

No outsourced processes under scope.

3.6 Specifications

Reviewed specifications during the audit:

- Loins (Vion Emstek)
- Foil incl. DOC
- Na-Acetaat/Na-Nitraat (
- Grease;
- Detergent (r

Review at least yearly of more often in case of changes. All specification <3 years.

3.7 Corrective and preventive actions

Corrective actions taken are documented in CAPA Excel overview list for internal/external audits and hygiene inspections. For complaints on the complaints form. In this action list the responsible for completing/ closing the non-conformity is monitored for reporting the status of progress. In all mechanism's attention for root cause analyses. Seen action list November 2023. Ref. P10018.

3.8 Control of non-conforming product

Reference procedure: P-SPZ-10176. Blocking products and non-conforming products.

Raw materials and (semi) finished products are checked on a regular base during the process stages. Products are released by production team leader. Corrective and preventive actions are described in several work instructions. Clear process well understood by staff that was interviewed during the audit.

No Non-conforming products were seen on stock, only in the cold storage (frozen), demonstrably blocked and marked with a red/white chain incl block form. QA allowed to unblock/ release. An overall action list (action register) is used to follow actions from internal and hygiene audits. Corrective and preventive actions system on blocked / non conforming products is up to date. The handling of non-conforming products is according to requirements..



3.9 Traceability

Reference procedure: PSPZ10013, v13.11.2023 Traceability.
 Traceability system operates through computer system , and paperwork enables trace of raw materials and packaging from supplier through processes to packing and dispatch.
 Test for recall/ traceability at least once per year, f.e. 25.09.2023. Test performed backwards/ forwards.
 Report including mass balance, carried out within 4 hours. Item used a mock recall about glass in bacon.
 Seen during audit well labelled items.
 With a vertical audit list, (the internal LRQA list based on Raw materials/Production/Distribution/Quality Assessments/Finished Product Weight Control/HACCP - Critical Control Points/Other Food Safety Controls/Microbiological Controls/Product Specification/ Cleaning Management Systems/ Maintenance/Calibration/Training records) during the audit was tested;
 "Smoked Bacon , customer , order , intake on 15.09.2023, processing on 15.09.2023, outtake on 22092023 of kg product, packed in Dolavs appr. 450kg, BBD 42d".
 Fast tracing (forwards/backwards), including packaging, logical mass balance was possible in the records/

3.10 Complaint-handling

Way of handling seen according to P10008.
 In 2022 4,7 complaint/week. In 2023 3,2/week. Goals <5/week. To 2023 decreased compared with 2022.
 Monitoring in the X-matrix. Complaints mainly about foreign bodies en partly temperature transport.
 No (other) food safety complaints. Corrective actions and root cause were shown for some of the complaints.
 Vion Scherpenzeel has a regulatory enforcement notice ("verscherpt toezicht) by the Dutch Food authority Nederlandse Voedsel- en Warenautoriteit (NVWA), for the period 23 October 2023 - 2 February 2024, related to condensation on ceilings/construction and not right recorded CCP-temperature- checks. During the audit right performance seen for these items.

3.11 Management of incidents, product withdrawal and product recall

Incident management process documented in P10015, v07.11.2023 and P10009, v12.09.2023.
 Procedure covers several types of incidents, incl. recall.
 LRQA will be informed within 3 working days according to procedure. Further via central HQ, quarterly reporting to LRQA seen.

 Vion Scherpenzeel has a regulatory enforcement notice ("verscherpt toezicht) by the Dutch Food authority Nederlandse Voedsel- en Warenautoriteit (NVWA), for the period 23 October 2023 - 2 February 2024, related to condensation on ceilings/construction and not right recorded CCP-temperature- checks. LRQA was not notified. **Minor NC 3.11.4.**

 No remarks during the audit, regarding to these items.
 BCM; P10015, v07.11.2023 and P10009, v12.09.2023 about f.e. actions in case of electricity outage; distribution/storage to other Vion locations/partners.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
3.5.4	Outsourced processing not applicable to this operation.

