



# Audit Report Global Standard Food Safety Issue 8

1. Audit Summary						
Company name	Vion Tilburg BV		Site Code	1886989		
Site name	Vion Tilburg BV					
Scope of audit	The slaughtering of cattle and the deboning, cutting to specification and packing (foil or vacuum) of beef. The production and packing (foil or drum) of slaughter by-products, semi-processed scalded stomachs.					
Exclusions from scope	None					
Justification for exclusion	None					
Audit Start Date	2022-04-12	Audit Fini	sh Date	2022-04-14		
Re-audit due date	2023-05-10	Head Offi	ce	No		

Additional modules	मालीपविद्या		
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		А	Audit Programme		Announced
Previous audit grade	A		Previous audit date		2021-04-08	
Certificate issue date	2022-05-24		Certificate expiry of	date	2023-06-21	
Number of non-conformities		Fundamental			0	
		Critical		0		

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2. Audit R	esults	• 7	
		Major	0
		Minor	10
3. Compa	ny Details		
Address	Enschotsestraat 28 5013 BD Tilburg		
Country	The Netherlands	Site Telephone Number	
Commercial representative Name		Email	
Technical representative Name		Email	

4. Company Profile				
Plant size (metres square)	•	No. of employees	No. of HACCP plans	
Shift Pattern	No			
Subcontracted processes	No		 	

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4. Company Profile	
Other certificates held	ISO9001; Organic; IFS PIA; BLK
Regions exported to	Europe Asia North America Oceania Choose a region Choose a region
Company registration number	NL 87 EG
Major changes since last BRCGS audit	Click or tap here to enter text.

VION Tilburg B.V. is a cattle slaughterhouse and industrial butcher. It is one of the several sites of VION Beef which is a company with global presence. Key numbers for VION group are employees with a turnover of slaughtering pigs per week and cattle per week. Leadership is Dutch / German. The location Tilburg is NVWA approved (NL 87 EG). VION Tilburg B.V. produces beef products and slaughter by-products and offal (organs, processing of stomachs (scalding) and the processing of first stage of natural casing (cleaning/ heating of bovine intestines)). The cattle is bought by VION Rundvee BV at the general mostly Dutch market. Slaughter capacity is animals per day—per hour which is all done in shift.

The cutting department is supplied by pre-selected carcasses and very first cutting. The department includes about 3 main routes (forequarter, hindquarter and butcher handling). There are many equivalent activities (deboning, cutting to specification). Packing is at semi-bulk level (no consumer packed items). Trimmings are packed loose in crates/ dolavs or vacuum packed. The by-products are packed loose in crates/ dolavs or vacuum packed. The main customers are operating companies in the VION Food Group, retailers related processing within the Netherlands and Europe, and business to business in and

The site is situated at an industrial area near the centre of the town Tilburg. The oldest part of the building is from 1920. In 2006 a new building for the cutting and packing departments has been constructed. Currently plans are defined on extending staff facilities, extending storage of crates and primary packaging material, and alteration of offices. Some beef is sent to an external provider for freezing, packing and final storage (GFSI certificated.). Some products from sister VION company in Enschede are cross-docked in Tilburg.

VION Tilburg B.V. is certificated against ISO 9001 (multi-site certification) and holds SKAL approval (001997), CoC declaration and certificate for trading of BL2\* meat. At the moment the company employs approximately people (including subcontracted personnel). The production takes place in one shift. The surface is q. meters and the used quality system is based on one HACCP-study. www.vionfoodgroup.com.

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5, Pro	duct Characte	aoitain				
Product categories			01 - Raw red meat Category Category Category Category Category Category Category Category			
			at and by-products/offals is under a positive relea	s. Beef intended for further ase regime.		
High care	No	High risk	No	Ambient high care	No	
Justification for area		Appendix 2 is applied. In general beef and by-products are heated in one of the next stages of processing at the customer. Beef intended for further raw processing and consumption is under a positive release regime.				
Allergens handled on site		Milk Choose an allergen				
Product claims made e.g. IP, organic		BLK Organic				
Product recalls in last 12 Months		No				
Products in of the audit	production at t	he time	Different meat cuts e.g. runderhaas 2.7kg+, beef trimmings 80/20.			

6. Audit Duration D	etails		
Total audit duration	24 man hours	Duration of production facility inspection	12 man hours
Reasons for deviation from typical or expected audit duration	None	-L	

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6. Audit Duration De	ails
Next audit type selected	Unannounced

Audit Duration per	day		
Audit Day	Date	Start Time	Finish time
1 (start date)	2022-04-12	07:30	16:00
2	2022-04-13	07:05	16:00
3	2022-04-14	07:10	15:30

Audit Team	Auditor number	Name	Role
Lead Auditor	25774	Yuri Cosco	Lead Auditor
Second Auditor	Click or tap here to enter text.		Please select

Present at audit				
Note: the most senior o closing meetings (ref: c		site should be liste	d first and be present a	t both apening &
Name/Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
/ Site	X			X
Quality	X	X	X	X
/ Quality manager	X	X	X	X
/ HR Manager			X	
Production Leader		X		
/ Purchasing		X		
Maintenance manager		X		

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GFSI Post Farm Gate Audit History		
Date	Scheme/Standard	Announced/Unannounced
2021-04-08	BRCGS Food	Announced

RQA9732086_	RQA9732086_4616208			
F834 Food Sa	F834 Food Safety Audit Report Template v11			
8	Tem	plate issue date	2022-02-15	
Food	Version	1.0		
	F834 Food Sa	F834 Food Safety Audit Report T  8	F834 Food Safety Audit Report Template v11  8	F834 Food Safety Audit Report Template v11  8

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# Non-Conformity Summary Sheet

