



Audit Report Global Standard Food Safety Issue 9

| 1. Audit Summary | | | | | |
|-----------------------------|---|-------------|-----------|------------|--|
| Company name | Vion Scherpenzeel B.V. | | Site code | 8476525 | |
| Site name | Vion Scherpenzeel B.V. | | | | |
| Scope of audit | Slicing, brining and curing, smoking, cooking, marinating and seasoning of (vacuum and/or bulk boxes) packed fresh or frozen pork meat and pork meat preparations/products. Freezing of pre-packed pork meat. | | | | |
| Exclusions from scope | None | | | | |
| Justification for exclusion | NA | | | | |
| Audit start date | 2024-11-26 | Audit finis | sh date | 2024-11-28 | |
| Re-audit due date | 2025-12-11 | Head office | ce | No | |

| Additional modules in | ncluded | | |
|-----------------------|----------------|-------|-----------------------|
| Modules | Result | Scope | Exclusions from Scope |
| Choose a module | Choose an item | | |
| Choose a module | Choose an item | | |

| 2. Audit Results | | | | | |
|----------------------------|--------------|-------------|-------------------------|--------------------|-----------|
| Audit result | Certificated | Audit grade | AA | Audit programme | Announced |
| Previous audit grade | В | | Previous audit date | 2023-12-08 | |
| Certificate issue date | 2024-12-23 | | Certificate expiry date | 2026-01-22 | |
| Number of non-conformities | | Fundamental | | 0 | |
| | | Critical | | 0 | |
| | | | Major | 0 | |
| | | | Minor | | 5 |

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| 3. Compan | y Details | | |
|--------------------------------|----------------------|-----------------------------|--------------------|
| Site address | Het Zwarte Land 13 | | |
| | 3925 CK SCHERPENZEEL | | |
| | | | |
| Country | The Netherlands | Site telephone number | +31 (0)88 995 4800 |
| Commercial representative name | | Email | |
| Technical representative name | | Email | |

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

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| 4. Company Profile | |
|--------------------------------------|--|
| Company registration number | NL82EG |
| Major changes since last BRCGS audit | No cutting/deboning activities anymore, some team changes. For a promotional product, the use of mustard. (no allergens before used) Sous-vide cooking as a regular process. |

Company Description

Vion Scherpenzeel B.V. belongs to the Vion Food Group which produces pork and beef. Vion Group is one of the biggest meat processing and selling companies in Western Europe and sales is worldwide with a focus on Europe and Asia (China, Japan, Korea). The site employs approx. people working basically in a 2-shift system from Monday to Friday, occasionally production on Saturdays. Vion Scherpenzeel B.V. is specialized in the production of cured and/or smoked bacon by, cutting, slicing. brining and curing, smoking, marinating, (slow)cooking and seasoning of packed (vacuum and/or bulk) fresh or frozen pork meat and pork meat preparations and products. Further also freezing of prepacked pork meat. Recently stopped with deboning activities and started with cooking of seasoned/marinated spareribs. Also, other products are produced like sliced pork meat, vacuum packed in consumer packs, bulk packed in boxes (B to B) and other packaging activities are performed. Only pork meat is processed and final products are based on welfare and good farming breed programs of the pigs (EKO, GB, GF, QS, standard and FS (farming star)). Three HACCP studies are valid. The raw materials come from own slaughterhouses, which are part of the Vion Group in the Netherlands and from some other non-Vion slaughterhouses in France. Only B2B delivery. The storage and transport of finished products is partly outsourced (both cooled and frozen) as sister company Distrifresh is now involved in transporting from and to own Vion plants (not in the scope of this audit). Also outsourced is the deep-freezing of some products to external cold stores. The products do not return to the site and are therefore out of scope of this audit. Furthermore, on-site cleaning of crates and pallet boxes. The company is under veterinary control for exporting activities, is USA approved and has several client statuses e.g. . Official veterinary approval number: NL 82 EG. Packed pork products which are bought from Vion International B.V. (produced by Vion sites, mainly Vion Boxtel) are frozen after reception, stored and palletized for export in containers. De company is about m2 and situated on an industrial area. No negative influences of processing of other companies were identified.

| 5. Product Characteristics | |
|-----------------------------------|---|
| Product categories | 03 - Raw prepared products (meat and vegetarian) 08 - Cooked meat/fish products 09 - Raw cured or fermented meat and fish Category Category Category Category Category Category Category |
| Finished product safety rationale | Temperature < 4°C (meat preparations), < 7°C or < -18°C (other products), vacuum packaging (bacon), dosage nitrite (> 1 gram/litre brine / > 60 ppm on ingoing product). Sous-vide cooked pork meat is heated till 85 °C. But all need to be heated prior to consumption. |

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| 5. Product Characteristics | | | | | | | |
|----------------------------|-----------------|-----------|--|---|----|--|--|
| High care | No | High risk | No | Ambient high care | No | | |
| Justification for area | | | Appendix 2 applied. All products (incl. sous-vide cooked pork meat) have to undergo full cooking step prior to consumption. Also smoking process step is not considered as a sufficient heating step justification for area. | | | | |
| Allergens har | ndled on site | | Mustard Choose an alle | rgen rgen rgen rgen rgen rgen rgen rgen | | | |
| Product claim organic | ns made e.g. l | Ρ, | IKB, FS (farming star / "beter leven") and GB (= GF + welfare) GF (good farming) + Qualität und Sicherheit (QS) + Organic (S | | | | |
| Product recal | ls in last 12 m | nonths | No | | | | |

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| Products in | production | at the time |
|--------------|------------|-------------|
| of the audit | | |

- Day 1;
 - Salting (injection) of Horse shoes, article , prepacked in netting at the Line Hammen, T31.
 - Vacuum-packing of BSD Rack 190-8 at Line 2, including the test of the metal detector (CP) with test bars and explained recording and CA if needed.
 - Crate and big box (Dolavs) washing and checks on dosing and rests of detergent; pH reduced from pH 11 to pH 7.
 - Salting (injection), smoking (beeh wood chips), cooling (about 6°C) and vacuum packing of Streaks .
 - Adapted cleaning process (after the Major NC, last year) of hooks and checks on dosing and rests of detergent; pH reduced from pH 11 to pH 7.
 - Freezing as tolling activity (for Vion Boxtel) of fresh prepacked APD /art. and finished freezing process after 23 hours of article
- Day 2;
 - Intake Koppen LC BXT, order , checks temperature within limits (CCP) and check loading department.
 - Slice department; vacuum packing, seal check, of VP Haasjes, art. , X-ray testing (CP, tested with 0,4x2mm SLS 316 wire/ tested with 0,8mm SLS 316 ball/2mm glass/2mm ceramic)
 - Loading container order , checks temperature within limits (CCP) and check loading department.
 - Labelling of VP Haasjes, art. , lot weighed and labelled per vacuum pack and in crates.
 - o Tumbling of Kiingsize z/k, article , program 4.
 - Explanation at the tumbler department about cleaning and used red valves for the Mustard-containing marinade.
 - Seasoning of Rollades 14135, NL1122V, with mix
 - Sous-vide cooking of Sweet marinated Spareribs, lot , program 2, incl. CP core temperature (85°C) and cooking time. (3h)
 - Loading of , order via trailer , incl. checks temperature within limits (CCP) and check loading department.
- Day 3;
 - o Tour outside.
 - Storage area across the road. Separated storage for the Mustard-containing marinade.
 - Unloading carton boxes incl. check loading department. Checks intake order

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| 6. Audit Duration Details | | | | | |
|---|--------------------------------------|--|--------------|--|--|
| Total audit duration | 24 man hours | Duration of production facility inspection | 12 man hours | | |
| Reasons for deviation from typical or expected audit duration | NA | | | | |
| Combined audits | None | | | | |
| Next audit type selected | Unannounced – mandatory 1 in 3 years | | | | |

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HR manager

HR officer

Voorman

Voorman

non-food meewerkend

Voorman/inkoop

voorman vrieshuis

werkvoorbereider

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Present at audit



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Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref: clause 1.1.11) Opening Procedure Closing Site inspection Job title Name meeting review meeting Plantmanager Х Х Manager QA local Х Х Х Х Manager QA Х Х Х Central QA medewerker Х Controller Х Afdelingsmanager Х Х Manager TD Х Х Х Afdelingsmanager Х Х Х Afdelingsmanager Х Х Х Х

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| Productmanager | | Х |
|------------------------------|---|---|
| ProductTechnoloog | | х |
| Medewerker expeditie | х | |
| Meewerkend voorman Expeditie | Х | |
| Medewerker expeditie | X | |
| Voorman zouterij/rokerij | Х | |
| voorman zouterij | X | |
| Medewerker NF | х | |
| Voorman/inkoop non-food | х | |
| Afdelingsmanager | х | |
| Voorman | х | |
| Voorvrouw | х | |
| TD | х | |
| | | |

| GFSI Post Farm Gate Audit History | | | | |
|-----------------------------------|-----------------|-----------------------|-----------|--|
| Date | Scheme/Standard | Announced/Unannounced | Pass/Fail | |
| 2022-09-14 | BRC Food 9 | Unannounced | Pass | |
| 2023-12-06 | BRC Food 9 | Announced | Pass | |

| Document control | | | | | |
|----------------------|--|------|-------------|----------|------------|
| CB Report number | RQA9832747 / jobnr. 6831996 | | | | |
| Template name | F908 Food Safety Audit Report Template | | | | |
| Standard issue | 9 | | Template is | sue date | 2022-12-16 |
| Directory allocation | Food | Vers | sion | 1.1 | |

