

Audit Report Global Standard Food Safety Issue 9

1. Audit Summary			
Company name	Vion Enschede B.V.	Site code	1598805
Site name	Vion Enschede B.V.		
Scope of audit	Deboning and cutting to specification of beef. Curing, slicing, marinating and tumbling of beef, bulk packed in dolavs or bags in crates, (consumer) vacuum packed.		
Exclusions from scope	None		
Justification for exclusion	Non-applicable		
Audit start date	2025-03-24	Audit finish date	2025-03-26
Re-audit due date	2026-03-25	Head office	No

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

2. Audit Results					
Audit result	Certificated	Audit grade	AA+	Audit programme	Unannounced - Voluntary
Previous audit grade	A		Previous audit date	2024-03-21	
Certificate issue date	2025-04-24		Certificate expiry date	2026-05-06	
Number of non-conformities			Fundamental	0	
			Critical	0	

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Page 1 of 50

CB Report No. RQA1032600 - 6774150

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2. Audit Results		
	Major	0
	Minor	4

3. Company Details			
Site address	Het Lentfert 74 7547 SP Enschede		
Country	Netherlands	Site telephone number	
Commercial representative name		Email	
Technical representative name		Email	

4. Company Profile					
Plant size (metres square)	<10K sq.m	No. of employees	51-500	No. of HACCP plans	1-3
Shift pattern		Dayshift, 2 shifts or shifted day shifts, 5 days per week			
Seasonal site		No			
Seasonal opening times (Start/end date)		Click or tap to enter a date.		Click or tap to enter a date.	
Other certificates held		Skal, IFS PIA, ISO9001 (multi site), QS			
Outsourced processes		No			



4. Company Profile	
Outsourced process description	NA
Regions exported to	Europe Choose a region Choose a region Choose a region Choose a region Choose a region
Company registration number	NL 305 EG
Major changes since last BRCGS audit	No outsourced processes anymore as the products frozen elsewhere don't return to the site anymore (no more production of minced meat and MAP packing). Within a few weeks also only B2B will be produced and no direct prepacked retailer products.

Company Description

VION Enschede B.V. is a site of VION Food Group in which beef is cut and produced to specification for retail and industry. This beef plant is together with the one other Dutch beef plant, led by the German VION Beef group. VION Enschede is bought summer 2010 as a former cattle slaughterhouse, this is still there and maintained but close for operation. The production consists of two halls for production and several cells for storage. There is an area for receiving and dispatching hanging goods and an area for receiving and dispatching goods in bulk.

Vion HQ is based in Boxtel and provides support on several main processes such as sales, QA, Internal audits and contract management.

There is a small team led by the operation Director Beef with production manager, maintenance workers, a sales team, finance manager, QA manager and 2 QA/QC employees and HR manager supported by coaches.

Main activity is the deboning and packing of fresh beef for retail organizations and meat industry Volume of production for Bio, Groenlo en is about Ton. B2B are the main customers (Western Europe).

There are 3 type of products (so 3 HACCP studies): Cutting to 1st slices meat products (technical parts, fresh bulk packed in crates or dolavs or most vacuum packed in foil), sliced products (which can be brined / tumbled), fresh packed in crates, vacuum packed, skin packed. There are cutting lines and packaging lines and a fresh meat line.

On site (m2) is app m2 in use by factory and some m2 for offices, utilities, and maintenance. Of m2 not all is in use as the former slaughtering house is partly closed.



4. Company Profile

About **employees** of which about % permanent, including the ones in the offices. The production is organized from 6.00 till 16.00 basic in one shift and when needed this can be expanded to a 2-shift operation. In special situations shifted shifts are implemented as some employees start a bit later and work until about 7PM (as example expedition, employee to manage dispatch).

The audit was performed unannounced, also for next year an unannounced audit will be planned.

5. Product Characteristics

Product categories	03 - Raw prepared products (meat and vegetarian) Category Category Category Category Category Category Category				
Finished product safety rationale	Chilling (temperature <7°C, <2°C), fresh / vacuum packing				
High care	No	High risk	No	Ambient high care	No
Justification for area	Appendix 2 applied. All products must undergo full cooking step prior to consumption				
Allergens handled on site	None Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen Choose an allergen				



5. Product Characteristics	
Product claims made e.g. IP, organic	Organic, Simmentaler
Product recalls in last 12 months	No
Products in production at the time of the audit	Products in production at the time of the auditBeef halves, quarters, labelled beef, sliced beef, cured beef (vacuum and fresh), sliced marinated beef (CU packed) skin packed, labelling of pre-packed beef.

6. Audit Duration Details			
Total audit duration	20 man hours	Duration of production facility inspection	10 man hours
Reasons for deviation from typical or expected audit duration	NA		
Combined audits	None		
Next audit type selected	Unannounced - Voluntary		

Present at audit					
Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref: clause 1.1.11)					
Name	Job title	Opening meeting	Site inspection	Procedure review	Closing meeting
	Managing Director	x		x	
	QA manager	x	x	x	x
	QA officer	x		x	x
	QA employee			x	
	HR manager			x	
	facility			x	x





	Maintenance manager	x		x	x
	VOS facilitator			x	x
	Engineer			x	
	Manager operations	x	x	x	x
	Prod. leader cutting department	x	x	x	x
	Manager retail		x	x	x
	Chain manager retail				x
	Operators and chefs department		x	x	
	AUT LRQA	x	x	x	x

GFSI Post Farm Gate Audit History

Date	Scheme/Standard	Announced/Unannounced	Pass/Fail
18-01-2023	BRC Food v8	BRC Food v9	Pass
2024-03-21	BRC Food v9	announced	Pass
2025-04-26	BRC Food v9	BRC Food v9	Pass

Document control

CB Report number	RQA1032600 - 6774150		
Template name	F908 Food Safety Audit Report Template		
Standard issue	9	Template issue date	2022-12-16
Directory allocation	Food	Version	1.1

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Page 6 of 50

CB Report No. RQA1032600 - 6774150

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Non-Conformity Summary Sheet

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

Critical		
Clause	Detail	Re-audit date

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

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Page 8 of 50

CB Report No. RQA1032600 - 6774150

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Minor						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
3.5.3	Pest control is done by , but not supplier approval could be shown	For 2024, has been included in the supplier evaluation plan, but is at the moment not yet available from headquarter. Evaluation is done by Vion Enschede (over year 2023) See attachment 1	The discussion with headquarters is currently ongoing regarding who is responsible for evaluating which supplier. The monitoring of different local suppliers will, in any case, be carried out by the location itself.	The cause lies in the fact that both internally at Vion Enschede and within the Purchasing department at the headquarters, new personnel have started who received too little information regarding the 2023 supplier evaluation. Additionally, the headquarters expects each location to carry out its own evaluation of the suppliers relevant to them. The headquarters selects a number of suppliers from the overall database to be assessed by them.	20250418	
4.6.3	The commissioning procedure was used for a new saw 14/4/2024, but the form was only filled by TD and did not pass the	The document has subsequently been reviewed by members of the HACCP team. See attachment 2	To prevent recurrence, the HACCP agenda now includes a standard item on the validation of equipment/processes. See attachment 3. Additionally, a	The root cause lies in the fact that not all members were present during the HACCP team meeting. The Technical Services department (TD) was not	20250418	

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report)