	Re-audit date	
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	Reviewed by	
	Date reviewed	2022-05-09
	Root cause analysis	During Covid the weekly meetings were not always hold in relation to Covid contamination risk. The lower frequency of weekly meetings in relation to a advised lower "visiting level" did not bring the acceptable standard of administration/
	Proposed preventive action plan	Document F-TIL-NL-10078 was updated with "werkoverleg" frequency conform BRC standard. HR manager was ordered to make weekly reports, in case of absent the plant manager is her substitute. See attachment: Proof minor 1A BRC audit Vion Tilburg 2022. NC was also discussed into "werkoverleg" and reported. See attachment: Proof minor 1B BRC Vion Tilburg 2022.
	Correction	Old reports can not rewritten in "past" time. Directly discussing this NC and planning approvement by HR manager, Plan tmanager and QA manager,
	Detail	Weekly meetings are planned but no reports / follow-up of action points could not be demonstrated from week 28 in 2021 until week 9 of 2022. NOTE: bimonthly management team meetings are planned and done.
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Practical situation was that if a trailer was refused, it could park outside of Vion Tilburg property/terrain with optimum/maximum cooling. Some hours later it returned with "cooled conform norm limit" meat and was accepted. To avoid this kind of situations a defined working program was developed (receiving to a maximum of 9°C, blocking and controlled cooling). This method is stopped and Vion Tilburg is working conform the new described limits into procedure.	Workers were outstanding creative and started (without
Into new situations (CCP's) only acceptation limits conform direct law and/or requirements are used after consultation QA (central) and or/ MT.	Procedure was updated. Between latest 5 animals was
The criteria for temperature acceptation into related procedure is rewritten to a maximum of 7,0°C for surface carcass. Related operatives/ managers are instructed/trained. See attachment: Proof minor 2 BRC Vion Tilburg 2022.	Training/Instruction workers that they have to work conform (updated)
In the definition of the CCP5 (warm transport), it is stated that carcasses can be accepted up to 9°C, whereas this is not allowed.  NOTE: no instances of temperatures higher than 7°C were seen, not was this exception of 9°C known by shop floor personnel. The remark is purely documentary.	For CCP 1 and CCP4 it was seen that the verification of the correct application was
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	permission QA) verification during other monitoring moment than described into earlier procedure. This is not accepted because only during last monitoring/verification (carcasses approved for human consumption) is conclusion full day production acceptable.	Not all managers/related workers did know that
	a practice/ possibility from presence disapproved carcasses (end-liners). In such situation the result of the monitoring/verification was not reliable. So related personal found a creative way to solve this problem (starting with verification during first monitoring). After update procedure's P-TIL-NL- 0007 and P-TIL-NL- 10128 and training only the latest 5 carcases approved for human consumption must be part of latest monitoring and	QA manager will order at beginning each calendar year
	procedures. See attachment: Proof minor 3 BRC Vion Tilburg 2022.	Related managers/workers are informed and have done their yearly supplier
	done on the first 5 carcasses of the day, whereas the procedure indicates that this needs to be done on the last 5 carcasses on the day. The interview with the person performing the verification stated that the verification was done alternating the first 5 carcasses of the day on day A and the last 5 carcasses on day B. NOTE: the monitoring was correctly done.	The evaluation of suppliers of services was not done or not timely done for all
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suppliers must be evaluated yearly. Also different Vion staff departments (HR, transport, buying non food) are ordering their own evaluation to different persons into the Vion production plants organisation during different time schemes during calendar year. So central overview and management (out of HQ) is missing.	During the last years several QA programs and requirements demanding more administration tasks while attention new personal /workers is more based on daily production. Vion HQ QA central is ordering the QC tasks to
all managers/related workers to evaluate their suppliers and communicate outcome with him.	Training\instruction for all Vion Tilburg "production - management" is planned for period Q2,Q3 2022. Focus on HACCP and Deming (PDCA) circle and related practice/registration processes. NC is
evaluation 2021 and share information with QA manager Vion Tilburg. See attachment: Proof minor 4A and 4B BRC Vion Tilburg 2022.	Old documentation could not rewritten in "past" time. Instruction from related department-managers and or related persons is done and documentated.
suppliers: interim workforce agencies not yet done in 2022 (last was January 2021) and (crate washing) is not taken in the systematics of the supplier evaluation.	In several instances, there was no documented proof of corrections or corrective actions made:  - 2021 evaluation of interim workforce agencies: no followup on the scores that were low - Slaughter preSSOP of 11/01 – no proof
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	2022-05-09
production departments and The QA for the QA manager(s). Also filling the necessary amount of workforce in relation to production/QA system is a challenge for our HR department in relation to availability on the "vacancy marked".	Comprehension of the level of depth of the test was erroneous.
discussed with plant manager and HR manager. See attachment; Proof minor 5 BRC Vion Tilburg 2022.	Begin 2023 the test will planned and performed conform BRC demands in relation to actual Vion procedure. More attention / information from proces will be part and report conform procedure P-VION-10015 page 5 Recall test. See attachment: Proof minor 6 BRC Vion Tilburg 2022.
	Report recall test 2022 can not rewritten in "past" time. Most actual Procedure Crisis management version P-VION-10015 (version 07/04/22) will be used. Proof minor 6 BRC Vion Tilburg 2022 (rewritten).
that immediate cleaning was done - Cutting preSSOP 13/04 – no proof that immediate cleaning was done SSOP compliance KPI: results 02/2022 above the standard – no documented approach plan could be demonstrated	The company only holds a limited recall test, not testing all the different elements of the recall procedure.
	3.11.3
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	d sk c e sk	Verifying cleaning company on frequencies cleaning company on of cleaning.  Implementing system places. Focus and that NC during PRE-
	Construction building but activities for new bin storage department finding articles of water running drops of water running and in vacuum department at during concrete pouring outside production what not could be stopped anymore. The water stopped running immediately after the works mass cleaned. "was cleaned."	Dirty/moldy ceilings, silecone joints and algae formation must planned for Irr cleaning/repair. See th
	Drops of water were found to be running down from the rear wall of the vacuum department. NOTE: no product contamination was seen as at that moment no product was stored in that plac area.  Goutt during the vacuum action of the vacuum area.	On several places ceilings were found to be dirty and/or mouldy. This was the case in the 'afsteekcel' where silicone joints were
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		2022-05-09	2022-05-09
	service not always directly based on NC's outcome of the PRE-SSOP checklists.	No attention for full overview used transport belts in relation to FG conformity and were exactly placed/used.	Definition validation is "general accepted" task for QA department. All actions with direct possible influence/ consequences for food safety system must be done by Vion
	better/faster registered and solved by action technical service / maintenance department. Starting (May 2022) 1x monthly hygiene verification control by QA department.	Technical department must produce overview all used belts with related places and check this yearly in relation to actual siutuation. See attachment: Proof minor 9 BRC Vion Tilburg 2022.	If new investments/changes are planned in relation to food security (HACCP) system validation must be planned, performed and registrated.
	BRC Vion Tilburg 2022 (pictures).	Technical department has must produced an overview of used belts and related places. Proof minor 9 BRC Vion Tilburg 2022.	Validation is done by QA Vion Tilburg. See attachment: Proof minor 10A and 10B BRC Vion Tilburg 2022.
	where algae formation was seen and the cutting room where a silicone joint was found to be mouldy over quite a distance.	Food contact materials are used (especially transport belts). Declarations of conformity are present, but the company is unable to link the certificates that are present to specific transport belts that are used in the production area (minor nonconformity).	There has been an investment in the company in new, more performant metal detectors. The validation of these metal detectors has not been performed, thus not exploring all possibilities of
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	Tilburg organisation	and at least reported	to QA department.	Than action could be	planned and garded
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# Additional Modules / Head Office Non-Conformity Summary Sheet

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<b>S</b>	No Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date Rev	Reviewed by

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## **Detailed Audit Report**

### 1. Senior management commitment

### 1.1 Senior management commitment and continual improvement

The company policy is laid down in document P-TIL-NL-10062v10 and signed by the plant manager. The policy is also posted on different places in the company, but moreover the elements of the policy (quality, food safety, traceability, animal welfare, sustainable packaging, product integrity) are also taken in the trainings that are given to personnel.

With regards to Food Safety Culture, the company has a a procedure P-FOOD-10059 dated 18/01/2022 which provides a general overview of the initiatives taken in the light of food safety culture. The activities undertaken are very broad and start with language lessons to improve communication between the employees and from management to employees (instructions in several languages are available). Further important points are personal discussions held with personnel as well as the satisfaction surveys. During the opening interview the site manager indicated that personnel management is key to the success of the company – clearly focusing on keeping personnel tied to the company. The food safety culture was found to be effective during the audit – ranging from small actions done by the employees to enthusiasm during the shop floor interviews.

Two types of targets are defined: some rather in relation to the company strategy (e.g. construction new building, more employees directly contracted by Vion, improving animal welfare). A second type of objectives are SMART and related to, amongst others, complaints, food safety complaints, microbiological results, results of cleaning and disinfection, pre-SSOP and SSOP compliance. Generally speaking, the company is achieving its targets after the third quarter of the fiscal year. KPI are reviewed quarterly, at a minimum.

A whistleblower process is installed and consists of the possibility to contact an external e-mail address and an external telephone number. The existence of this process is explained in the trainings that personnel receive and in the welcome brochures. The process has not been used by Vion Tilburg employees.

The company holds partial management reviews quarterly, leading to a final management review at the end of the year. Last full management review was in week 28 of 2021, whereas the quarterly report over the first quarter of 2022 was focused on during the audit. All necessary elements have been taken in the report (previous actions, audits, objectives via X-matrix structure, complaints, customer satisfaction, supplier management, product integrity, animal welfare, incidents, HACCP and conclusion incl. resources). People present in these meetings are plant management team, including amongst others the plant manager, quality and production. Action points are defined and used as an input for the next year. Actions defined concern amongst other microbiology, customer satisfaction and the new building structure. Apart from the quarterly reviews, MT meetings are held bi-monthly. Weekly meetings where points with regarding to quality and safety are planned weekly and the meeting minutes consist out of action points only. Meeting minutes demonstrating that these meetings are held and action points are followed could not be demonstrated from week 28 in 2021 to week 8 in 2022 (minor non-conformity).

Company is kept informed with regards to legislative changes via Vion headquarters and via authorities that are permanently onsite.

The resources offered are adequate and important investments are currently planned: new routing of clean and dirty crates (expansion of existing building is planned), new locker rooms and hygienic

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entrances of the factory and (to be finished in 2023) new stables for living stock. A supplementary person in QA has been employed in the beginning of 2022.

The recertification audit has taken place on or before the audit expiration date.

Senior management was in attendance of opening and closing meeting, as well as all intermediate feedback meetings.

No incorrect use of logo seen.

It has been established that the 8 minor deviations from the previous have been adequately resolved.

### 1.2 Organisational structure, responsibilities and management authority

An organisation chart reflects the organisational structure (Februari 2022). The plant manager holds full responsibility on the production site, with a production leader and several departmental heads. Other functions such as quality, commercial, logistics, maintenance and HR are in staff positions.

Job descriptions and deputies are defined. Further, procedures (available through the electronic document system of Vion and printed where-ever necessary) provide the necessary details. Machine-instructions needs to be read and signed before any machine can be used by staff.

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

### 2 The Food Safety Plan - HACCP

The company's food safety control system is based on the Codex Alimentarius HACCP principles: an assessment is made of microbiological (main risks Salmonella, STEC, Listeria), chemical (main risks heavy metals, pesticides, PCB, dioxines, veterinary residu's, the allergen milk is acknowledged due to slaughtering of cows/presence of udder), radiological and physical (metal, plastic) risks for all steps in the production process, packing material and general elements as indicated by Vion corporate structures. Documentation is available in P-VION-1000 with regards to the global systematics and the framework, P-FOOD-10000 for the PRP definition and further in P-TIL-NL-10127 for the site hazard analysis.

There is 1 HACCP study and key processes identified in the scope are the slaughtering of cattle, the cutting to specification of beef and the slaughter by products and offal's.

The HACCP team consists of plant manager, QA manager, departmental managers and maintenance manager.