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4. Site standards
4.1 External standards
<p>Building and facilities are suitable for this type of industry. No specific risks identified related to local activities around the site. Located on an industrial area in a rural region of the Netherlands.</p> <p>Site area is properly paved to facilitate truck loading and unloading and are fully fenced. Well-maintained roads and planted areas.</p> <p>No contamination items; f.e. measures against pests (incl. birds) or ingress of f.e. water.</p> <p>Staff entering with badges, visitors via reception, f.e. drivers via a security office.</p> <p>Inside access only with badges for restricted access.</p> <p>Site security is part of the training programmes and rules for on-boarding personnel.</p>
4.2 Site security and food defence
<p>The site is completely fenced and access to areas of production, packaging and storage is limited to authorized persons. Electric key control for personnel to gain access to the different departments is implemented. Also e.g. fences and cameras installed inside / outside. The company is always guiding the visitors while visiting the production areas. Security in 2 shifts on site including safety guards of [redacted] on movements/ camera system. Bulk storage tank for salt is fenced and locked. Raw materials and packaging materials warehouse are locked manually. Porter present at entrance point of trucks. Visitor reporting system implemented in the office building. Site entrance close to the office building is closed outside office hours (only entrance to the site after reporting at the porter's lodge or by intercom). Meat processing company registered and officially approved by The Food and Consumer Product Safety Authority (NVWA) according to EU legislation. Official approval NL 82 EG.</p> <p>The Food Defence plan is suitable for the site; 10051, v22.11.2023 and RA 10067, v28.04.2023 /10174, v14.11.2022.</p>
4.3 Layout, product flow and segregation
<p>The lay out and flow of the processes is based on levels of contamination; mainly open products – logic product flow – all low-risk. Only fresh and vacuum-packed products under scope. A lay out with flow of processes and movement of personnel is present, including zoning. Separate rooms are in place between raw material intake, production, packing and storage areas.</p> <p>Beside enclosed product areas, low risk open product areas are applicable, defined with the decision tree in Appendix 2. Premises allows sufficient working space and capacity to work in a proper way.</p> <p>Temporary constructions were noticed during this audit, but all well marked and clearly marked with red/white ribbons including measures were taken to avoid contamination risks.</p> <p>There is a site plan for the plant, routing for employees, raw material, packing, finished products, staff facilities and the removal of waste products is demonstrably stated. Latest version P-SPZ-NL-10159 September 2023.</p>
4.4 Building fabric, raw material handling, preparation, processing, packing and storage areas
<p>The site, building and other facilities are suitable for the operation. The walls (sandwich panels) are appropriately maintained to prevent accumulation of dust, dirt and mold growth. They also facilitate easy cleaning. The floors (concrete) are impervious and are suitable for the intended use and withstand daily activities of cleaning and demands of the process. Drainage is designed to minimize contamination. It is appropriately covered and maintained well. The slope of the floor in the processing area is adequate to avoid stagnation of the water.</p> <p>The ceilings (concrete) are kept clean and there is no accumulation of dirt, no evidence of mold growth and condensation. Suspended ceilings are used in the production areas but adequate access to the void is provided. Windows can't be opened or are adequately screened. Glass windows are appropriately</p>

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protected with shatter proof films or shatterproof glass and a glass register is maintained for regular monitoring of glass. External doors are kept closed. Doors are close fitting. Adequate lighting is provided. Bulbs and strip lights are adequately protected. Ventilation is adequate, although monitoring for condensation is needed.

No condensation observed during the audit. Elevated walkways are designed and maintained effectively: not over lines, but over piping etc. Only low risk activities and products are applicable. Suitable plastic curtains, monitored in the monthly hygiene/fabrication check round. No mezzanine floors.

4.5 Utilities – water, ice, air and other gases

All utilities for water, cooling water and compressed air are covered by the maintenance system. Both water from the mains and well water (one source) are used. Water streams are mixed up, break tanks applied. Well water filter installed which is inspected every week as part of the maintenance program. Water used for brine is only from the mains (no well water applied). Well water quality is monitored as (2xY). A water distribution plan is available. Sampling tap points on a quarterly basis as indicated by procedure P-NLFOOD-10032. Seen analyses with good results from 23.05.2023.

Compressed air not in contact with product/lines. Food grade oil applied on predetermined risk related equipment including compressors. Maintenance of cooling equipment outsourced and overview on screens in maintenance office. Monitoring of the air compressors is also part of the maintenance program (water / oil separation, drying, etc.). Filters installed in the air supply and maintained although HACCP-team does not set quality of the filter. Daily inspection of any oil leakage in the compressed air as part of the pre-SSOP inspections (CP). Also, inspection and maintenance (incl. cleaning and anti-fungal treatment of the evaporators) is a CP. Last maintenance from 23.11.2023.

4.6 Equipment

In general, well-maintained equipment is installed in the factory, suitable for the application. The equipment is suitable for the intended use and no evidence is found during the inspection on contamination of the product.

Food approval declaration seen for conveyor belts;
Current validation (December 2023) for the new installed cooking cabinet.

In general, well-maintained equipment seen. Exception for conveyor belt at the Salting Line 2; slightly damaged belt, without direct contamination. **Minor NC 4.6.2.**

Equipment not in use; clearly separated stored in f.e. maintenance area.
Special equipped/separated areas for forklifts and battery charging equipment.

4.7 Maintenance

Maintenance is performed by own resources and some maintenance is outsourced. Maintenance management system based on . If possible, any maintenance activities are clustered and executed every week on Saturday outside production hours. Communication to production and cleaning is done prior start-up in order to prevent contamination. Maintenance contractor instruction demonstrable, contractors sign for the external hygiene instruction. Greasing plan for food grade and non – food grade grease demonstrable (risk-based approach, frequency depends on type of equipment and usage).

No major breakdowns applicable in last 12 months on machinery that disturbed the delivery to customers, but a lot of work performed because of the re-organization of the internal processes. Documented hygiene inspections on start-up are completed daily by shift leaders, Pre-SSOP checklists are used to record and confirm maintenance where necessary. Short lines were seen between production and maintenance.