Page 9 of 50

CB Report No. RQA1032600 - 6774150

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Minor

	HACCP team (as described in the form).		brief weekly meeting is held between Production, QA, and Technical Services to ensure that changes can be validated in a timely manner.	represented at the time and most likely did not submit this document for the meeting.		
4.9.6	In the warehouse of packaging materials crates were seen with bleu foil inside but not covered. Also 1 stack of carton boxes was seen with green foil inside. These boxes were outside dirty and 1 box was not covered well.	The pallet with the uncovered crates is removed to an other place and covered with empty crates. See attachment 4 The dirty boxes where also removed and thrown away.	A different location has been designated from which the employee must now collect the crates. The employee has been addressed regarding the fact that it is not acceptable for them to determine their own routes. To prevent contamination of the boxes, it has been decided to fix the leakage after the excess materials have been transferred to another site. This will take place in the coming month.	Because it was easier for the employee to take the required crates from that spot, the employee decided to place the pallet there without consulting anyone. As mentioned during the audit, the location where the contaminated cardboard packaging was found is affected by a leakage from the adjacent room. The complete storage room will be cleaned up end this month If needed I will send a picture of it next week	20250418	
7.4.2	Yellow crates are in use to place food contact material in (like dry ice / a spoon / packaging materials). But in 2 yellow crates also a face mask was seen, 1 was missing a small part of	The broken mask was removed directly. There were hooks made for the storage of the face masks, so the people can hang it on the hook when not in use. Attachment 5	Hanging options have now been created for these masks. The face masks have been included in the glass control checklist for periodic inspection for damage, and are also part of the SSOP check.	On site, there was no proper hanging method available. As a result, the option was left open to choose this method of storage. During the Pre-SSOP, the damage to the mask was not noticed.	20250418	

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report

Page 10 of 50

CB Report No. RQA1032600 - 6774150

Auditor:



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Minor						
	plastic. This facemask is not a food contact material.					

Comments on non-conformities						
-						



Additional Modules / Head Office Non-Conformity Summary Sheet

Critical		
Clause	Detail	Re-audit date

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

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

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report)

Page 12 of 50

CB Report No. RQA1032600 - 6774150

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Audit team

Lead auditor		
Auditor number	First name	Second name
NA		(auditor under training (AUT))

Audit team				Attendance (YYYY/MM/DD, 24hr: MM)			Presence	
First name	Second name	Auditor number	Role	Audit Date	Start time	End time	Remote or physical	Professional recognition number
			Lead auditor	2025-03-24	8.45	17.30	Physical	
			Lead auditor	2025-03-25	8.45	17.15	Physical	
			Lead auditor	2025-03-26	8.45	13.15	Physical	
		NA	AUT	2025-03-24	8.45	17.30	Physical	
		NA	AUT	2025-03-25	8.45	17.15	Physical	

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report)

Page 13 of 50

CB Report No. RQA1032600 - 6774150

Auditor:



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		NA	AUT	2025-03-26	8.45	13.15	Physical	
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LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report)		
Page 14 of 50	CB Report No. RQA1032600 - 6774150	Auditor:



Detailed Audit Report

1. Senior management commitment

Policy

The site policy is documented in: **P-ENS-NL-10029 14-02-2023 signed 30-12-2024**

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

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

Communication to staff: Displayed in key area (hallway to canteen and restrooms, on notice boards).

Product safety and quality culture plan

HQ has set up a procedure for FSC P-NL-Food 10059. The culture improvement plan of the site is documented in: **P-ENS-NL-10074 V2, 17-12-2024**

The organization has several items pointed out for further development of the food safety and quality culture such as training, feedback from employees, open communication, performance of evaluation rounds to measure activities related to safety/ legality/quality. However these subjects for improvements and developments were not defined in one clear plan incl. these goals to be reviewed and updated at least annually. (Separate goals were reviewed such as training and performance of hygiene/evaluation/behaviour rounds. So quality culture at the site is identified but by separate parts which are communicated through various channels (policy, induction program, annual newsletter, TV screens in the canteen).

Some objectives are: structural performance reviews employees, conduct annual HACCP training for all employees in key positions, digitalise (QA) documents.

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: **17/12/2024** by

Frequency of reviews: quarterly

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

Food safety and legality objectives

A corporate policy is established and approved, with the slogan "Daily Delicious". The strategy is supported and modelled with the OGSM-method which will now be rolled out to this site of Vion.

Notable food safety and quality objectives include:

Notable food safety and quality objectives 2025 include:

- *Staff absents is reduced to 5.5%*
- *Perform at least 85% of preventive maintenance within the specified period*
- *Increase in processed volume by 5% compared to 2024*
- *Optimising all product labels by adopting a uniform layout of all labels*
- *Optimising all product specifications to be available so that they are as uniform as possible, incl. photos*

Objectives are monitored 4x year by **QA manager incl. all MT members, last Management Review 03-01-2025**

Key results or significant trends: the site is not meeting all established objectives / effectively progressing through its objectives, but these are identified and by the VION improvement system allocated (VOS) to analyse and take measures if needed and when possible.

Management review

Frequency of management review meetings: 1x 2 weeks Tier 2. All required items are discussed.



Who typically attends the meeting: MT members (QA, control, management production management, maintenance)

Date of last management review meeting: **03/01/2024**.

How minutes and actions are communicated to staff and recorded: Senior management is present during most of the meetings. Meetings are sufficiently provided with action lists with timescales, responsibilities and recording of status. For Tier also information is provided on boards so visible for all employees.

Regular meetings

Routine meetings are held in which HR, sales, food safety and quality, maintenance, operations, Wave projects are discussed. The structure is documented. Points of attention /input through the attendance of MT with different backgrounds and focus.

Tier meetings (1-3) with Tier 1 held with operatives daily, Tier 2 (MT) with line management weekly and Tier 3 every month.

Minute meetings reviewed: **11/03/2025. Every first Tuesday of the month.**

Previous nonconformities

All previous non-conformities have been closed out suitably.

Thorough root causes are identified through application of discussions. Preventive actions are effectively implemented to prevent re-occurrence. A CAPA excel list is maintained (Excell File) by QA e.g. register of actions e.g. audits external and internal, status ongoing.

Organisational structure, responsibilities, and management authority

The site organization structure is documented in: **P-ENS-NL-10020, Q1 2025**. Procedure replacement schedule P-ENS-NL-10021 V13 06-07-2022.

Management structure:

The senior management has appointed qualified employees for key functions (managed by HR).

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. Procedure **P -ENSNL-10006 (Q1 2025)** describes HACCP team of location Enschede has a multidisciplinary team.

Current structure and reporting are up to date.

Permanent expertise is provided by HQ Vion Boxtel but also expertise is shared with other Vion locations, managed by Vion HQ; the QA managers of all locations are part of the Internal audit team and audit "each others" locations to support the internal audit programme.

Overall responsibility for the day-to-day management of the food safety system is with the Operations Manager together with the Production Leader deboning and manager Retail, supported by the local QA manager.

No external expertise is used (consultant).

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 consultant.

A whistle blowing system is in place, document is available in 6 languages (P-food-10049), anonymous concerns can be shared by a special phone number / email or QR code which can be scanned. The Operations Manager is responsible for monitoring and cascading this to the relevant stakeholders across the site. No issues reported since last audit.



The following supporting evidence was reviewed:
NVWA latest system audit 16-09-2024 (no report received yet (!))

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
-	

2. The Food Safety Plan – HACCP

There is one HACCP manual described as the: **P-Ens-NL-10006**

HACCP Team

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 Quality Manager who has more than 20 years' experience in the food industry and trained in HACCP incl. microbiology. The other members all had appropriate training and experience. Training records were sampled. 4x year meeting, last HACCP team meeting on 27-11-2024. Training Mark H. 04-03-2024 "HACCP voor leidinggevende", by trainer for 4 hours.

