Audit Report
Global Standard Packaging Materials Issue 6: August 2019

1.Audit summary			
Company name	Film and Foil Solutions Limited	BRCGS site code	7725375
Site name	Film and Foil Solutions Limited - Haydock		
Scope of audit	Perforation, macro punching, folding, slitting and rewinding of pre-printed OPP, BOPP and PET to produce film on reels. The slitting and rewinding of Kraft paper onto reels for food, consumer and retail products. All products contact and non-contact.		
Scope exclusions	None		
Justification for exclusion	Not applicable		
Start date	2025-01-20	Finish date	2025-01-21
Re-audit due date	2026-02-11	Previous audit date	2024-01-22

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

2.Audit results			
Audit result	Certificated	Audit Programme	Announced
Audit grade	AA	Previous audit grade	AA+
Certificate issue date	2025-02-26	Certificate expiry date	2026-03-25

Number of non-conformities		
	Major against SOI of Fundamental	0
	Critical	0
	Major	0
	Minor	2

3.Company details

Address	North Building North Florida Road Haydock WA11 9UB		
Country	United Kingdom	Telephone	0044 1942 727151
Commercial representative Name	Paul Rice	Email	paul.rice@filmfoil.com
Technical representative Name	Steven Walsh	Email	steven@filmfoil.com

4.Company profile

Plant size (square metres)	<10K sq.m	No. of employees	1-50	No. HARA Plans	1-3
Subcontracted activities	No				
Outsourced processes	No				
Other certificates held	None				
Regions exported to	None				
Major changes or auditor observations since last BRCGS audit	The site no longer undertake the previous process of “traded Goods” which was undertaken at the Bauer warehouse, (no longer occupied by the site) and therefore the exclusion has been removed.				
Company description	The site is part of Coral Products PLC group, the site was originally set up to provide over winding film tape for the electrical component industry before expanding into the food and consumer sectors. There is a dedicated and experienced Management Team at site, and this is reflected by the ongoing success and development of the plant. The nature of the business is the perforation, slitting folding and rewinding of a range of purchased films for food, consumer and retail products customers on 8 slitting machines, 2 with hot needle perforation unit and one with a punch unit 2 centre fold machines & core cutter. The process of printing is outsourced to a third-party company, which occurs before any on-site processes and therefore not classed as outsourced in terms of scope of this audit. The site infrastructure is adequately maintained and suitable for the products manufactured at the site, some products come into direct food contact. To this end, the site has been				

4.Company profile	
	audited and approved for supply to Tesco. The site is 3,147m² in total. There are 24 employees working a 2-shift system with 9 on site at any one time. The audit was undertaken within the audit due window dates.

5.Product and process characteristics	
Manufacturing Categories	02 - Papermaking 05 - Flexible plastics
Products in production at the time of the audit	Plain and printed BOPP film slit from master roll format into customer specified widths and lengths.

6.Audit duration details			
Total audit duration	12 hours	Duration of production facility inspection	4 hours
Reasons for deviation	Not applicable		
Next audit type selected	Announced		

Audit Duration per day			
Audit Day	Date	Start Time	Finish time
1	2025-01-20	08:00	17:30
2	2025-01-21	07:15	10:15

Auditor information		
Auditor number	Auditor Name	Role
22066	Nick Jackson	Lead Auditor
N/A		Please select

Present at audit Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings				
Name/Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
Bob Jenkins – Site Director	On-Site			On-Site
Steven Walsh – Quality Manager	On-Site	On-Site	On-Site	On-Site

GFSI Audit History		
Date	Scheme/Standard	Announced/Unannounced
2025-01-20	BRCGS Packaging Material Issue 6	Announced
2024-01-22	BRCGS Packaging Material Issue 6	Unannounced
2023-01-16	BRCGS Packaging Material Issue 6	Announced

Document control			
CB Report number	UK/BRC/505		
Template Name	P609 Packaging Materials Audit Report Template v11		
Standard Issue	6	*Template issue date*	2022-02-15
Directory allocation	PackMat	*Version*	1.0

Non-Conformity Summary Sheet

Major non-conformity against statement of intent of a fundamental requirement				
No.	Clause	Detail	Critical or Major	Re-audit date

Critical			
No.	Clause	Detail	Re-audit date

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

Minor							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1	3.5.2	A record of internal audit against section 2 of the standard undertaken in the last 12-months was not available at the time of the audit.	The internal audit has been undertaken	The internal audit for this section will be completed in line with the audit schedule as per the other internal audits	It was mistakenly believed that the Harm system review was adequate to cover this internal audit, this was an oversight.	2025-02-05	N Jackson
2	5.9.2	Raw materials stored in the production area at the North Site Facility and the Keedwell warehouse were seen to be unprotected with the potential for product contamination.	Reels have been re-wrapped	Memo issued advising of the correct procedure and retraining of all concerned staff. Production Manager checks will include the checking of the wrapped status of reels. Process control Procedures have had the following paragraph added:- Any part master rolls that are not being fully utilised need fully wrapping around the body and the edges before handing back to the Warehouse team to ensure that no contamination can enter the material.	Staff believed that by removing the outer wraps of materials prior to use, this would mitigate any potential risk of contamination	2025-02-05	N Jackson

Comments on non-conformities
Not applicable.

Additional Modules/Head Office Non-Conformity Summary Sheet

Critical			
No	Clause	Detail	Re-audit date

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

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

Detailed Section

1.	Senior management commitment
1.1	Senior management commitment and continual improvement

Management System Reviewed
The site has a documented policy in place which states the site's intention to meet its obligation of producing safe and legally compliant products to the specified quality, as well as the responsibility the site has to its customers. The policy is signed by the person with overall responsibility for the site and is communicated to all staff.
The senior management have defined a clear plan for the development and continual improvement of a product safety and quality culture. The plan includes defined activities involving all sections of the site that have an impact on product safety and quality, a description of how the activities will be undertaken and measured, including the intended timescales and a review of the effectiveness of completed activities.
Clear objectives are defined to maintain and improve the quality, safety and legality of products manufactured, in accordance with the site's product safety and quality policy and this Standard. These were seen to be documented and include targets, were clearly communicated to staff, monitored, and the results reported.
The senior management of the company provide sufficient human and financial resources required for the production of safe packaging material, to the required quality, and in compliance with the requirements of the Standard.

The company's senior management have a system in place to ensure that the site is kept informed of and reviews:

- Scientific and technical developments.
- Industry codes of practice.
- All relevant legislation applicable in the country of manufacture and, where known, the country where the product will be used.

Products meet the minimum legal requirements in the country of manufacture and of use where known.
The site have a genuine copy of the current Standard and are aware of any changes to the Standard or protocol that are published on the BRCGS website.
The site has ensured that their recertification audit has occurred on or before the audit due date indicated on the certificate.
The most senior manager on site participated in the opening and closing meetings of the audit. Relevant departmental managers or their deputies were made available as required during the audit.
The site's senior management has ensured that the root causes of any non-conformities identified at the previous audit against the Standard have been effectively addressed to prevent recurrence.

Compliance Evidence
Product safety and quality culture system in place: Product Safety and Quality Culture Development and Improvement plan initiated February 2021
Defined activities: continuous communication development via information boards and regular toolbox talks
Action plan: continue to develop plan as required with annual review and actions allocated to senior team as required. Review plan every six months
Outcome of effectiveness review: plan continues to be effective with a very small staff turn over and low level of customer complaints.
Status of plan:

- Last review date: last reviewed by senior team December 2024.

A sample of the objectives set for the current year includes:

- Objective: maintain BRCGS certification at grade A or above – achieved in 2024.
- Objective: reduce complaints by 10% - achieved in 2024 reduction from 31 – achieved in 2024.
- Objective: reduce the number of internal non-compliances from 3% to 2.7 %.

Monitoring of objectives: ongoing monitoring and full review at annual meeting latest 03/06/2024.

Previous non-conformities: The non-conformances raised during the previous audit have been closed out by the site, with adequate root cause provided and suitable preventive action in place.

1.2	Management review

Management System Reviewed

Management review meetings attended by the sites senior management are undertaken at appropriate scheduled intervals, annually at a minimum to review the sites performance against the Standard and the objectives.

The review process includes evaluation of:

- Previous management review documents, action plans and timeframes.
- The results of internal, second-party and third-party audits.
- Any customer performance indicators, complaints and feedback.
- The effectiveness of the hazard and risk management (HARM) system.
- The impact of any applicable legislative and certification scheme changes.
- Any incidents, corrective actions, out-of-specification results and non-conforming materials.
- Resource requirements.
- Any objectives that have not been met, to understand the underlying reasons.
- The effectiveness of the product defence and product fraud prevention plans.

The meeting is documented and used to revise the objectives. The decisions and actions agreed within the review process is effectively communicated to appropriate staff, and actions implemented within agreed timescales.

The site have a demonstrable system in place which enables product safety, legality, integrity and quality issues to be brought to the attention of a designated manager. The system allows for the resolution of issues requiring immediate action.

Compliance Evidence

Frequency of management review meetings: Management review meetings are undertaken at least annually.

Typical meeting attendance: All members of the senior management team attend the meeting, with apologies sent if required. Those who attended the last meeting include SW Quality Manager, TQ Director, JB Production Manager, BJ Site Director.

Date and details of last management review: 03/06/2024

How minutes and actions are communicated to staff and recorded: Sent electronically to all members of the senior management team.

Management review outcomes: annual meeting agenda was seen to cover all requirements of clause 1.2.2 with electronic minutes sent to all team members with any actions allocated with timeline for completion monitored by Quality Manager and Site Director.

1.3	Organisational structure, responsibilities, and management authority

Management System Reviewed

The site has a current organisation chart in place demonstrating the management structure and reporting channels of the company. Systems were seen to be in place to demonstrate the responsibilities for the management of activities which ensure product safety, quality and legality are clearly allocated and

understood by the managers responsible. There is clear documentation of who deputises in the absence of a responsible person.
The site's senior management ensure that all employees are aware of their responsibilities. Where documented work instructions exist for activities undertaken, the relevant employees have access to these and are able to demonstrate that work is carried out in accordance with the instructions.

Compliance Evidence
Organisational chart reference: COM ORG issue 6 dated 03/01/2025
The staff structure was seen to be up to date at the time of the assessment and deputies are clearly defined.
Processes to ensure staff are aware of their responsibilities: Job descriptions are in place for all staff which outlines the key responsibilities, which are signed by the relevant members of staff.
Job role responsible for implementing and managing BRCGS compliance: responsibility of Quality Manager SW deputised by Site Director BJ – job responsibilities detail key responsibilities relating to and implementing the BRCGS Standard reviewed for Quality Manager and Site Director.

Non-applicable clauses	Not applicable

2.	Hazard and risk management
2.1	Hazard and risk management team

Management System Reviewed
A hazard analysis and risk assessment has been developed by the site and is reviewed and managed by a multidisciplinary team that includes those responsible for quality, technical, engineering/maintenance and production operations.
The multidisciplinary team has a designated team leader who is suitably trained and able to demonstrate competence and experience of hazard and risk analysis.
The team is able to demonstrate competence in hazard and risk analysis principles and is kept up to date with factory changes and customer requirements as they occur.

Compliance Evidence
Hazard and Risk Management Team Leader Details:
- Team Leader: SW Quality Manager
- Experience: 31 years industry experience.
- Training: trained in HACCP procedures by Effective Control limited with mentoring and review dated December 2019

Hazard and Risk Management Team Details:
- Team Members: IS Production Manager 20+ years' industry experience Internal HACCP awareness training certificate dated September 2024, PR Finance Director, LW Production training certificate dated May-2023, CF Warehouse and Logistics, BJ Site Director (Deputy Team Leader)
- Competence: The team is able to demonstrate competence through training and experience in hazard and risk analysis principles and they are kept up to date with factory changes and customer requirements as they occur.

External expertise used in HACCP development and maintenance: The site was not utilising any external consultants at the time of the assessment.

2.2	Hazard analysis and risk assessment

Management System Reviewed
The scope of the hazard analysis and risk assessment has been clearly defined and documented and covers all products and processes included within the scope of certification.
The HARA team maintains awareness of and takes into account:

- Historical, known and foreseeable product safety hazards associated with specific processes and raw materials.
- Intended use of the product (where known).
- Known likely product defects that affect safety.
- Relevant codes of practice or recognised guidelines.
- Legislative requirements.

A full description of the product, product group and process has been developed, which includes all relevant information on product safety and integrity. This includes composition, origin of raw materials, and intended use of the packaging materials along with defined restrictions on use.
There is a process flow diagram prepared for each product, product group and process which sets out each process step from the receipt of raw materials, through manufacture and storage, to dispatch to the customer.
The accuracy of the process flow diagrams have been verified by the HARA team at least once per year and also following any significant incidents or process changes.
The HARA team has identified and recorded all potential product safety hazards that are reasonably expected to occur, and subsequently identified control measures necessary to prevent, eliminate or reduce each product safety hazard to acceptable levels.
A review of the hazard and risk management system and prerequisite programmes has been carried out at least once per year and following any significant incidents or when any process changes.

Compliance Evidence
Summary of products and processes: slitting, hot needle perforating, centre-folding and punching of various plain and printed flexible films including OPP, BOPP, and Polyester.
Exclusions: There are no exclusions contained with the hazard analysis and risk assessment.

Flow diagrams:

- Flow ref / date: Process flow chart for material on reel Appendix 1 of document 2.2 verified by team 31/05/2024
- Flow ref / date: Process flow chart for pick and pack Appendix 2 of document 2.2 verified by team 31/05/2024– not in scope of audit
- Flow ref / date: Process flow chart for print approval Appendix 3 of document 2.2 verified by team 31/05/2024

All flow diagrams were reviewed and accurately reflect the production processes undertaken by the site.
The key process steps to manufacture products within the scope of certification are: Artwork and specification approval, receipt of raw materials/printed goods, storage, issue to production, processes - slitting, hot needle perforating, centre-folding and punching, storage, delivery, customer returns

The hazard analysis and risk assessment were seen to be based on comprehensive information sources and the severity of the hazard verses the likelihood of occurrence had been considered.
The hazards which have been identified by the site during the hazard analysis includes:

- Microbiological: personnel, pests, dust/dirt
- Chemical: cleaning chemicals and lubricants
- Potential for unintended migration: non-food approved materials or inks

- Functional integrity and performance of final product use: controlled by product inspection and testing
- Malicious intervention: controlled by site security procedures
- Raw material fraud: controlled by vulnerability plan – no specific hazards

The following has been determined:
PRP's: cleaning procedures and schedules completed and verified by management, pest management undertaken by professional contractor, supplier approval all suppliers approved and reviewed, hygiene procedures staff training, staff training records, site standards, site security
OPRP's: include artwork and specification approval, all artwork formally approved by customer normally via email, product inspection, first off inspection by operator with second verification and testing, line clearance undertaken on completion of every job

The site has determined through risk that no critical control points are required.

Date of last HARA review: 03/06/2024 undertaken by HARM team
Reviewed by: undertaken by HARM team seen to cover the requirements of the standard

Non-applicable clauses	2.2.9 The site has not identified any critical control points. 2.2.10 The site has not identified any critical control points. 2.2.11 The site has not identified any critical control points.

3. Product safety and quality management

3.1 Product safety and quality management system

Management System Reviewed
The site's documented policies, procedures, working methods and practices have been collated in a navigable and readily accessible system.
The system is fully implemented, reviewed at appropriate planned intervals and improved where necessary.

Compliance Evidence
Access and availability to staff: Document control procedure 3.2 issue 2 dated 13/07/2020 all QMS in electronic format available to staff in read only format with printed documents in place as appropriate.
Translation requirements: The site have determined no documents are required to be translated.

3.2 Document control

Management System Reviewed
The company has a documented procedure to manage documents which form part of the product safety and quality management system. There is a list of all controlled documents indicating the latest version number. The method for the identification and authorisation of controlled documents is through the control system, documents are identified by title, issue number and date and changes are recorded on the list of controlled documents. Documents and records in electronic form are stored securely and backed up to prevent loss or malicious intervention.

Compliance Evidence
The controlled documents seen during the audit were seen to be compliant with the requirements of the Standard. Document control procedure 3.2 issue 2 dated 13/07/2020 all QMS in electronic format available to staff in read only format with printed documents in place as appropriate.

3.3	Record keeping

Management System Reviewed
The sites records were seen to be legible, appropriately authorised, retained in good condition, and retrievable.
Any alterations to records are authorised and justification for the alteration is recorded.
The company's senior management ensure that documented procedures are established and implemented for the organisation, review, maintenance, storage and retrieval of all records relating to product safety, legality, regulatory compliance and quality.
Records are held for a defined period which relates to the usable life of the packaging and the products it is designed to contain.

Compliance Evidence
Record retention period: Record keeping procedure 3.3 issue 2 dated 13/07/2020 all records retained for five years and electronic documents indefinitely and in archive format as applicable with back up to Cloud based system constantly.
Document retrieval: All records are held by the site in either electronic or hard copy format.
The completed records seen during the audit were seen to be compliant with the requirements of the Standard.

3.4	Specifications

Management System Reviewed
Detailed, accurate and compliant specifications are available for all products, including product safety and legislative requirements.
The company seek formal agreement of specifications with all relevant parties.
There is a specification review process in place where the product composition or characteristics change and also at a predetermined interval. Reviews and changes are documented and communicated to the customer.
Any changes to existing agreements or contracts are agreed, documented and communicated to appropriate departments.

Compliance Evidence
Specifications were seen to be available for all raw materials and products challenged, with the controlled specifications kept electronically. The specifications which were reviewed include limits for relevant attributes.
Statements of compliance are available for all food/hygiene sensitive products produced, compiled and authorised by a suitably competent person. The statement of compliance included the nature of the materials used in the manufacture of the packaging, confirmation that the packaging meets relevant legal requirements and the inclusion of any post-consumer recycled materials (where relevant). The date of issue, expiry date, limitations of product use and usable life of the packaging are also identified. The site review the statement of compliance at a risk-based frequency.
Statement of compliance for food or hygiene sensitive product challenged: site declaration of compliance for finished food grade products 3.4.3 issue 7 dated 02/05/2024 reviewed annually seen to contain all relevant information.
Raw material specification challenged: Alupol Films BOPP TSA, TSB, TSX specification and declaration of compliance dated 28/05/2024 – Superfilms PET Supcoat specification BT7011HMC issue 7 dated 18/08/2022 declaration of compliance dated 28/07/2022 – Nahar Polyfilms heat sealable OPP HTT film 2-side treated specification dated 29/06/2022 declaration of compliance dated 15/09/2023
Finished product specification challenged: Heat Sealable OPP film 15 to 50micron specification FF182 version 5 dated 13/05/2024
Frequency of review of specifications: annual review of specifications by Quality Manager with latest undertaken May-2024.

3.5	Internal audits

Management System Reviewed
The site has demonstrated that there is a scheduled programme of internal audits in place which is fully implemented and effective, covering: HARA or product safety and quality plan, prerequisite programmes product defence and product fraud prevention plans, procedures implemented to achieve the Standard.
Audits are scheduled and undertaken at a frequency based upon risk and previous audit performance, at least annually.
Internal audits are carried out by appropriately trained and competent auditors. Auditors are independent from the process or activity being audited to ensure impartiality.
Internal audit reports identify conformity as well as non-conformity.
Results are notified to the personnel responsible for the process/activity audited. Root cause analysis is used to determine appropriate corrective actions and a designated manager is responsible for the implementation.
There is also a separate programme of documented inspections to ensure that the factory environment and processing equipment are maintained in a suitable condition where food/hygiene sensitive products are manufactured.

