

## Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505

Auditor Name		Cameron Keith		E-mail /	Address	mailca	meronkeith@gm	ail.com
Target Date for Completion	2022-02-24		Final D	ue Date	2022-03-03			
G. 177 ()	Day 1	Day 2	Day 3		( )	Day 1	Day 2	Day 3
Start Time(s)	09:00	09:00	00:00	Finish Time(s)	Time(s)	17:00	15:00	00:00
Live Video Feed (Only applicable for Blended and Remote	Start	Time	E	nd Time		Total Duration		
Audit Options)								
Scope	Perforation, macro punching, folding, slitting and rewinding (Outsourced print process) of OPP, BOP film on reels. The slitting and rewinding of Kraft paper onto reels for food, consumer and retail prod Contact and non-contact)				•			
Exclusions from Scope	OPP, BOPP and	OPP, BOPP and PET, reel film.						
Justification for exclusion	Purchased and sold on without site intervention, differentiated by supplier branded outer and kept in segregated area of factory		er branded outer	packaging and p	aging and product codes			
		Non-Conformity	Summary		Additio	nal Modules/He	ad Office Audit I	NC Summary
	Major against	SOI of Fundament	al C	)	Major ag	gainst SOI of Fund	damental	0
Number of Non-Conformities	(	Critical	C	)		Critical		0
		Major	C	)		Major		0
		Minor		'		Minor		0

I acknowledge that the QAIC Packaging Auditor has conducted an audit against the requirements of the BRCGS Packaging Materials Issue 6 and has brought to my attention the non-conformities identified from the audit and has explained the contents of this document. I understand that at this stage, no certification decision has been made and that the results are provided for information and corrective action responses only. I am aware that the certification decision is made by authorised personnel independent of the audit process following review of the auditor's notes, final report and corrective action response.

Client Name:	Steven Walsh	Date:	2022-02-03
Client Signature:	Steven	Auditor Signature:	C Keíth



Company name Film and Foil Solutions Ltd Haydock Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505

Note: A signed copy of this form must be returned to the QAIC Packaging office within 7 days of the audit. The completed form must be emailed to the QAIC Packaging office along with evidence in line with BRCGS Requirements – further details below. Before completing your response please ensure you read the instructions on this form.

### What happens next:

	lit are subject to a full report review, corrective action evidence review kely outcome, but used as a guide to determine next steps.	and final certification decision and the	refore
Provisional Grade AA (AA+) Provisional Grade A (A+) Provisional Grade B (B+)	<ul> <li>Take corrective action to rectify the non-conformities raised.</li> <li>Complete corrective action, root cause and preventive action sections on this audit summary sheet.</li> <li>Complete evidence provided section on this audit summary sheet.</li> <li>(see next page for guidance on corrective action evidence)</li> </ul>	E-mail this audit summary sheet and corrective action evidence to: evidence@qai.co.uk and copy your auditor. Target: 21 calendar days Latest: 28 calendar days Audit frequency: 12 months	X
Provisional Grade C (C+)	<ul> <li>Take corrective action to rectify the non-conformities raised.</li> <li>Complete corrective action, root cause and preventive action sections on this audit summary sheet.</li> <li>Complete evidence provided section on this audit summary sheet.</li> <li>(see next page for guidance on corrective action evidence)</li> </ul>	E-mail this audit summary sheet and corrective action evidence to:  evidence@qai.co.uk and copy your auditor.  Target: 21 calendar days  Latest: 28 calendar days  Audit frequency: 6 months	
Provisional Grade D (D+)	<ul> <li>A revisit is required to close out your non-conformances.         Must be within 28 days.</li> <li>Take corrective action to rectify the non-conformities raised.</li> <li>Complete corrective action, root cause and preventive action sections on this audit summary sheet.</li> <li>(see next page for guidance on corrective action evidence)</li> </ul>	If possible, please arrange a date for the revisit with your auditor. Otherwise, contact the office as soon as possible to arrange. Email this audit summary sheet to: evidence@qai.co.uk Audit frequency: 6 months	
Not certificated	No action required	To arrange a re-audit, please contact the office.	

Attachment 024 (PRO.011) Rev 16 Page 2 of 9 11<sup>th</sup> November 2021

## Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505



### **Guidance on Preparing and Sending Corrective Action Evidence**

#### **Audit Reporting**

This audit summary sheet details the non-conformities raised at your audit; you will receive an interim copy of your report once the review process is complete and the correct submission of this document, along with corrective evidence, has been reviewed and accepted. Following certification decision, the final report will be uploaded to the BRCGS Directory.

The information recorded in the final report is set out in the same format used in this form. It is therefore important that the information provided gives confidence in the rectification and sustainability of corrective action taken for the non-conformities raised.

Please ensure that the below principals are followed:

- Correction This should contain a short description of the immediate actions taken, confirming in the past tense that it has been completed (this may include action taken at the time of the audit).
- Preventive Action Consideration needs to be given as to how the issue will be prevented from reoccurring. Root cause analysis should give you the basis for identifying a suitable preventive action plan. This is vital as any non-conformities that reoccur at your next BRCGS Audit may be upgraded to a Major NC.
- Root Cause Analysis Non-conformities require further investigation to understand how and why the issue occurred. Consideration should also be given to assessing whether it was an isolated incident or if there are wider implications.