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The following CCP's are determined:

- CCP 1
  - faecal contamination of carcasses, zero tolerance for visible faecal contamination just before the carcass cooling step. Formal monitoring is done on 5 carcasses at least 4 times per day. There is a daily verification of this CCP on the 5 last carcasses of the day. Monitoring is done at the end of the slaughter process;
- CCP 2
  - Temperature control of cooled (vacuum) packed beef and by-products at dispatch (expedition). The critical limits are the core temperature of beef <7°C, intermediate surface contact temperature of vacuum packed cooled beef <6°C, core temperature of animal by-products <3°C, surface contact temperature of vacuum packed animal by-products <2°C. This is measured on every dispatch of product in the product reception / dispatch area;
- CCP 3
  - Temperature control of externally slaughtered cattle (carcasses) of approved suppliers. Critical limits are core temperature of beef <7°C, and (returned) cooled / vacuum packed beef and by-products. internmediate surface contact temperature of vacuum packed cooled beef <6°C, core temperature of animal by-products <3°C, surface contact temperature of vacuum packed animal by-products <2°C. This is measured on every reception of product in the product reception / dispatch area;
- CCP 4
  - Removal of spinal cord at the slaughter department. Zero tolerance for visible spinal cord or husks of spinal cord just before the carcass cooling step. Formal monitoring is done on 5 carcasses at least 4 times per day. There is a daily verification of this CCP on the 5 last carcasses of the day. Monitoring is done at the end of the slaughter process;
- CCP 5
  - Transport and reception of partially chilled beef quarters conforming (EU) 2017/1981 with transport time of maximum of 6 hours. This is measured on every reception or dispatch of product in the product reception / dispatch area. The theoretical explanation however allows a deviation up to 9°C, whereas no deviation is possible. No actual cases were seen and the rule was not known bu personnel in the logistics department (minor non-conformity).

Records are kept on different forms such as F-TIL-NL-0008 for CCP3, F-TIL-NL-0009 for CCP5. For CCP 1 and CCP4 it was seen that the verification of the correct application was done on the first 5 carcasses of the day, whereas the procedure indicates that this needs to be done on the last 5 carcasses on the day. The interview with the person performing the verification stated that the verification was done alternating the first 5 carcasses of the day on day A and the last 5 carcasses on day B (minor non-conformity). The monitoring was correctly done.

Verification is part of the quarterly management review and takes all the necessary points into account (CCP, CP and PRP), with a clear conclusion. Seen for fiscal year 2021 and partial information up to Q1 of 2022. The validation of the hazard analysis and the CCPs is extensively developed in Vion Group documentation. The last review of the HACCP study is 08/03/2022 (local document P-TIL-NL-10127).

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Details of non-ap	pplicable clauses wit	Injustification		
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### 3. Food safety and quality management system

### 3.1 Food safety and quality manual

All documentation is managed by central and site level procedures in an online system called a Specific controls over the manufacturing process are defined in the HACCP documents that define CCPs, CPs, pre-SSOPs and SSOPs. This system was found to be working effectively and meets the requirements of the Global Standard for Food Safety and ISO 9001 to which the company is also certified. An electronic quality manual is in place and available to departmental managers. Documents for registrations are available (paper) at the departments.

### 3,2 Document Control

Documents within are managed by the QA manager. Printed documents mention that they are uncontrolled, prompting readers to verify whether the last version is present.

### 3.3 Record completion and maintenance

Records are made during the production process. This partly electronic (I&R tracing) and manual (HACCP logs and planning documents. All logs are verified before archiving. Retention period for paper and digital archive is over 5 years.

### 3.4 Internal audits

Internal audits are managed through procedure P-VION-10011. 4 internal audits are planned annually, covering the complete scope of the standard. Two audits have an extra focus on hygiene requirements. For non-compliance, the BRCGS grades for non-conformities are used. The planning is prepared by Vion headquarters and auditors used are auditors from other Vion production sites. The audit of 08/12/2021 (full scope) done by (qualified through ISO 9001 lead auditor training 27-31/1/2020 and further internal training on BRC). Auditor was independent of their own work. Corrective actions are followed through the audit reports themselves (site needs to provide a corrective action) and verified during the next internal audit.

Hygiene inspections are also done seen PRESOPP and SSOP over the period taken in the traceability test (week 2 of January). Additionally, the company has unplanned tours that are done by quality personnel. A good follow-up of action points was seen.

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### 3.5 Supplier and raw material approval and performance monitoring

### 3.5.1 Management of suppliers of raw material and packaging

Formally, the company buys live cattle from an internal company, which is called "VION rundvee" (represented during the audit). Cattle is bought through the own personnel, traders or directly from farmers. The quality requirements for cattle are indicated on document P-TIL-NL 10147. Cattle is fully followed through the I&R system which provides for identification and background information of the animals (government managed). Some meat is bought from other Vion sites (Belgium – Adriaens site in Zottegem). Seen procedure P-FOOD-10048 procurement sourcing process.

Suppliers are monitored on an on-going basis, leading to a supplier evaluation. This evaluation is based on food safety issues, whether the documentation is up-to-date, and this is balanced with the number of deliveries. The assessment is based on enquiries at each VION site involved. This results into an approved report of VION suppliers divided in food/meat, ingredients, packaging, sourcing suppliers as cold stores and transport, service suppliers. No exemptions are seen, if for high risk no GFSI certificate available than an audit is done. This approach includes agents and brokers.

The supplier monitoring and analysis was seen for:

- Vion Rundvee
- Vion Adriaens
- . 11.7
- was surely

### 3.5.2 Raw material and packaging acceptance, monitoring and management procedures

Cattle that arrives in the company has different checks. At first, a VKI check is done to see whether it is the correct animal and that there were no issues with regards to medication, diseases, etc... This is already checked by the company guard and records are present on document F-TIL-NL-10112. Seen for the reception of 13/04/2022. If there are issues, this is immediately flagged. In a next step there is a verification done, per animal, by the government (nVWA) to see whether the animal is slaughter worthy.

For meat that is bought in from Vion Adriaens, a verification is made, taking into account the temperature (CCP), the cleanliness of the truck, the labelling and whether the carcasses are clean. This is recorded on F-TIL-NL-0008. Instructions are available in the logistics area. Seen for 13/04/2022.

Packaging is visually checked for any deviations that are seen.

### 3.5.3 Management of suppliers of services.

Suppliers are monitored on an on-going basis. The assessment is based on enquiries at each VION site involved. This results into an approved report of VION suppliers. For transport companies a separate system is applied and this leads to a final list of approved transporting companies. Seen documents P-FOOD-10032 supplier assessment non-food. This was seen for the companies mentioned in 3.5.1., however other suppliers of services were not included in the list ( for crate washing) or were not yet done in 2022 (interim agencies – last evaluation was done in January 2021) (minor non-conformity).

### 3.5.4 Management of Outsourced processing

Only the freezing of certain products is outsourced – however this is not defined in the audit scope.

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### 3 6 Spredikeallons

For live cattle, the specifications are taken in document F-TIL-NL-10147, whilst separate specifications are in place for meat that is not slaughtered on site (coming from Vion Adriaens only). Seen for front feet document F-TIL-NL-10006 of 19/03/2021. For packaging both specifications and certificates of conformity are present and seen for document of 19/01/2022 and blue crate bag from dated 08/01/20219. All specifications seen were suitable.

### 3.7 Corrective and preventive actions

Corrective and preventive actions are managed depending on where they are defined. For internal audits for instance they are managed through the internal audit report structure. This means that the structure that is put in place is quite disperse and corrective actions taken could not always be demonstrated / were not always documented (minor non-conformity). This includes several examples at management level (workforce agencies, KPI non-compliance) and some shop-floor examples (pre-SSOP compliance). A full root cause analysis (so called A3 matrix improvement plan) is initiated only when there are major non-compliances (seen for one specific example and evaluated as effective).

### 3.8 Control of non-conforming product

The procedure on how to handle non-conforming product is P-TIL-NL-10229. This indicates that products that are non-conforming need to be blocked and identified accordingly (paper with 'blocked'). In some areas, there are specific zones for blocked product and non-conforming meat product is always classified in category 1 or category 3 bins, which are correctly identified. Category 2 exists but is assembled in category one bins to simplify the management on the field. When products need to be corrected in the slaughter area, this is done on a specific platform and in collaboration with the government (nVWA). When products need to be corrected in the cutting area, this is done on specific tables where plastic sheets are already present so that this can be done in a hygienic way.

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The traceability system covers the raw materials through work in progress to finished product including packaging materials and distribution according to procedure identification and traceability (P-TIL-NL-10067). This system is fully based on electronic data and written documents, day batch codes and bar codes:

- Cattle wear an earmark (+ accompanied by passport, track record and VKI according Dutch I&R)
- Beef carcasses / quarters get a serial number (together with date of slaughter + origin + classification)
- Quarters (own production + additional purchase) get a batch code (date of production + origin)
- Finished product is traced depending on the date of production (SSCC-number per piece / crate / box is scanned at dispatch)
- Primary packaging materials are tracked based upon the date of starting a new batch.