Scope of HACCP

The HACCP system scope is documented in: **P-ENS-NL-1011 V13 18-10-2024**. 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: **base document of the Hazard analysis P- Vion-10000 and 10001**.

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:

P-ENS-NL-10005 21-01-2025

Record date and reason of last verification: **27/11/2024**. Fixed agenda item during the HACCP team meeting. Flow-diagrams are maintained and digital authorized as verified by members of the HACCP team; all were reviewed during the HACCP review. Last review Q3 2024.

Hazard analysis

HARA is based on comprehensive information sources. A VION central PRP and CCP plan is the basis for the local HACCP plan (P-FOOD-10000 PRP's and additional CCP's and CP's is regularly updated). The hazards are part of this document (incl. microbiological (esp. pathogens, with Salmonella as higher risk (therefore temperature at receiving is a CCP), chemical, physical (incl. radioactivity/ radiological hazards) Severity vs likelihood is considered, all in basic managed and supported by QA of HQ Vion Boxtel. No allergens on site.



The local HACCP plan (process beheersplan) is last updated 2022-06-24. No alterations in CP's or CCP's. Reassessment / verification taken up in the quarterly management review. This verification (reassessment) of the HACCP system is done.

Each identified hazard was reviewed and given a risk rating 1 to 9 (severity and likeliness of a hazard occurring = 3 x 3 matrix). A decision tree is used. A set of flow diagrams is part of the HACCP documentation, the steps are: Process steps in sequence: Receipt (CCP temperature), storage, cutting, metal detection, injecting (option) / slicing, packing, storage and dispatch (CCP temperature on outgoing and returns). The processes are shown on flow diagrams for each process. Checked during the audit for deboning and retail (packing). Also, a minced meat line is part of the production, The production of minced meat with 2 mincing machines, two portioning machines and a Map /vacuum (skin) pack machine and vacuum packers.

CPs, limits and controls

At this moment the following CCP apply with the critical limits (all related to temperature of incoming or outgoing product):

#	CCP	Control measure	Critical limit	Monitoring frequency
1	reception of (parts of) carcasses	min 5 products temp measurement spread over the batch	Chilled (parts of) carcasses / hanging meat: $T \leq 7^{\circ}\text{C}$ core (CCP 1a)	min 5 products temp measurement spread over the batch
2	reception of meat additional purchase	min 5 products temp measurement spread over the batch	Bulk meat (dolavs / crates): • $T \leq 7^{\circ}\text{C}$ core (CCP 2a) • $T \leq 6^{\circ}\text{C}$ vacuum $\rightarrow$ surface temp (CCP 2b) Organs (rarely received): • $T \leq 3^{\circ}\text{C}$ core (CCP 2c) • $T \leq 2^{\circ}\text{C}$ vacuum $\rightarrow$ surface temp (CCP 2d)	min 5 products temp measurement spread over the batch
3	dispatch temperature of products	min 5 products temp measurement spread over the batch	Chilled (parts of) carcasses / hanging meat and bulk meat (dolavs / crates): • $T \leq 7^{\circ}\text{C}$ core (CCP 3a) • $T \leq 6^{\circ}\text{C}$ vacuum $\rightarrow$ surface temp (CCP 3b) Organs (rarely): • $T \leq 3^{\circ}\text{C}$ core (CCP 3c) • $T \leq 2^{\circ}\text{C}$ vacuum $\rightarrow$ surface temp (CCP 3d) Meat preparations: • $T \leq 4^{\circ}\text{C}$ core (CCP 3e) • $T \leq 3^{\circ}\text{C}$ vacuum $\rightarrow$ surface temp (CCP 3f)	min 5 products temp measurement spread over the batch

In general good control was seen on CCP's. Steady group of employees performing the measurements, corrective actions taken correctly.



Beside CCPs, there are about 20 specific control measures (CP's) on various prerequisite and operational processes: personal hygiene, metal detection, household plan, identification and traceability, pest management, training, etc.

Validation of the CCP is done at central level, report is part of the central management system (quality online)

Documentation and record keeping is verified. Results of verification are recorded and communicated to the HACCP food safety team.

More than 20 PRP's / CP's have been identified in: **P-ENS-NI10011 2022-06-24**. Control measures have been defined. This includes e.g.:

1. Packaging / label control (allergens, EAN code verification).
2. Cleaning and disinfection (Pre SSOP check start up after cleaning)
3. Recipe control / check on cutting size
4. Packing & Label check
5. pH check received carcasses
6. % fat by X-ray
7. Weight control
8. Metal detection
9. Traceability
10. Allergens
11. Pestcontrol
12. Personal hygiene
13. Hygienic working/processing/ GMP incl SSOP check daily per department
14. Chain control chilling / Area temperature monitoring
15. Water quality
16. Raw materials appearance/handling
17. Hygienic handling after contamination of products (e.g. cleaning/handling fallen meat)

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 CCPs are in control conform the work instructions.

Validation, verification and review:

The company has effectively validated and verified the HACCP/Food Safety Plan, including the critical limits, control measures and Cp specific for controlling food safety hazards. Validation of the CCP is done at central level, report is part of the central management system (quality online). Procedures of verification have been established.

Procedures of verification have been established. SSOP Daily checks and specific daily/batch checks

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 CCPs. Results if CCP monitoring are daily verified. During HACCP team meetings CCPs are reviewed and CCPs are discussed during Tier 1 meetings.

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

Date of last review: **08/11/2024**

Completed by: HACCP team members

Reason for completion: **annual review**



The following supporting evidence was reviewed:

PowerPoint presentation HACCP training

During site tour: F-ENS-NL-10018 V11 14-03-2025 "checklijst aankoop bouten"

During site tour: F-ENS-NL-10003 V9 03-06-2024 "CCP temperatuur ontvangst bouten"

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
-	

3. Food safety and quality management system

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

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 and 5 more other languages to support the employees understanding the information provided. When staff is not having an appropriate level of English or 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, clearly marked. Changes are also kept by the QMS system.

All documents seen during the audit were complying.

Record completion and maintenance

Records are in good condition and retrievable electronically or on site. Records retained 3 years (max shelf life fresh (vacuum) is 35 days).

The following supporting evidence was reviewed:

Documents in the QMS (digital) and on site during the onsite tour and the trace test, digital and on paper.

3.4 Internal audits

The following document(s) define the process: P-VION-10011 2024-11-19, all included in Q planning

The audits generally follow BRCGS guidelines and clause structures.

Internal audits are conducted: 4 x year. 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: internal auditors provided from Vion HQ and QA managers of other Vion sites (intercompany) 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: a Word format.
Objective evidence of compliance and non-compliance are reported. The audit criteria are clearly referenced. Findings are included in the word document and extra monitored in an excel file, 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: min 4 audits per year: **07/05/2024** (unannounced), **17/10/2024**, **26/11/2024** (unannounced).

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

A separate program of internal inspections of factory environment and processing equipment is undertaken monthly verification rounds QC together with operator.
This is reported in: for each specific inspection per department, a specific format, signed off by QC. Inspections are performed by using a checklist with the audit topic included and a clear action list. Performance is measured based on minors and major deviations. Actions in response to deviations are recorded, cascaded to team leaders for follow-up, and discussed in HACCP QA/QC meetings. Completion of actions is verified upon the next inspection by QA/QC. Effectiveness of the system is discussed in the Management Review and also separate with the managers as the lines are short in this company.

Hygiene Inspections reports reviewed during this audit: verification rounds (incl. Glass/brittle plastic) sampled 26/04/2024, 13/06/2024, 13/09/2024, 10/12/2024
A few minor issues had been observed. Follow-up of actions is demonstrable with records.