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Non-Conformity Summary Sheet

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

| Critical | | | |
|----------|---------|---------------|--|
| Clause | Detail | Re-audit date | |
| | | | |
| | <u></u> | | |

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

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| Minor | | | | | | |
|--------|---|--|--|---|---------------|-----------------|
| Clause | Detail | Correction | Proposed preventive action plan | Root cause analysis | Date reviewed | Reviewed by |
| 2.7.1 | Seen the HiRa 10067, v21.11.2024for f.e. the process steps. Missing is an evaluation of the process step freezing, where this is different from storage. | The flowchart for the freezing process was aligned with the process. This was at the moment of the audit not described in the HirA document of Vion Scherpenzeel. During the audit the Hira document is updated according to the Flowchart whom was already available. | Freezing involves specific risks, such as temperature drops, freezing rates, and product crystallization, which are not the same as general storage risks. Assumption that hazards associated with freezing are implicitly covered under storage without detailed description of the process. Insufficient guidance or checklist in the HIRA framework to ensure all unique process steps are considered during evaluations. Provided proof; Updated flow and HiRa. | Lack of clarity in distinguishing freezing as a separate step during hazard identification. | 2024-12-20 | Fully Closed |

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| | 3.7.2 | Seen at the TD, the check/calibration of sensors (16.02.2024), f.e "102". The result (-1,3°C) was out of the limit. (<0,5°C) No clear action was recorded, beside a re-check 4 month later; 04.06.2024. | 12-12-2024 meeting for the up-dated instructions with the Maintenance department Update of the Control work sheets. | SOP Updates: Revised the calibration Procedure to include a detailed escalation protocol for out-of-limit results. Required documentation of the issue and corrective actions within 24 hours of identification. Follow-up testing within a specified timeframe (10 workdays) to confirm effectiveness of corrective measures. Provided proof; Adapted SOP and picture settings. | 1: Lack of an established escalation protocol in the SOP for responding to out-of-limit calibration results. The absence of clear instructions led to delayed corrective actions.(12-12-2024 meeting for the up-dated instructions with the Maintenance department) 2: Insufficient awareness among personnel responsible for calibration on the urgency and process for handling non-conforming equipment. 3: Inadequate documentation and follow-up practices for calibration results, reducing traceability of corrective actions taken. | 2024-12-20 | Fully Closed | |
|--|-------|---|---|---|--|------------|-----------------|--|
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| 3.9.2 | Seen well-labelled items during the audit. Exception for 1 of the 3 pallets with cooked/cooled Spareribs Sweet (batch); label missing. It could be proven with the system that the label belongs to this pallet. So, no loss of traceability. | Immediate Actions/Correct the Issue: Labeled the affected pallet with the appropriate label corresponding to the batch of Spareribs Sweet - Updated SSOP records: Confirmed and documented the alignment of the physical label with the batch record in the traceability system. Documentation Update: Recorded the incident and corrective actions in SSOP list, including details of the affected batch, root cause, and actions taken. | Process Improvement: All pallets are double checked for physical labels before leaving the line and put in to storage. Also there are multiple labels(at least 2) present on the pallets with crates. Discrepancies are immediately flagged and resolved and noted on the SSOP. Process Review: Conducted a full review of the labeling and storage process, focusing on: Identification of weak points where labeling errors can occur. Provided proof; Pictures label, training staff. | 1: The labeling step at the end of the packaging line was maybe not effectively verified. 2: The pallets with crates and labels where placed in a cool cell with high air movement, this could result in blowing the label of the pallet. 3: Due to wrong placement of the label on the pallet with crates and placement in the cell. | 2024-12-20 | CLOSED |
|-------|--|--|---|--|------------|--------|
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| 4.4.8 | In general, well closed doors seen during the audit days. Exception for a hole under the role door at the Intake meat-department. | Repair the Hole: Seal the gap under the roll door using durable material appropriate for the facility's hygiene standards. | Maintenance Checklist Update: Regular evaluation of wear and tear on high-use facility components. Scheduled Inspections: Scheduled quarterly facility inspections with a focus on infrastructure and sealing. Assign a specific team or individual responsible for these inspections. Provided proof; Pictures repair, adapted Maintenance Checklist and scheduled quarterly facility inspections. | 1: Routine maintenance inspections did not identify the wear and tear affecting the roll door. 2: Audits and inspections lacked sufficient focus on minor facility defects such as small gaps, seals, or structural wear. 3: Absence of a specific checklist item addressing door and sealing integrity during facility maintenance and hygiene inspections. | 2024-12-20 | Fully Closed |
|-------|---|--|---|--|------------|-----------------|
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| | | | Extra Control: The weeks after the audit we have | | | |
|---------|---|---|---|---|------------|--------|
| 4.9.6.1 | Seen during day 1 at the "Zouterij" department, the use of an insufficient sharp knife. Cutting of nets with "Horse Shoes" causes unnecessary fibres, although the product was not contaminated during the audit. | Replace Knife: Replace the insufficiently sharp knife with one meeting the required sharpness standard or sharpen it immediately. Department-Wide Inspection: Conduct a thorough inspection of all knives in the "Zouterij" department to identify and address any other knives that do not meet the sharpness standard. | conducted hourly controls of all the knives used in the production facility. SSOP Update: Revised the Standard Operating Procedure (SOP) for knife maintenance to include: A defineded sharpening schedule (e.g., during the workday and depending on the activities and usage of the knives). Routine inspections to verify knife condition. Criteria for knife replacement. Verification of Actions: Announced Inspections: Performed announced inspections in the department(s) to verify that all knives meet sharpness standards and are wellmaintained. Provided proof; Knife Maintenance Log, Training of the employees for awareness and a log showing scheduled sharpening and inspections, with records beginning immediately after implementation. | 1: Inadequate monitoring of knife sharpness during daily operations. 2: Unclear SOP requirements regarding the frequency of knife maintenance and inspections. 3:Lack of awareness or training among staff on the importance of maintaining knife sharpness for efficiency and product quality. | 2024-12-20 | CLOSED |







| Comments on non-conformities | | |
|------------------------------|--|--|
| - | | |

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Additional Modules / Head Office Non-Conformity Summary Sheet

| Critical | | | |
|----------|--------|---------------|--|
| Clause | Detail | Re-audit date | |
| | | | |

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

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

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Audit team

| Lead auditor | | | | |
|----------------|---------------------------------------|--|--|--|
| Auditor number | Auditor number First name Second name | | | |
| | | | | |

| Audit team | | | | Attendance | | | Presence | |
|------------|-------------|-------------------|--------------|-------------|--------------|----------|--------------------|---------------------------------|
| | | | | (YYYY/MM/DD |), 24hr: MM) | | | |
| First name | Second name | Auditor number | Role | Audit Date | Start time | End time | Remote or physical | Professional recognition number |
| | | | Lead Auditor | 2024-11-26 | 10.00 | 18.00 | Physical | |
| | | | Lead Auditor | 2024-11-27 | 08.30 | 16.30 | Physical | |
| | | | Lead Auditor | 2024-11-28 | 08.30 | 16.30 | Physical | |

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Detailed Audit Report

1. Senior management commitment

Policy

The site policy is documented in: 10158, v30.01.2024.

It is signed by the person with overall responsibility for the site; the Plant Manager.

Commitment to continuously improve the site's food safety and quality culture is included.

Communication to staff: Displayed in key areas on notice boards and part of induction program new employees.

Product safety and quality culture plan

The level of culture at the site is identified by: introducing and implementing a plan for the development and continuing improvement of a food safety & quality culture. Culture aspects are clearly communicated through various channels (policy, induction program, annual newsletter).

The culture improvement plan is documented in: SPZ10153, updated June 2024.

Activities undertaken, involving all sections of the site: personnel survey, workshops, year-end meetings with personnel, food safety training, whistleblowing policy, sign up to business code of conduct. Success of the plan is measured through: monitoring of actions taken during management meetings. Tier 1 boards show current performance against the objectives for the benefit of the staff.

Plan is ongoing. During this audit, the implementation of this plan was also verified on the factory floor and all other departments that were audited.

Date of last review of plan: 01/06/2024

Frequency of reviews: 2xY

Senior management were able to discuss the plan during this audit (spoken to Operational Manager).

Food safety and legality objectives

Notable food safety and quality objectives include:

- CCPs more digital recorded in 2024.
- · Yearly training
- BRC "A"

Objectives are monitored 4xY by MT

Key results or significant trends: the site is meeting established objectives / effectively progressing through its objectives.