Attention for a hygiene clearance to production before starting production full cleaning after maintenance activities are implemented. Recording of maintenance jobs goes through . When the site has

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new equipment, this is included on the maintenance schedules, this was checked for the recently new installed line, deboning line of shoulders and the smoking cabins. Separate engineering workshop: no issue identified. Only entrance to the maintenance workshop using a badge. Only pre-organized maintenance suitcases are allowed to be used inside production and storage facilities. Greasing plan for food grade and non – food grade grease demonstrable (risk-based approach). A detailed overview of required maintenance and lubrication was shown. Effective plan and follow up. Lubrication with food grade oils; specification seen from Challenged details; department L2 Salting, SPR01; preventive maintenance monthly; 16.10/16.11-2023. Release AZM17. Air pressure system 23.11.2023.

4.8 Staff facilities

Central suitable staff facilities for both own employees and temporary workers. The surface of storage facilities (staff lockers) is in line with the number of employees. Based upon a risk assessment all zones are “low risk areas”. Lockers available for private clothing and personal items. No storage of protective clothing in the lockers except for protective shoes. Central issue of protective clothing. Boot wash installed at the entrance to production facilities. Direct access to production facilities. Also personally issued body protection (worn underneath the clean protective clothing) may be stored in the locker. Hygiene lock at the entrance of the production facilities. Toilets are located near the changing facilities.

After the plant tour in the afternoon of 06.12.2023, a part of the handwash facilities does not supply warm water anymore. **Minor NC 4.8.4.**

Closed smoking room in the canteen area. Catering provided to the personnel. Facilities created to store own food in canteen including fridges.

Audited catering in the canteen; seen well-equipped.

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

4.9.1 Chemical control

Within the company there is a place where the working stock for the external cleaning company is stored. Control over cleaning chemicals on site is demonstrated.

Seen on day 1, a not secured door (), containing some chemicals. **Minor NC 4.9.1.1.**

MSDS available and specifications confirm suitability for use in food processing industries.

Seen as part of approved chemicals;

- Grease;
- Detergent \

Seen during the audit the cleaning performance of hooks to hang meat for the smoking process. In the crates with cleaned hooks, water rests which contains rests of detergent. (pH 12)

MAJOR NC 4.9.



4.9.2 Metal control		
<p>There is a strict site policy concerning metal control P-SPZ-NL-10023 Suitable knives were used (clicking back in holding system – safety issue). Knives are widely used in production, no cut off blades seen. Daily checks seen for knives and equipment on the SSOP's/daily checklists. Staples, paper clips and drawing pins are not used in open production areas.</p> <p>Knife checks starts at sharpening department and ends there too. Knives are issued to employees by numbered sets and changed every break for cleaning. Color codes knives in knife assembly baskets are in place and assessed was the sharpening and cleaning of the knives in a special area with two sharpeners, two whetting machines and a dish washer with calibrated chemical dosing equipment and checks on rinsing water temperature (>82 °C). Integrity check of knives carried out. Knives which do not return every break are covered by daily (pre-) SSOP inspections. Inspections of cutting blades and needles carried out during breaks (e.g. SDP department). Breakage of injection needles in bacon processing department is considered very unlikely, but checked daily; f.e. week 38-2023).</p>		
4.9.3 Glass, brittle plastic, ceramics and similar materials		
<p>Evidence seen of a glass breakage procedure. Also, a glass register which is checked as well as infrastructure everyday (Pre-SSOP) and quarterly; f.e. 09.08.2023.</p> <p>No recently breakage.</p>		
4.9.4 Products packed into glass or other brittle containers		
<p>Products are not packed into glass/brittle containers.</p>		
4.9.5 Wood		
<p>No wood is allowed in the production departments, except the wood chips for smoking bacon. These are stored and used separately.</p>		
4.9.6 Other physical contaminants		
<p>Debugging only applicable for packaging materials and for the re-packing activities; seen in a careful way during the audit.</p> <p>Careful handling regarding to packaging handling has been well described in working instructions, as well as for use of pens. Seen in the processing/packing area the use of detectable pens.</p>		
4.10 Foreign-body detection and removal equipment		
4.10.1 Selection and operation of foreign-body detection and removal equipment		
<p>Metal detection (products), sieves (brine injector, water) and X-ray (sliced products) applied. Vision camera system not validated to remove foreign materials (control of quality aspects). Also during visual inspection at specific lines (for example SDP) foreign materials found are collected and evaluated. Both foreign bodies and product own materials (like bone residues due to improper cutting) are presented to supplier when necessary. Testing metal detection and X-ray detection using methods and samples compliant with commercial specification as verified during the audit.</p>		
4.10.2 Filters and sieves		
<p>Filters used to control the hygiene of the brine to prevent any obstruction of the injection needles (with the risk of insufficient injection at certain areas of the meat pieces). Cleaning and inspection as part of the cleaning program executed by external agency. Assembling of the micro-sieve of the injection equipment by the team leader after hygiene inspection as recorded on the pre-SSOP-list as reviewed during the audit. Well water filter installed is inspected every week as part of the maintenance program</p>		