Beside internal audits, more than 10 client audits are performed on site per year. Results (actions) are reviewed, handled and followed up, also included in the MR report.
The following evidence was reviewed: QA planning 2024

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

Risk identification / risk assessment related to raw materials setup centrally by HQ in Boxtel resulting in product specifications specifying relevant aspects to quality and food safety (CP). As the meat suppliers are all within the Vion company, all approved suppliers. In case of incidental other suppliers, these are low risk (fresh meat). Additives and seasoning is supplied by well-known and fully certified approved suppliers. No high-risk food suppliers identified for this organization. For packing material, Approval of suppliers based on GFSI-certification. All suppliers of packaging materials must be approved by the central Vion office entered the system () before they are allowed to deliver. Supplier questionnaires used too. For raw materials purchased from an agent, broker or wholesaler, is the identity of the last manufacturer, packer or consolidator of the material known: **Yes**
Some additives from the brine delivered by trading companies, Traceability system is verified through: GFSI certification of the manufacturer.

The company's raw material risk assessment, including primary packaging is documented in: List suppliers' additives Vion Food NL (S-MMI-10190), List of approved transporters (S-MMI-10013) and 'List of approved cold stores in use by VION (S-MMI-10199), yearly demonstrably reviewed by Vion HQ

All potential risks have been appropriately considered.
No significant risks include for this site applicable.
The risk assessment forms the basis for the raw materials acceptance and testing procedure and for the processes adopted for supplier approval and monitoring.



Reviewed during the audit according to the last updated evaluation All suppliers are evaluated: **yearly, last update 21/3/2025**

List examples of suppliers reviewed during this audit:

Initials supplier	B= broker S= (supplier S+B = supplier & broker	Supplier from ingredient PP= Primary packaging SP + Secondary packaging	Method of assessment (Valid GFSI certificate)	Evidence seen (checks at receiving / documents)	Specification date (checked at vertical trace test)
	S	Ingredient beef carcasses	Valid GFSI certificate	yes	5/1/2024
	S	Ingredient beef carcasses	Valid GFSI certificate	yes	5/1/2024
	S	Foil	Valid GFSI certificate	yes	9/5/23
	S	Labels (to be printed onsite)	Valid GFSI certificate	yes	
		Secondary packaging NA			

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). The meat is bought by the companies site manager (and purchase manager) by him selves from approved (GFSI certified) suppliers (slaughterhouses) all over in Europe.

Acceptance by receiving checks: close look, also by experienced employees, well known with carcasses and beef, CCP (temp check), monitored during site audit day 1 reception of meat CMR (carcasses parts and as part of the vertical trace test)

Deliveries are visually checked for product integrity, labelling and cleanliness. Based on risk assessment, food safety hazards are controlled through COAs, internal analysis etc.

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 during the audit at reception by expedition.

The following evidence was reviewed:

F-ENS-NL-10018 V11 14-03-2025 "Checklist aankoop bouten" seen for during site tour
F-ENS-NL-10003 V9 03-06-2024 "Temperatuur ontvangst bouten" seen for during site tour

3.5.3 Management of suppliers of services

The following services are used and assessed, Examples assessed during this audit:

- Pest control , but not supplier approval could be shown (MINOR)
- Laundry services
- Contracted cleaning
- Transport Distri fresh
- Off-site storage

Supplier approval, monitoring and evaluation process documented (referenced under 3.5.1) in List of approved transporters (S-MMI-10013) and 'List of approved cold stores in use by VION (S-MMI-10199). Seen the last updated evaluation Dec 2024 over year 2023 (over year 2024 it is not finalized yet), it is done with all Vion sites.

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



Quarterly management review (seen for Q4 last year) include performance of suppliers of services and feedback.

The following evidence was reviewed: see above

MINOR Pest control is done by , but not supplier approval could be shown

3.5.4 Management of Outsourced processing

Outsourced process steps to a third-party or undertaken at another site is: **not applicable**
No products are coming back from freezing companies.



3.6 Specifications

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 (MDM) 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.

During the audit, several specifications were reviewed:

Initials supplier	B= broker S= (supplier S+B = supplier & broker	Supplier from ingredient PP= Primary packaging SP + Secondary packaging	Method of assessment (Valid GFSI certificate)	Evidence seen (checks at receiving / documents)	Specification date (checked at vertical trace test)
	S	Ingredient beef carcasses	Valid GFSI certificate	yes	5/1/2024
	S	Ingredient beef carcasses	Valid GFSI certificate	yes	5/1/2024
	S	Foil	Valid GFSI certificate	yes	9/5/23

- Finished product: Product specification kogelbief (art.) seen during site tour 25-03-2025 and Beef top side without cap (vacuum), 7/1/2025.
- Cleaning agents/ lubricants, see chemicals (4.9.1)

Formal agreement of customer branded products is verified through the system of the retailers (for instance). Verified customer approval during the vertical traceability exercise, but this is a B2B client (at the moment no supermarkets are client who receive prepacked products).

The following evidence was reviewed: Procedure P – Ens NL-10027 Management of specifications

3.7 Corrective and preventive actions

A documented system is used to manage corrective and preventive actions on the shopfloor. Corrective actions taken are documented in CAPA Excel overview list for internal/external audits and hygiene inspections. For complaints on the complaints form. In this action list the responsible for completing/ closing the non-conformity is monitored for reporting the status of progress. In all mechanism's attention for root cause analyses. Seen action list which was ongoing reviewed and adjusted. Corrective actions and preventive action system is up to date. The huddle white boards are implemented, and these daily morning meetings are implemented). Corrective and preventive actions are discussed during the Tier1-2 -3 meetings.

During this audit, several samples were taken to verify effectiveness of corrective and preventive actions. Thorough root cause analysis is performed depending on level of deviation and action required.

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

The following evidence was reviewed:

(TD department) / internal audit action list / Complaint records / pest control actions/

3.8 Control of non-conforming product



Control of non-conforming product is detailed in: **P-ENS-NL-10024 complaints handling** And in P-ENS-NL-10004. All fallen meat incidents have to be reported on the SSOP-checklists. Non-conforming products are categorised to CAT 1 (CAT 3 is degraded to cat 1). Blocked products are accompanied by form P-ENS-NL-1007.

After recording a complaint or incident, a RCA is performed corrective and preventive actions are defined and handled. Categories are used, food safety related issues complaint codes start with 20, this way easy to select in the file. No serious FS related issues were detected.

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. There is a segregated section in the warehouse for non-conforming products and returned goods.

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

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

The following evidence was reviewed:

FB complaint 7/1/2025 (foreign paper in bulk found).

In MR analyses of complaints were seen, discussed during the 3 monthly meeting and per incident with involved team. Complaints are below max. KPI.

3.9 Traceability

The traceability process is documented in: **P-Food-10015**

Traceability through the process:

Traceability system operates through ERP computer system and paperwork enables trace of raw materials and packaging from supplier through processes to packing and dispatch. Incoming goods are entered into the ERP system and labelled. Basically, full pallets are transported from the warehouses to the production facilities and do not return. Replacements recorded based on scanning. In case of distributing recipients from the pallets to the production facility this will be entered manually into the system. Recording of batch information raw materials, packaging materials, rework batches or pallets to be re-used on the production record sheets (as reviewed for vertical audit).

Traceability marking on products:

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.