Management review

Frequency of management review meetings: 4xY. All required items are discussed.

Who typically attends the meeting: whole MT.

Date of last management review meeting: 18/07/2024

How minutes and actions are communicated to staff and recorded: Senior management is present during most meetings. Meetings are sufficiently provided with action lists with timescales, responsibilities and recording of status.

Regular meetings

Routine meetings are held in which food safety, authenticity, legality, and quality issues are discussed. The structure is documented.

How minutes and actions are communicated to staff and recorded: emerging actions are discussed in the Tier meetings (1-5) with Tier 1 held with operatives daily and Tier 2 with line management weekly. Minute meetings reviewed: **18/07/2024**, **21/11/2024**

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Previous nonconformities

All previous non-conformities have been closed out suitably.

Thorough root causes are identified through application of a 5-Why. Preventive actions are effectively implemented to prevent re-occurrence. A CAPA excel list is maintained.

Organisational structure, responsibilities, and management authority

The site organization structure is documented in: Organogram, June 2024.

Management structure:

The senior management has appointed qualified employees for key functions. Responsibilities and competences are detailed in job descriptions. Employees in key functions and the members of the Incident Management Team are announced in the production site. Also, Members of the Food Safety Team are announced. Substitutes have been clearly appointed in case of absence of the responsible person. Current structure and reporting are up to date.

External expertise is used (consultant). This consultant supports the internal audit programme. Overall responsibility for the day-to-day management of the food safety system is with the Department Managers and Foremen.

Reporting food safety issues

How food safety risks, concerns or non-conforming issues are reported by staff and resolved: Feedback from personnel on factory floor demonstrates that staff is aware when, how, and to who report food safety issues to. The company keeps up to date with emerging issues, legislation, and good practice through branch organization and the Central Organisation.

A whistle blowing system is in place, where a box is placed within the rest room and employees are free to leave anonymous concerns. The Operations Manager is responsible for monitoring and cascading this to the relevant stakeholders across the site; seen memo 24.10.2024.

The following supporting evidence was reviewed:

Logo use; not applied.

Profile production employee.

| Details of non-applicable clauses with justification | | |
|--|---------------|--|
| Clause/Section Ref | Justification | |
| 1.1.13 | No logo use. | |

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2. The Food Safety Plan - HACCP

There is one HACCP manual described as the: PVion10000, v29.01.2024.

HACCP Team

The food safety team is detailed in: PVion10000, v29.01.2024.

The team leader is well qualified and experienced. The team is multidisciplinary, experienced, and knowledgeable in their fields with required level of food safety training. The HACCP Team is led by the QA Manager who has more than 5 years' experience in the food industry and trained in Level 3 HACCP. The other members all had appropriate training and experience. Training records were sampled.

Scope of HACCP

The HACCP system scope is documented in: **PVion10000**, **v29.01.2024**. It covers relevant processes and all products on site.

Vulnerable groups have been identified. Product is suitable for regular consumer groups.

Product descriptions are detailed in: **PVion10000**, **v29.01.2024**. Relevant information is described and information on food safety is included.

The scope accurately reflects all products on site.

Process flow diagram

Record key process steps/operations to manufacture products within the scope of certification: Intake, storage, slicing, brining and curing, smoking, cooking, marinating and seasoning, freezing and dispatch.

Record date and reason of last verification: 18/07/2024

Flow-diagrams are maintained and signed as verified by members of the HACCP team; all were reviewed during the HACCP review.

Hazard analysis

HARA is based on comprehensive information sources.

Severity vs likelihood is considered.

Outline hazards considered specific to each process step:

Microbial/Chemical/Physical/Allergen hazards.

CCPs, limits and controls

Provide CCPs / PRPs details:

| # | CCP | Control measure | Critical limit | Monitoring |
|----|---|---|---|--------------|
| | | | | frequency |
| 1A | 1A: Core temperature at | Measuring | meat ≤ 7°C (legal lineit) | Each intake. |
| 1B | reception of meat 1B: Core temperature at reception of meat for raw materials transferred within Vion plants | temperature with calibrated thermometer | limit) • meat for raw materials transferred within Vion plants, ≤ 6°C | |
| 1C | 1C: Core temperature at reception of meatpreparations | | meatpreparations ≤ 4°C (legal req.) ms meat ≤ 2°C | |
| 1D | 1D: Core temperature at reception of ms meat | | (legal req) | |

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| 2A | • | 2A: Temperature loading of fresh | Measuring temperature with | • | Fresh meat: ≤ 7°C | • | Each loading |
|------|---|--|----------------------------|---|--|---|---------------------|
| 2B/C | • | meat: ≤ 7°C 2B/C: Temperature of vacuum packed | calibrated thermometer | • | Vacuum packed meat and meat | • | Each packing run |
| | | meat and meat products/preparation s (incl. returns) ≤ 6°C | | | products/preparati ons (incl. returns) ≤ 6°C | | packing run |
| | | · , | | | | | |

PRPs have been identified in: **P-SPZ-NL-10067revisie: 35datum: 29-04-2024**. Control measures have been defined. This includes:

- CP 01 M Bezoedeling vlees door medewerkers en bezoekers
- CP 02 M Kruisbesmetting van vlees en bloed met pathogenen via mes en machines
- CP 03 M Gevallen producten, bezoedeling vlees
- CP 04 M Vlees in contact met retouren en vuile emballage
- CP 05 M Bezoedeling op vlees abces
- CP 06 M/C Bezoedeling product via verpakkingsmateriaal
- CP 07 M Lekke (vacuüm)zakken
- CP 08 M Besmetting van vlees met condens
- CP 09 M/C Aanwezigheid harde en zachte vleesvreemde bestanddelen
- CP 10 F Bezoedeling door olie/ smeermiddelen
- CP 11 C Verontreiniging vlees / hulpstof / verpakkingsmateriaal met koelmedium
- CP 12 F Vleesvreemde middelen inpakken bijv. hout, peukjes, zacht plastic e.d.
- CP 13 M Kruisbesmetting van vlees / hulpstof / verpakkingsmateriaal door onvoldoende R&D
- CP 14 C Residu reiningings- en/of ontsmettingsmiddel in product.
- CP 15 F Bezoedeling van vlees / hulpstof / verpakkingsmateriaal door contact met (uitwerpselen van) ongedierte
- CP 16 C Versleping van gif
- CP 17 M/C Besmetting viees / hulpstof / verpakkingsmateriaal door onvoldoende schoon
- CP 18 M Doorgroei door gebruik van niet verse producten (waaronder retouren)
- CP 19 M Kwaliteit aangevoerde grondstoffen (vlees)
- CP 20 M/C/F Kwaliteit aangevoerde hulpstoffen (incl. gas)
- CP 21 M Doorgroei pathogenen door te te hoge producttemperatuur in combinatie met te lange verblijfstijd
- CP 22 M temperatuur / tijd verhittingscyclus niet voltooid/behaald
- CP 23 CP 24 M Te hoge temperatuur ontvangen vlees diepbevroren (incl. retouren)
- M Te hoge temperatuur verladen vers vlees, vleesbereiding en gehakt vlees,
- vleesproduct, separatorvlees diepgevroren (<-18)
- CP 25 M Te hoge temperatuur ontvangen vers vlees getempereerd
- CP 26 M Juiste THT op etiket
- CP 27 C Aanwezigheid van allergene stoffen
- CP 28 M Doorgroei in eindproduct door onjuiste dosering nitriet
- CP 29 M Onvoldoende pekel geinjecteerd
- CP 30 C Doseren pekel met hoog nitriet/nitraat gehalte
- CP 31 M Doorgroei als gevolg van onjuiste pekelsterkte
- CP 32 M Vermeerdering van kiemen in condens in de drukleiding
- CP 33 C Olieresten in druklucht
- CP 34 M Kruiscontaminatie tijdens slicen van producten uit verschillende groepen
- (zoals gekookt, gezouten, gefermenteerd, rauw)
- CP 35 C Ontstaan van polycyclische aromatische koolwaterstoffen (PAK's) bij roken, braden en branden

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CP 36 Verwisseling van de Nitriet / Nitraat-vrij met nitriet / nitraat houdend

CP 37 Controle op lekke zakken door versmering marinade / slechte seal

CP 38 Temperatuur en tijd moet behaald worden(product afhankelijk ; +/-3uur bij ≥72°C

Examples of corrective actions:

Actions when monitoring level exceed acceptable limits are documented within the HACCP plan, recorded and investigated. Based on live demonstrations and records checked during this audit all CPs/CCPs are in control conform the work instructions.

Seen the HiRa 10067, v21.11.2024for f.e. the process steps. Missing is an evaluation of the process step freezing, where this is different from storage. **Minor 2.7.1.**

Validation, verification and review:

The company has effectively validated and verified the HACCP/Food Safety Plan, including the critical limits, control measures and PRPs specific for controlling food safety hazards. Procedures of verification have been established.