4.10.3 Metal detectors and X-ray equipment

Detection equipment installed as result of the risk analysis and are not controlled as CCP's. But the checks which are determined, are including critical limits, all checked beginning/end of the day and between breaks;

Metal detectors installed at:

- Packing line JK / VM12 / VM14 / trimmings / smoking process: 5,0 mm Fe + 6,0 mm non-Fe + 6,35 mm SLS (check start-up, every 3 hours and end of production);
- Salting process 1 and 2: 5,0 mm Fe + 6,0 mm non-Fe + 6,35 mm SLS (check start-up, every 3 hours and end of production);
- Spare-rib process line: 3,5 mm Fe + 4,5 mm non-Fe + 6,00 mm SLS (check start-up, every 3 hours and end of production);
- SDP / slice lines: 3,5 mm Fe + 3,0 mm non-Fe + 4,5 mm SLS (check start-up, every 3 hours and end of production);

Also metal detection applied by contractor (frozen storage). Metal detector functioning is checked using certified sample sticks. Both belt stop systems with noise and/or light and/or rejection devices used depending on the packaging size. Procedure metal detection documented (P-SPZ-NL-10052) on registration form F-SPZ-NL-10072.

Slicing; verification of proper functioning of recently installed X-ray system using specified sample sizes. Test strips contain different sample sizes. Therefore, the X-ray detector has to detect at least 4 objects on each strip (which is equal to the minimum samples specified below):

- 0,8 mm SLS 316 ball;
- 0,4x2 mm SLS 316 wire;
- 2,0 mm glass;
- 2,0 mm ceramic.

This verification is on client request, not identified as a CCP.

Seen during the audit, packed "Beenham", passed via the shrink tunnel ("krimptunnel") and via the belt though the metal detector with a setting for bigger products. (Leg Beds) In this way no guaranteed belt stop. It was explained that metal detection is not agreed with the customer. But this is not clearly justified/documentated as BRC requires. **Minor NC 4.10.3.1.**

At Line 2 of the Salting-department, the test of the metal detector was shown with test bars 5mm Fe/6 mm Fe/6,35mm SLS 304. The test was not performed for every bar "in the centre of the detector". (least sensitive area) Testing in the right way shows belt stop in the right way. **Minor NC 4.10.3.4.**

4.10.4 Magnets

No magnets are used into the process.

4.10.5 Optical sorting equipment

No optical sorting equipment is in use.

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

Products are not packed into glass/brittle containers.

4.10.7 Other foreign-body detection and removal equipment

As result of the HiRa no extra equipment needed/applicable.



4.11 Housekeeping and hygiene

Cleaning mainly by / own staff according to schedules with frequencies and applied agents and procedures and cleaning schedules
 Periodic cleaning schedule: check on performance via pre-SSOP and logbook of 2023. Cleaning is done as common in the branch: dry cleaning, flushing, foaming, (this includes disinfection), flushing. This is done on a daily base and covers equipment, plant, buildings, and services (with daily / weekly / monthly cleaning frequencies). Low frequent cleaning schedule (ceilings, walls above 2,5m, evaporators) assessed also. These detail the chemicals to use, precautions to take and method of cleaning. A list of cleaning chemicals is in place and calibration on dosing unit is executed. Daily end of production checklists/before start up, are recorded to communicate with and production incl. performed/requested corrective actions. An internal facility team supports handling of waste and staff facilities (detergent, gloves, paper towels).

Seen records of cleaning Pre-SSOP's during the audit and in records of the vertical test for the processing. Daily start-up checks with visual inspections are carried out. Results were (conform Mr) not excellent, this way projects to improve were implemented, showing now in general, good results. Inspection: corrective actions seen cleaning activities 23 nov.2021 daily list to of non-conformities: to correct and verification by employees next morning, good control was seen. Hygiene checks of materials is performed 2 x 3 months, knives/ metal gloves, measure equipment, cleaning utensils, cleaning of hands checks (1 x Q) on VRBG agar, compressed air 2 x year. Performance and results were verified, ok
 Empty goods which was cleaned is also verified (min 2 x Q), ok
 Cleaning chemicals documents seen e.g. seen in document of , all Food grade.
 Overview cleaning agents and objects 2023 including what has been done by Vion and what by seen.
 CIP is not applicable, brine tanks are only rinsed, but manual started and observed. Residue tests washed crates on daily basis recorded in SSOP of the internal service department pH 7-9.

In general, well-maintained condensers seen. The grid of the unit in the smoking department is not well-cleaned. **Minor NC 4.11.2.**

Monitoring on performance cleaning in monthly hygiene/fabrication check rounds. Further daily start-up checks on performed cleaning by . Deviations; directly cleaned and recorded in the "logbook" for

See also MAJOR NC 4.9 in relation with cleaning.

4.11.7 Cleaning in place (CIP)

CIP is not applicable.