Traceability test details company:

Frequency: min annually

Last test conducted: **26/11/2024 + 17/10/2024**

Product **CZ carcasses + kogelbiefstuk (art.)**:

Lot code: **batch 09-11-2024 +**

Results are retained as documented information and reports include all relevant information and data (including mass balance information). Traceability is achieved within 3 hours.

Vertical audit details:

Finished product: **Beef top side without cap (vacuum), batch**

Production/packing date: **11/12/2024**



Raw materials: **Ingredient beef carcasses from A (in B.), received 11/12/24 / for beef top/ and from A (in D), short ribs are made 18/12/24 received (used for the forward trace)**
 Printed packaging and labels: **Label** , info printed based on ERP system.

Quantities reconciled: 150,54 kg finished product Beef top side without cap

Key documentation reviewed including process control and quality control documentation:
 With a vertical audit list, (the internal LRQA list based on Raw materials/Production/Distribution/Quality Assessments/Finished Product Weight Control/HACCP - Critical Control Points/Other Food Safety Controls/Microbiological Controls/Product Specification/ Cleaning Management Systems/ Maintenance/Calibration/Training records) during the audit was tested.

Summary traceability and vertical audit:

Tracing (forwards/backwards) including packaging was possible within 3 hours 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. 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.

3.10 Complaint-handling

Complaint-handling is documented in: **Klachten en claims procedure P-NL-Food 10054**

Follow-up of complaints is managed through: Excel list managed by Sales and QA, complaints are handled 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.

After recording a complaint or incident, a RCA is performed corrective and preventive actions are defined and handled. Categories are used, food safety related issues complaint codes start with 20, this way easy to select in the file. No serious FS related issues were detected.

Product complaints:

2022: complaints per week (all kind of complaints)
 2023: complaints per week (all kind of complaints)
 2024: complaints per week (all kind of complaints)
 Food safety related complaints < kg per week

Top 3 complaint reasons:

1. Weight
2. Foreign body complaints (metal, plastic, other)
3. Labelling

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

There has been no significant increase in a complaint.

The following complaint samples were taken:

- Complaint of production 28-11-2024, vacuum leak, solved 03-01-2025
- Complaint from , part of a paper label in beef trimmings, solved 07-01-2025



3.11 Management of incidents, product withdrawal and product recall

Incident management process documented in **P-VION- 10015 V14 25-10-2024** 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 will be informed within 3 working days according to procedure. Further via central HQ, quarterly reporting to LRQA seen.

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

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 / The following incident occurred since the previous visit.

Date of last incident management procedures test: **22/03/2024**

Type of test completed: recall

Mass balance information is included in the report. Traceability is achieved within 3 hours. Successful test conducted. No improvements have been required as result of the outcome.

Mass balance information is included in the report. Traceability is achieved within 3 hours. Successful test conducted. No improvements have been required as result of the outcome.

Report of conducted test was seen, ok.

Details of non-applicable clauses with justification

Clause/Section Ref	Justification
3.5.4	Outsourced process steps to a third-party or undertaken at another site

4. Site standards

4.1 External standards

Plant located in an industrial area in a rural environment.

Site boundaries are clearly identified. Premises is partly fenced off with security gate access to the facility and supervision of all visits incl transport by a porter on site between 4 AM and 11 PM, outside thee hours the main port is locked, then the site fully fenced.

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report

Page 27 of 50

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Auditor:



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Types of buildings include: production facility, storage building, offices, and maintenance workshop.

Site security:

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

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

4.2 Site security and food defence

Site boundaries well defined and security (external facility provider) in place with check for visitors and lorry drivers. Separate storage takes place for cleaning chemicals, lubricants and waste. Two entrances for pedestrians and one for vehicles. There is a documented policy of the security included in F-ENS-NL10040 Risico management beheersplan 2022-27-11 Product en procesintegriteit (TACCP study), last review was used as input for the Management Review.

Risk score calculation based on impact and likelihood of occurrence. Examples of threats that have been determined **The threat assessment includes both internal and external threats, e.g.: entering of people who are not known/ on not opening hours.** The site has established a documented food defence plan covering assess points and controls.

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 included in gen HACCP training.

Appropriate **control measures** are developed and implemented: EXAMPLES: No adverse activities in the surrounding area. Site is suitable maintained and well equipped; makes a logical and safe way of processing possible. Access is via electronic keys porter on site between 4 AM en 11 PM, access control.

In general appropriate control measures are developed and implemented.

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 Overzichtstekening Vion Enschede 2023-02-20 and "bezoekersfolder":

Production risk zones (based on BRCGS Annex 2):

- Open product areas: low risk
- Enclosed product areas: warehouses and storerooms
- Non-product areas: canteens, laundries, offices nonfood opslag

Contractors and visitors, including drivers are informed of the requirements for the areas they are visiting through hygiene rules, in a folder with Hygiene and safety rules and zoning incl. personal protection to wear in which area. Personnel flows, material flows, services and equipment are placed such as to minimise the risk of product contamination. No high risk, high care or ambient high care production.

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:

Folder "welkom bij Vion Enschede" / Overzichtstekening Vion Enschede



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

Building materials were in good condition. Smooth cement floors, walls, and ceilings from metal cladding.

Condition of building was acceptable. No deteriorated doors or gaps evident. No suspended ceilings. Drainage, where provided, designed and maintained to minimise risk of product contamination and not compromise product safety. Machinery piping goes directly to the drains. ()

There are elevated walkways, access steps or mezzanine floors that are adjacent or above open product, but good control was seen. Ventilation controls in place to ensure good air flow.

No windows could be opened in the processing areas, glass is protected

Sufficient lightning available, a project is running to optimize this even more.

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

The washing of equipment is done separated from production. Plastic strip curtains present, clean and maintained.

4.5 Utilities – water, ice, air and other gases

Water is used as: ingredient for the brine and for cleaning purposes.

Source(s) of water supply:

- Municipal/city (cleaning, handwashing)
- In-house treated (only magnet softened)
- Storage or holding tanks (water used for cleaning purposes only, Temp T min 60°C) this water is warmed up by rest heat generated by cooling equipment

Only potable water is used.

Microbiological or chemical testing is undertaken: 3x / year. 1 x / year an analysis report is downloaded from (water supplier).

Water testing is completed via compliance checks and microbiology via an accredited external laboratory.

A water system distribution schematic diagram is available (2009)

Sampling points include: sampling points are changing, but include tumbling (brine) and hand washing points.

Gas used in packaging: **No**

Compressed air used: **Yes**

Purpose of compressed air use: air pistol (product contact), control of machines and equipment and packing machines ()

In direct product contact: **Yes**

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

Checks are done on filter replacement as part of the preventive maintenance program. Filter air pistol is from , specification seen. Last filter change 14-11-2024 by .



No steam or other gases are in contact with products.

The following evidence was reviewed:

Lab report air from air pistol (product contact) 27-01-2025, yeasts/moulds, TVC, Entero's: no issues found

4.6 Equipment

Key production and product-handling equipment include: **maintenance recorded and monitored with help of** **Some sample taken, equipment was included and maintained. Most is maintained by own engineers.**

Equipment is suitable and designed for the intended purpose; mostly stainless-steel construction. Conveyor belts are food grade

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.

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 when it stays in the production area.

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.

MINOR The commissioning procedure was used for a new saw 14/4/2024, but the form was only filled by TD and did not pass the HACCP team (as described in the form).

The following evidence was reviewed:

DoC conveyor belt 02-01-2019

DoC 19-03-2024

4.7 Maintenance

Preventive maintenance

Maintenance management system:

Frequency of main checks: depends on type of maintenance and equipment, based on risks/usage and status of equipment.