Procedures include: performing internal audits, review of records where acceptable limits have been exceeded, review of complaints (by enforcement authorities or customers), review of incidents (of product withdrawal or recall).

Documentation and record keeping is verified.

Results of verification/validation are recorded and communicated to the HACCP food safety team. Validation was sampled for the two CCPs.

Frequency of planned HACCP system review (at least annually): 1xY

Date of last review: **18/07/2024** Completed by: HACCP- team

Reason for completion: update and yearly verification

The following supporting evidence was reviewed:

Lay- out verified version; 18.07.2024

PRP inventory; SPZ-NL-10067, v29-04-2024

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

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3. Food safety and quality management system

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

Food safety and quality manual

The Food Safety & Quality Manual with department specific work instructions are available on the network () and at point of use as demonstrated throughout the audit. All procedures and work instructions are in Dutch only; all staff are expected to have appropriate levels of Dutch Language skills. Interpreters are available should they be required. Documentation seen is up to date. Only QA can make the changes into the system. Changes are indicated in the procedures in a yellow color.

All documents seen during the audit were complying.

Record completion and maintenance

Records are in good condition and retrievable electronically or on site. Records are archived for 5 years according to procedure. Maximum product shelf-life applied is 2 years. All electronic data are secured by daily back-ups, arranged by HQ

The following supporting evidence was reviewed:

Right version of CCP intake temperature.

3.4 Internal audits

The following document(s) define the process: PV10011, v19.11.2024.

The audits generally follow BRCGS guidelines and clause structures.

Internal audits are conducted: 6XY. The programme includes at least four different audit dates spread throughout the year and is risk-based, considering any previous audit findings.

Internal audits are performed by: the consultant together with QA (to maintain independency).

Auditor competency has been demonstrated through: training records, sufficient knowledge of the products and processes and experience.

Internal audits are reported in: normal reports.

Objective evidence of compliance and non-compliance are reported. The audit criteria are clearly referenced. Findings are included in a central log, monitored for follow-up, and evaluated in management meetings. Follow-up actions include immediate correction, root cause analyses and corrective action. Responsibilities and timescales for verification/closure of findings have been defined.

Internal audit reports reviewed during this audit: 26/02/2024, 15/03/2024 01/05/2024

The reports reviewed detail conformity as well as non-conformity. A few minor nonconformities have been raised with no trends identified. Root cause by 5-Why is included where required. All actions were closed within the due date. Audits contained a good amount of detail.

A separate program of internal inspections of factory environment and processing equipment is undertaken 12xY

This is reported in: f.e. SSOPs and related monthly verification.

Inspections are performed by using a checklist which includes a clear action list. Performance is measured based on a scoring system and link to a KPI. Actions in response to deviations are recorded, cascaded to team leaders for follow-up, and discussed in HACCP meetings. Completion of actions is verified upon the next inspection by QA. Effectiveness of the system is discussed in the Management Review.

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Inspection report reviewed during this audit: **14/08/2024**. A few minor issues had been observed. Follow-up of actions is demonstrable with records.

The following evidence was reviewed:

No other.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

The company's raw material risk assessment, including primary packaging is documented in: **PF10032**, **v19.04.2024**.

All potential risks have been appropriately considered.

Significant risks include: NA.

The risk assessment forms the basis for the raw materials acceptance and testing procedure and for the processes adopted for supplier approval and monitoring.

The supplier approval procedure is documented in: PF10032, v19.04.2024. Procedure is found to be suitable and effective.

List examples of suppliers reviewed during this audit:

| | 5 | | |
|------------------------|----------------|------------------------|------------------|
| Name/Initials supplier | Supplier of: | Method of assessment | Evidence seen |
| | Ingredients | Valid GFSI certificate | IFS- certificate |
| | Salt | Valid GFSI certificate | IFS- certificate |
| | Ingredients | Valid GFSI certificate | IFS- certificate |
| | Packaging foil | Valid GFSI certificate | BRC- certificate |
| Vion Boxtel | Meat | Valid GFSI certificate | IFS- certificate |

All suppliers are evaluated: 1xY.

Suppliers are rated on quality, service, delivery, and complaints. All suppliers graded satisfactory in the past year.

Suppliers, that are not audited or certificated, have been traceability tested on first approval and then at least every three years: NA

This was seen for: NA

For raw materials purchased from an agent, broker or wholesaler, is the identity of the last manufacturer, packer or consolidator of the material known: **Y.**

Traceability system is verified through: GFSI certification of the manufacturer.

Handling exceptions and absence of information is considered in the supplier approval procedure. Exceptions can be made on supplier status and when information is not available straight away. But this should be fixed within 3 days otherwise the supplier is taken of the approved supplier list and blacklisted.

The following supporting evidence was reviewed: See above.

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3.5.2 Raw material and packaging acceptance, monitoring and management procedures

Procedures for the acceptance of raw materials and primary packaging on receipt is in place and based on risk assessment (see 3.5.1).

Deliveries are visually checked for product integrity, labelling and cleanliness. Based on risk assessment, food safety hazards are controlled through COAs, internal analysis etc. Samples have been taken (see below).

The requirements to be met for acceptance is identified for all raw materials (including primary packaging). Parameters for acceptance and frequency of testing has been clearly defined, implemented, and reviewed.

The following evidence was reviewed:

Intake Koppen LC BXT, order , checks temperature within limits (CCP) and check loading department.

Unloading carton boxes incl. check loading department. Checks intake order Dextrose

3.5.3 Management of suppliers of services

The following services are used:

Pest control; , seen contract

Maintenance; f.e. (belts), (calibration) and (cooling equipment)

Laundry services; (audit)

• Contracted cleaning; (cleaning schedules)

Transport; (audit 07.11.2024, including temperature monitoring)

Off-site storage; NA

Waste;

Laboratory; (ISO17025 under no)

Approval and monitoring for ongoing performance are described in the company's supplier approval procedure (referenced under 3.5.1). Service suppliers (based on risk assessment) are evaluated annually.

Contracts are in place that clearly define service expectations. Food safety aspects are appropriately addressed.

Examples assessed during this audit:

•

Many suppliers of services are long standing with a good history of supply and contained on the approved supplier list from initial approvals.

Monthly management reviews include performance of suppliers of services.

The following evidence was reviewed:

See above.

3.5.4 Management of Outsourced processing

Outsourced process steps to a third-party or undertaken at another site is: not applicable.

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Suitable specifications are maintained for all raw materials (including primary packaging) and finished products and were reviewed from the auditor traceability exercise.

Specifications are held electronically () and access is restricted to the compliance team.

Specifications include limits for relevant attributes (relevant chemical, microbiological, physical and allergens). Key data is included to meet customer and legal requirements and to assist the user in the safe usage of the product.

CoA.

During the audit, several specifications were reviewed:

Name/Initials supplier Supplier of:

Ingredients

Salt

Ingredients

Packaging foil (incl. DOC/Migration tests)

Vion Boxtel

Lubricant Conveyor belt

All were seen to be clear and accurate.

Formal agreement of customer branded products is verified through the system of the retailers (for instance SIM, Trace one, or GS1). Verified customer approval during the vertical traceability exercise.

Frequency of review of specifications: at least every 3 years or if changes occur.

The following evidence was reviewed: See above.

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3.7 Corrective and preventive actions

Procedures are in place for handling and correcting issues identified in the food safety and quality management system. This is documented in: **PV101201.**

Identified issues are logged in: the site central CAPA list, which is an Excel overview.

During this audit, several samples were taken to verify effectiveness of corrective and preventive actions. Thorough root cause analysis is performed by the HACCP team. Usually a 5-Why method is applied to expose the underlying issue and to determine appropriate preventive actions.

This approach is applied for: internal audits findings, nonconformities raised by external audit bodies, complaints and found to be suitable and effective. It meets the expectations of the BRCGS standard (i.e., section 3.7)

Timescales for completion are agreed upon and recorded. No issues noted regarding exceedance of due dates.

Actions and status of CAPA list are discussed during: HACCP meetings.

Seen at the TD, the check/calibration of sensors (16.02.2024), f.e "102". The result (-1,3°C) was out of the limit. (<0,5°C) No clear action was recorded, beside a re-check 4 month later; 04.06.2024. **Minor NC 3.7.2.**

The following evidence was reviewed:

3.8 Control of non-conforming product

Control of non-conforming product is detailed in: **SPZ10010.**

There are categories for customer complaints, internal NCs and incidents, non-conforming materials and suppliers used.

Raw materials and (semi)finished products are checked regularly during the process stages.

Corrective and preventive actions are described in several work instructions (see previous section). Clear process which is well understood by staff that was interviewed during the audit.

Non-conforming products are physically labelled and put on hold in the ERP system. There is a segregated section in the warehouse for non-conforming products and returned goods.

Responsibilities regarding release of products on hold lies with QA and follows a clear decision-making process.

Records are kept of decisions made and where product is destroyed for food safety reasons.

Example seen of non-conforming product incident: None.

The following evidence was reviewed:

-

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3.9 Traceability

The traceability process is documented in: 10009, v21.08.2024.