4.11.8 Environmental monitoring

Environmental swabbing (Listeria) and Rodac (TPC) programmes are implemented. Analyses on Listeria are done by an accredited Agar, swabs and residual tests are performed weekly as indicated by the risk-based environment monitoring program. Results and trends are plotted in the management review. Actions are taken, short lines in follow up and control were seen. Seen results of Listeria/Salmonella swabbing 1x 3 weeks per department; f.e. 27.11.2023 TPC swabbing; 29.08.2023. No remarks.



4.12 Waste and waste disposal

Good control was seen over the collection and disposal of waste. Dispatch of category 2/VO853 and category 3/VO853 materials to authorized processing companies (). Other by-product (like bones) supplied to authorized processing companies for human consumption (). Other waste stored on-site and collected separately by
 No trade-marked materials from customers to be destroyed.

4.13 Management of surplus food and products for animal feed

Category 2 + category 3 material declared unfit for human consumption, retrieved by (); which is specialized in the destruction of this type of animal by-products. Trade documents according to Regulation 1069/2009/EC. A register is kept, and legal requirements are met, e.g. separate refrigerated storage and clear identification.

4.14 Pest management

Contracted via () for rodents; 8 times a year, including EFKs. Site map with all bait stations seen. Trend analyse and comply with BRC requirements in MR. An effective control programme could be shown, regarding to visits: 27.10/17.11/01.12-2023.
 All required items well recorded, including an actual plan and specifications of pest control products. Qualified employees from the contractor f.e. () EVM valid till 01-2028.
 Pest signage by staff in the yearly training including the actions when necessary.
 Staff () have been trained to identify potential pest activity 2021-03-25.
 No infestation observed during site round.
 In-depth pest control survey; frequency based on risk determined; 1xY; f.e. 09.10.2023 including attention for bird roosting. All actions are closed. Nearly trends are identified according to the evaluation, trend analyses is also given in management review and the report from

4.15 Storage facilities

At the production facility limited cold storage is available. Temperatures control system implemented (frozen and cooled) including temperature alarm settings () linked to contractor alarm desk forwarding alarms to Vion officers when necessary. No storage under controlled atmosphere applicable. External contracted storage is applied for almost all goods. All transported at appropriate temperature (< 7°C for fresh and when it is frozen to below -18°C conform to legislative requirements).
 A separate building is applied for the storage of packaging and other raw materials. No return of partly used packaging materials to this warehouse. No outside storage, except for dirty crates. Warehouse / cold store contractors are approved. In a separate part of the production facility, the packaging is unpacked so packing material not transported into production areas (like foils and strips).
 The storage facilities are suitable in relation to the operation. Warehouses are clean, dry, well-ventilated spaces protected from dust, condensation, fumes, odors or other sources of contamination. Waste materials and chemicals (cleaning products, lubricants, and pesticides) are stored separately. Good warehouse practice audits are performed.
 Seen right temperature settings in the verification report 18-24.09.2023.
 Seen history with setting for week 38-2023.
 Seen on all 3 audit days, right way of storage.
 Seen on day 3, the right storage of ambient ingredients/packaging materials.



4.16 Dispatch and transport

Dispatch and release of products is based on temperature verification (CCP). Transport mainly subcontracted to DistriFresh, a Vion transport company, which is BRC Storage & Distribution certified. Other approved logistic partners are listed. Contracts managed by the logistic / supply chain department at the corporate VION organization covering the requirements of the BRC Food standard related to transport. Transport is organized and scheduled by the Service desk. They are only using approved transport and storage contractors. Trucks and reefer containers are inspected for hygiene and temperature before loading. Results of this inspection are recorded at the CP control forms. Trailers may be pre-loaded and parked on the Vion Scherpenzeel site area. Remote monitoring of cooling equipment by logistic contractor DistriFresh. Internal transport is performed with electric hand trucks, cleaned and remained on basic level. Transport: all outsourced. Companies certified against GFSI standards. (f.e. /Distrifresh.

Evaluated intakes during the audit without remarks;

- Intake on day 1; (incl. CCP 1 temperature check) of meat (Backs), order
- Intake on day 3; packing materials order and related checks on loading department and materials on FSPZNL100087
- Loading o. \ order and related incl. CCP2 temperature check and check in records of CCP1)



Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.3.6	No temporary facilities
4.4.5	No suspended ceilings or roof voids present.
4.9.1.2	No use of strongly scented or taint forming materials.
4.9.2.2	No uses staples, clips and drawing pins
4.9.4	No product packed in glass or brittle containers.
4.10.4	No magnets are used into the process.
4.10.5	No optical sorting equipment is in use.
4.10.6	No packing in glass jars or other rigid containers.
4.10.7	No other foreign body detection and removal equipment in place
4.11.7	No CIP installation on location
4.12.4	No trade-marked materials from customers to be destroyed
4.14.3	Pest management is outsourced.
4.15.4	No RH controlled storage.
4.15.5	No storage outside.