Notable equipment include: cooling equipment last check was performed 2024-03-01

Preventative maintenance covers all plant, processing equipment and mobile equipment.

Contractor services are used for: , cooling equipment / evaporators 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:

- Cooling maintenance Jan 2025
- Metal detector 26-07-2024
- X-ray () fat % 25-02-2025



Inspection of equipment condition

Inspections for damage and wear are completed for: conveyor belt condition and other equipment on daily basis, is part of SSOP. Maintenance engineer is "walking" his round in the morning before startup, to see and hear if all equipment is running ok. Daily meeting at 9:00h.

Temporary maintenance was not detected.

Specific attention is given to energy savings such as heat recovery and reuse, water saving, reduction of gas and electricity consumption.

Temporary maintenance was not detected. In the daily SSOP a can be placed.

Handover

Suitable handover processes were in place after maintenance work to eliminate foreign matter risks generated signed off by technician, responsible engineer, foreman, production manager on F-ENS-NL-10028 V3 03-09-2024 "Onderhoud tijdens werkzaamheden". Acceptance of line start up signed off by line manager on SSOP form. Seen F-ENS-NL-10028 and SSOP forms of 25-03-2025, 12-03-2025 and 30-01-2025.

Lubricants

Range of food grade lubricants used:

MSDS with compliance to NSF H1 and Allergen Declaration seen.

Overall cleanliness engineering workshop

The workshop was well maintained, not directly connected with the production areas. Entry via "regular entry with food brushes and hand wash equipment. There is also a dedicated rest room, changing room and wand wash present.

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 home laundered to a defined process and brought to site in a separate bag. Captive site shoes are stored in the work-wear locker when not in use.

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

Two rest room areas for food storage and eating; catering facility in place. Fresh meals are cooked on daily basis. No (white) working jackets are allowed to prevent contamination risks. Good controlled



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: **document Diversy portal**

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: seen and spray 10-09-2021

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.

Knife check performed by operation management, also included in SSOP

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

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

4.9.3 Glass, brittle plastic, ceramics and similar materials

Monitoring of glass/brittle, plastic and ceramic items is done through glass inspections as part of the monthly hygiene audits.

Records were seen for: 26-04-2024, 13-06-2024, 13-09-2024, 10-12-2024

Besides these quarterly audits, inventory is checked daily (SSOP) and extra checks are performed by QC.

Last round performed and recorded on record: see above

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.

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 allowed (and present) in packing areas, only at the site of enclosed products and not near open product areas. Wooden pallets used were observed to be in good condition.
Some packaging may be delivered on wooden pallets but re packed so no wooden pallet is used in the near of open product.



4.9.6 Other physical contaminants

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

De boxing and debagging procedures include controls for physical contamination. When packing material is brought in, the to use amount is temporary stored in yellow crates, to avoid contamination risk by carton/ other packing material at the packing line (in near of open products).

Management of portable handheld equipment:

Metal detectable pens are in use mobile phones only by management used. Testing equipment is situated in a separate area away from production of open retail products All checked on daily basis by SSOP rounds and extra rounds by QC

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

MINOR: In the warehouse of packaging materials crates were seen with bleu foil inside, but not covered. Also 1 stack of carton boxes was seen with green foil inside. These boxes were outside dirty and 1 box was not covered well.

4.10 Foreign-body detection and removal equipment

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

Metal detection (products) and X-ray (to determine fat%) applied. Also visual inspection is applicable, as employees are trained to detect FB's such as small pieces of bones /tendons and e.g. plastic pieces. When foreign materials found these are collected and evaluated.
Testing metal detection and X-ray detection using methods and samples compliant with commercial specification as well as the sensitivity of control measures is appropriate as determined through validation study.

4.10.2 Filters and sieves

No filters or sieves used.



4.10.3 Metal detectors and X-ray equipment

Detection equipment (metal detection) is installed as result of the risk analysis and is controlled as CP, recorded on F-ENS-NL-10023 in cutting department and on F-ENS-NL-10036 in vacuum (skin) pack department for retail. Based upon risk analysis metal detector devices are placed in the cutting department, also in the sorting and labelling department. After these departments, meat can be sliced and packed, and there are also two metal detector devices in the packing department. The x ray device is behind the detector in the cutting department but for fat% measurement. No removal or detection of foreign bodies with the Xray.

Metal detection is arranged as a system with an alarm and a belt stop at the production lines and/ or rejection system. The sensitivity of control measures is appropriate as determined through validation study. Tests are done with 3 types testing rods in the cutting department: Fe 10,0 mm; Non FE 7,1 mm; RVS 316 8,7 mm, and in the packing department: Fe 4,0 mm; Non FE 4,0 mm; RVS 316 4,0 mm. The testing procedure is found to be suitable. No history of failed (metal) tests recorded.

Correct operation was observed in line with the work instruction. Corrective actions are clearly defined in the CP control plan. Data is maintained in documentation. The sensibility of the detector is justified. An automatic belt stop and red light system is in place

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

Monitoring frequency metal detection: at the beginning/end of the run, changeover of products and every 2 hours.

In case of detection of foreign body contamination, the material is analysed by QA/QC

Date of last record of detection: **24/03/2025** (during the tour onsite, the detector was giving an alarm. The procedure was followed well). **No** foreign bodies detected recently.

Metal detection (CP) was tested during this audit, correct performance was seen by trained employees.

4.10.4 Magnets

Magnets are not used in the processes.

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: **P-ENS-NL-10031 (excell)**



Periodic cleaning activities "diepte reiniging" are included and managed by QA and main contact .
Dedicated contact person of , good contact and regular meetings, this contact is working for 25 years on this location.

1x week Acidic cleaning as scheduled in the "werkschema"

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.

Cleaning is monitored through: daily start up check by Pre- SSOPS per production/ area.

Environmental verification is done, see 4.11.8. Results are shared with departments and management.

Limits of acceptable and unacceptable cleaning performance is defined for food contact surfaces and processing equipment: In general good performances were seen in case agar is 3 or 4, (TOO high amount of TPC) a resampling is performed.

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.

The following evidence was reviewed:

- results cleaning chemical residue control e.g. 22-01-2025 and 04-03-2025
- Examples records Pre- SSOPS records verified for Jan-Feb-March YTD Pre-SSOP's are verified by QC .

4.11.7 Cleaning in place (CIP)

CIP is **not** applicable.

4.11.8 Environmental monitoring

The environmental monitoring programme is detailed in: micro planning, F-ENS-NL-10086

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

Environmental verification

- Swabs retail pack area 12 x year Listeria mono.10 samples
- Swabs deboning 12 x year Listeria mono. 5 samples
- Agar TPC verification cleaning 1 x 2 weeks retail area and the other week deboning, 20 samples a week (crates included in the sampling schedule)
- Water samples 3 x year: sampling plan random incl. tumbling (preparing pekel), 1 x year analysis
- Air samples 4 x year 6 samples (TVC, Entero's, yeasts/moulds)

Comment on the results of environmental monitoring programme:

Agar results seen for 2025 and trend. One elevated count due to bad cleaning equipment in February 2025. After repair agar results were good. Close and direct communication with representative employee of on site (good and direct communication, short lines).

Also by what's app: photos of situations which are not good cleaned or when agar is too high, direct communication and feedback was seen.



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:

Lab report air from air pistol (product contact) 27-01-2025, yeasts/moulds, TVC, Entero's: no issues noted
Lab report water for brine 27-01-2025, no issues noted.

4.12 Waste and waste disposal

Waste is categorized in: **Cat 1 & bones, carton and plastic and mixed waste (canteen/ offices)**
All waste containers were identified with contents. Cat 1 specific in grey containers or with clear identification CAT 1.