Internal trace testing is done several times per year as for several schemes as organic and IFS PIA. During the audit, a traceability test was performed for the finished product 'rundersnipper 70/30' delivered to customer—It concerned article number—internal specifications of 03/04/2020 seen, batch code—', production of—kg, sent to customer on 12/01 with order number—For this batch, it was asked to find back all the animals used (day lot), the packaging used. From the animals used, three were chosen to verify VKI information. For the packaging used, specifications were verified. A mass balance was made and verified (for the—kg). Of all the products produced on that day, a second product (article—kwas chosen and traced downwards to client—All information could be assembled within 4 hours and no issues were seen.

The company's own traceability test was done on 29/03/2022 on a tartare product. Mass balance was correctly made, timing of 4 hours was respected. No issues seen in the report, which include up- and downstream traceability.

### 3.10 Complaint-handling

Complaint handling is explained in procedure P-TIL-NL-10229. Complaints are recorded by the commercial department or are directly communicated to the quality department. The quality department performs the necessary research and answers to the commercial department who prepare a full answer to the customer. Complaints are measured as # per ton. The goal is 0.2 and is currently not fully met (0.22). Most important complaints are products that are insufficient shelf life (often related to the customer), hard plastic (2 complaints), grease from carcass rails (11), metal (9). Investigated complaint from customer (plastic foreign body, coming from crate).

### 3.11 Management of incidents, product withdrawal and product recall

Crisis management is done through procedure P-VION-10015 which contains the necessary elements and takes the global VION structure into account. Arrangements with regards to the certification body (3 days) are correctly mentioned in the procedure. The last annual test was done on 22/03/2022, but did not include sufficient elements (minor non-conformity) to be assured that all elements of the procedure are tested. No recalls since last audit.

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### 4 Site dandards

### 4.1 External standards

The site is located in an urban area in the outskirts of Tilburg. No surrounding activities that need any specific attention. There is a canal located at about 100 meters from the plant, but there are quite some other buildings in between the site and the canal. External areas are clean. The company is currently building an extension to the site, but this temporary solution is correctly managed and will represent an improved situation once finalised. No issues seen with regards to areas that might harbour pests.

### 4.2 Site security and food defence

The production site is completely fenced / surrounded by a wall. For those parts where, due to the building works, part of the fencing is removed, an adequate temporary solution is implemented, leaving no possibility to just walk on the site. A guard is present during all activities. CCTV cameras are installed. Staff receive badges that provide access to different areas upon necessity. The badges are managed and access is given by HR. Staff training is performed upon employment and further annually. The site is registered with the government under number EG 87 NL.

The food defence plan is taken in procedure P-FOOD-10051 and a re-validation has been done following the start of the construction works (on 12/01/2021). The TACCP study is taken in P-TIL-10126. There also is a local procedure P-TIL-NL-10205 for which personnel has received training. Verification is done annually (taken in the management review / HACCP approach).

### 4.3 Layout, product flow and scorepation

There are three large parts on the production site. The first part contains the live animal stable and slaughter part, the second part is the cooling of the carcasses and finally there is a cutting part in the plant. There is 1 slaughter line and carcasses are automatically transported to the cooling areas. From there there is 1 main cutting line to cut the carcasses into quarters. Once this is done, there are three possible finishing lines for technical pieces, one line for meat cuttings and some smaller machines for grease collection and some minor products. In the slaughter area, the intestines are sent to a specific area, where there is a cold and a warm cleaning line. In the cutting area, the offal is collected and sent to a specific area for further collection. There are no high risk or high care lines, only open low care areas according to the BRCGS annex. The site plan (2017) was seen during the audit. This will be updated once the new building is finalised.

Temporary works are being done at this moment outside of the cutting department. This is followed up by the maintenance department. No extra pest control risks are identified.

Product moves forward in all instances, thus having a correct product flow.

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

The oldest part of the building is from 1920. In 2006 a new building for the cutting and packing departments has been constructed and in 2012 expansion of the storage department took place. The

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fabric and internal condition of the site is suitable and satisfactory for the process. Walls, ceilings and floors were generally suitable, but some attention needs to be spent on ceilings in some areas. In one area, water was seen coming down from the wall (in relation to the construction works that are done. Floors constructed are generally in good condition and maintained. False ceilings are used in manufacturing areas. They are totally closed. Glass windows are protected by foil. Suitable ventilation/ cooling provided into the factory.

No issues seen with drainage, ventilation and extraction.

### Minor non-conformity

On several places ceilings were found to be dirty and/or mouldy. This was the case in the 'afsteekcel' where silicone joints were mouldy, 'uitbeengang' where algae formation was seen and the cutting room where a silicone joint was found to be mouldy over quite a distance.

### Minor non-conformity

Drops of water were found to be running down from the rear wall of the vacuum department. NOTE: no product contamination was seen as at that moment no product was stored in that area.

### 4.5 Utilities - water, ice, air and other gases

Water used is municipal water which is softened and distributed throughout the factory. Water is used for cleaning, but also in contact with the product on several places (rinsing). Further, water is used to produce ice (for stomach cooling) and steam (steam-vaping machine in the slaughter department). Requirements for water analyses are taken in P-NL-FOOD 10032 and 4 analyses are performed annually for chemical (metals) and microbiological (E. Coli, total plate count and Enterococci) parameters. Further, the results from the drinking water supplier are requested every 3 months. Results were seen – no issues. Analyses on ice was done in 2021 – no issues seen.

Compressed air is produced in the maintenance department. The compressor holds a filter as a first and at the end point use a supplementary filter is used in the area where the compressed air is in direct product contact. The filter specification is 0.01 µm and the filter is taken in the preventive maintenance programme.

### 4.6 Equipment

The used key equipment is typical equipment for a slaughter and cutting plant and is suitable for its purpose. Use of well-known brands of equipment for food applications – no issues seen. Equipment is suitably placed in the production areas and sufficient room is provided for cleaning.

### 4.7 Waintenance

A preventive maintenance system (. is installed. All the different equipment and equipment types that are in the factory are taken in the system. Frequencies for preventive maintenance are defined and the maintenance system indicates whenever a job needs to be planned. The job contains info with regards to what needs to be done. Once the job is done, the necessary information is entered in the system and automatically replanned. For curative maintenance, a specific engineer is appointed. There are daily meetings between production and maintenance and as well as between the maintenance department as such. Maintenance records checked for the ice making machine, fat analyser, metal detector, water

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softener and compressed air filter. Maintenance is mostly done by the internal team ( personnel), but for some specific jobs, outside contractors are sought.

There is 1 workshop, which is remote from the production department. Whenever maintenance activities are performed during production, there is a sign-off by the production department and the line is cleaned where necessary. Preventive maintenance is mostly planned after production and before cleaning. Pre-SSOP checks will verify line cleanliness.

Food contact materials are used (especially transport belts). Declarations of conformity are present, but the company is unable to link the certificates that are present to specific transport belts that are used in the production area (minor non-conformity).

### 4.8 Staff facilities

Changing facilities are provided for company personnel, agency workers, visitors and contractors to ensure correct work wear is worn prior to entry to any production area. Staff facilities are designed and operated to minimise the risk of contamination. Staff facilities are suitable for the operation and in the building of the new offices coming year alteration and improvement of staff facilities is foreseen. Outdoor clothing and shoes are stored separately from work wear. Hand-washing facilities are provided in toilets and at entry points to production areas with hand-free soap tap operation and single use paper towels or air technology. Before entering the production area a sole washer is installed and an extra hand disinfecting system as well.

No high risk or high care production. Two rest rooms and catering facilities are provided for staff. Eating is allowed in the canteen, which is equipped with a fridge to bring in own food and catering facilities are present and smoking is only allowed in a separated area of the canteen. The catering is done by an external company, for which service supplier evaluations are performed.

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

### 4.9.1 Chemical control

Main chemical products used are cleaning fluids. These have been seen to have correct specifications. pH testing is done after cleaning to assure sufficient rinsing and no chemical contamination of products (recording on F-TIL-NL-10054). Separate storage of cleaning chemicals (none seen in the production area). All grease/oil that is used is food grade (NSF H1) grease/oil. Seen for

### 4.9.2 Metal control

There is a daily knife check which is recorded on document P-TIL-NL-10137. Pens need to be metal detectable, as are plasters. A metal detector is installed and defined as a PA (no CCP – see further for more information). Clips and staples are not allowed in open product areas.

### 4.9.3 Glass, briftle plastic, ceramics and similar materials

The company has a glass control procedure P-TIL-NL-10054, which takes all the different steps to follow in case of breakage of glass / brittle plastic (changing of clothes, cleaning of shoes, product blocking, zone quarantining, cleaning and release). There is a check every quarters of the different places where brittle plastic is present. This is recorded on document F-TIL-NL-10047 and the last check was done on 04/04/2022. No issues with regards to glass / brittle plastic breakage seen in open product areas.