5. Product control

5.1 Product design/development

Reference procedure: P-NL-Food-10190 Product design and development.
 Product development is normally not applicable except for changes in existing products and introduction of new packaging methods. Past period, starting with a cooking process. In all relevant cases when the company changes anything or introduces new methods this is described in detail in a validation reports which were verified. Factory trials and validation from such trials are documented, demonstrably included in the quarter reviews. Shelf-life verification and evaluation details have been verified; f.e. 18.09.2023.

5.2 Product labelling

Labelling according to legal aspects as required by the company, several checks done during production tour. Raw materials are special labelled in the racks and on the individual product bags. Shown were good results for the product of the vertical traceability test.
 Verification of shelf-life date recorded on labelling controlled as CP. No fully automatic labelling of packed product installed. Slicing is packed for of consumer products this line is automated with automatic labelling and verification procedure applied, rest is B2B. Pre-printed labels used, up to 6 different types. Product labels are printed based on article numbers and must be printed per packed unit. No functional product claims made. No allergens identified on-site. Labelling according to legal aspects as required by the company, several checks done during production tour. Raw materials are special labelled in the racks and on the individual product bags. Shown were satisfactory results for the product of the vertical traceability test.
 Labelling product for EU-market following EU-legislation and any additional customer requirement. Following Vion central procedure labelling for markets outside EU approved by sales (HQ Vion) after evaluation by the customer. In storage no none-labelled goods allowed.
 Suitable cooking instructions are limited applicable; only for retail-packing. Seen in the right way. Seen several right labelling of B2B packing. Retail packing/labelling seen; sliced and packed vaccuum 400g of boneless 6mm Loins.

5.3 Management of allergens

No allergens on-site. The Allergen risk is included in the HACCP analyses, but no allergens on site (general policy, managed by HQ and verified by local QA. Also in the canteen no allergen-handling seen. Seen allergen handling as part of the yearly training.

5.4 Product authenticity, claims and chain of custody

Risk-assessment ref. P10204, v28.02.2023.
 Vulnerability assessment based on central 'procedure product and process integrity' (P-FOOD-10049) and complies with IFS PIA certification, GGN4056186517845. Local assessment must be carried out on the basis of this procedure and is translated in Procedure 'Risicomanagement-beheersplan Product-procesintegriteit derde landen' P-SPZ-NL-10174 with high risk appraisal. Also listing of countries to supply to is available in F-SPZ-NL-10095. Basically, the local vulnerability assessment is based on the evaluation of raw material characteristics, supplier evaluation and logistic services. Raw material risks are considered low as products can be easily recognized as pork meat parts. Product mainly supplied by Vion sister companies. Procurement of meat parts from external companies and external logistic services (especially when products are unpacked, e.g. freezing) are considered high risks. Audit program implemented for logistic service providers depending on the company risk profile. Logistic service providers have to be GFSI-certified and CoC-certified as well. Segregation and correct identification is established for several animal welfare categories (so called quality lines):

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- Organic pork (SKAL certified): identification by green label, last number of article number = 7 not in production at the time of the audit;
- Farming star (“beter leven”): identification by orange label, last number of article number = 5;
- GB (good farming including welfare requirements for UK clients): identification by blue label, last number of article number = 6;
- GF (IKB certified): identification by blue label, last number of article number = 3;
- QS (Qualität und Sicherheit for German market): identification by blue label, last number of article number = 4 or 8.

Certification of GF, GB by certification bodies IFS PIA by LRQA. All products are produced based on EG 82 NL approval number, incl. regular meat (called ST “standard”). Risk assessment and execution of mass balance exercises are scheme requirements. Daily verification of mass balance FS at process level is accepted by the certification body (FS scheme requires full daily mass balance test). Mass balances are made on a daily basis for all quality lines. During the audit it is checked how the status of quality lines is verified and segregated at the intake department and several production departments (cutting / deboning, DMM, SDP, etc.) like the labelling of meat hooks, the identification of product lines, the production sequence (starting with high quality lines followed by lower quality lines), color coding of recipients (colored liners) to prevent exchange of meat categorized in different quality lines.

Procedures are implemented concerning the verification of the quality line and how to downgrade the quality lines as generally the demand of certain quality lines is lower than the availability of meat categorized in higher quality lines. Downgrading quality lines is the responsibility of trained and qualified personnel. The downgrading is allowed following the sequence: FS -> GB -> GF -> QS -> ST. BIO-> GB. Vulnerability assessment for non-meat raw materials covered by the procedures and risk calculation based on a few factors like product characteristics, packaging materials, origin, product availability. No high-risk raw materials identified.

- Also countries of destination can have their own requirements (like USA / Canada, Korea, Japan, China). Dutch authorities (NVWA) issue health certificates on batch level following third countries export protocols.

5.5 Product packaging

A system of coloured jumbo bin liners is in use for some clients / products (purple for Japan, orange for FS). For others mostly blue liners are used. Packaging materials are unpacked in a separate cell next to production are (re-)stored separately from production materials. Partly used packaging is covered prior to returning to the storage area. Packaging materials have to comply with Regulation 1935/2004/EC (specification review / approval process) and 10/2011.