Compliance Evidence
Frequency of audits: Internal audits are carried out annually and based on risk.
Risk determination: past history of low number of issues against each section of the standard, frequency reviewed following significant number of non-compliances raised against specific sections.
Details of the internal auditor training: BJ Site Director SGS Internal EMS auditor certificate SGS/SSCE/EMSA/508783/714 dated 25/11/2008 and SW Effective Control certificate dated December 2019.
All internal auditors challenged were seen to be competent, have completed the required training and are independent from the area being audited to ensure impartiality. The auditors challenged include:
Internal auditor: BJ Site Director
Internal auditor: SW Quality Manager
The following Internal system audit reports were challenged:

- Report: section 5.4 of standard Process Control undertaken 07/01/2025 audit 25/6 by SW no issues raised
- Report: section 5.2 of standard artwork control audit 25/7 undertaken 07/01/2025 by SW no issues raised
- Report: Site security audit 25/13 undertaken 07/01/2025 by SW no issues raised
- Report: Supplier Approval and Monitoring procedure audit 24/18 undertaken 28/05/2024 by BJ with no issues raised.

Internal audit reporting and follow up: Completed internal audits are reported to the managers responsible and closed out within defined timescales based on the non-conformity identified. Non-conformances, where raised, are subject to corrective action, root cause and preventive action.
Review of the following GMP, Hygiene & Fabrication audit report:

- Report Date: 12/09/2024 document 3.5.2 covering all areas of the site undertaken by SW with all actions seen to be closed out.
- Report Outcome: minor issues raised and actions largely closed out on the day, verified by SW.

Risk determination for frequency of GMP audit: undertaken quarterly based on past performance and audit results, large number of issues or non-compliances may result in an increase in frequency.

A non-conformance was raised against clause 3.5.2 of the standard - A record of internal audit against section 2 of the standard undertaken in the last 12-months was not available at the time of the audit. See minor NC-01

3.6	Corrective and preventive action

Management System Reviewed
The site has a procedure in place for the completion of root cause analysis and corrective actions and to determine preventive actions. Root cause analysis is used to implement ongoing improvements and prevents recurrence of non-conformities in the event of:

- An analysis of non-conformities for trends which shows that there has been a significant increase in a type of non-conformity.
- A non-conformity which places the safety, legality, integrity or quality of a product at risk (including withdrawals).
- The results of internal, second- or third-party audits.
- Customer complaints.
- Failure of in-line testing equipment.
- Any incidents.

The site evaluates the effectiveness of root cause analyses, and of any corrective and preventive actions.

Compliance Evidence
Procedure reference: Root cause analysis and preventative action procedure 3.6 issue 1 dated 01/09/2020
The procedure applies to product related issues as well as quality system issues.
Example of corrective action close out reviewed: one non-compliance raised at last BRCGS audit against clause 6.2.3 unauthorised mobile phone reviewed with corrective action RCA and preventative action effectively closed out with no repletion to date – Customer complaint reviewed D310 raised 08/11/2024 customer GA eight reels received with incorrect product code P33862 instead of P36924 job number 17596, Investigation and RCA inefficient line clearance not all previous documents removed, CA operator retrained.

3.7	Supplier approval and performance monitoring

Management System Reviewed
The site has a documented supplier approval procedure and continual assessment programme in place, based upon risk analysis and defined performance criteria. The procedure ensures that the materials and services procured conform to defined requirements where there is a potential impact to product safety, quality or legality.
The approval procedure is based on risk and includes either one or a combination of certification to a valid GFSI-benchmarked standard with a scope that includes the raw materials purchased, supplier audits, or where a valid risk-based justification is provided, a satisfactorily completed supplier questionnaire used for initial approval.
There is a documented and fully implemented process for ongoing supplier performance review, based on risk and defined performance criteria.
The site has a system in place to ensure that when approval is based on questionnaires, these are reissued at intervals based on risk, and suppliers are required to notify the site of any significant changes in the interim, including any change in certification status. Records of ongoing supplier assessment and any necessary actions are maintained and reviewed.
The site have an up-to-date list of approved suppliers, readily available to the relevant staff.
The company ensure that its suppliers of raw materials have an effective traceability system.
The site has a system in place to ensure they are aware of the last manufacturer or packer when raw materials have been purchased from companies that are not the manufacturer or packer.

Compliance Evidence
Supplier approval procedure reference: 3.7 issue 2 dated 29/07/2020
A sample of suppliers reviewed as part of this assessment:

- Raw material supplier: Nahar Polyfilms Ltd – SAQ dated 10/06/2024 BRCGS site code 10008630 A

expiry 09/06/2025
- Raw material supplier: Alupol Films – SAQ dated 11/06/2024 BRCGS site code 1322187 AA+ expires 09/03/2025.
- Raw material supplier: Superfilms Ltd – SAQ dated 08/06/2023 BRCGS site code 1591560 A+ expires 09/12/2025.
- Raw material supplier: Aintree Plastics (food grade sleeves) – SAQ dated 08/06/2023 BRCGS site code 6385113 A+ expires 14/06/2025.
- Outsourced (subcontracted) production: Webflex Ltd (printing) SAQ dated 10/06/2024 BRCGS site code 6051053 AA expires 29/01/2025
- Agent & broker supplier: no materials purchased via agents or brokers

Frequency of on-going approval: annually based on delivery performance, certification status, complaints, and any non-conforming product.
Evidence of effective supplier traceability systems in place: All suppliers were seen to have been certificated to GFSI benchmarked schemes or other third-party scheme with a scope that includes traceability. A number of third party certificates were reviewed during the assessment.
Exceptions to the supplier approval process: exceptions if required for emergency use of un-approved supplier – senior management authority, detailed incoming inspections receipt of DoC of CoA.

3.8	Product authenticity, claims and chain of custody

Management System Reviewed
The company have processes in place to access information on historical and developing threats to the supply chain which may present a risk of substitution of raw materials. Information is gathered from trade associations, government sources or private resource centres.
A documented vulnerability assessment has been carried out on all raw materials to assess the potential risk of substitution, taking into account historical evidence of substitution, economic factors which may make substitution more attractive, ease of access to raw materials through the supply chain, sophistication of routine and upstream testing to identify substitution and nature of the raw material. The output of this assessment has been documented as a vulnerability assessment plan. This plan is reviewed to reflect changing economic circumstances and market intelligence which may alter the potential risks and is formally reviewed annually.
Where raw materials have been identified as being at particular risk of substitution, the vulnerability assessment plan includes appropriate assurance and/or testing processes to mitigate the identified risks.

Compliance Evidence
Documented vulnerability assessment: 3.8 raw material vulnerability assessment and control plan issue 2 dated 19/04/2023.
The vulnerability assessment covers all five of the mandatory requirements in the Standard.
Details of review process: Reviewed at least annually or when there is significant change to economic circumstances or market intelligence.
Last reviewed: 19/04/2024 – no changes required
Examples of raw materials and their risk:
Raw material: BOPP film
- Risk: No significant risks identified

Raw material: PET films
- Risk: no significant risks identified

3.9	Management of subcontracted activities and outsourced processes

Where the company has outsourced part of production, this has been declared to the customer or brand

owner and, where required, approval has been granted.
Processes that have been subcontracted or outsourced have been risk assessed to determine the risks to the quality and safety of the product.
Clear specifications have been agreed for all work outsourced or subcontracted.
Final release of product which has had process steps subcontracted or outsourced is the responsibility of the site and controls are in place for checks on finished work to ensure product safety and quality meets specification prior to dispatch to the final customer.
The company has ensured that any subcontracted or outsourced processors have an effective traceability system.
Details of processes/activities outsourced: Flexographic printing of BOPP and PET films

- Processer used: Webflex Ltd (printing) SAQ dated 10/06/2024 BRCGS site code 6051053 AA expires 29/01/2025
- Processer approval: Webflex Ltd (printing) SAQ dated 10/06/2024 BRCGS site code 6051053 AA expires 29/01/2025

Controls in place: artwork approval is controlled by the site, detailed purchase order sent with each order detailing the specific design required and artwork reference reviewed for PO2675 makes reference to artwork design 6164241 V1 and printed product inspected on receipt by Quality Manager to approved proof or sample reviewed for design customer TOPC design Lamb Patty received 29/11/2024 with approved sample signed by QM.
Note, this process happens before the product arrives on site and therefore does not strictly fit into outsourced requirements, however has been assessed against 3.9 at request.

3.10	Management of suppliers of services

Management System Reviewed
The site has a documented procedure for the approval and monitoring of suppliers of services, which is risk-based and takes into consideration risk to the safety and quality of products, compliance with any specific legal requirements and potential risks to the security of the product.
Contracts / formal agreements are in place with the suppliers of services which clearly define the service expectations and ensure potential risks associated with the service have been addressed.

Compliance Evidence
Procedure for approval and monitoring of suppliers of services: 3.7 issue 2 dated 29/07/2020
Reviewed the following suppliers of services, including agreements in place:

- Pest control: Northwest Pest Control agreement dated 11/06/2018 rolling NPTA member 0852 expires 15/04/2025
- Transport and distribution: M&S Transport haulier agreement 5.8.1 issue 2 signed 16/09/2020
- Calibration services: Accurate Weighing Services – annual scale calibration
- Waste management: Fresco – waste carrier licence CBDU44197 expires 21/10/2027
- Product safety and quality consultants: Effective Control Ltd consultancy as and when required.

3.11	Traceability

Management System Reviewed
The site have a documented traceability procedure and system that can trace and follow all raw materials from the supplier through all stages of processing and distribution of the finished product, and vice versa.
Identification of raw materials, intermediate products, finished products, non-conforming products and quarantined goods is adequate to ensure traceability.
An appropriate system is in place to ensure that the customer can identify a product or production lot number for the product.
The traceability procedure and system is tested at least annually, and the results are retained and easily

retrieved for inspection. Traceability of all materials can be achievable in a timely manner.