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### 4.9.4 Products packed into glass or other brittle containers

N/A

### 4.9.5 Werere

Wood is not allowed in open product areas. Wooden pallets are used for finished products. No issues seen.

### 4.9.6 Other physical contaminants

No specific other physical contaminants, except for bones that may be present in the finished product. Complaint numbers are however not indicating any issues with regards to this.

### 4.10 Foreign-body detection and removal equipment

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

Metal detectors are in place on most of the finished product streams. Since the products are meant for B2B only and that the weight of sold packs are rather large, metal detection cannot be accurate in all instances and cannot always be lower than 7 mm. Metal detection is thus defined as a CP. Since the products are delivered to B2B only, there is metal detection in the next steps of the supply chain when processing the meat.

### 4.10.2 Filters and sieves

N/A

### 4.10.3 Metal detectors and X-ray equipment

Management of the metal detection is taken in document P-TIL-NL-100061. Depending on the place where metal detection is performed, the size of the metal test pieces ranges from 4 mm Fe, 5 mm non-Ferro and 6 mm stainless steel on the 'snippers' production line to 7mm Fe, 7 mm non-Ferro and 10 mm stainless steel on the MP line and further to the use of 20 mm Ferro only. Metal detection findings are kept and given to the QA department. A full analysis is done. Most findings concern bolts and screws, hooks used in the production area and needles used to administer veterinary products. New metal detectors were recently installed but no validation could be demonstrated (minor non-conformity). Relatively low number of complaints with regards to metal (9).

Metal detection was checked during the audit at the line and at the 'snippers' line. Tests were correctly performed; detection was correct (belt stop or belt reverse system in place) and personnel could correctly indicate actions that need to be done in case of issues. Metal detection results are recorded, for example for line on document F-TIL-NL-10064.

### 4.10.4 Magnets

N/A

### 4.10.5 Optical sorting equipment

N/A

### 4.10.6 Container cleanliness - glass jars, cans and other rigid containers

N/A

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### 4.11 Housekeeping and hygiene

All different elements that need to be cleaned are assembled on a full listing P-TIL-NL-10228, which is used to define frequency of cleaning as well as who is cleaning (external company or internal). Cleaning is done after production hours and there are daily activities. For every element a frequency is defined. Cleaning is done with products from Specifications and MSDS seen for and All necessary elements are listed on the cleaning schedule.

Before startup there are verifications of the cleanliness through the pre-SSOP checklists. When there are issues, these are immediately corrected and brought to the attention of Monitoring programmes are equally in place and following a frequency for total plate count checks as defined by schedule P-NLFOOD-10031. The results are placed in categories and any points with category 3 or 4 are rechecked the week after until conformance is reached. Annual results as seen are better than target.

Apart from the total plate count verifications, there is a monitoring programme on Listeria, where 6 points are done weekly. No issues seen.

### 4.11.7 Cleaning in place (CIP)

N/A

### 4.11.8 Environmental monitoring

Monitoring programmes are in place and following a frequency for total plate count checks as defined by schedule P-NLFOOD-10031. The results are placed in categories and any points with category 3 or 4 are rechecked the week after until conformance is reached. Annual results as seen are better than target.

Apart from the total plate count verifications, there is a monitoring programme on Listeria, where 6 points are done weekly. No issues seen.

### 4.12 Waste

Waste containers are available throughout production areas and are emptied regularly to prevent an accumulation of waste. No accumulation was seen throughout the production area. No trademarked materials applicable. Legal requirements are met (e.g. separate storage and clear identification). Waste disposal is handled by licensed contractors: (paper, plastic, e.g.), for category 1 and 3 waste

4.13 Management of surplus food and products for animal feed

N/A

### 4 14 Pedimeneniament

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electronic fly killers. Glue plaques are changed upon necessity and at least annually. All baits used are non-toxic baits. There were no infestations since last audit.

Individual reports are made per visit, indicating issues that may have occurred. These are then taken into graphs so that evolutions can immediately be seen. This is also part of the trend analysis that is performed. The final, annual trend analysis is taken in the management review / HACCP review. An indepth technical visit is performed annually and was last done on 30/11/2021. Actions points are taken in an excel sheet and are retained for action after an evaluation by the company.

### 4, 15 Storage facilities

Storage is done in cooled cells so that the temperature requirements of the product can be met. Cooled cells are at a low temperature ( $0^{\circ}C - 2^{\circ}C$ ). Temperature records are kept automatically, and this is managed by the maintenance department. All products are labelled / identified. There is no outside storage (except for live animals awaiting slaughter – these are kept in the stables). Packaging is stored separately. No issues were seen – all materials were correctly protected awaiting usage. Finished products have a short shelf life and are shipped as soon as possible. Stock rotation is based on FIFO.

### 4.16 Dispatch and transport

Products that are dispatched are verified before shipping, as is the truck where the products are assembled in. Checks are recorded on document F-TIL-NL-0009 and also include the temperature (CCP). Traceability is maintained through the documentation and of course all products are still labelled. Transport is subcontracted to Vion approved parties, such as . They are BRC S&D certified ( and audited by Vion HQ (16/06/21).

Details of non-applicable clauses with justification					
Clause/Section Ref	Justification				
4.10.2.	No filters or sieves for this product				
4.10.4.	No magnets for this product				
4.10.5	No optical sorting equipment for this product				
4.10.6.	No glass, cans or rigid containers				
4.13.	No products for animal feed				
4.14.2.	Pest control is outsourced				

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### 5. Product control

### 5.1 Product design/development

There is no real product design or development. Product range may be a different cut, but even this is very limited and would consist out of a variation on current products. Should changes be made, then this is taken in the evaluation that is done quarterly and links to the HACCP study are automatically made. No changes in packaging types. No new developments since last audit.

Shelf life testing is done yearly, where 1 article from a specific group is tested. This is planned in document P-NLFOOD-10165. When shelf life tests are done, there is a microbiological as well as an organoleptic test that is done. Typical shelf lives are 10 days for offal products, 14 days for trimmings and 35 days for other cuts. Last test if trimmings performed on 28/03/22 and seen during the audit.

### 5.2 Product labelling

Product labels are applied in different parts of the production process, so that there is always an identification of the animal / parts of the animal according to legal requirements. No issues were seen. Final products are labelled according to EU legislation, including identification of slaughterhouse and cutting, provenance of the animal(s) where necessary, lot number, shelf life date, temperature, ... Labels also hold SSCC codes.

No nutritional claims made. Verified label of Runderhaas 2.7 kg+.

### 5.3 Management of allergens

The only allergen on-site is milk, which is present in the udder, but which is removed very early in the slaughter process. Risk assessment P-TIL-NL-10127 holds this risk. Correct removal of udders was demonstrated. Conclusion is that there is no risk of cross-contamination.

Personnel needs to remove jacket when going to the canteen and has to wash and disinfect hands before entering the plant again.

### 5.4 Product authenticity, claims and chain of custody

The company has defined its approach towards food fraud in document P-TIL-NL-10224. The risk assessment is performed in document P-TIL-NL-10223 and the final risk is considered to be low. This was last evaluated on 12/05/2021. Any information about issues is gathered by the company HQ and communicated to the site where necessary.

Claims are made for organic products as well as for Beter Leven Keurmerk BLK products, both of which are externally certificated. During these audits a trace exercise and mass balance is performed. This is equally part of the scheme requirements (to hold an own internal trace exercise and to hold a mass balance).

Finally, the company also has unannounced IFS PIA audits for product integrity.

5.5 Product packaging

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Packaging materials consist of in-process liners as well as final product packaging that can be applied. For all the primary packaging materials, documents of conformity are requested according to EU legislation. This management is done by VION headquarters. Obsolete packaging is destroyed through the waste channel (no trademarked material).

The necessary information to assess suitability was seen for:

5.6 Product inspection and laboratory testing

5.6.1 Product inspection and testing

Live cattle is inspected ante mortem by the government (nVWA) during the arrival at the slaughter house. Based on the findings and the VKI information received the animal can or cannot be slaughtered. Post mortem inspections as well as cattle classification according to SEUROP are equally done by a government official or an independent delegate.

A laboratory testing plan is developed for the next steps and is based on 2073/2005 EU legislation. All tests are done by an external lab ( , , which is ISO 17025 accredited). Schemes are as following:

- Carcasses: twice per week, 5 carcasses: total plate count, enterobacter, STEC, Salmonella
- Quarters that are bought externally, every delivery, 5 carcasses: total plate count, enterobacter, Salmonella, Listeria
- Technical pieces, weekly on 5 pieces: total plate count, enterobacter, Salmonella, Listeria
- Vacuum products, once per week: enterobacter, Salmonella, Listeria
- Trimmings, once per week: total plate count, enterobacter, staphylococcus, yeasts and moulds, Pseudomonas, Salmonella, Listeria and STEC
- Offal: once per month: total plate count and enterobacter

Products that will be used to produce ready-to-eat products are positively released on Listeria, STEC and Salmonella. The customer needs to indicate that the products will be used for ready-to-eat items.