Final products mainly packed vacuum and often delivered in Dolavs. (bulk boxes)

Foils assessed during the traceability test. (from



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

No laboratory present on the site.
 External analysis via .
 Product monitoring based on Regulation 2073/2005/EU laid down in procedure P-FOOD-10008. Both food safety criteria and process hygiene criteria set by legislation are translated to the monitoring program as reviewed based on sampling.
 Listeria positive swabs found during monitoring of production areas (internal requirement). All products produced by Vion Scherpenzeel BV have to be fully heated prior to consumption. Comprehensive action plan on cleaning is observed.
 Mechanically separated meat type 3/type 4 (according to Regulation 853/2004/EU) to be used for meat product must be heated prior to consumption.
 A microbiological monitoring program: bacon (TPC, Entero's, Salmonella, Listeria), SDP (TPC, E. Coli, Salmonella, Listeria), DMM (TPC, E. Coli, S. aureus, Salmonella, Listeria) and shelf-life testing program is in place. Results are analysed and reported . Results of 2023 YTD demonstrate compliance with the defined specifications. Results are part of each quarterly MR and shared with MT. Each month a comprehensive report is created also to be presented to authorities.
 Physical / chemical product monitoring as part of process control, for example meat part size and fat content for SDP.
 Seen analyses incl. BBD from 18.09.2023, related to the traceability test.
 Seen results of Listeria/Salmonella swabbing 1x 3 weeks per department; f.e. 27.11.2023
 TPC swabbing; 29.08.2023.
 Water analysis 4xY; f.e. 23.05.2023.
 No remarks.

5.7 Product release

No positive release. Review of the production reports by the (assistant) production manager. Sign off of the production records sheets as reviewed for the vertical audit. When requested by the customer QC inspections can be carried out and results reported as applicable for the vertical audit trail.

5.8 Pet food and animal feed

The site does not produce/pack pet food.

5.9 Animal primary conversion

Not applicable, no live animals.

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
5.6.5	No own laboratory.
5.8	The site does not produce pet food and animal feed.
5.9	No animal primary conversion

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6. Process control

6.1 Control of operations

Process control was evaluated in all process steps including packing and change-over.

Day 1;

- Intake (incl. CCP 1 temperature check) of meat (Backs), order
- Brining, tumbling, packing in vacuum foil; in bulk boxes (Dolavs), including check metal detector
- Brining, tumbling, smoking and packing in vacuum foil; in bulk boxes (Dolavs)
- Freezing of pre-packed fresh meat (Koppen) from supplier Vion Boxtel
- Marinating/seasoning of spareribs
- Packing in vacuum foil and change-over from Sweet marinated Spareribs to Spicy marinated Spareribs.

Day 2;

- Sous-vide cooking of (packed) Spareribs Sweet and Spareribs Spicy and related core temperature 85°C.
- Packing in foil and shrinking of Beenham (BBD 04.01.2023)
- Tempering of Loins as preparing for slicing
- Crate washing process
- Loading o. and related incl. CCP2 temperature check and check in records of CCP1)

Day 3;

- Slicing and packing vacuum 400g of boneless 6mm Loins, including check X-ray
- Intake of packing materials order) and related checks on loading department and materials on FSPZNL100087.

6.2 Labelling and pack control

Packing takes place in line with production planning and customer requirements. Tests of product labelling, traceability code and shelf life carried out in accordance with specifications. B2B, but also consumer packing. A system is developed with controls and instructions. Several types of products are identified, and pre-printed labels applied. Packs are labelled with more than one label per pack on customer request.

Label checks are implemented per batch. Records checked on the audit days and in the vertical audit. There are labels on fresh meat in primary packaging as vacuum foils and bags and there are labels on packed, slices, salted or seasoned meat. Also labelling applies on boxes, crates and other secondary packaging.

Seen in detail;

- After brining, tumbling, packing in vacuum foil; in bulk boxes (Dolavs)
- After brining, tumbling, smoking and packing in vacuum foil; in bulk boxes (Dolavs)
- Packing in vacuum foil and change-over from Sweet marinated Spareribs to Spicy marinated Spareribs.
- Packing in foil and shrinking of Beenham (BBD
- Slicing and packing vacuum 400g of boneless 6mm Loins



6.3 Quantity, weight, volume and number control

No weighing under e-sign.

The company has implemented a quantity control system. All products are sold by weight. Metrology controls the balances for commercial purpose. Calibration of the scales is demonstrable, tarres are implemented. Consumer packing are all weight, minimum weight is applicable. The devices are tested internally by means of standard weights. Weighing equipment is calibrated 1x/y and tested daily in Pre-SSOP. Checks are performed at start and at the end of the run. Records checked on the audit days and in the vertical audit, ok. The scales for intake and dispatch are connected to the computer system.