Bone collection is situated indoor in special area, this way no birds nuisance.

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.

4.13 Management of surplus food and products for animal feed

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.

Materials transferred to the animal feed chain: No

4.14 Pest management

Pest control is contracted to
The scope is detailed as: rats, mice, cockroaches, flies and visual inspection point

No internal pest controller applicable. If yes, detail evidence of competence. If no, remove this sentence.

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

Routine visits per year: 8x year

- Content of routine inspection: 8x rodent inspection visit, 4x flies, 1x year lamp change
- In-depth inspections performed: 1x year PRI performed 18/11/2024
- Sampled regular visit reports 19/3/2024

Frequency is suitable.

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

of Vion has been trained also.
dashboard, detailed information, a few recent open action points were seen.



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, temperature storage of FP is <2°C. This is not required for ambient stable raw materials and packing materials incl. clean empty crates.

No allergens on site

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 the ERP system managed. FIFO usage when possible, but as the shelf life is short and most products are produced based on client orders, FIFO or FEFO is not always applicable.

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.

No outside storage.

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: **(storage); e.g. distrifresh and (transport)**

Temperature checks and hygiene monitoring controls are in place for: unloading raw materials and loading finished product (identified CCP, see chapter 2), all recorded per batch.

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

The following evidence was reviewed: Records of evidence were reviewed during the factory inspection during these audit days and and through the auditor vertical audit.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.10.2	No filters and sieves applied
4.10.4	No magnets applied to control / prevent product contamination. Method not suitable for this sector.



4.10.5	No optical sorting
4.10.6	No packaging in glass jars, cans and other rigid containers.
4.10.7	No other foreign-body detection and removal equipment
4.11.7	No CIP cleaning applied. Brine storage tanks are cleaned using manual flushing programs.
4.13.x	No customer-branded surplus food.
4.13.3	No surplus food and products for animal feed
4.15.5	No outside storage

5. Product control

5.1 Product design/development

The product design/development procedures are clearly detailed in: **P-ENS-NL-10070xx 2023-02-06**

No specific product development, mostly minor product adjustments of products/ labels/pack performance, portion size or brine, all on request of clients.

There is a process of defining the product brief and agreeing the brief with external customers. HACCP review and sign off, sample agreement, trial review and customer sign off.
The sign off within the company is spread between PD of location Groenlo and Enschede. But since last audit, there are no new retail products developed in Enschede (most production for retail is now done in Groenlo)

HACCP team involvement and agreement on customer requirements:
Communication with PD based at Vion Groenlo retail is performed by QC (HACCP team member)
HACCP reviews are held annually and include HACCP assessments made by the HACCP team leader
The HACCP team also consider any amendments to standard processes.

The QC 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 QC/ Sales contact and Development Manager and customers, this is all customized (depending on type of development).

Shelf-life validation:
Shelf-life verification and evaluation details: Records of evidence were reviewed from the auditor's chosen product of the vertical audit.



5.2 Product labelling

The following documentation describes the process: P-Ens-NL-10039 2020-01-03 Labelling procedure

Day batches are created for meat preparations and minced meat products. All other meat which is only portioned and packed, the original batches stay on the final packing incl. the shelf life is depending on the original day of cutting (deboning). However the label says "pack date which is eventually the deboning date. But this method of shelf life date defining is all laid down in specification system and interpretation. See also minor NC on 3.3.2

Legislation in countries of sale:

Labelling product for EU-market following EU-legislation and any additional customer requirement. No markets outside EU for this kind of products produced at this Vion site. In storage no none-labelled goods allowed.

Suitable cooking instructions are limited applicable; only for retail-packing. Seen in the right way.

Seen several right labelling of B2B packing.

Artwork approval & accuracy of information:

The artwork approval and legality of customers' labels is the responsibility of the customer – they are supplied to site by the customer. QA / QC will still review the label contents.

No allergens on site used.

Cooking instruction validation procedures: Cooking instructions are not applicable, only B2B raw beef meat.

5.3 Management of allergens

No allergens handled onsite, this is also communicated with product development and sales in case new marinades are introduced, to look for ingredients without allergens. Risk of allergens is part of the risk analysis. Measurements are arranged in hygiene rules and visitor rules e.g. eating/ drinking without company clothes only in the canteen, and handwashing before entry. Cross contamination with possible allergens is defined as low risk.

5.4 Product authenticity, claims and chain of custody

Product authenticity is detailed in: Riscicomatrix Food Fraud last adjustment P-ENS-N-10057 2024-06-3 and P-ENS-NL-10041 V7 23-11-2024

Knowledge of the Team

The food defence and fraud team are also the site HACCP team. The team leader has completed relevant training (22/4/2024). 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.

Examples raw materials, risk level and mitigating controls:

Significant vulnerabilities have been determined. Examples include:
Bio material <50 low risk, .No high risk identified (> 100)



Appropriate mitigation measures are developed and implemented, which include:
Herb /spices, trusted GFSI certified suppliers: risk <50
External storage risk GFSI certified <50

Review of the vulnerability plan is programmed to be reviewed annually, included in yearly MR.
Date of the last review is done in the Management Review: 03/01/2025

Claims:

Simmentaler rind: (specific race of beef) site is FS PIA certified
Organic: Annual Skat audit (BIO) took place, no remarks.

5.5 Product packaging

The packaging materials for finished products are: **plastic bags and foil, for vacuum pack, trays (plastic incl. top foil, in liners in crates)**

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

The following evidence was reviewed: Specification and declarations of conformity seen for the vac, foil (trace test, see chapter 3); tech spec and DOC available and up to date

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

The testing programme is outlined in: **P-ENS-NL-10067** based on P-Food 10009 created and maintained by HQ.

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

No laboratory present on the site. External analysis via **ISO 17025 accredited.** ().

Product monitoring based on Regulation 2073/2005/EU laid down in procedure P-FOOD-10008. Both food safety criteria and process hygiene criteria set by legislation are translated to the monitoring program as reviewed based on sampling.

Listeria positive swabs found during monitoring of production areas (internal requirement)..
Comprehensive action plan on cleaning is observed.

Types of tests and frequency:

Daily Salmonella snippers pool 60 sample
Weekly trimmings 80/10 80 list STEC, TPC / Enteros
Weekly parts (veredelde delen)TPC and Listeria
TPC, E. coli, Salm, for meat preparations (for two more weeks)
Shelf life per product type 1 x year

Environmental: see 4.11

Results are shared with departments and management, also included in MR. Out of specification laboratory results follow a defined escalation route managed by QA / QC.

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



(e.g. Seen that if the trend for a new supplier of carcasses is continuous (first 5 deliveries) too high, the supplier is not accepted, seen for supplier S. in Q1 2025)

The following evidence was reviewed:

- Trend analysis dressed cuts beef TVC and Entero's 2025
- Trend analysis trimmings beef TVC and Entero's 2025
- Trend analysis meat preparation TVC and Entero's 2025 (these products will be not produced anymore within a few weeks)
- Trend analysis carcasses. Every 10th truck is sampled. New suppliers sampling of first 5 trucks, if okay than approved supplier. Quarterly reviewed by QA manager.
- Shelflife test of final product as part of the vertical trace test (see 3.9 for details).
- Quarterly QA review micro results

5.7 Product release

No specific pos. release. For selected clients there is a positive release request on microbiological values (Listeria absent, E. coli O157 absent) on raw materials, selected and tested before deboning. No such clients since last years.

5.8 Pet food and animal feed

No pet food produced.

5.9 Animal primary conversion

No animal primary conversion.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
5.6.5	No laboratory on site.
5.8	No pet food
5.9	No Animal primary conversion



6. Process control

6.1 Control of operations

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

The following evidence was reviewed:

During the onsite audit evaluated:

- Unloading and reception of (hanged) parts of carcasses, incl. CCP temperature check and CP pH check (if needed)
- Deboning of meat
- Cutting of meat
- Slicing / portioning of meat
- Determine fat% by the eagle (x-ray)
- Deboning of beef, metal detection, vacuum packing of beef, B to B labelled and packed in boxes
- Vacuum packing of minced meat, labelling and metal detection
- Managing of packing material
- Managing of Cat 3 material
- Managing of clean arrived crates and used dirty crates
- Marinating by tumbling meat
- Storage of chilled meat (packed in crates, foil, boxes)
- Mincing of meat
- Slicing and portioning of meat
- Label check with specifications and client requests
- UBD defining/ label print check
- E-weight control checks
- CP metal detection check on retail products
- Storage of FP at $\leq 2^{\circ}\text{C}$
- PRE-ssop and SSOP checks
- Control checks before loading on product temperature (CCP) and trucks order ok
- Chemical storage (for cleaning purposes)
- Maintenance of during processing

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, set up approval (release) and packing.

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

No products outside of the scope are handled.

The following evidence was reviewed:

Process control was evaluated in all process steps including packing and change-over; changeover of Batch delivered carcasses to be deboned was evaluated and also retail packing and labeling

6.2 Labelling and pack control

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.

Verification of labels is 4 eye principle, manual check which is recorded.
There is no online verification equipment for the correct label.

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

The following evidence was reviewed:

- Seen label check kogelbief during site tour
- If a change over is done in the cutting department, a big empty space on the line is made between batches and a coloured piece of hard plastic is placed between the batches as marking. This was noticed during the tour.
- At the time of the audit there was no change over on the lines so this could not be witnessed but the process was discussed with the labelling supervisor during site tour.

6.3 Quantity, weight, volume and number control

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

E-weighing is done at the packing department and is described in F-ENS-NL-10001. Most goods in packing area are on e-weight. Also some type of meat can be packed with the nominal weight on the label.

No bulk quantities are sold.

The following evidence was reviewed:

calibration of scales, checks on amounts and weight during tour/ trace test.
Check weigher online is used for real product weight, verification start during packing and at the end, ok
E-weight control was checked during site tour.

E-weighing Licence is in use since 2011-04-27 of NMI.

6.4 Calibration and control of measuring and monitoring devices

Calibration procedures ensure relevant equipment is identified and regularly calibrated on calibration form F-ENS-NL-10020.

There is a monitoring and registration system for the temperature in cooling / freezing cells and production areas. Calibration of the temperature equipment is outsourced.

Temperature devices (hand thermometers CCP and CP related) and scales (legal issue) were sampled and found calibrated 6 times a year. Calibration of the chemical dosing systems used for cleaning equipment is managed by the cleaning company CSU.

There is a clear schedule of calibration for all equipment. The records of calibration were checked for:

- pH meter incoming goods (1x wk)
- Metal detector 25-07-2024
- thermometers reception and dispatch (internal every 2 months) 16-10-2024
- and 16-12-2024, “mother” thermometer (sn:),
- floor scales dispatch (sn: and) 30-11-2024.
- The inline X ray (fat measurement) is calibrated daily by TD and external yearly 25/2/25



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 verification equipment used.

7. Personnel

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

The HR department has its own Quality Manual, also centrally for VION locations. Training is a relevant part of the Manual. For temporary personnel, for flex, for key personnel. Records are maintained in personnel files and in an excel-sheet (seen overview 2025 ytd)
HR manager is "shared" with Vion Tilburg. HR officer is dedicated for this site.

There is evidence of introduction training for new starters and refreshment training of employees. Personnel hired via an agency are trained on hygiene policies and safety policies as well. HQ is responsible for contracts with agencies. Competence training had taken place for the staff sampled (food safety and quality).

Day 0, the induction film and training is provided in the language of the employee. A good overview of given training per person is in place. Afterwards, all employees do have to pass a test with a minimum result of 10 points. This HACCP training and test is every year repeated. Seen personal training records for several key personnel on metal detection, HACCP test, instruction " ", CCP temperature, training SSOP. There are two xlsx-files to demonstrate education and training on competencies and on training: "Invoeren opleidingsoverzicht" and "Personeelsmatrix".

Clear competency records and refresher training records were seen. End-of-year meetings are scheduled with employees and seen for EP on 28-03-2025.

The following evidence was reviewed:

- hygiene + test 07-02-2025
- metal detection 28-06-2023
- hygiene + test 21-12-2024
- metal detection 28-06-2023
- metal detection 21-01-2025
- (maintenance) hygiene 14-01-2025 and HACCP for managers 04-09-2023
- (agency) hygiene + test 17-03-2025
- CCP temperature reception 13-01-2025
- CCP temperature dispatch 09-01-2025

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

LRQA; 1 Trinity Park Bickenhill Lane Birmingham UK (issue 2 February 2024 template report)

Page 44 of 50

CB Report No. RQA1032600 - 6774150

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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 and a folder is given with the Hygiene rules

Adequate facilities in place. Only to enter with a batch Handwashing takes place at entry of the production area and warehouse area. No issues observed regarding handwashing stations. Staff hygiene 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:

In practice seen every day on site during the audit, good control.

7.3 Medical screening

Employees, visitors and contractors have to complete a health questionnaire prior to entry to any production areas. Procedures are established for personnel to notify management of infectious conditions they may be suffering from or been in contact with.

The site makes all visitors, new starters and contractors aware of the need to report infectious disease during the intake by the porter before entering the site. The health and safety service physician signs declarations for each personnel under contract of VION Enschede. Persons who are suffering from relevant infectious diseases are not allowed to enter the production facilities.

Personnel should report the use of medicine to their direct leader according to the house rules in the contract. Dutch law ensures basic income in case of absence due to illness.

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. Gloves used in production processes which is defined clearly where to use. Disposable hair/beard nets and/or Astro caps available for employees and visitors.

Safety shoes/boots also provided. For visitor's coats, shoes/boots and hairnets are provided.

The laundering of protective clothing is outsourced to a contracted and specialised laundry .

The wearing of sleeves, aprons, gloves and work coats isn't allowed during eating and smoking.

In cold areas since a few weeks, balaclavas were provided and worn.

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. Free provided every day. When needed sleeves or skirts

MINOR Yellow crates are in use to place food contact material in (like dry ice / a spoon / packaging materials). But in 2 yellow crates also a face mask was seen, 1 was missing a small part of plastic. This facemask is not a food contact material.



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



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

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



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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
9.4 Product inspection and laboratory testing
Not applicable
9.5 Product legality
Not applicable
9.6 Traceability
Not applicable

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



Click or tap here to enter text.

11.3 Raw material receipt and inspection

Click or tap here to enter text.

11.4 Management of cross-contamination between species

Click or tap here to enter text.

11.5 Product testing

Click or tap here to enter text.

11.6 Training

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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)

Click or tap here to enter text.

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

Click or tap here to enter text.

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

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

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

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14.1 Additional Specifier Requirements
14.1 Traceability
Click or tap here to enter text.
14.2 Environmental Monitoring
Click or tap here to enter text.
14.3 Product inspection and laboratory testing
Click or tap here to enter text.
14.4 Protective clothing: Employees or visitors to production areas
Click or tap here to enter text.