Compliance Evidence
Traceability procedure reference: 3.9 issue 3 dated 10/09/2021. Overview of the traceability system: All incoming items are given a unique trace code which follows the product throughout the production process. Production batch codes are provided on delivery notes as dispatched to the supplier.
Traceability markings on product: all raw materials are identified by the manufacturer's label. In addition following intake checks the goods are entered on to the site's Access stock system and each batch is issued with a PID label used for allocation and traceability which when entered onto the system will show all the material information. If part used reels of raw material are put back into stock a new PID number is issued which again will relate to the suppliers original information. Finished goods in reel format have a label on the outside of the reel and inside the core which details the Customer, product description, work order number, reel number, and date of manufacture.
Traceability test details instigated at this assessment:

- Product chosen: 38 reels 500mm x 25 micron P8 perforated film item number FBE500perf delivered to customer FBE delivery note 12058 sales order 7543 – sales order number 7543 entered into site BCE system and traced to work order 16753.
- Date of production: Production date 16/12/2024
- Raw material reconciliation challenged: raw material batch reel number BEE1505168 recorded on production record together with original reel label copy – 1010mm x 25 micron BOPP-PPT – traced to supplier Nahar Polyfims PO2217 issued PID16129 on intake.
- Start and finish time: 10:10 to 11:25
- Key documentation reviewed:
    - Delivery note to customer 12058
    - Work order job pack 16573 dated 16/12/2024
    - Original reel label BEE1505168 and PID label 16129
    - Supplier delivery note Nahar Polyfilms PO2217
    - Delivery packing list 00713 details reel number as item 153 delivered 11/06/2024

The traceability exercise undertaken during the assessment was seen to be undertaken effectively.
The traceability system for the site can effectively trace and follow all raw materials from the supplier through all stages of processing (including subcontracted processes) and distribution of the finished product, and vice versa.
The site challenges the traceability systems annually, with the last in-house traceability test having occurred within the last 12 months.
Site trace test undertaken 17/06/2024 customer GC delivery note 10957 sales order 7665 – traced to work order 16823, raw materials reel 4300170989/50278/1/3 PID number 15054 traced to supplier Alupol PO2210 received 17/05/2024

3.12	Complaint handling

Management System Reviewed
The site has a detailed complaints system in place, all complaints are recorded and investigated. Actions resulting from the complaint are carried out promptly and effectively by appropriately trained staff and complaint data is analysed to identify significant trends. Root cause analysis is used where significant complaints occur.

Compliance Evidence
Procedure for managing complaints: 3.11 issue 3 dated 13/01/2022 – all complaints are entered onto log and a documented investigation is undertaken.
Overview of complaint trends and how analysed: reviewed by Quality Manager ongoing with full analysis presented and reviewed at annual meeting to identify any trends.

Highest complaint type and cause: The site has a low number of complaints with no specific trending identified - Customer complaint reviewed D310 raised 08/11/2024 customer GA eight reels received with incorrect product code P33862 instead of P36924 job number 17596, Investigation and RCA inefficient line clearance not all previous documents removed, CA operator retrained.

3.13	Management of product withdrawals, and incidents and product recalls

Management System Reviewed
The site has a product withdrawal procedure which identifies key personnel involved in assessing potential product withdrawals or returns, a communications plan including methods of informing customers, root cause analysis and corrective action to implement appropriate improvements as required.
The withdrawal procedure can be operated at any time and takes into account notification to the supply chain, stock return, logistics for recovery, storage of recovered product, and disposal.
The company provides written guidance and training for relevant staff regarding the type of event that would constitute an incident, which may include disruption to normal production processes, disruption to key services, events such as fire, flood or natural disaster, malicious contamination or sabotage or failure of, or attacks against, digital cyber-security. A documented incident reporting procedure is in place.
The company have determined and documented the activity required to effectively manage an incident to prevent release of product where hygiene, safety or quality may have been affected.
There is a procedure to manage product recalls initiated by the brand owner or specifier which includes:

- Identification of the key personnel.
- Clearly defined responsibilities.
- A communications plan that includes methods of informing customers and (where necessary) regulatory bodies in a timely manner.

The product withdrawal procedure is tested at least annually. Results of the test are retained and include timings of key activities.

Compliance Evidence
Procedure reference: Product withdrawal procedure 3.12 issue 3 dated 01/09/2020 and Hygiene and product safety incident procedure 3.13 issue 2 dated 01/09/2020
The incident management and product recall procedure was reviewed which was seen to contain sufficient detail and no issues were noted.
Date and details of latest test: site test undertaken 17/06/2024 – scenario supplier Alupol advised site of a possible contamination issue with a roll of BOPP reel number 430170989/50678/1/3 delivered 17/05/2024 – BCE system indicated batch was issued PID number 15054 purchase order number 2210 – purchase order 2210 was entered into system which detailed that reel was allocated to work order 16823 to produce 25 reels of 300mm x 1900m which was produced for customer GC order M465099 and delivered on note 10957 dated 14/06/2024.
Conclusions and improvements: Successful test carried out; no improvements identified as being required.
Incidents since last audit: None.

Non-applicable clauses	3.8.3 There are no raw materials which have been identified as a particular risk of substitution.

4. Site Standards

4.1	External standards

Compliance Evidence
Description of location: the site occupies two adjacent sites on an established industrial estate. There is a

third warehouse which is rented by the site which is fully controlled by the site for the storage of raw materials, finished goods and some obsolete materials.
The site was found to be suitable in size for the business and its operations and located in an area which did not present any issues likely to affect the safety or legality of products. The site has stated that there are no local activities seen which may have an adverse impact on the safety or quality of the finished product or raw materials. External areas around the site were found to be well managed and maintained, grassed areas away from the buildings were deemed suitable, external traffic routes which come under the responsibility of the site are suitably surfaced. External building fabric was inspected during the external site review and was maintained to a good standard to minimise the potential for any product contamination.
Adequate site drainage was seen to be in place during the external inspection, this included gutters, drainpipes and drains around the external pathways.
External storage of materials: there is no external storage of any materials.
Additional locations: third rented warehouse at neighbouring site linked to main facility via a locked gate with warehouse under full control of Film and Foil.

4.2	Building fabric and interiors: raw materials handling, preparation, processing, packing and storage areas

Management System Reviewed
The fabric of the building was observed to be suitable for the intended purpose and in good condition and repair. Walls, floors, ceilings and pipework were seen to be maintained in good condition and can facilitate cleaning.
All internal drain openings are suitably protected against the entry of pests and designed to minimise odour.
Suitable and sufficient lighting has been provided to ensure a safe working environment, correct operation of processes, effective inspection of the product and cleaning.
Suitable and sufficient ventilation has been provided.

Compliance Evidence
Materials of fabrication for internal walls: the North and South production and warehouse facilities are brick built to lower levels with steel fabricated upper sections and rooves. The warehouse facility in the North facility is a stand alone semi temporary structure with steel fabricated walls and inflatable type roof. The rented warehouse facility is brick to lower levels with composite upper walls and roof with resin skylights. All units have steel roller shutter doors.
Materials of fabrication for floors: floors in all facilities are sealed concrete, painted as appropriate.
Materials of fabrication for ceilings: ceilings in the North and South facilities are steel fabrication, the warehouse in the North site is an inflatable type of semi-temporary build and the rented warehouse is composite outer with lined inner. There are no suspended ceilings in the production or warehouse facilities.
Drainage provision: Sinks are fitted directly to drains, no issues noted with drainage.
Method of window protection: There were no glass windows within the production area which were identified as a hazard.
Door suitability: Various doors were observed during the assessment, including fire doors. All doors observed were seen to be close fitting and in suitable condition.
Lighting suitability: Adequate lighting in place.
Suitability of ventilation and extraction: Normal ventilation in place with no pest issues noted.

4.3	Utilities

Management System Reviewed
All water used in the processing of the products or equipment cleaning is potable or suitably treated to prevent contamination.
The microbiological and chemical quality of water, steam, ice, air, compressed air or other gases which

comes into direct contact with packaging is regularly monitored, based on risk assessment. These present no risk to product safety or quality and comply with relevant legal regulations.

Compliance Evidence
Water use: Water is used for handwashing and cleaning only.
Source of water: United Utilities – potable mains supply
Utilities testing: No water testing – compressors are serviced under contract reviewed for Boge C25 compressor job number 2543 undertaken 22/110/2024 seen to include full filter change – no compressed air in contact with product.

4.4	Site security and product defence

Management System Reviewed
The company undertake a documented risk assessment (threat assessment) of the security arrangements and potential risks to the products from any deliberate attempt to inflict contamination or damage. This threat assessment includes both internal and external threats. The output from this assessment is a documented product defence plan. Areas have been assessed according to risk; sensitive or restricted areas defined, clearly marked, monitored and controlled. The plan is kept under review to reflect changing circumstances and external influences and is formally reviewed at least annually.
Measures are in place to ensure only authorised personnel have access to production and storage areas, and access to the site by employees, contractors and visitors is controlled. A visitor reporting system is in place. Staff are trained in site security procedures and encouraged to report unidentified or unknown visitors.

Compliance Evidence
Documented threat assessment: Site security risk assessed as part of HARM process 2.1 issue 9 reviewed 30/06/2024 and in Site security risk assessment and product defence risk assessment and plan 4.4 issue 4 dated 10/09/2021
Product defence plan reference: Site security risk assessment and product defence risk assessment and plan 4.4 issue 4 dated 10/09/2021.
Last reviewed and updated: 30/06/2024
Security measures: There were various measures seen during the assessment to manage internal and external threats which included locked doors to prevent unauthorised access and various areas included in a CCTV system. Staff and visitor access to the site is controlled and the security systems in place ensure that unauthorised access is not permitted. Systems are in place to ensure that only authorised personnel have access to production and storage areas and access by employees, contractors and visitors is controlled. A visitor recording system is in place.
Additional locations: Keedwell rented warehouse - fully fenced perimeter and gated facility which is linked to the main site via a dedicated linking gate to the main facility with site owner CCTV in place with warehouse access by electronic key roller shutter door.

4.5	Layout, product flow and segregation

Management System Reviewed
The site has a current plan of the site which includes access points for personnel, travel routes for personnel, raw materials and intermediate or finished products, staff facilities, routes for the removal of waste, production and process flows and storage areas.
The process flow from intake to dispatch has been arranged to minimise the risk of contamination or damage to the product.
Premises allow sufficient working space and storage capacity to enable all operations to be carried out properly under safe and hygienic conditions.

Designated walkways have been provided through production so there is adequate segregation from materials.
Facilities have been designed and positioned so that movement of personnel is by simple, logical routes.