No remarks for evaluated processes;

- After brining, tumbling, packing in vacuum foil; in bulk boxes (Dolavs)
- After brining, tumbling, smoking and packing in vacuum foil; in bulk boxes (Dolavs)
- Packing in vacuum foil and change-over from Sweet marinated Spareribs to Spicy marinated Spareribs.
- Packing in foil and shrinking of Beenham (BBD)
- Slicing and packing vacuum 400g of boneless 6mm Loins

6.4 Calibration and control of measuring and monitoring devices

Calibration procedures (with use of maintenance software) ensure relevant equipment is identified and regularly calibrated. Calibration is planned both by QC and maintenance following an overview op equipment. Critical measuring equipment are thermometers (handheld and PT 100/ PT1000 in refrigerators and smoking cabins). Internal calibration with 2-monthly frequency (thermometers CCP), 6-monthly frequency (thermometers CP) and yearly frequency (PT 100/PT1000) or external calibration with yearly frequency (X-ray).

Results were shown for:

- Floor weigher salting; T52, valid till 09-20243
- Weighers in-line; 10.10.2023
- Sensors for temperature monitoring conditioned departments; 17.01.2023
- Metal detectors/X-ray's; validd till October 2024

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
6.2.4.	No on-line label scanners applied.



7. Personnel

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

The organization structure (v September 2023) is documented in the system; levels Plant Manager/Manager Operations/Department Manager/Foreman/Employee. Function descriptions are set up for all, including replacements; f.e. for Foreman Slicing v January 2022. Employees are trained, instructed and supervised by the Team Leaders/Manager Operations/QA. Records that demonstrate appropriate and effective training. Seen in detail training for [redacted] (Haccp/FD; 30/28.06.2023), [redacted] (Product integrity 06.04.2023, MDD 26.01.2023, general training 29.09.2023) and for [redacted] (CCP1 and 2; 03.05.2023, TACCP; 18.04.2023) A yearly review was carried out about the competences in relation to carried out activities; seen f.e. [redacted] (30.11.2022) and [redacted] 06.01.2023.

Seen several training records and competence evaluations. Beside training, for temporary employee ("Uitzendkracht") [redacted] no competence evaluation carried out since his start in 2022. It is not clearly defined when/how an "Uitzendkracht" will be reviewed for his competency. **Minor NC 7.1.7.**

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

Company hygiene rules documented in version 01-2023 which covers BRC9 requirements. Verification detection blue metal detectable plasters by staff when new batch is received. Rules about medicines, hygiene control is included in the rules.

7.3 Medical screening

Medical screening prohibited in NL. Adverse conditions in health have to be reported. Also applicable for visitors. (sign in required).

7.4 Protective clothing: employees or visitors to production areas

Company issued protective clothing (inclusive work shoes) is given to all staff and visitors. Visitors get hairnet, Astro cap, head cap, coat, trousers, shoes. The laundering of protective clothing is outsourced to a contracted and specialized laundry [redacted]. The wearing of sleeves, aprons and work coats isn't allowed during breaks, eating, smoking and using the toilets. White protective shoes are worn and washed by sole washer (before entering production) and by manual cleaning (after leaving production). Disposable hair nets, beard snoods and Astro-caps are in use. Cleaning facilities are provided. Knives and metal gloves are washed internally following a manual cleaning procedure incl. disinfection

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
-	



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

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



9. Requirements for traded products
9.1 The food safety plan - HACCP
Click or tap here to enter text.
9.2 Approval and performance monitoring of manufacturers/packers of traded food products
Click or tap here to enter text.
9.3 Specifications
Click or tap here to enter text.
9.4 Product inspection and laboratory testing
Click or tap here to enter text.
9.5 Product legality
Click or tap here to enter text.
9.6 Traceability
Click or tap here to enter text.

Module 11: Meat Supply Chain Assurance	
Scope	Click or tap here to enter text.
11.1 Traceability	
Click or tap here to enter text.	
11.2 Approval of meat supply chain	
Click or tap here to enter text.	
11.3 Raw material receipt and inspection	
Click or tap here to enter text.	



11.4 Management of cross-contamination between species

Click or tap here to enter text.

11.5 Product testing

Click or tap here to enter text.

11.6 Training

Click or tap here to enter text.

Module 13: Meeting FSMA Requirements for Food – July 2022

Preventive Controls for Human Food: 21 CFR Part 117 (Clauses 13.1.1 – 13.1.33)

Click or tap here to enter text.

Preventive Controls for Animal Food: 21 CFR Part 507 (Clause 13.2.1)

Click or tap here to enter text.

Food Defence: 21 Part 121 (Clauses 13.3.1 – 13.3.11)

Click or tap here to enter text.

Sanitary Transportation: 21 CFR Part 1 Subpart 0 (Clauses 13.4.1 – 13.4.9)

Click or tap here to enter text.

Produce Safety: 21 Part 112 (Clauses 13.5.1 – 13.5.18)

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14.1 Additional Specifier Requirements

14.1 Traceability

Click or tap here to enter text.

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14.2 Environmental Monitoring

Click or tap here to enter text.

14.3 Product inspection and laboratory testing

Click or tap here to enter text.

14.4 Protective clothing: Employees or visitors to production areas

Click or tap here to enter text.