Traceability through the process:

Traceability system operates through computer system + and paperwork enables trace of raw materials and packaging from supplier through processes to packing and dispatch.

Traceability marking on products:

LOT codes are printed on all raw materials, intermediate/semi-processed products, part-used materials, finished products and materials pending investigation which enables retrieval of all required data.

Seen well-labelled items during the audit. Exception for 1 of the 3 pallets with cooked/cooled Spareribs Sweet (batch); label missing. It could be proven with the system that the label 2671509 belongs to this pallet. So, no loss of traceability. **Minor NC 3.9.2.**

Traceability test details company:

Frequency: 1xY

Last test conducted: 01/03/2024

Product Middles 81:

Lot code:

Results are retained as documented information and reports include all relevant information and data (including mass balance information). Traceability is achieved within 4 hours.

Vertical audit details:

Finished product: Spareribs Sweet.

Raw materials: meat and the ingredients from

Printed packaging and labels: **foil** Production/packing date: **09/08/2024**

Quantities reconciled: input kg meat, output after cooking kg, dispatch kg.

Key documentation reviewed including process control and quality control documentation: Mass- balance, intake evaluations, specifications, process- checks etc.; according to our vertical traceability form.

Summary traceability and vertical audit:

Fast tracing (forwards/backwards) including packaging was possible in the records/system. Rework is not used. No product in stock, all sold. Seen product specifications of all raw materials and finished product, receipt records, food compliance certificate is verified. Fully traceable one-step-up and one-step-down the system, including packaging. Verified records of CCPs, CPs and PRP's, delivery control checks, production checks, calibration and analyses were verified too. Time to perform the test was respected (<4h). There were no issues found during the product traceability and all documents showed control over the system for food safety by the organisation. Food contact materials legalization is fully implemented. The company's traceability system is found to be effective.

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3.10 Complaint-handling

Complaint-handling is documented in: 10008, v27.09.2024.

Follow-up of complaints is managed through: SalesForce / Excel list. Complaints are handled centrally using the SalesForce system and investigations are completed by the site and returned to the central function for responses. Corrective actions are carried out promptly and effectively. All complaints were deemed as not justified following investigations.

Product complaints:

2023: **3,3/week** complaints 2024 YTD: **2,6/week** complaints

This is 0,002 complaint per Ton product.

Top 3 complaint reasons:

- 1. Drip
- 2. Delivery performance
- 3. Product defects

A trend analysis is maintained and documented and discussed in management meetings (including the management review).

There has been no significant increase in a complaint.

The following complaint samples were taken:

Complaint 24006 about a bolt in a vacuum, metal detected product; seen root cause and additional training.

3.11 Management of incidents, product withdrawal and product recall

The company has procedures in place to report and effectively manage incidents and potential emergency situations that impact food safety, authenticity, legality, or quality.

Contingency plans have been considered, including the need to withdraw or recall products.

There is a documented product withdrawal and product recall procedure: 10009, v21.08.2024.

The recall procedure identifies those who are to be notified (including CB, LRQA) in the event of an incident where product safety or legality is in question. There is a recall plan which is supported by a recall checklist. Mobile phone numbers for the senior management team are available for out of hour's emergencies. Recalls are categorised as critical (food safety, allergens, FBs, health, pest, and legislation) and non-critical (quality, coding and packaging).

LRQA is referenced as contact, indicating that incidents/withdrawal/recalls shall be reported via the website within 3 days of the event.

No withdrawals/recalls occurred since the previous visit.

Date of last incident management procedures test: 01/03/2024

Type of test completed: recall/withdrawal/incident.

Mass balance information is included in the report. Traceability is achieved within 4 hours. Successful test conducted. No improvements have been required as result of the outcome.

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The following evidence was seen:

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

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4. Site standards

4.1 External standards

Plant located in an industrial area in Scherpenzeel.

Site boundaries are clearly identified. Premises is fenced off with security gate access to the facility.

Types of buildings include: production facility, storage building, offices, maintenance workshop and a storage area across the road.

Site security:

Unauthorised access is prevented by use of ID badges and/or fingerprint access. Visitors/contractors must register at the security building and request for a badge. Several CCTV cameras are installed.

Supervision by maintenance staff. Truck drivers need to ring the bell before they can enter and will be supervised by warehouse staff. The company is always guiding the visitors while visiting the production areas.

External tanks are in place, but only for water buffering cleaning.

Good condition of constructions noted. No risks have been identified related to the external environment. Site area is properly maintained.

The following evidence was reviewed:

Lay out v27.04.2024.

Plant tour outside.

4.2 Site security and food defence

The individuals or team completing threat assessments and food defence plans have the appropriate knowledge. The Team is also the site HACCP team. Awareness training was seen for team members.

There is no legal requirement for specific training.

Food defence risk assessment is documented and based on TACCP: **10051**, **v22.11.2023**. The TACCP was part of the verification 18.07.2024.

Risk score calculation based on impact and likelihood of occurrence. The threat assessment includes both internal and external threats. The site has established a documented food defence plan covering assess points and controls.

Examples of threats that have been determined access to the building:

Appropriate control measures are developed and implemented: **fenced**, **security office and tags for doors**.

Access is via key coded doors and combination locks. There is an electric gate that can be used outside of normal operating hours. Security training is included for all staff as part of the HACCP induction to site.

Raw material storage areas are controlled and internal. No external intake points.

The following evidence was reviewed:

Plant tour in/outside.

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4.3 Layout, product flow and segregation

A lay out map with flow of processes and movement of personnel is present, including zoning. This is documented in Lay out v27.04.2024.:

Production risk zones (based on BRCGS Annex 2):

- Open product areas: All products (incl. sous-vide cooked pork meat) have to undergo full cooking step prior to consumption. Also smoking process step is not considered as a sufficient heating step justification for area. Therefore all areas Low Risk, incl. Expedition due to routing reasons.
- Enclosed product areas: warehouses and storerooms; f.e. the storage area across the road
- Non-product areas: canteens, laundries, offices

Contractors and visitors, including drivers are informed of the requirements for the areas they are visiting through hygiene rules, placed on walls and to be signed in contract or during visit (visitors and contractors).

Premises allows sufficient working space and capacity to work in a proper way. There were no temporary constructions noticed during this audit. Also, there was no modernisation work in progress during this audit. There is a site plan for the plant. The routing for the removal of waste products is also demonstrably stated.

The following evidence was reviewed:

Plant tour.

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

The site, building and other facilities are suitable for the operation. The walls (sandwich panels) are appropriately maintained to prevent accumulation of dust, dirt and mold growth. They also facilitate easy cleaning. The floors (concrete) are impervious and are suitable for the intended use and withstand daily activities of cleaning and demands of the process. Drainage is designed to minimize contamination. It is appropriately covered and maintained well. The slope of the floor in the processing area is adequate to avoid stagnation of the water.

The ceilings (concrete) are kept clean and there is no accumulation of dirt, no evidence of mold growth and condensation. Suspended ceilings are used in the production areas but adequate access to the void is provided. Windows can't be opened or are adequately screened.

In general, well closed doors seen during the audit days. Exception for a hole under the role door at the Intake meat-department. **Minor NC 4.4.8.**

No elevated walkways, access steps or mezzanine floors that are adjacent or above open product. Ventilation controls in place to ensure good air flow.

Protected glass, no windows could be opened in the processing areas.

Doors in good condition, external doors (in general) are well fitted and kept closed when not in use.

There is a dedicated washing area present for crates/Dolavs. The washing of equipment is done separated from production. Plastic strip curtains present; all clean and maintained.

The following evidence was reviewed:

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4.5 Utilities - water, ice, air and other gases

Water is used as: Cleaning purposes only.

Source(s) of water supply:

- Municipal/city (cleaning, handwashing)
- Borehole
- Storage tanks (claening water)

Only potable water is used.

Microbiological or chemical testing is undertaken: 1xY

Water testing is completed to ensure the requirements of The Private Water Supply Regulations 2016 are met. Analysis reports for chemistry are completed internally via compliance checks and microbiology via an accredited external laboratory.

A water system distribution schematic diagram is available, including boreholes, soft water, CIP, reverse osmosis and holding tanks.

Sampling points include: all relevant water used points.

Gas used in packaging: **No** Compressed air used: **Yes**

Purpose of compressed air use: equipment

In direct product contact: N

Filtered at point of use (when in direct contact): NA

Checks are done on filter replacement as part of the preventive maintenance program.

No air, steam or other gases are in contact with products.

The following evidence was reviewed:

Water analyses municipal and borehole with good results; 29.09.2024. results 2024-September.

4.6 Equipment

Key production and product-handling equipment include: injector/tumbling, slice line, cooking, X-Ray, metal detectors.

Equipment is suitable and designed for the intended purpose; mostly stainless-steel construction.

Line equipment is sourced through: procurement, specified, tested, and commissioned before use.

Equipment which is in direct contact with food is suitable for food contact and meets legal requirements where applicable.

Purchase specifications are in place to ensure new equipment meet legislative requirements and is suitable for food contact where appropriate.