Shelf life testing is done yearly, where 1 article from a specific group is tested. This is planned in document P-NLFOOD-10165. When shelf life tests are done, there is a microbiological as well as an organoleptic test that is done. Typical shelf lives are 10 days for offal products, 14 days for trimmings and 35 days for other cuts. Last test if trimmings performed on 28/03/22 and seen during the audit.

For chemical contaminants, there is a government programme managed by . There is one annual verification performed by the company itself, as seen for 31/03/22 (heavy metals, pesticides, OTA, PCB and dioxins).

Test results are trended and quarterly reports are made per category to see the evolution over time. There are for example trendings on the log of total plate count, Enterobacter, Salmonella and Listeria as seen done in the quarterly reports that are sent to Vion HQ.

When results are found to be out-of-spec, the actions depend on the type of parameter that is out-of-spec. If it does not concern a food safety issue, the process hygiene is examined. If it concerns pathogens, a risk assessment is made and the authorities contacted if necessary. No such issues since last audit.

5.6.2 Laboratory testino

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Tests are performed in an external, accredited laboratory. See 5.6.1. for details.

### 5.7 Producti release

Positive release only for products that will be used for ready-to-eat items. These are analysed for Listeria, Salmonella and STEC and, according to the results, these products can be used for ready-to-eat items or have an alternative routing (e.g. selling to a processer who cooks). This process is described in procedure P-TIL-NL-10132.

### 5.8 Pet Food

No production for pet food.

Details of non-applicable clauses with justification						
Clause/Section Ref	Justification					
5.6.2.2.	No on-site lab					

### 6. Process control

### 6.1 Control of operations

Throughout the process, the company has implemented pre-SSOP, SSOP and CCP verifications, to which metal detection checks, knife sterilizer checks and some specific checks with regards to quality (example: trimmings) are added. All checks are documented on monitoring forms, which are verified daily by the quality department. KPI for the correct completion of records are done. Further, there is a continuous presence of the government for verification of the carcasses post-mortem.

Main controls seen are:

- PreSSOP checks (e.g. F-TIL-NL-10065 for cutting and 10055 for slaughter)
- SSOP checks (e.g. F-TIL-NL-10122 for cutting and 00026 for slaughter)
- Metal detection (e.g. MP F-TIL-NL-10064 and trimmings 10081)
- Trimming quality check on F-TIL-NL-10134

Good control over processes could be demonstrated.

6.2 Labelling and pack control

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There is a very limited number of packaging materials available and mostly the only change is the size. Machines are generally linked to a specific size as to prevent changeover time. Labelling is preprogrammed in the company's ERP and the correct product must be chosen during production. Label checks are routinely performed. During the tour production of Runderhaas 2.7 kg+ and Runderhaas with lower weights was witnessed. No issues seen.

### 6.3 Quantity, weight, volume and number control

All products are sold by weight. Metrology verifies the balances for commercial purpose. No issues identified. Calibration of the scales is demonstrable. Apart from the calibration there also is a daily verification of the weighing scales with calibrated weights.

### 6.4 Calibration and control of measuring and monitoring devices

All elements that need to be calibrated are taken in a list or in the preventive maintenance programme, so that they are calibrated upon the frequency that is defined. Document F-TIL-NL-10049 applies. Calibrations can be organised by the quality department or can be organised by the maintenance department. Identification is done on the measuring equipment itself (manual thermometers), through serial numbers or location if fix. Calibration verified for:

- Thermometer 6, slaughter department (used to measure the temperature of the sterilizer baths): done on 31/03/2022, verification once every two months;
- Thermometer 9, expedition (used to measure the temperature as per CCPs 3 and 5): done on 17/12/2021, verification once every two months;
- Metal detector trimmings: annual check, done on 15/02/2021 by
- Temperature probe shipping area: calibrated on 21/04/2021, annual calibration.

No issues seen.

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

### 7. Personnel

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

New employees start by receiving a first training when entering the company. They receive a general instruction video with the necessary elements with regards to hygiene, food safety and integrity. This is tested through a questionnaire. From there, personnel is trained with regards to the use of the different machines and safety. A company trainer is available to guide new personnel to the correct department. From there on, the department responsible takes over and the training-on-the-job starts. An inventory is made of who has received which training. For CCP and CP there is a supplementary training done by the quality department. The training plan for 2022 (budgeted cost

Training records were seen for . with regards to the metal detection (training on 31/03/21) and further for . and . of CCP 2, 3 and 5 (training on 10/06/2020 and 30/04/2021 respectively).

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During the plant tour, a good understanding of processes and procedures seen.

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

The standards for personal hygiene, dress code, medicines, jewellery and medical screening have been defined and communicated to the personnel through a brochure called "Good business Practice". Also, Code of Conduct and safety instruction are available and demonstrable training is recorded and is part of the induction training. The continued application of the hygiene rules as learned during the induction training is re-tested once every two years and taken in the pre-SSOP checks. For agency workers a booklet Flex NL is available (Veiligheidinstructies Uitbeen/Snijzaal Vion Tilburg "Werken bij Vion and code of conduct". During this visit, in general, correct application of the hygiene rules was seen.

### 7.3 Medical screening

Medical screening of employees is done at the start and further every 5 years, as allowed by law. The hygiene rules indicate that when persons are infected with infectious diseases, they are not allowed to work in the production area. Hygiene rules are taken in the induction training and regularly repeated. Before entering the production area, a few questions are asked to visitors (medical questionnaire). Medicines are not allowed in the production area.

### 7.4 Protective clothing: employees or visitors to production areas

All operations are considered low care. Company issued protective clothing is given to all staff and visitors. This consists of trousers and shirt, helmet, hairnet and, depending on the place where employed, plastic sleeves, protective (metal) gloves, ... Good adherence to the dress code observed during the site evaluation. The standards for personal hygiene, dress code, medicines, jewellery and medical screening have been defined and communicated to the personnel through brochure "Good business Practice". These hygiene rules are effectively enforced.

Clean and dirty clothes are stored separately in the lockers. Every member of personnel has a locker. Locker rooms are separated between slaughter and cutting. The slaughter department is separated between a clean and a dirty area. For the dirty area a supplementary coat needs to be worn. Employees can change daily or more frequently when necessary. The clothes are externally cleaned by This is a low risk operation with visual inspection by the company.

Personal protective devices (chain mail gloves / aprons) are washed and disinfected daily and monitored by the company. Plastic gloves are coloured and changed frequently.

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

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8. High-Risk, High-Care and Ambient High-Care Production Risk Zones
8.1 Layout product flow and segregation in high-risk, high-care and ambient high-care zones
Not applicable
8.2 Building fabric in high-risk and high-care zones
Not applicable
8.3 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-a	Details of non-applicable clauses with justification				
Clause/Section Justification Ref					
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9 - Traded Products
9.1 Approval and performance monitoring of manufacturers/packers of traded food products
Not applicable
9.2 Specifications
Not applicable
9.3 Product inspection and laboratory testing
Not applicable
9.4 Product legality
Not applicable
9.5 Traceability  Not applicable

Module 11: Meat supply chain assurance					
Secolote	Click or tap here to enter text.				
11.1 Traceability	y				
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11.2 Approval of meat supply chain					
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11.3 Raw material receipt and inspection					
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11.4 Management of cross-contamination between species	
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11.5 Product testing	
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11.6 Training	
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Jaiety						
Module 13 FSMA Preventive Controls Preparedness Module						
Version 2 July 2018						
Clause	Module item	Conforms Y/N	Comments			
13.1.1	Handwashing areas, dressing and locker rooms, and toilet rooms must have adequate lighting.					
13.1.2	Water distribution system must prevent backflow from, or cross-connection between, piping systems that discharge waste water or sewage.					
13.1.3	All food contact surfaces of plant equipment and utensils used in manufacturing, processing, packing, or holding food must be corrosion resistant.					
	Seams on food-contact surfaces must be smoothly bonded or maintained so as to minimize accumulation of food particles, dirt, and organic matter and thus minimize the opportunity for growth of microorganisms and					
	allergen cross-contact.					
13.1.4	Ice used in contact with food must be manufactured in accordance with Good Manufacturing Practice					

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	(GMP) requirements of 21 CFR 117.		
13.1.5	Where defect action levels (DAL) are established for a food, quality control operations must reduce defects to the lowest level possible.		
	Defect levels rendering the food adulterated may not be reduced by mixing the food with another lot.		
13.1.6	The hazard analysis must additionally identify and evaluate the following known or reasonably foreseeable hazards, which are associated with the food or facility:		
	<ul> <li>Economic adulterants which affect food safety</li> </ul>		
	Environmental pathogens where readyto-eat (RTE) food is exposed to the environment prior to packaging and the packaged food does not receive a kill step		
	<ul> <li>Radiological hazards</li> </ul>		
	<ul> <li>Unintentional adulterants which affect food safety</li> </ul>		