Compliance Evidence
Site map reference: North site building plan issue 8, South building site plan issue 7, Keedwell warehouse site plan issue 4 seen to include staff entry points and movement, stock and production flow, storage and routes for waste
Overview of the site layout: the site comprises of two main facilities known as the North and South site, these are located on the opposite side of the access road. The North site has a gate in the top corner which accesses the Keedwell rented warehouse used for storage of raw materials and limited finished goods.
Adequacy of layout: All areas allowed for sufficient working space to enable all operations to be carried out properly under safe and hygienic conditions. Logical and designated walkways have been provided throughout production.
Additional locations: Keedwell rented warehouse - fully fenced perimeter and gated facility which is linked to the main site via a dedicated linking gate to the main facility with site owner CCTV in place with warehouse access by electronic key roller shutter door.

4.6	Equipment

Management System Reviewed
Production, storage and warehousing equipment has been designed for the intended purpose and minimises the risk of contamination to the product. Lubrication points and application methods of any lubricant do not contaminate the product. Equipment is constructed of suitable materials and designed to ensure it can be effectively cleaned and maintained.
Newly installed equipment is properly specified before purchase, tested and commissioned prior to use and a maintenance and cleaning programme has been established.

Compliance Evidence
Overview of the key equipment: site equipment consists of industry standard - six surface wind slitters two with HNP facility and two with punch facility and four centre folding machines. In addition there are two bag making machines , a pouch maker, and laminator which are not operational having been mothballed pending re-commissioning to suit future orders and workload. In addition there are gas powered FLT and other MHE.
Construction of equipment: all equipment is of industry standard construction and all seen to be very clean and well maintained.
Wooden equipment: Wooden equipment was seen to be properly sealed, in good condition and free from splinters.

4.7	Maintenance

Management System Reviewed
There is a documented programme of maintenance, covering all items of production equipment and plant critical to product safety, legality and quality, to prevent contamination and reduce the risk of breakdown.
Maintenance logs are maintained for all off-line testing equipment which includes any adjustments and the re-calibration date of any interventions.
Equipment that has been identified as being a risk of product contamination by foreign bodies arising from equipment failure or damage is inspected at predetermined intervals, inspection results documented, and appropriate action taken.
Maintenance work does not place product safety, quality or legality at risk. Maintenance work is followed by a documented clearance procedure which records that contamination hazards have been removed and

equipment cleared to resume production.
Tools and other maintenance equipment are cleared away after use and appropriately stored.
Contractors involved in maintenance or repair are suitably monitored by a staff member who is responsible for their activities.

Compliance Evidence
Programme details: The planned maintenance schedule is recorded in paper format.
Programme reference: Maintenance procedure 4.7 issue 3 dated 06/01/2023 with PPM schedule 4.7.1 issue 4 dated 10/08/2022 – all key equipment is serviced three times per year.
Programme coverage: All equipment on site is included on the sites planned maintenance schedule. The site also undertakes extraordinary inspection of equipment where required, for example following a report of an issue.
Records of maintenance work reviewed: Service check list 4.7.2 issue 3 – PPM reviewed for Eldec 4 dated 29/11/2024, 12-point check with post maintenance line clearance verified by Engineering Manager RT – Centre folder 4 dated 22/11/2024, 12-point check with post maintenance line clearance verified by Engineering Manager RT - Eldec re-winder dated 08/11/2024, 12-point check with post maintenance line clearance verified by Engineering Manager RT - Eldec 3 dated 09/08/2024, 12-point check with post maintenance line clearance verified by Site Director BJ – Centre folder 2 dated 12/07/2024, 12-point check with post maintenance line clearance verified by Site Director BJ – Non-scheduled repairs recorded on maintenance request form reviewed for Harnden B52 slitter replace brass bearing dated 19/11/2024 with post maintenance line clearance verified by RT.
Temporary repairs: No temporary repairs were observed during the assessment.
Engineering workshop: The engineering workshop was seen to be well controlled with a good standard of hygiene, with swarf mats used to prevent transfer of engineering debris into production or storage areas.

4.8	Housekeeping and cleaning

Management System Reviewed
Documented cleaning procedures are in place and maintained for buildings, equipment and vehicles.
Cleaning schedules and procedures include responsibility for cleaning, item/area to be cleaned, frequency of cleaning, method of cleaning, cleaning materials to be used, cleaning record and responsibility for verification. The frequency and methods of cleaning are based on risk.
Cleaning chemicals are fit for purpose, suitably labelled, and used in accordance with manufacturers' instructions, stored in a secured, designated location, in closed containers. Chemicals that are strongly scented or could give rise to taint and odour contamination are not used. Cleaning equipment was seen to be kept in a suitable designated location.
Materials and equipment used for cleaning toilets is clearly differentiated from those used elsewhere.

Compliance Evidence
Condition and hygiene standards within the facility: Good standards of housekeeping were seen to have been maintained at the site throughout the whole facility.
Cleaning provided by: Site cleaning staff and production and warehouse operatives.
Cleaning frequency: cleaning of all areas is undertaken to a set schedule and work instruction based on daily and weekly tasks with the schedule/record detailing responsibility, frequency, method, equipment and verification of completion – cleaning records reviewed Centre folder 1 & 2 record 4.8.2.2 16/12/2024 to current date – Eldec 1 & 3 1 & 2 record 4.8.2.10 16/12/2024 to current date – Eldec 4 & re-winder record 4.8.2.19 16/12/2024 to current date – Elite 1 and 2 1 & 2 record 4.8.2.8 16/12/2024 to current date – facilities cleaning records toilets 4.8.2.17, canteen 4.8.2.16 and locker room 4.8.2.15 all seen to be up to date.
Microbiological environmental monitoring: environmental monitoring risk assessment undertaken as part of HARM study deems none required due to prerequisites in place and site rules and the nature of the

materials do not support the growth of pathogens.

4.9	Product contamination control

4.9.1	Glass, brittle plastics, ceramics, and similar materials control

Management System Reviewed
The site does not have any unnecessary non-production glass, ceramics or brittle plastic present, which could pose a foreseeable risk of contamination. Procedures for the handling of non-production glass, ceramics and brittle plastics required in production, packing and storage areas where there is a risk of product contamination, have been put in place.
Glass or brittle plastics that pose a potential product contamination hazard are controlled and recorded on a register which includes a list of items detailing location, number, type and condition, recorded checks of condition of items, carried out at a specified frequency that is based on the level of risk to the product and also details on cleaning or replacing items to minimise the potential for product contamination.
Glass or brittle plastics not in the production or storage areas are included on the register on the basis of risk.
Where non-production glass or brittle plastic breakage occurs, a responsible person is placed in charge of the clean-up operation and ensures that no other area is allowed to become contaminated due to the breakage. Any product that has become contaminated is segregated and disposed of.
All breakages are recorded in an incident report.

Compliance Evidence
During the audit there was no evidence of unnecessary, non-production glass, ceramics, or brittle plastic present.
Glass and hard plastics register reference: glass and brittle plastics procedure 4.9.1 issue 3 dated 03/09/2020 includes breakage procedure – glass registers in place by area/equipment reviewed 4.9.1.2 Elite 3 slitter, Eldec 3 slitter and centre folder 1 and 2 and warehouse North site all seen to include item, quantity, location and condition.
Frequency of checks: all production equipment is subjected to monthly inspection reviewed for Elite 3 slitter, Eldec 3 slitter and centre folders 1 and 2 undertaken 10/01/2025 and 11/12/2024 and warehouse undertaken every 3 months reviewed for 10/10/2024.
Breakages in the last 12 months: There have been no breakages or items damaged in the last 12 months.

4.9.2	Sharps and metal control

Management System Reviewed
There is a documented policy for the controlled use and storage of sharp implements to prevent contamination. The policy includes control of these items into and out of the site.

Compliance Evidence
Controls in place: Sharps and blade control procedure 4.9.2 issue 2 dated 02/09/2020 – knife register 4.9.2.4 issue 1, site issued knives to all operators with number engraved reviewed for knife K2 issued to SW and K31 issued to AG seen on site tour and verified against register.
Monitoring of production blades: Knife blades are changed on a one for one basis at the blade changing station with the Quality Manager issuing 10 new blades and will issue 10 more when used with verification check against used quantity, staff are trained to report ant breakage or loss – machine slitting blades issued to operators by Quality Manager.

4.9.3	Chemical and biological control

Management System Reviewed
Processes are in place to manage the use, storage and handling of non-production chemicals, to prevent chemical contamination. This includes a list of approved chemicals for purchase, availability of material safety data sheets and specifications, avoidance of strongly scented products, the labelling and/or identification of containers of chemicals at all times, designated storage area with access restricted to authorised personnel, use by trained personnel only.
Hazard and risk analysis has been used to identify, control and manage any potential risks from microbiological contamination and any potential allergens.

Compliance Evidence
Details of the types and uses of chemicals used on site: cleaning chemicals are stored in a dedicated locker controlled by the site cleaner, maintenance chemicals are stored in a locked roller cabinet in the engineering store.
Chemical controls in place, including storage, labelling, issue and use: All chemicals are locked in the chemical store and were seen to be suitability labelled. Approved chemical list in place – MSDS reviewed for Bartoline White Spirit version 4 dated 22/05/2020, No nonsense degreaser version 4 dated 18/10/2022, and Crown Oils food safe Plus 2 grease version 3 dated 14/05/2018.
Allergen management: allergen risk assessment undertaken as part of HARM study deems none present in raw materials, where appropriate maintenance chemicals are food safe, food stuffs brought in by staff are permitted only in canteen and office facilities, transported to canteen from staff entrance in sealed containers – hand wash in place at factory entrances. Film and Foil absence of substances policy dated 06/01/2023 includes allergen advice.

4.10	Waste and waste disposal

Management System Reviewed
Licensed contractors are used where required, for the removal of waste, with records kept and maintained.
Process waste has been managed to minimise release to the environment.
Suitable and sufficient refuse and waste containers have been provided around the site, which are emptied at appropriate frequencies and maintained in an adequately clean condition.

Compliance Evidence
Details of waste management: internal bins are 1100l lidded Dolavs with separate units for process and general waste, scrap BOPP is baled for re-cycling, externally FEL skips ate in place segregated for cardboard and general waste emptied on a weekly basis. Waste contractor Fresco waste carrier licence CBDU44197 expires 21/10/2027.
Waste facilities were seen to be appropriate for the site, with no evidence of pest harbourage or cross contamination risks.