Equipment is made of: stainless steel. Conveyor belts are food grade. Hose used for product transfer is registered as FDA compliant for food contact.

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There is a procedure for moving static equipment detailing preventing potential risks to food safety and equipment integrity. Equipment that is not in use is always taken into the cleaning schedule.

Mobile equipment and battery-charging equipment is in use, potential risk to the product is prevented by means of separate storage and up to date maintenance.

The following evidence was reviewed:

Belts:

Red hose marinade;

4.7 Maintenance

Preventative maintenance

Maintenance management system: based maintenance system used for PPM work. Frequency of main checks: weekly, monthly, quarterly, and bi-annual PMs are completed. Notable equipment include: injector/tumbling, slice line, cooking, X-Ray, metal detectors.

Preventative maintenance covers all plant, processing equipment and mobile equipment. Contractor services are used for: X-ray and metal detectors.

Plans are downloaded along with relevant job sheets. Once completed they are put into the system.

Samples seen and completed to schedule:

- PM job 00783
- CM; order RK01-937

Inspection of equipment condition

Inspections for damage and wear are completed for: conveyor belt condition. Sampled for: PM job 00783.

Temporary maintenance

Temporary repairs are controlled via: jobs in with priority.

Handover

Suitable handover processes were in place after maintenance work to eliminate foreign matter risks generated; directly in the production deprtment.

Lubricants

Range of food grade lubricants used: SKF LG FG2/0.4. MSDS with compliance to NSF H1 and Allergen Declaration seen.

Overall cleanliness engineering workshop

The workshop was well maintained with a swarf mat present on exit of the workshop. There is also a dedicated rest room, changing room and wand wash present.

The following supporting evidence was seen:

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4.8 Staff facilities

Changing facilities

Designated changing facilities for staff in place that are appropriately sited. Sloped lockers observed for storage of outdoor clothing, and a separate area for protective clothing.

Workwear is laundered via

Handwashing

Hands-free operable handwash facilities located in lobby area at entrance to production, equipped with an adequate supply of water delivered at a suitable temperature, soap and drying facilities. Advisory signs for prompt handwashing are displayed above the sinks.

Toilets

Toilets provided do not open directly into production or packing areas. Adequate hand-washing facilities are provided within toilets conform 4.8.5.

Catering facilities

One rest room areas for food storage and eating; well-controlled catering facility in place. (not outsourced) There are vendors for food and drink (no nut products allowed or seen), a kettle, a microwave, and a toaster. There is a sink available for use also. Staff fridges were seen to be clean and maintained.

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

4.9.1 Chemical control

An approved list of chemicals is available and documented in: chemical list.

Chemical containers including cleaning chemicals are clearly labelled and separately stored in secured compounds.

Safety Data Sheets / specifications are available, and samples have been taken:

All chemicals as sampled are suitable for the intended application.

Waste handling and spillage control is effectively managed.

4.9.2 Metal control

The following type of sharp metal equipment is used: knives (

). No snap-off blades used.

An example was seen on the factory inspection and observed to be in a satisfactory condition. (but see NC 4.9.6.

Condition and integrity are monitored: by QA/QC on monthly hygiene audits, also based on daily SSOPs; see section 3.4.4 for details.

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Staples, paper clips and drawing pins are not used in open production areas. Observed bags and boxes were tired.

4.9.3 Glass, brittle plastic, ceramics and similar materials

Monitoring of glass/brittle, plastic and ceramic items is done through: monthly hygiene audits. Records were seen for: item inventory.

Besides monthly audits, inventory is checked: once per annum.

Last round performed and recorded on record: 14.08.2024.

No glass incidents to date took place since the last audit. Staff is well trained in process and mock incidents which were part of the training (training is repeated at least once per two years)

Windows are protected against breakage with foil. (where applicable)

4.9.4 Products packed into glass or other brittle containers

Products are not packed into glass/brittle containers.

4.9.5 Wood

Wood is not allowed (and not present) in and near open product areas.

Wooden pallets used in storage areas were observed to be in good condition.

4.9.6 Other physical contaminants

Describe any other specific controls on physical contamination such as packaging:

Deboxing and debagging procedures include controls for physical contamination.

Seen during day 1 at the "Zouterij" department, the use of an insufficient sharp knife. Cutting of nets with "Horse Shoes" causes unnecessary fibres, although the product was not contaminated during the audit. **Minor NC 4.9.6.1.**

Management of portable handheld equipment:

X-ray/Metal detection is used. Single piece biros are used with no small parts evident.

Other types of control for contamination not covered in section 4.9 are not required.

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4.10 Foreign-body detection and removal equipment

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

Detection equipment (metal detection) is installed as result of the risk analysis and is controlled as CP.

The sensitivity of control measures is appropriate as determined through validation study.

No other types of foreign body contamination removal are used.

Escalation procedure in place in case of breakdown incidents. Detected foreign materials are evaluated and analysed by QA.

No foreign bodies detected recently.

The following evidence was reviewed:

4.10.2 Filters and sieves

No sieves used.

Filters

Filters used to control the hygiene of the brine to prevent any obstruction of the injection needles (with the risk of insufficient injection at certain areas of the meat pieces). Cleaning and inspection as part of the cleaning program executed by external agency. Assembling of the micro-sieve of the injection equipment by the team leader after hygiene inspection as recorded on the pre-SSOP-list as reviewed during the audit. Well water filter installed is inspected every week as part of the maintenance program

Filters are checked as part of PM checks when completed.

The following evidence was reviewed:

-

4.10.3 Metal detectors and X-ray equipment

X-ray/Metal detection is used.

X-ray/Metal detection equipment installed as result of the risk analysis and are controlled as CP.

Monitoring frequency: beginning/end of the day, every 2 hours and between breaks.

X-ray/Metal detection verification is performed through test sticks. The testing procedure is found to be suitable. No history of failed (metal) tests.

Corrective actions are clearly defined in the CP control plan. Data is maintained in documentation. The sensibility of the detector is justified. A belt stop and alarming system is in place.

X-ray/Metal detection was tested during this audit. Correct operation was observed in line with the work instruction.

In case of detection of foreign body contamination, the material is analysed by QA/QC Date of last record of detection: NA this year.

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The following evidence was reviewed:

- Vacuum-packing of BSD Rack 190-8 at Line 2, including the test of the metal detector (CP) with test bars and explained recording and CA if needed.
- Slice department; vacuum packing, seal check, of , art. , X-ray testing (CP, tested with 0,4x2mm SLS 316 wire/ tested with 0,8mm SLS 316 ball/2mm glass/2mm ceramic)

4.10.4 Magnets

Magnets are not used.

4.10.5 Optical sorting equipment

Optical sorting equipment is not used.

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

No containers are in use. No products packed into glass/brittle containers.

4.10.7 Other foreign-body detection and removal equipment

Other types of control for foreign-body detection equipment not covered in section 4.10 are not required.

4.11 Housekeeping and hygiene

Cleaning is performed by:

Documented cleaning and disinfection procedures are in place and maintained for the building, plant and all equipment. Examples cleaning procedures seen included: **cleaning schedules**, **agreed with Vion.**

Cleaning methods described are found to be suitable.

Cleaning records were reviewed in both the traceability exercise and on the factory inspection with no issues noted. Cleaning records detail the cleaning requirements stipulated in clause 4.11.2.

Examples records seen: 26-28.11.2024 and 29.07-09.08.2024

Cleaning is monitored through: visual, residues, swabs.

Limits of acceptable and unacceptable cleaning performance is defined for food contact surfaces and processing equipment.

Areas visited on the factory inspection were observed to be clean and tidy. Specific cleaning operations seen during the audit: cleaning and disinfecting of cutting boards, which was carried out conform work instruction and cleaning agent manufacturers instruction.

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4.11.7 Cleaning in place (CIP)

CIP is not applicable.

4.11.8 Environmental monitoring

The environmental monitoring programme is detailed in: analyse-schedule.

The programme is risk-based and includes frequency of testing, organisms to be included, typical sampling areas and procedures for out of specification results.

The programme monitors for: spoilage bacteria, Listeria, coliforms, yeast and moulds.

Comment on the results of environmental monitoring programme:

Results seen were within specification.

A clear review and trend analysis is in place. Key data and performance are provided as input to the management review (no issues).

The programme is found to be suitable and effective.

The level of environmental monitoring performed is commensurate with the final product risk.

The following evidence was reviewed:

- Agar 12xY; week 30
- Listeria 05/19.08.2024
- TPC/Y&M; week 30

4.12 Waste and waste disposal

Waste is categorized in: paper, plastic, overall.

All waste containers were identified with contents.

Good control was seen over the collection and disposal of waste. Dispatch of category 2/VO853 and category 3/VO853 materials to authorized processing companies (). Other by-product (like bones) supplied to authorized processing companies for human consumption (). Other waste stored on-site and collected separately by

The factory was seen to be clean and tidy with waste well controlled and no evidence of spillages were observed. There are limited open product areas.