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13.1.7	All identified known or reasonably foreseeable hazards must be evaluated to determine "hazards requiring a preventive control" (i.e., significant hazards).			
13.1.8	Establish one or more preventive control(s) for each identified "hazard requiring a preventive control" (i.e., significant hazard) such that the control significantly minimizes or prevents the food manufactured, processed, packed, or held by the facility from being adulterated under section 402 of the Federal Food, Drug, and Cosmetic Act or misbranded under section 403(w) of the Federal Food, Drug and Cosmetic Act.			
13.1.9	Evaluate and update the recall and withdrawal procedure as necessary to ensure it contains procedures and responsibility for the following:  Notifying consignees of how to return or dispose of recalled product  Conducting effectiveness checks to verify recall is carried out			

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	<ul> <li>Appropriate         disposal (i.e.,         destroy, divert,         repurpose) of         recalled         product</li> </ul>			
13.1.10	Establish monitoring activities and a written procedure for each preventive control consistent with the requirements of BRCGS section 2.10.			
13.1.11	Establish corrective action procedures when preventive controls are not implemented consistent with the requirements of BRCGS sections 2.11 and 3.7.			
	Corrective action procedures must be established and implemented when the presence of a pathogen (or indicator organism) is detected as a part of verification activities (i.e., product testing and/or environmental monitoring).			
13.1.12	Validate all established process controls prior to implementation of the food safety plan, upon changes requiring re-validation or within 90 calendar days of the first food production.  Validate allergen, sanitation and supply-			
	chain controls as appropriate to the			

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	nature of the hazard, control and facility.		
13.1.13	The PCQI (or authorized designee) reviews monitoring and corrective action records within 7 days. Where an alternate timeframe exceeding 7 days is used, the PCQI must document justification.		
	The PCQI (or authorized designee) reviews verification records for all preventive controls (e.g., calibration records, product testing, supply-chain audits) within a reasonable timeframe after the record is created.		
13.1.14	Where product testing for a pathogen (or indicator organism) or other hazard is used as a verification activity, a scientifically valid and written testing procedure must identify the following:		
	<ul> <li>Sampling         procedure to         include         method,         quantity,         frequency, and         number of         samples</li> </ul>		
	Analytical method		
	<ul><li>Laboratory conducting analysis</li></ul>		
	<ul><li>Corrective action procedure</li></ul>		

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	where pathogen is detected			
13.1.15	Where environmental monitoring for a pathogen (or indicator organism) is used as a verification activity, a scientifically valid and written testing procedure must identify the following:			
	<ul> <li>Adequate number and location of sample sites</li> </ul>			
	<ul> <li>Timing and frequency of sampling</li> </ul>			
	Analytical method			
	<ul> <li>Laboratory conducting analysis</li> </ul>			
	<ul> <li>Corrective         action         procedure         where         pathogen is         detected</li> </ul>			
13.1.16	Devices used to verify preventive controls must be calibrated.		***************************************	
13.1.17	Identify a Preventive Controls Qualified Individual (PCQI) responsible for developing the food safety plan, validating preventing controls, review of records, and reanalysis of the plan.  Document the PCQI's			
	training and qualification via job experience.			

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13.1.18	All records required by 21 CFR § 117 must include:  • Date and time of activity being documented  • Signature/initials of individual performing activity or conducting record review  • Information to			
	identify the facility (e.g., name and location)			
	<ul> <li>Identity of the product and lot code where applicable</li> </ul>			
13.1.19	The owner, operator or agent in charge of facility must sign and date the written food safety plan initially and then upon any changes following reanalysis.			
13.1.20	All documents and records relating to the food safety plan (i.e., all records required by 21 CFR § 117) must be retained at the facility for 2 years after the record is created. Where records are stored offsite, they must be retrievable within 24 hours with the exception of the food safety plan, which must remain onsite.			

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13.1.21	Where a hazard requiring a supply-chain-applied control is identified in the hazard analysis, the receiving facility must establish and implement specific supplier approval and verification activities.		
	Where a hazard requiring a supply-chain-applied control is identified AND the control is applied by an entity other than the receiving facility's supplier, the receiving facility is responsible for verifying implementation of the control.		
13.1.22	Supplier approval must be documented before receiving and using raw materials and ingredients.  Verification activities must be conducted before receiving and using raw materials and ingredients on a temporary basis from unapproved suppliers.		
13.1.23	One or more supplier verification activities (defined in § 117.410(b)) must be conducted for each supplier before using raw materials and ingredients AND periodically thereafter at an adequate frequency.		
13.2.1	Human food by- products held for distribution as animal		

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	food must be held under conditions that will protect against contamination, including the following:			
	- During holding, human food by- products for use as animal food must be accurately identified.			
	* Labeling that identifies the product by the common or usual name must be affixed to or accompany the human food by-products for use as animal food when distributed.			
	* Shipping containers (e.g., totes, drums, and tubs) and bulk vehicles used to distribute human food byproducts for use as animal food must be examined prior to use to protect against the contamination of animal food from the container or vehicle when the facility is responsible for transporting the human food by-products for use as animal food itself or arranges with a third party to transport			
	the human food by- products for use as animal food.			
13.3.1	A Qualified Individual (QI) is responsible for developing the site's food defense plan,			



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	conducting a vulnerability assessment, identifying mitigation strategies, and conducting a reanalysis of the plan. The QI responsible for developing the food defense plan shall be identified on the site's organizational chart.  One or more QI's shall			
	be responsible for implementing mitigation strategies at actionable process steps.			
13.3.2	The site shall have a written food defense plan, which includes the following:			
	<ul> <li>A vulnerability assessment identifying significant vulnerabilities and actionable process steps</li> </ul>			
	<ul> <li>Mitigation strategies appropriate to reduce the vulnerability</li> </ul>			
	<ul> <li>Procedures for food defense monitoring, corrective action and verification</li> </ul>			
13.3.3	A written vulnerability assessment shall be prepared for each food type manufactured, processed, packed, or held, which evaluates the following key criteria (at a minimum):			
	Scale and severity of		 	***************************************

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	threat if a contaminant is added to product		
	Degree of     physical     access to the     product		
	Ability of an attacker to successfully contaminate product—including consideration of an inside attacker  A vulnerability assessment shall be documented for each food type regardless of the outcome and provide justification as to why each point, step		
	or procedure in the operation was or was not identified as an actionable process step.		
13.3.4	Written mitigation strategies shall be established and implemented for each actionable process step identified in the vulnerability assessment.		
	Justification shall be documented explaining how the strategy significantly minimizes		

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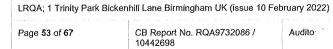
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	or prevents the vulnerability.		
13.3.5	Written monitoring procedures shall be established and implemented to include the activity and frequency for monitoring food defense mitigation strategies.		
	Procedures shall include recordkeeping requirements for all monitoring activities.		
13.3.6	Written corrective action procedures shall be established and implemented when mitigation strategies are not properly implemented. The procedure shall include the following criteria:		
	<ul> <li>Method for identifying and correcting a lack of implementation</li> </ul>		
	<ul> <li>Method for reducing the likelihood of recurrence</li> </ul>		
	<ul> <li>Recordkeeping requirements for corrective actions</li> </ul>		
13.3.7	Written verification procedures shall be established and implemented to ensure that food defense monitoring and corrective action are performed according to procedures. Verification procedures shall		

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	describe activities to verify implementation of mitigation strategies.			
	Verification procedures shall include:			
	A review of monitoring and corrective action records within an appropriate timeframe (e.g., 7 days)			
	Other verification activities as appropriate (e.g., internal audit)			
	<ul> <li>Method for verifying that reanalysis of the food defense plan was conducted</li> </ul>	!		
	<ul> <li>Frequency for verification activities</li> </ul>			
	<ul> <li>Recordkeeping requirements of all verification activities</li> </ul>			
13.3.8	Reanalysis of the food defense plan shall be documented and performed every three years or whenever			
	<ul> <li>A change in facility operations which creates a new significant vulnerability</li> </ul>			
	<ul><li>Knowledge about a new threat</li></ul>			and the second second







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	applicable to the food or facility becomes known  Mitigation strategies are not implemented as intended  FDA requires reanalysis based on new			
	threats or scientific evidence			
13.3.9	All records required by 21 CFR § 121 must include:  Date and time of activity being documented  Signature/ initials of individual performing activity or conducting record review  Information to identify the facility (e.g., name and location)  Identity of the product and lot code where applicable			
13.3.10	The owner, operator or agent in charge of facility must sign and date the written food defense plan initially and then upon any changes following reanalysis.			
13.3.11	All documents and records relating to the			