4.11	Pest management

The company has implemented and maintains a preventive pest management programme which covers all areas of the site.
The site contract the services of a competent pest management organisation for the regular inspection and treatment of the site in order to deter and eradicate infestation. The frequency of inspections has been determined by risk assessment and documented. The risk assessment is reviewed whenever there are changes to the building or production processes which could have an impact on the pest management programme or if there has been a significant pest issue. The service contract of the pest contractor has been clearly defined.
Equipment such as bait stations, traps or electric fly-killing devices is appropriately located and operational.
Effective precautions have been put in place to prevent pests entering the premises, including proofing of

the building.
Immediate action is taken in the event of infestation to eliminate any hazards.
Catch analysis from flying-insect control devices is requested in the event of an infestation and at appropriate intervals.
Documented procedures and detailed records of pest activity, pest management inspections and recommendations are all maintained. This includes an up-to-date, signed and authorised site plan identifying numbered pest control devices and their locations, identification of the baits and/or monitoring devices on site, clearly defined responsibilities for the site management and the contractor, details of pest control products used and instructions for their effective use and detailed records of inspections, recommendations and any pest infestation. The site ensures all the relevant recommendations made by the contractor are implemented in a timely manner.
Employees of the site all understand the signs of pest activity and are aware of the need to report any evidence to a designated manager.

Compliance Evidence
Pest Contractor: Northwest Pest Control NPTA member 0852 expires 15/04/2025

- Pests covered: Rats, mice, crawling insets and flying insects
- Frequency of visits: eight routine visits, one Technical inspection and four EFK with CTA and annual tube change

All routine visits were seen to be undertaken over the last 12 months and actions have been closed out within suitable timeframes. Routine visits 28/11/2024, 03/10/2024 and 15/08/2024 no major issues – Senior Technical review 07/02/2024 with nine recommendations all seen to be closed out, EFK service and CTA 28/11/2024 all counts low, 04/07/2024 all counts low and 09/04/2024 included annual tube change.
Pest issues identified in the previous 12 months: No significant pest issues have been identified within the last 12 months. There was no evidence of presence of infestation during the BRCGS assessment.
Staff training in signs of pest activity and action to take: trained out at induction process and at refresh – reviewed for AP 13/02/2024 induction and AG refresh dated 24/01/2024.
The contract with the pest management service provider covers all locations covered under the scope of certification.

Non-applicable clauses	4.1.5 The site does not store any raw materials in external areas. 4.2.2 The site does not have suspended ceilings in production, process or storage areas. 4.2.4 There are no windows or roof glazing which constitute a risk to product. 4.2.5 There are no bulbs or strip lights which constitute a risk to product. 4.2.6 There are no elevated walkways. 4.4.3 There are no silos or intake pipes. 4.9.2.4 There are no open noticeboards in production, packing or storage areas. 4.9.3.3 Allergens have not been identified as a risk as part of the hazard analysis. 4.9.3.4 Allergens have not been identified as a risk as part of the hazard analysis. 4.10.5 There is no trademarked waste. 4.10.6 There is no trademarked waste. 4.11.3 The site does not undertake its own pest management.

5. Product and process control

5.1 Product development

Management System Reviewed
Customer requirements relating to the design, development, specification, manufacture and distribution of

the product are documented and agreed with the customer, taking into consideration process requirements and end use. Critical-use parameters are identified and defined.
The site clearly define and document production trials that are required. The outputs and success criteria required from a production trial have been determined, and any changes and/or additions made to materials, processing characteristics or equipment as a result of the trial. Production trials are carried out and testing validates that manufacturing processes are capable of producing a safe and legal product to defined quality parameters. New products or product changes are subject to suitable evaluation to ensure that required safety and quality parameters can be achieved.
The company ensure that production is carried out using defined operating conditions which result in safe and legal products to defined quality parameters.
Technical product specifications required by customers are prepared and, where possible, agreed with the customer or brand owner before the production process begins.
Samples as agreed with the specifier are retained for future reference.
There is a documented procedure in place to address the transfer of customer specifications or requirements to the site's own systems, which includes validation of accuracy of data transferred, how changes to customer specifications are updated and communicated, how the agreed requirements for customer testing methods are met and evaluation of how changes made to the customer specifications affect the technical product specification.
Settings derived from successfully conducted production trials or equipment installations are transferred accurately to process control documentation.

Compliance Evidence
Specific customer requirements: The site do not undertake product development and merely slit or perforate film from stock items to customer specific requirements. Customers place orders for slit and perforated film and will advise the site of the film type, width and where required the perforation/punch requirement, this is confirmed to the customer on an order for order basis by the site in the form of an order acknowledgement.
Finished product specifications are produced by the site's Access system and are provided to customers on request – reviewed for Heat Sealable OPP film 15 to 50micron specification FF182 version 5 dated 13/05/2024.
Production trials: the site do not undertake production trials as such but will provide specific widths of film from the site products for trial by the customer.
Retained development samples: production samples are retained in the specific work order job bag for all production for a period of 5 years.

5.2	Graphic design and artwork control

Management System Reviewed
The site has a documented artwork management procedure which covers all the activities for which the site has responsibility.
A process is in place to seek formal acceptance and approval of final product concepts and artworks by the specifier, the outcome of which is documented.
Where appropriate, print trials are carried out and testing validates that the agreed product quality and print standards can be consistently achieved.
Printing equipment are verified as being correct to specification and artwork version or agreed master prior to use, and fully traceable to the customer's approved origination material.
Customer-approved reference material is controlled to ensure minimisation of degradation and returned to appropriate storage after use. The site has a policy to address requirements for the renewal of approved masters, as necessary.
The site has a documented procedure for managing changes to artwork and print specifications to manage obsolete artwork and printing materials.
Artwork files and approved master's in electronic form are suitably protected to prevent loss or malicious

intervention.

Compliance Evidence
Artwork management procedure: Graphic design and artwork and print control procedure 5.2 issue 4 dated 06/01/2023 – the site will receive a PDF from the customer and will then forward this to the outsourced printer Webflex. The printer will then supply a proof with an artwork reference number which is forwarded to the customer for formal approval which is generally in the form of email – system reviewed for customer OP, customer supplied PDFs for 3 designs, Beef Patty, Chicken Patty and Vegetable Patty, the site forwarded these to Webflex who then provided artwork proofs for approval Beef Patty reference 6179280, Chicken Patty reference 6179283 and Vegetable Patty reference6178816 – F7F subsequently forwarded these to the customer who approved the designs in email dated 19/11/2024 at 13:29
Verification of printing equipment: printing equipment is limited to artwork proofs and samples used for comparison only on receipt of printed product and are stored in the Sales Office in envelopes.

5.3	Packaging print control

The site does not carry out any printing operations, therefore the requirements of this section of the Standard are not applicable

5.4	Process control

Management System Reviewed
The hazard and risk management team have identified and recorded all potential product defects that are reasonably expected to occur at each step in relation to the product and process. These hazards include product quality defects, defects that may have an impact on the functional integrity and performance of the final product in use and defects which result in the production of products which are outside customer-specified quality parameters.
A review of the manufacturing and, where applicable, printing process has identified manufacturing process control points that can prevent or limit the risk of producing products with quality defects.
For each manufacturing process control point, machine settings or process limits have been established and documented in a process specification.
Where equipment settings are critical to the safety or legality of the product, changes to the equipment settings are only completed by trained and authorised staff.
A bill of materials and process specification (including manufacturing process control points) is available for each batch or lot during production.
Documented process checks are undertaken at start-up, following adjustments to equipment and periodically during production, to ensure products are consistently produced to the agreed quality specification.
A documented clearance procedure is in place to ensure that at start-up the line is clear of all previous work and production documents.
In the event of changes to product composition, processing methods or equipment, the site, where appropriate, re-establish process characteristics and validate product data to ensure that product safety, legality and quality are achieved.
The documented line clearance procedure includes the roles of persons involved in line clearance, areas where materials can become trapped, validation of the line clearance and sign-off for continuing production.
The line clearance procedure is fully implemented for each production run.

Compliance Evidence
Product quality and integrity defects: Process control procedure 5.4.1 issue 5 dated 26/05/2022 – typical defects – incorrect material, incorrect leadoff or winding, incorrect width, print, perforation, and surface treatment.

Machine settings or process limits: machine settings are generally for finished reel width and winding tension and position of perforation pattern where applicable.
In-process checks for quality: all jobs are set up and checked for correct material, width, leadoff, print if applicable, treatment surface, and perforation if applicable. The operator will sign and obtain a second signature for verification. Visual checks are undertaken at the end of each set with a documented check middle and end of the run with a sample retained.
Start-up line clearance procedure reference: line clearance procedure detailed within process control procedure 5.4.1 issue 5 dated 26/05/2022.
The start-up line clearance procedure was seen to detail all the requirements of the Standard.
Witnessed line clearance during the assessment: line clearance witnessed for work order16573 sales order 7543 line clearance signed at the end of the job on record 5.4.4 and verified by operator KT

5.5	Calibration and control of measuring and monitoring devices

Management System Reviewed
The site have identified and control in-line and off-line measuring equipment used to monitor critical control points and product safety, quality and legality. This includes a list of equipment and its location, identification code and calibration due date, prevention from adjustment by unauthorised staff and protection from damage, deterioration and misuse.
All identified measuring equipment has been checked and adjusted at a predetermined frequency, based on risk analysis. Calibration is traceable to a recognised national or international standard.
Corrective action and reporting procedures have been established and documented in the event of the monitoring and testing procedure identifying any failure of product inspection, testing or measuring equipment.

Compliance Evidence
Calibration controls: All equipment used for measuring or monitoring product safety, quality and legality are documented and calibrated according to risk.
Equipment list reference: Calibration procedure 5.5 issue 3 dated 07/09/2020, calibration log reference 5.5.1 issue 1 dated 04/04/2020 last reviewed 02/01/2025.
Calibrated equipment sampled during this assessment included the following:
Off-line: Equipment type & serial number: Scale T-scale serial number 02104048006 located in production.

- Last Calibration Date: 17/12/2024 (annual) by Accurate Weighing Equipment to NS
- Frequency: annual certificate SC1922/24 dated 17/12/2024.
- Method of protection against damage, deterioration and misuse: no user serviceable adjustments and located on secure work area.

Off-line: Equipment type & serial number: Scale Avery serial number 110250182 located in production.

- Last Calibration Date: 17/12/2024 (annual) by Accurate Weighing Equipment to NS
- Frequency: annual certificate SC1921/24 dated 17/12/2024.
- Method of protection against damage, deterioration and misuse: no user serviceable adjustments and located on secure work area.

Off-line: Equipment type & serial number: Scale Jadever serial number 42105422803 located in production.

- Last Calibration Date: 17/12/2024 (annual) by Accurate Weighing Equipment to NS
- Frequency: annual certificate SC1923/24 dated 17/12/2024.
- Method of protection against damage, deterioration and misuse: no user serviceable adjustments and located on secure work area.

5.6	Product inspection, testing and measuring

Management System Reviewed

Quality checks are carried out to demonstrate that the finished product is within the tolerances laid down in the agreed product specification and conforms to any critical technical/legal requirements. The frequency of checks and sampling is in accordance with industry-accepted practice or customer requirements and based on risk analysis.
The site define how samples used for checking in-process quality are disposed of.
Hazard and risk analysis principles have been used to determine the need for in-line product testing equipment to ensure product safety, quality and legality.
The company have established, documented and implemented procedures for the operation, routine monitoring and testing of all equipment used in product inspection, testing and measurement.
Routine off-line quality checks are carried out at appropriate stages in production to demonstrate that the product is within the tolerances laid down in the agreed product specification.
A system that includes off-line or randomised quality checks is in place to identify and remove non-conforming product from the production lot.
Test methods, analytical methods and customer-approved reference samples (where required) are seen to be the most recent version and are available in the laboratory or where offline testing is conducted. Samples are suitably stored to avoid degradation.
The test methods used by the site in both on-line and off-line testing are validated to ensure their sensitivity, reproducibility and range.
The site have ensured that prescribed methodologies are followed for standardised tests.
Where testing shows out-of-specification results, a documented procedure for investigating these results has been established and followed to determine whether the cause is non-conforming product or a testing failure.
The site have established and implemented procedures for the operation and testing of automated inspection equipment used to check print or other material features, to ensure that it is correctly set up and capable of alerting or rejecting the packaging when it is out of specification.
Testing of the equipment is completed at the start of the production run, the end of the production run and a frequency based on the site's ability to identify, hold and prevent the release of any implicated materials should the equipment fail.
The site have established and implemented procedures in the event of a failure in the equipment.

Compliance Evidence
Details of quality checks carried out: Process control procedure 5.4.1 issue 5 dated 26/05/2022 – typical defects – incorrect material, incorrect leadoff or winding, incorrect width, print, perforation, and surface treatment.
Frequency of checks (based on risk assessment): all jobs are set up and checked for correct material, width, leadoff, print if applicable, treatment surface, and perforation if applicable. The operator will sign and obtain a second signature for verification. Visual checks are undertaken at the end of each set with a documented check middle and end of the run with a sample retained. Reviewed for work order 18815 sales order 8556 Elite slitter slit from 1200mm x 25mu BOPP to 10 x 120mm – first off checks undertaken by C and verified by DB, checks seen to include machine clear down, material check, width, treatment check, winding and appearance - work order 19138 sales order 36925 Elite 3 slitter slit from 1200mm x 25mu BOPP to 3 x 400mm – first off checks undertaken by MK and verified by DB, checks seen to include machine clear down, material check, width, treatment check winding and appearance - work order 18477 sales order 8401 Centre folder from 710mm x 25mu BOPP to 355/355 – first off checks undertaken by A and verified by DB, checks seen to include machine clear down, material check, width, treatment check

5.7	Control of non-conforming product

Management System Reviewed
Clear procedures for the control of out-of-specification or non-conforming materials are in place, documented and understood by all personnel. These include the effective identification and management of

materials before a decision has been made on their final disposition.
Non-conforming materials are assessed and a decision taken to reject, accept by concession, rework or put to alternative use.

Compliance Evidence
Non-conforming product handling procedure reference: 5.7 issue 5 dated 11/12/2024
Recording of non-conformances: all non-conforming materials are recorded on a log and on an individual investigation form used for internal non-conformances identified and customer complaints and include RCA using 5-whys method. Example of a non-conforming product incident: D306 raised 13/05/2024 work order 15766 sales order 7127 printed reel had black dots randomly in a line in machine direction – RCA to supplier Terinex deemed to be ineffective clean down of print station with issue not detected by operator – CA material rejected and replaced - Customer complaint reviewed D310 raised 08/11/2024 customer GA eight reels received with incorrect product code P33862 instead of P36924 job number 17596, Investigation and RCA inefficient line clearance not all previous documents removed, CA operator retrained

5.8	Incoming goods

Management System Reviewed
The site have a documented raw materials and intermediate product intake procedure to ensure that incoming goods match purchase or product specifications.
There is a procedure for the inspection of loads on arrival to ensure that products are free from pest infestation, contamination or damage and are in a satisfactory condition.
Unloading areas for bulk deliveries are clearly identified and designed to prevent product mix-ups.
Regarding raw materials, all complaints or defects identified by the site are recorded and investigated (including root cause analysis) and the results of the investigation documented.
The site have a procedure for the acceptance of raw materials.
Receipt documents and/or product identification facilitate correct stock rotation of goods in storage and, where appropriate, ensure materials are used in the correct order and within the prescribed shelf life.
The site have a system in place to validate all raw materials and intermediate products prior to their introduction to the process.

Compliance Evidence
Procedure reference: Incoming goods, storage and despatch procedure 5.8 issue 4 dated 10/09/2021
Raw material intake inspection checks: all goods are checked against the delivery note for accuracy and quantity. The warehouse have access to purchase orders to verify any issues. The vehicle and goods are also inspected for any signs of pests, contamination, odours or damage. The delivery note is stamped as inspected and signed. The goods are then entered onto the Access system and issued with a PID number for the batch.
Intermediate product intake inspection checks: Follows the same process as raw material intake.
Example inspection challenged: delivery from supplier Alupol Films delivery CMR028805 BOPP Anti-mist film 8 sizes/ batches, delivery note stamped as inspected and signed by CF dated 17/01/2025 and Access codes PID16946 to 16953 issued.
Example of defect received (including investigation): None since last audit

5.9	Storage of all materials and intermediate and finished products

Management System Reviewed
Procedures to maintain product safety and quality during storage are risk-based, understood by the relevant staff, and implemented accordingly. They include instructions for the packing of finished product, segregation of products where necessary to avoid cross-contamination, mixing of sorts, or taint, storage of product/materials off the floor and away from walls, specific handling or stacking requirements to prevent

product damage.
All materials, work in progress and finished product is properly identified and protected during storage by appropriate packaging to protect them from contamination.
Storage is controlled to protect the product from contamination, including taint or odour and malicious intervention.
Finished or intermediate product storage meets customer requirements (with regard to first in, first out (FIFO), where applicable), with dispatch after positive release. Where external storage of finished product is required, the product is suitably protected.
Packaging used for storage or dispatch of intermediate or finished products, such as pallets, is appropriately protected when stored outside and inspected for signs of damage or contamination prior to use.
In order to prevent contamination, documented procedures are in place to appropriately segregate raw materials, intermediate products and finished products.
The site ensure that hazardous chemicals are handled in such a way that risk to product safety, quality and legality is minimised.

Compliance Evidence
Storage conditions: raw materials are stored in the Keedwell warehouse facility in the manufacturer's packaging or in dedicated racking in the North site production facility. Finished goods in reel format are individually sleeved and identified, palletised and the securely wrapped for storage or despatch. Finished goods are generally despatched on completion. There is currently no work in progress.
Storage procedure: storage and despatch procedure 5.8 issue 4 dated 10/09/2021. All goods are checked against the delivery note for accuracy and quantity. The warehouse have access to purchase orders to verify any issues. The vehicle and goods are also inspected for any signs of pests, contamination, odours or damage. The delivery note is stamped as inspected and signed. The goods are then entered onto the Access system and issued with a PID number for the batch.
Type of storage: Raw material in master roll format are stored in the Keedwell warehouse on the original pallets and packaging in the floor area and stacked as appropriate. Finished goods when stored are stored in the warehouse facility in the North site at floor level or the Keedwell warehouse if not despatched immediately in dedicated racks.
Method of protection of raw materials, work in progress and finished goods: Raw materials are stored in original packaging until issued to production, finished goods in reel format are individually sleeved and identified, palletised and the securely wrapped for storage or despatch
Methods of segregation: dedicated floor areas in Keedwell warehouse for raw materials with segregated racks for finished goods, and obsolete materials marked for machine trials. finished goods also stored in North Site warehouse . Any part used reels of raw material are stored in the dedicated racking in the North site.
Additional locations: Keedwell rented warehouse - fully fenced perimeter and gated facility which is linked to the main site via a dedicated linking gate to the main facility with site owner CCTV in place with warehouse access by electronic key roller shutter door, dedicated areas for Raw materials, limited finished goods and obsolete materials marked for machine trials.

A non-conformance was raised against clause 5.9.2 of the standard - Raw materials stored in the production area at the North Site Facility and the Keedwell warehouse were seen to be unprotected with the potential for product contamination. See minor NC-02

5.10	Dispatch and transport

Management System Reviewed
The company have procedures for the dispatch and transport of products, which include any restrictions on the use of combined loads and requirements for the security of products during transit, particularly when vehicles are parked and unattended away from a designated storage depot.

All products and materials are identified and either protected during distribution by appropriate external packaging or transported under conditions to protect the product from contamination. This includes the risk of taint or odour and of malicious intervention.
All pallets are checked and damaged, contaminated or unacceptable pallets are discarded. Wooden pallets that come into direct contact with finished products or raw materials are not allowed to contaminate the product, with a layer pad in place and those used are sound, dry, clean and free from damage and contamination.
All company-owned or leased vehicles used for deliveries are included in the documented cleaning schedules and kept clean and in a condition that minimises the risk of product contamination.
All delivery vehicles and shipping containers are subject to a documented hygiene and odour checking procedure before loading.
Vehicle drivers all comply with the site rules. Access to the site for third-party transport personnel is controlled.

Compliance Evidence
Controls on combined loads and security in transit: all goods are sufficiently wrapped and protected against damage whilst in transit, however dedicated approved third party haulier is in place with an appropriate agreement and controls in place.
Vehicle hygiene checks: Incoming goods, storage, and despatch procedure 5.8 issue 4 dated 10/09/2021 details the vehicle pre-loading checks to be undertaken including contamination, pests, wet, and taint & odour. This check is recorded on the delivery manifest challenged for Manifest for M&S Transport dated 15/01/2025 consisting of 8 consignments with note stamped as inspected and signed by MR
An inspection is undertaken on pallets, vehicles and containers as required during each loading activity.
Subcontract haulier contracts and certification: supplier agreement 5.8.1 issue 2 dated 16/09/2020 signed by M&S Transport partner MK seen to include hygiene and security requirements.

Non-applicable clauses	5.2.3 No print trials are required to be carried out. 5.3 There are no printing processes undertaken. 5.3.5 The site does not undertake composite printing. 5.4.4 There are no equipment settings critical to the safety or legality to product. 5.6.3 There is no inline test equipment. 5.6.6 There is no inline test equipment. 5.6.9 There is no automated test equipment. 5.6.10 There is no critical analysis of products undertaken. 5.9.7 The site does not handle hazardous chemicals. 5.9.8 There is no material which is intended for recycling.

6. Personnel

6.1	Training and competence: raw materials handling, preparation, processing, packing and storage areas

Management System Reviewed
All personnel, including temporary personnel and contractors, are appropriately trained prior to commencing work and adequately supervised throughout the working period. Induction training includes the company hygiene rules.
Personnel engaged in activities relating to product safety, quality and legality have relevant training and competency assessment is in place.
The site defines and documents how new or changed procedures, working methods and practices related to product safety or quality are communicated to relevant personnel.

The company routinely review and document the competencies of all staff and provide relevant training as appropriate.
Records of training are available which include the name of the trainee and confirmation of attendance, the date and duration of the training, the title or course contents and the training provider.
The site has put in place documented programmes covering the training needs of relevant personnel.

Compliance Evidence
Training reviewed during this assessment: training procedure 6.1 issue 3 dated 05/01/2023 – induction training reviewed for AP dated 13/02/2024and IH 30/09/2024 seen to include hygiene rules, work wear, lockers, glass, blades, sickness reporting, refresh training reviewed for AG dated 24/01/2024. – process control (product inspection & testing and line clearance) training reviewed for AP centre folder and slitting/perforation and punching dated 21/03/2023 and IH dated 13/09/2023 – pest awareness training reviewed for AP dated 21/03/2024 and IH dated 13/09/2023 – goods in, storage, and despatch procedure training reviewed for JB, MR and CF dated 24/01/2022
Personnel questioned during the audit regarding activities relating to safety, quality and legality were seen to be competent.
Details of ongoing training and competency: continual assessment of competency by Production Manager on shop floor and verification of job set up and analysis of complaints – training for specific procedure updates by QM reviewed for updated non-conformance procedure 6.1.4 to issue 3 reviewed for CB. LW & KB dated 11/12/2024

6.2	Personal hygiene: raw materials handling, preparation, processing, packing and storage areas

Management System Reviewed
Personal hygiene requirements have been documented and communicated to all personnel where food/hygiene sensitive products are produced. This includes the following instructions: wrist bands, wrist-worn devices or watches shall not be worn, jewellery including piercings shall not be worn on exposed parts of the body, with the exception of a plain wedding ring, wedding wristband or medical alert jewellery, fingernails shall be kept short and clean and free from nail varnish, false fingernails and nail art shall not be worn, excessive perfume or aftershave shall not be worn. Compliance with the site's requirements is checked routinely.
Handwashing is performed on entry to the production areas and at a frequency that is appropriate to minimise the risk of product contamination.
Personal items and belongings are not allowed to be taken into production areas without the permission of the management.
The site use risk assessment to determine the procedures and written instructions necessary to control the use and storage of personal medicines in production and storage areas, to minimise the risk of product contamination.
Where visitors cannot comply with site hygiene rules, suitable control procedures are in place.
All cuts and grazes on exposed skin are covered by appropriately coloured plasters that are different from the product colour. These are site-issued and monitored.

Compliance Evidence
Personal hygiene witnessed: Staff were seen to be following the sites personal hygiene rules during the on-site inspection with a high level of compliance.
Hand washing witnessed: Observed handwashing taking place as part of site tour, all observed in compliance with site requirements. Handwashing was available at the entrance to production areas.
Personal items: No personal items were seen to be present in production during the audit.
Plaster control: blue detectable plasters issued by site and recorded on plaster log 6.2.4 issue 1 dated 08/09/2020 monitored by QM.

6.3	Staff facilities

Management System Reviewed
Locker rooms can be accessed without the need to enter production areas.
Lockers are provided for all personnel who work in raw material handling, processing, preparation, packing and storage areas. Lockers are of sufficient size to accommodate all reasonable personal items and any protective clothing required.
Site-issued protective clothing and personal clothing are appropriately segregated based on risk.
Eating, drinking and smoking is not allowed in locker and changing rooms.
Suitable and sufficient hand-washing facilities are available to enable cleaning of hands before commencing work, after breaks, and as necessary during work. Hand-washing facilities provided include sufficient quantity of water at a suitable temperature to encourage handwashing, unscented soap, adequate hand-drying facilities and advisory signs to prompt use.
Toilets do not open directly into storage, processing or production areas. Toilets are provided with suitable and sufficient hand-washing facilities.
Facilities for visitors and contractors enable compliance with the site's hygiene policy.
All food brought into manufacturing premises is stored in a clean and hygienic state and no food is taken into storage, processing or production areas.
Eating, drinking and smoking is not allowed in the production or storage areas.
Smoking (including e-cigarettes) is only permitted in designated controlled smoking areas. Adequate arrangements for dealing with smokers' waste have been provided at smoking facilities.

Compliance Evidence
Description of the changing facility: Lockers are on site with PPE, including segregation of personal and protective clothing, and situated just before entry into production.
Control of eating, drinking and smoking: detailed in personal hygiene procedure 6.2 issue 4 dated 05/01/2023, food limited to canteen and offices, drinking in production from water dispenser away from equipment from conical cups. Smoking limited to dedicated area at rear of North site production facility.

6.4	Medical screening

Management System Reviewed
The site has made employees aware of the symptoms of infection, disease or condition which would prevent a person working, where they are involved in handling of food/hygiene sensitive products/materials.
The site have a procedure for the notification by personnel, including temporary personnel, of any relevant infections, diseases or conditions with which they may have been in contact or be suffering from.
Employees, contractors and visitors suffering from any of the above are excluded from work involving the handling of direct food contact or other hygiene-sensitive product packaging for as long as the symptoms persistVisitors and contractors fill in a health questionnaire or otherwise confirm that they are not suffering from any symptoms which may put product safety at risk, prior to being allowed into production, packing or storage areas.

Compliance Evidence
Details of medical screening: All visitors, including contractors, are subject to medical screening prior to entry to the production area which is undertaken in the form of a visitor questionnaire. All staff are made aware of reportable symptoms and raise this to management where required.
Training in reporting illness: induction training reviewed for AP dated 13/02/2024 and IH 30/09/2024 seen to include hygiene rules, work wear, lockers, glass, blades, sickness reporting, refresh training reviewed for AG dated 24/01/2024.

6.5	Protective clothing

Management System Reviewed
Hair coverings and/or beard snoods, where appropriate are worn in production areas where materials for direct contact with food or other hygiene-sensitive products are produced.
Hazard and risk principles have been used to determine the need for other protective clothing.
Where risk assessment has determined that protective clothing is not required in a particular area, it has been fully justified and does not pose a contamination risk to the product.
The company have used risk assessment to determine, document and communicate to all employees, including temporary personnel and contractors, the rules regarding the wearing of protective clothing during the journey to work, in raw materials handling, preparation, production and storage areas and when away from the production environment.
Where protective clothing is required, appropriate clean protective clothing is worn. Sufficient sets of clothing appropriate to the activities being carried out are provided.
Protective clothing worn in production areas provides adequate coverage, with no external pockets or sewn on buttons, and changes are provided as required.
Based on the assessment of risk to the product, suitable footwear is worn within the factory environment.
Gloves are replaced regularly, distinctive, intact and do not cause a contamination risk to the product.
Protective clothing is kept clean and laundered.
For home laundry, the site have ensured that employees have received written instructions regarding the laundering process to be used, employees are provided with a bag or other suitable means to safely transport washed garments from home to the workplace, there is a defined process within the site for monitoring the effectiveness of the system and there is a procedure and system for dealing with any case where employees are unable to perform home laundry effectively.
Clean and dirty clothing is segregated and controlled to prevent cross-contamination.
Disposable protective clothing is subject to adequate control to avoid product contamination.

Compliance Evidence
Details of the typical PPE issued: Operatives are issued with polo shirts, trousers, and fleeces in sufficient sets for daily change. Hairnets and beard snoods where appropriate are mandatory. Warehouse staff also issued with Hi-viz jackets. Visitors issued with disposable paper coat.
Risk assessment for PPE: Part of HARM study - Hairnets and beard snoods where appropriate are mandatory, with site issued PPE described above to be worn at all times whilst on site.
Hair coverings: All hair coverings were observed to be worn correctly and containing all scalp hair during the assessment
Rules on wearing of clothing outside work environment: site issued clothing is not permitted to be worn off site or during the journey to and from work with bags provided to transport – home laundry procedure 6.5.1 issue 3 dated 26/07/2022 includes arrangements in staff unable to undertake – procedure training reviewed for JC dated 29/10/2024 and AP dated 29/02/2024.

Non-applicable clauses	6.2.5 All visitors are required to comply with site hygiene procedures. 6.5.10 Disposable protective clothing is not used.

Requirements for traded products	
7.1	Approval and performance monitoring of manufacturers/packers of traded packaging products
Not applicable	
7.2	Specifications
Not applicable	
7.3	Product inspection and laboratory testing
Not applicable	
7.4	Product legality
Not applicable	
7.5	Traceability
Not applicable	
Non-applicable clauses	Not applicable