Page 3 of 9

Examples of how to complete the correction, preventative action and root cause analysis can be found on page 5 of this document.

Further guidance on effective responses to non-conformities can also be found by using the following link: http://www.gaicpackaging.co.uk/



Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505

#### **Evidence**

Please ensure that your evidence files are labelled appropriately and are easily identifiable against the applicable non-conformity. For example: NC 01 – Updated HARA plan, NC 02 – Purchase order for building work to be carried out.

### **Types of evidence**

Photographic	Where possible, before and after photos should be provided.	
Documentary*	Updated standard operating procedures	
	<ul> <li>Updated forms/checklists, e.g. housekeeping, maintenance etc</li> </ul>	
	Updated HARM plan	
	Updated pest control records	
Other*	• Invoices	
	Purchase orders	
	Certificates of calibration, conformity or analysis	
	Auditor witnessed correction	

\*This list is not exhaustive and is only intended to give an overview of what may be required to close out a non-conformity.

Where documents have been amended please indicate where/highlight the amended section. Please also include details of how changes have been communicated to relevant members of staff, e.g. updated training records or records of briefings.

Wherever possible please provide completed examples of the updated forms.

Where specific documentation was missing or incomplete at the time of the audit, please ensure that you provide the same document(s) as any evidence provided will be cross referenced with the auditor's notes made at the time of the audit.

For minor non-conformities which cannot be fully rectified within 28 days, evidence of short term actions taken to minimise any product contamination risks should be provided along with details of the longer term action plans including details of actions to be taken, timescales and CAPEX agreement.

#### Presentation

Where it is not possible to e-mail responses, our address is: QAIC Packaging, Barnet House, Dudley Court, Dudley Road, Darlington, DL1 4GG. Please note that this form must be received by e-mail in MS Word format even if sending evidence by post. Sending hardcopy documents may lead to a delay in processing your certification.

Please note that this mailbox cannot accept e-mails larger than 5MB, you may wish to send one e-mail per non-conformity.

This form must be completed in English. If your procedures, work instructions and records are in a language other than English please highlight the information that has changed and provide an explanation in English.





Example Non-Conformitie	Example Non-Conformities				
Detail of Non-Conformity	Corrective action taken	Proposed preventive action plan	Root cause analysis		
The roller shutter door at good inwards (ref B on site plan) had gaps around the top of the door allowing for pest ingress.	The gaps around the roller door have been sealed to prevent pest access.	A new service provider will be employed with a new SLA put in place. QC staff will accompany the contractor during site visits over the next 3 months to ensure all areas are being assessed correctly. Staff will be retrained on reporting issues to their manager. Internal auditors will be retrained alongside this for hygiene audits and the check sheet will be updated to include checks for gaps.	Neither the pest control contractor or internal hygiene audits identified the issue, nor did any employee report any issues. The pest control company were not accompanied during service visits and no recommendations have been made. Pest control visits were not monitored or reviewed.		
Although procedures and written instructions exist, there has been no risk assessment used to determine the control of use and storage of personal medicines in production and storage areas	A risk assessment has been conducted and procedures and written instructions updated to reflect.	BRC Representative has been booked onto a training course with BRC Training 123 Ltd on 1 <sup>st</sup> March 2020 to receive a greater in depth understanding of the requirements of the Standard	It was believed that the existing procedures and written instructions were sufficient. It was not known that a risk assessment was required, and this was due to the fact that the BRC representative had not attended formal BRC training so the requirement was misunderstood		

Attachment 024 (PRO.011) Rev 16 11th November 2021 Page 5 of 9

# Audit Summary Sheet (Packaging Materials)

# Company name Film and Foil Solutions Ltd Haydock Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505



### **Non-Conformity Summary**

Major	Major non-conformity against statement of intent of a fundamental requirement				
No.	Requirement ref.	Details of Non-Conformity	Critical or Major?	Anticipated re-audit date	

Critica	Critical			
No.	Clause.	Detail of Non-Conformity	Anticipated re-audit date	

Major	Major Control of the					
No.	Clause	Details of non-conformity	Corrective action taken	Proposed preventive action plan	Root Cause Analysis	Date Reviewed by Auditor

Minor						
No.	Clause	Detail of Non-Conformity	Corrective action taken	Proposed preventive action plan	Root Cause Analysis	Date Reviewed by Auditor
1	2.2.4	HARM process flow chart does not reflect the actual outsourced printing process being conducted by the site.	Harm Process Flow chart has been updated to include outsourced / returned printed reels (Document attached)	HARM Process flow review added to Management Review agenda. HARM Process flow review added to internal audit schedule.	Human error - Misunderstanding regarding specific requirements of clause The flow chart hadn't been amended in line with the process change that had taken place	

# Audit Summary Sheet (Packaging Materials) Company name Film and Foil Solutions Ltd Haydock Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505



				Flow chart will be reviewed annually or after any changes to the process, to verify accuracy.		
2	4.1.2	External traffic route for vehicles is not being adequately maintained at site and is a potential contamination risk; dirty water is splashing from various potholes in the traffic road surface onto Flt units - pallets of products whilst being transported at site	Potholes have been filled with concrete to make the surface fit for transporting pallets of products. (Photographs attached)	Monthly inspections of external traffic route have been incorporated into the General site maintenance schedule.	Human error - Misunderstanding regarding specific requirements of clause. The External traffic route had been recently road swept with a road sweeper truck and this had damaged / removed parts of the tarmac surface, revealing the potholes. The General site maintenance schedule didn't have this section, so it hadn't been recorded.	
3	4.1.3	Gap at base of pedestrian door by smoking area, and a brick dislodged on the warehouse wall are potential pest ingress points, there is also a build-up of debris around the warehouse perimeter wall	Brush Strip applied to door. Brick repaired on warehouse wall and debris removed around warehouse perimeter wall.  (Photographs attached)	Monthly inspections of doors, walls and perimeters have been added to the General site maintenance plan.	Human error - Misunderstanding regarding specific requirements of clause. These areas had been missed off the general site maintenance plan.	
4	4.1.4	Drainpipe base broken & some gutters have foliage growing in them on production buildings	Drainpipe repaired and gutter cleared of foliage. (Photographs attached)	Memo / training document issued and signed off by all managers asking them to check effectiveness of site maintenance checks carried out by warehouse operatives	Human error - General site maintenance inspection schedule was not being effectively monitored	
5	4.2.1	Paint flaking off walls and floors in small production hall area perforator slitting dept	Flaking paint has been removed and specific area repainted	Review of internal fabric of building added to internal audit schedule.	Human error - Misunderstanding regarding specific requirements of clause The issue of flaking paint had	

# Audit Summary Sheet (Packaging Materials) Company name Film and Foil Solutions Ltd Haydock Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505



			(Photographs attached)		not been considered as a risk and / or added to schedule.	
6 4	4.7.6	Temporary Engineering banding noted on Eldec punch machine light unit, has not been recorded or been subject to a scheduled time limit for correction	The temporary engineering on the light above the Eldec punch machine has been removed and new lighting installed.  (Photographs attached)	Instruction to be issued to the engineer advising him that all temporary engineering must be recorded and subject to a scheduled time limit for correction.  Review of temporary engineering added to internal audit schedule	Human error - Misunderstanding regarding specific requirements of clause by the engineer who thought current method of recording temporary engineering was sufficient.	
7 !	5.9.3	The site rented warehouse {Keedwell} has roof insulation hanging down over stored materials {Storm damage} & a selection or reels of raw material in the rented warehouse noted with very dirty external packaging	The roof has resealed and repaired  (Photographs attached)  The stored material pallets have been cleaned  (Photographs attached)	Review of rented warehouse (Keedwell) added to internal fabric checks and internal audit schedule	A storm and high winds on the weekend before the audit loosened several warehouse ceiling tiles, which fell out of the ceiling onto the product. As soon as we were aware of the damage, tarpaulin sheets were placed over the stock to prevent contamination and to protect the area and the landlord of the rented building contacted to get repairs carried out.	

Attachment 024 (PRO.011) Rev 16 11th November 2021 Page 8 of 9



Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505

Comment on non-conformities – free text to explain where a large number of NCs have been raised without a major
Please note that if we do not receive details of your corrective actions before the completion target date, we will not be able to guarantee that your report and registration renewal will be completed within the strict timescales we are required to apply to BRCGS certification.
For all minor non-conformities and major non-conformities raised at recertification audits, if satisfactory evidence is not provided within the 28 calendar-

For all minor non-conformities and major non-conformities raised at recertification audits, if satisfactory evidence is not provided within the 28 calendar-day period allowed for submission following the audit, certification will not be granted. In both instances, if the site cannot close out the non-conformity within the time period, the site will require a further full audit in order to be considered for certification. (Page 75 of Standard)

### Additional Modules/Head Office Non-Conformity Summary (If applicable)

Major non-conformity against statement of intent of a fundamental requirement						
No.	Requirement ref.	Details of Non-Conformity	Critical or Major?	Anticipated re-audit date		

Critica	Critical Cri					
No.	Clause.	Detail of Non-Conformity	Anticipated re-audit date			

# Audit Summary Sheet (Packaging Materials) Company name Film and Foil Solutions Ltd Haydock Audit Date(s) 2<sup>nd</sup> & 3<sup>rd</sup> February 2022 UK/BRC/505



Major	Major						
No.	Clause	Details of non-conformity	Corrective action taken	Proposed preventive action plan	Root Cause Analysis	Date Reviewed by Auditor	

Minor	Minor						
No.	Clause	Detail of Non-Conformity	Corrective action taken	Proposed preventive action plan	Root Cause Analysis	Date Reviewed by Auditor	

Attachment 024 (PRO.011) Rev 16 11th November 2021 Page 10 of 9