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	food defense plan (i.e., all records required by 21 CFR § 121) must be retained at the facility for 2 years after the record is created. Where records are stored offsite, they must be retrievable within 24 hours with the exception of the food defense plan, which must remain onsite.		
13.4.1	Vehicles and transportation equipment must be maintained and stored in a sanitary condition appropriate for the intended use to prevent food from becoming unsafe during transportation. Where inspection reveals that vehicles or containers are not in a clean condition, they shall not be used.		
	A documented procedure shall describe cleaning and storage practices of all vehicles and transportation equipment maintained by the site whether leased or owned and as appropriate for the intended use. The procedures shall be fully implemented. Cleaning activities shall be recorded.		
13.4.2	The site shall ensure that contracts with U.S. shippers, receivers, loaders, and carriers specify their		

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	responsibility for compliance with FSMA's Sanitary Transportation rule. Where the site acts as the shipper or receiver, it shall ensure compliance with the rule.  Responsibilities shall ensure transportation operations are conducted in a manner to prevent food from becoming unsafe during transport (i.e., apply controls) and that responsibility for compliance with the regulation is assigned to competent supervisory personnel.		
13.4.3	Where the site arranges transportation, it shall document sanitary design requirements and cleaning procedures of vehicles appropriate for the type of food to be transported. These requirements shall be communicated to the loader and carrier.  Where the site does not arrange transportation, the above provision shall be documented in the shipping service contract to ensure the shipper documents sanitary specifications of vehicles for the loader and carrier,		

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	which are appropriate for the type of food.			
13.4.4	Contracts with loaders shall specify that the loader is responsible for following sanitary specifications provided by shipper.			
13.4.5	Where the site receives temperature controlled product immediately following transportation, it shall conduct an assessment to determine whether the food was subject to temperature abuse.			
13.4.6	Contracts with carriers shall specify that the carrier is responsible for the following sanitary activities where agreed to in writing with shipper.  • Sanitary condition of vehicles and transportation equipment			
	• Following shipper's sanitary specifications (including precooling requirements where applicable)			
	<ul> <li>Recording compliance with operating temperature where critical to food safety</li> </ul>			
	<ul> <li>Procedures for the use of bulk vehicles, which includes</li> </ul>			

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			Land the second
	recording the previous cargo and most recent cleaning for the shipper		
13.4.7	Contracts with carriers shall specify that the carrier implements a training program for all personnel engaged in transportation activities, which covers		
	<ul> <li>Awareness of potential food safety problems that may occur during food transportation</li> </ul>		
	Basic sanitary transportation practices to address those potential problems		
	Responsibilities of the carrier		
13.4.8	The site shall keep all records related to U.S. transportation operations and transportation service contracts as original or electronic records for a minimum of 12 months beyond termination of the activity or contract. Offsite records shall be retrievable within 24 hours.		
13.4.9	The recordkeeping policy shall ensure all sanitary design requirements and cleaning procedures for vehicles are maintained onsite and all offsite		

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	records are retrievable within 24 hours.			
13.5.1	Personnel (permanent and temporary) who handle produce or food contact surfaces must receive additional training on the following:			
	Principles of food hygiene and food safety			
	Produce safety standards applicable to an individual's job			
13.5.2	Personnel (permanent and temporary) who conduct harvest activities (including washing and cooling) must receive additional training on the following:			
	Recognizing produce contaminated with known or reasonably foreseeable hazards			
	Inspecting     harvest     containers and     equipment to     ensure that     they are clean,     maintained and     do not     contaminate     produce with     hazards			
	<ul> <li>Correcting problems with harvest containers or equipment</li> </ul>			

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13.5.3	One or more supervisors or individuals responsible for the operation must have successfully completed food safety training equivalent to standardized curriculum recognized by the FDA.		
13.5.4	A supervisor shall be identified with responsibility for the operation and ensuring compliance with Produce Safety regulation. This individual shall be identified on the site's organizational chart.		
13.5.5	Personnel (permanent and temporary) shall avoid contact with animals or take measures such as hand washing and protective clothing to prevent contamination of produce and food contact surfaces following contact with worker animals.		
13.5.6	The water distribution system supplying agricultural water used for harvest, packing, holding—and associated equipment—shall be maintained, regularly inspected and equipment properly stored to prevent the system from being a source of contamination to produce and food contact surfaces. The system shall be inspected for		

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	conditions, which could introduce known or foreseeable hazards into or onto produce.  Where testing of the water source or system inspection reveals contamination, deficiencies shall be corrected such as the repair of well caps or sanitary seals.			
13.5.7	Agricultural water treatment must be delivered and monitored at a frequency that ensures water is safe, of adequate sanitary quality, and meets the microbial quality criteria of no detectable generic Escherichia coli (E. coli) in 100mL.			
13.5.8	Potable water quality standards used shall ensure the microbial quality criterion is met, which is no detectable generic E. coli in 100 mL.			
13.5.9	Where agricultural water does not meet microbial quality criteria or is determined to be unsafe and not of adequate sanitary quality, water use must be discontinued along with treatment or other correction that reestablishes sanitary quality and microbial criteria.			
	Where water treatment is not performed, re-inspection of the entire affected agricultural water system shall be			

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	conducted followed by the identification of conditions leading to the introduction of hazards into or onto produce or food contact surfaces, correction, and verification of correction to ensure water meets microbial quality criteria.		
13.5.10	Agricultural water testing may be performed by the site (or site representative) or by a third party provided representative samples of the site's water source is secured.		
	Aseptic water sampling must be performed. The method of analysis for water testing is U.S. Environmental Protection Agency (EPA), "Method 1603: Escherichia coli (E. coli) in Water by Membrane Filtration Using Modified membrane- Thermotolerant Escherichia coli Agar (Modified mTEC), EPA-821-R-09-007)," December, 2009 or equivalent method.		
13.5.11	During harvest, packing and holding operations (e.g., hydrocooling, washing), manage water to maintain its safety and sanitary quality and prevent contamination of produce to include establishing and following a water-		

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	change schedule for recirculated water.			
	Visually monitor the water quality of water used for harvest, packing, and holding activities for organic build-up (e.g., soil, plant debris).			
	Maintain and monitor the temperature of water used for harvest, packing, and holding activities as appropriate to the commodity and operation to minimize infiltration of pathogens into produce.			
13.5.12	Dropped produce (i.e., produce that comes in contact with the ground prior to harvest) where the produce would not normally touch the ground as a part of growing and harvest (e.g., cantaloupe, almonds, etc.) shall not be distributed.			
13.5.13	Sewage disposal and septic systems shall be controlled and appropriate for the site to prevent the contamination of produce and food contact surfaces.			
13.5.14	Plumbing shall not allow backflow or cross-connection between waste and potable water lines.			
13.5.15	All produce safety related records must be reviewed, dated, and signed within a reasonable timeframe after being made by the			

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	supervisor or responsible party.			
13.5.16	All produce safety documents and records must be retained at the site for 2 years after the record is created.			Add to a
	Where records are stored offsite, they must be retrievable within 24 hours.			
	Records related to equipment or processes used by the site for analyses, sampling, or action plans—including the results of scientific studies, tests, and evaluations—shall be retained at the site for at least 2 years after their use is discontinued.			
13.5.17	Specific additional requirements for the harvesting, packing, and holding of sprouts.  Establish and implement a written Environmental Monitoring plan for the testing of Listeria spp or Listeria monocytogenes.  The environmental			
	monitoring plan shall include the following criteria:			
	<ul> <li>Target test         <ul> <li>(i.e., Listeria</li> <li>spp. or L.</li> <li>mono)</li> </ul> </li> </ul>			
	<ul> <li>Sample frequency (no less monthly)</li> </ul>			

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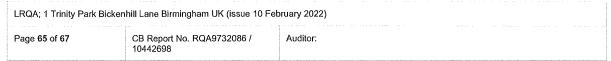
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	Sample timing (i.e., when in the process are samples collected)      Sample sites where the number of samples and location are sufficient to determine the efficacy of controls (includes food contact and non-food contact surfaces)		3
	The plan shall describe aseptic methods for sample collection and testing according to FDA's "Testing Methodology for Listeria species or L. monocytogenes in Environmental Samples," Version 1, October 2015 (or equivalent).		
13.5.18	Specific additional requirements for the harvesting, packing, and holding of sprouts.  The environmental monitoring plan shall include a corrective action plan if any samples are positive for Listeria spp. or L. mono.  If Listeria spp. or L mono are identified in the harvesting, packing, holding area, the following activities shall occur as a part of		







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the corrective action process:		
Resample positive surfaces and the surrounding area to determine the extent of contamination		
Clean and sanitize the affected and surrounding areas		
Resample and re-test to confirm the elimination of Listeria spp. or L. mono		
Conduct     finished     product testing     as appropriate		
Take additional action to prevent recurrence and to prevent adulterated food from entering commerce		

14.1 Additional Specifier requirements		
14.1 Traceability		

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14.2 Environmental Monitoring	
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14.3 Product inspection and laboratory testing	
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14.4 Protective clothing: Employees or visitors to production areas	
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