Waste removal is contracted to:

Trademarked waste materials are: not present

Licensed waste removal was sampled for:

Records of destruction are being retained.

The following evidence was reviewed:

Plant tour in/outside.

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4.13 Management of surplus food and products for animal feed

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

The following evidence was reviewed:

-

4.14 Pest management

Pest control is contracted to

The scope is detailed as: rats, mice, cockroaches, silverfish, house crickets, garden ants, ground beetles, earwigs, woodlice, centipedes, and millipedes.

No internal pest controller applicable.

No presence of infestation during the last certificated period or observed during the BRCGS audit.

Routine visits per year: 8xY

Content of routine inspection: EIVs, rats, Mices etc.

In-depth inspections performed: 1xY;

Frequency is suitable.

Documentation was well maintained and visit reports fully completed with actions closed in a timely fashion.

The following evidence was reviewed:

Visits; 22.10/22.11-2024.

On-depth inspection 09.10.2024, PRI 16.01.2024. Qualification ; RPMV valid till 12-2027.

4.15 Storage facilities

Storage spaces are maintained in hygienic conditions. Waste materials and chemicals are stored separately.

Temperature controlled storage is required, and this is monitored continuously through a central system with alarms when out of set limits. This is not required for ambient stable raw materials and final products.

Seen separated storage for the Mustard-containing marinade.

Chemicals and (raw) materials are stored separately from finished products. Only electric powdered fork-lift trucks are operated.

Only small stocks of materials are kept on site and stock rotation is via a manual white board system identifying FIFO usage.

Delivery/Storage record sheets are in place for each raw material & packaging item and are kept at their storage location; seen within the traceability exercise with no issues noted.

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Outside storage is limited to locked, secure bulk ingredient silos; seen on the factory inspection.

No controlled atmosphere storage.

The following evidence was reviewed:

- Temperature control week 30.
- Freezing as tolling activity (for Vion Boxtel) of fresh pre-packed APD art. and finished freezing process after 23 hours of article
- Intake Koppen LC BXT, order
 , checks temperature within limits (CCP) and check loading department.
- Loading container order department.
 , checks temperature within limits (CCP) and check loading
- Loading of EFD/GB, order via trailer , , incl. checks temperature within limits (CCP) and check loading department.
- Storage area across the road. Separated storage for the Mustard-containing marinade.
- Unloading carton boxes incl. check loading department. Checks intake order Dextrose

4.16 Dispatch and transport

The transport of finished goods is all outsourced to external service providers. There are no company vehicles.

An overview is maintained in the site approved supplier list. Verified GFSI certification of: ; BRC S&D.

Temperature checks and hygiene monitoring controls are in place for: unloading raw materials and loading finished product. This is daily using pre-use check sheets.

Records of evidence were reviewed during the factory inspection and through the auditor vertical audit (see details below)

Vehicles back directly onto loading bays, which are closed with shutter doors when not in use.

The following evidence was reviewed:

- Intake Koppen LC BXT, order , checks temperature within limits (CCP) and check loading department.
- Loading container order department.
 , checks temperature within limits (CCP) and check loading department.
- Loading of EFD/GB, order via trailer , incl. checks temperature within limits (CCP) and check loading department.
- Unloading carton boxes incl. check loading department. Checks intake order Dextrose

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

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|-----------------------------|---|----------|
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5. Product control

5.1 Product design/development

The product design/development procedures are clearly detailed in: SZL10100, v03.10.2024.

There is a process of defining the product brief and agreeing the brief with external customers. HACCP review and sign off, sample agreement, trail review and customer sign off.

Product is mostly minor product adjustments rather than new developments or new materials and allergens. Developments are mostly for customers who provide guidance in each instance.

HACCP team involvement and agreement on customer requirements:

HACCP reviews are held biannually and include HACCP assessments made by the HACCP team leader for each new recipe. The HACCP team also consider any amendments to standard processes.

The QA Manager (HACCP Team Leader) reviews process specifications and agrees/discusses information areas with customers before final agreements are made.

Trials:

Trials are agreed between the Contract and Development Manager and customers but 3 trials are the usual preferred option.

Shelf-life validation:

Shelf-life trials follow documented protocols that reflect appropriate conditions. The process is the same for existing products.

The following evidence was reviewed:

Allergen testing/validation; 21.02.2024.

Sous-vide process validation January 2024.

5.2 Product labelling

The following documentation describes the process: 10002, v03.10.2024.

Legislation in countries of sale:

Labelling product for EU-market following EU-legislation and any additional customer requirement. Following Vion central procedure labelling for markets outside EU approved by sales (HQ Vion) after evaluation by the customer

Artwork approval & accuracy of information:

NΑ

Cooking instruction validation procedures:

Cooking required; recorded well on labels, although most are B2B.

The following evidence was reviewed:

Labelling of VP Haasjes, art. , lot weighed and labelled per vacuum pack and in crates.

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5.3 Management of allergens

The following documents form the controls in this area: 10216, v23.07.2024.

Allergens handled on site are: mustard.

The risk assessment covers all potential sources, including cross contamination. Measures implemented include: storage and marking, product follow and red hoses for the marinade.

Allergen containing re-work:

Reworking NA.

Claims for individuals:

No allergen claims are made.

Cleaning, validation and verification:

Cleaning processes have been verified through rinse water sampling. An audit for allergens, was seen as part of the auditor traceability exercise and was seen to be recorded as fully compliant.

Changeover process:

Allergen testing/validation; 21.02.2024; results in CP27.

The following evidence was reviewed:

Storage and material-check.

5.4 Product authenticity, claims and chain of custody

Product authenticity is detailed in: 10203/204.

Knowledge of the Team

The food defence and fraud team are also the site HACCP team. The team leader has completed relevant training (see evidence section below). The use of raw material and supplier risk assessments demonstrated knowledge of the principle of vulnerability assessment.

The vulnerability assessment covers all the mandatory requirements in section 5.4 of the BRCGS standard.

Review of the vulnerability plan is programmed to be completed annually.

Date of the last review: 24/01/2024

Examples raw materials, risk level and mitigating controls/ Claims:

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

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Organic pork (SKAL certified): identification by green label, last number of article number = 7 not in production at the time of the audit;

Farming star ("beter leven"): identification by orange label, last number of article number = 5;

GB (good farming including welfare requirements for UK clients): identification by blue label, last number of article number = 6;

GF (IKB certified): identification by blue label, last number of article number = 3;

QS (Qualität und Sicherheit for German market): identification by blue label, last number of article number = 4 or 8.

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

Procedures are implemented concerning the verification of the quality line and how to downgrade the quality lines as generally the demand of certain quality lines is lower than the availability of meat categorized in higher quality lines. Downgrading quality lines is the responsibility of trained and qualified personnel. The downgrading is allowed following the sequence: FS -> GB -> QS -> ST. BIO-> GB.

Vulnerability assessment for non-meat raw materials covered by the procedures and risk calculation based on a few factors like product characteristics, packaging materials, origin, product availability. No high-risk raw materials identified.

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

Claims are made for some products for Vegan/Vegetarian via assessment of animal derived raw materials, reduced calorie lager via process specification calculations and gluten-free via 3rd party UKAS accredited laboratory testing using methodology.

The following evidence was reviewed:

5.5 Product packaging

The packaging materials for finished products are: foil and carton boxes.

Suitable packing procedures and materials are in place with relevant (food contact suitability/migration) specifications. The packing suppliers are GFSI certified.

Specification and declarations of conformity seen for the packaging used in the traceability test.

The following evidence was reviewed:

, Packaging foil (incl. specification DOC/Migration tests) and GFSI; BRC Packaging.

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

The testing programme is outlined in: analyse-schedule.

A plan of analysis is available and systematically followed. Product samples are taken from production at the line.

Types of tests and frequency:

A routine sample (finished product) is analysed on a weekly basis by an external accredited lab on odour, colour, visuals, Salmonella, yeasts and moulds.

Next to the final product, analyses on raw materials are done on Salmonella for raw materials with a higher risk for Salmonella via Central Vion sites.

Summarise test result outcomes / trends and actions taken: no issues.

The most recent shelf-life validation was seen for the: Sweet Spareribs.

Confirm process and frequency of shelf-life testing verification: Sweet Spareribs. Most recent shelf-life verification: **October 2024.**

Onsite laboratories

NA.

The following evidence was reviewed:

- , ISO 17025 accreditation under no.
- Bacon 07.10.2024
- Smoked products Listeria, Salmonella, TPC, Entero; 07.10.2024.
- Agar 12xY; week 30
- Listeria 05/19.08.2024
- TPC/Y&M; week 30

5.7 Product release

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

5.8 Pet food and animal feed

No pet food produced.

5.9 Animal primary conversion

No animal primary conversion.

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| Details of non-applicable clauses with justification | | |
|--|---|--|
| Clause/Section Ref | Justification | |
| 5.3.7 | No claims. | |
| 5.6.5 | No own laboratory. | |
| 5.8 | The site does not produce pet food and animal feed. | |
| 5.9 | No animal primary conversion | |

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6. Process control

6.1 Control of operations

The processes covered on the site include:

Intake, storage, slicing, brining and curing, smoking, cooking, marinating and seasoning, freezing and dispatch. and waste disposal.

During this audit raw material receipt were in operation and were also reviewed as part of the auditor traceability exercise.

Documented procedures and work instructions are in place that ensure consistent product is produced and packed.

There are dedicated logs for each process which include traceability, process steps, process parameters such as times, temperatures and volumes, additions, recipes, quality testing and results, sensory sign-off, set up approval (release) and packing.

The product is subject to CP, CCPs and PRP checks and these were seen (see details below at evidence).

No products outside of the scope are handled.

The following evidence was reviewed:

Day 1;

- Salting (injection) of Horse shoes, article , pre-packed in netting at the Line Hammen,
- Vacuum-packing of BSD Rack at Line 2, including the test of the metal detector (CP) with test bars and explained recording and CA if needed.
- Crate and big box (Dolavs) washing and checks on dosing and rests of detergent; pH reduced from pH 11 to pH 7.
- Salting (injection), smoking (beeh wood chips), cooling (about 6°C) and vacuum packing of Streaks
- Adapted cleaning process (after the Major NC, last year) of hooks and checks on dosing and rests
 of detergent; pH reduced from pH 11 to pH 7.
- Freezing as tolling activity (for Vion Boxtel) of fresh pre-packed APD /art. and finished freezing process after 23 hours of article

Day 2;

- Intake Koppen LC BXT, order , checks temperature within limits (CCP) and check loading department.
- Slice department; vacuum packing, seal check, of VP Haasjes, art. , X-ray testing (CP, tested with 0,4x2mm SLS 316 wire/ tested with 0,8mm SLS 316 ball/2mm glass/2mm ceramic)
- Loading container order 495264, checks temperature within limits (CCP) and check loading department.
- Labelling of VP Haasjes, art. , lot , weighed and labelled per vacuum pack and in crates.
- Tumbling of Kiingsize z/k, article , program 4.
- Explanation at the tumbler department about cleaning and used red valves for the Mustardcontaining marinade.
- Seasoning of Rollades , , with mix
- Sous-vide cooking of Sweet marinated Spareribs, lot , program 2, incl. CP core temperature (85°C) and cooking time. (3h)
- Loading of EFD/GB, order via trailer , incl. checks temperature within limits (CCP) and check loading department.

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Day 3;

- Tour outside.
- Storage area across the road. Separated storage for the Mustard-containing marinade.
- Unloading carton boxes incl. check loading department. Checks intake order Dextrose

6.2 Labelling and pack contro

There is a clear process and line clearance check for labelling and removal of labelling from the line at a product change over.

Records of checks were sampled from previous days and from the vertical audit trail.

At the time of the audit there was change over on the lines so this could be witnessed. There is no online verification equipment for the correct label.

The process for back label printing was looked at with checks on bar code and best before date undertaken and recorded.

The following evidence was reviewed:

Day 1;

- Vacuum-packing of BSD Rack 190-8 at Line 2, including the test of the metal detector (CP) with test bars and explained recording and CA if needed.
- Salting (injection), smoking (beeh wood chips), cooling (about 6°C) and vacuum packing of Streaks 81533.
- Freezing as tolling activity (for Vion Boxtel) of fresh pre-packed APD /art. and finished freezing process after 23 hours of article

Day 2;

- Slice department; vacuum packing, seal check, of VP Haasjes, art. 37793, X-ray testing (CP, tested with 0,4x2mm SLS 316 wire/ tested with 0,8mm SLS 316 ball/2mm glass/2mm ceramic)
- Labelling of VP Haasjes, art. , lot , weighed and labelled per vacuum pack and in crates.

6.3 Quantity, weight, volume and number contro

Weight control is on average weights (gram) for packaged products as seen on the factory inspection and within the trace exercise and satisfactory.

Partly online check weighers. No e-sign.

The following evidence was reviewed:

Day 1;

- Vacuum-packing of BSD Rack 190-8 at Line 2, including the test of the metal detector (CP) with test bars and explained recording and CA if needed.
- Salting (injection), smoking (beeh wood chips), cooling (about 6°C) and vacuum packing of Streaks
- Freezing as tolling activity (for Vion Boxtel) of fresh pre-packed APD /art. and finished freezing process after 23 hours of article

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Day 2;

- Slice department; vacuum packing, seal check, of VP Haasjes, art. 37793, X-ray testing (CP, tested with 0,4x2mm SLS 316 wire/ tested with 0,8mm SLS 316 ball/2mm glass/2mm ceramic)
- Labelling of VP Haasjes, art. 37793, lot NL11 22GB VB, weighed and labelled per vacuum pack and in crates.

6.4 Calibration and control of measuring and monitoring devices

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

- Sensors : 16.02.2024
- Floor weigher 030183; 25.10.2024
- Sensor cooking; 27.06.2024
- Metal detector Zouterij MD29; 28.08.2024
- X-Ray Slice, 20241249; 01.10.2024
- Calibers 10.09.2024
- Ref. thermometer #492: <15.02.2025
- Thermometers, 8 and 22; 15.11.2024.

Clear records of calibration were seen within defined limits for all the equipment sampled.

| Details of non-applicable clauses with justification | | |
|--|------------------------------------|--|
| Clause/Section Ref | Justification | |
| 6.2.4. | No on-line label scanners applied. | |

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7. Personnel

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

Induction training is required for all new employees and includes the company hygiene rules, site policy, general product safety and quality aspects, etc. There is a 1 yearly refresher training in place.

Training needs for personnel engaged in activities related to product safety, quality and legality are further defined in a competence matrix.

Employee training is defined in a documented procedure. For operators there are records of sign off against key tasks.

At this visit, 2 operators and 1 warehouse employee were sampled. Clear competency records and refresher training records were seen. End-of-year meetings are scheduled with employees.

The following evidence was reviewed:

Training 25.01.2024, 15.11.2024, CCP temperature 15.10.2024, MD/X-ray 04.03.2024; all for Mr. and Mrs.

Flex matrix competences last update 21.11.2024; on SPZ10220.

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

Hygiene policy is clearly communicated as part of induction programme and displayed on the wall in key areas. All requirements of the Standard are addressed. No deviations from the policy were observed during the audit. Blue, metal detectable plasters are provided in the first aid box.

Visitors are required to complete a questionnaire prior to entrance.

Adequate facilities in place. Handwashing takes place at entry of the production area and warehouse area. No issues observed regarding handwashing stations. Staff canteens and consumption areas are segregated from production areas. Hygienic conditions are maintained. No issues observed during the audit.

Changing rooms are located close to production facilities and found to be clean and tidy. Personal items stored in lockers. Double sided lockers for personal and company issued clothing. Staff changes into workwear on site. Toilets are accessible from the locker rooms, segregated from production. Designated smoking area available outside of the main buildings.

The following evidence was reviewed:

Rules in "Werken bij Vion", v01-2022.

7.3 Medical screening

Staff medical screening is limited under national privacy law. Reporting of illness and injuries which might cause a risk to product safety must be reported according to the company hygiene rules.

Visitors need to sign the visitor's log and therewith declare adherence to the company rules.

The following evidence was reviewed:

Rules in "Werken bij Vion", v01-2022.

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7.4 Protective clothing: employees or visitors to production areas

Work wear of personnel includes suitable, protective clothing (including hair/beard nets) that provides adequate coverage. Clothing has no external pockets above waste or sewn-on buttons. No gloves used in production processes. Disposable white coats and hair/beard nets available for visitors.

Laundering of clothing is done by external service provider (professional laundry service). Limited inhouse washing of clothing is done conform a documented work-instruction.

Segregation of clean and dirty clothing is effectively managed; there is a dedicated closed bin for dirty clothing. Clean clothing is provided in a dedicated locker by the laundry service provider.

The following evidence was reviewed: Staff facilities.

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

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

| Details | of non-a | oplicable | clauses | with j | justification |
|---------|----------|-----------|---------|--------|---------------|
| | | | | | |

Clause/Section

Justification

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| 9. Requirements for traded products |
|--|
| 9.1 The food safety plan - HACCP |
| Not applicable |
| 9.2 Approval and performance monitoring of manufacturers/packers of traded food products |
| Not applicable |
| 9.3 Specifications |
| Not applicable |
| 9.4 Product inspection and laboratory testing |
| Not applicable |
| 9.5 Product legality |
| Not applicable |
| 9.6 Traceability |
| Not applicable |
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|---|
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11.3 Raw material receipt and inspection

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11.4 Management of cross-contamination between species

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11.5 Product testing

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11.6 Training

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Module 13: Meeting FSMA Requirements for Food – July 2022

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

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

Click or tap here to enter text.

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

Click or tap here to enter text.

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

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14.1 Additional Specifier Requirements 14.1 Traceability Click or tap here to enter text. 14.2 Environmental Monitoring Click or tap here to enter text. 14.3 Product inspection and laboratory testing Click or tap here to enter text.

Click or tap here to enter text.

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Auditor: