

SQFI Corrective Action Report

Company Information					
Company Name	Adams Vegetable Oils, Inc.			Company #	6348
Address 1	7301 John Galt Way				
Address 2					
City	Arbuckle	State	California	Zip Code	95912
Country	United States	Phone #	530-668-2062		
Primary Contact	Mary Khlok	Email	mkhlok@adamsgroup.com		

Audit Information			
Certification Type		Level	
Start Date	08-DEC-2020	End Date	09-DEC-2020
Auditor First Name	Klodian Dauti		

Minor Non-Conformities				0 in Pending Status	
2549194-1		Due Date	08/Jan/2021	Status	APPROVED
Clause:	M2 (MANU) - 2.4.3.7 :The food safety team shall develop and document a flow diagram covering the scope of each food safety plan. The flow diagram shall include every step in the process, all raw material, packaging material, service inputs (e.g. water, steam, gasses as appropriate), scheduled process delays, and all process outputs including waste and rework. Each flow diagram shall be confirmed by the food safety team during all stages and hours of operation.				
Evidence:	2.4.3.7 Minor: The food safety plan 02.054.14 "Packing Plant", is missing the flow diagram the bottle feeder, the Capper with caps feeder, the compressed air in the cap feeder and the bottle reprocess in case of a missing cap or faulty cap. Also, there is no hazard analysis performed for this processing steps.				
Responsible Person:	Mary Khlok				
Root Cause:	The prior version of the HARPC Plan included sealing and capping of bottles in one section which was not properly labeled on the flow chart. The risk of compressed air was missed by the HARPC team during this year's review and was also not noted in prior audits.				
Corrective Action:	The HARPC Plan was updated to include the "Cap" step and includes the risk assessment for the compressed air. The flow chart was also updated to properly reflect the flow.				
Containment Plan:					
Preventative Action:	Future HARPC and flow chart reviews will take into account compressed air if at steps where there is finished product or packaging contact.				
Reviewer:	Rich Simmons				
Reviewer Comments:	Approved based on updated FC and HA attached. BH				
2549194-2		Due Date	08/Jan/2021	Status	APPROVED
Clause:	M2 (MANU) - 2.5.4.2 :On-site personnel that conduct environmental or product testing shall participate in an applicable proficiency testing program at least annually to ensure accuracy of results.				
Evidence:	2.5.4.2 Minor: The site has not performed a proficiency testing for their laboratory employees and other production team members that perform different control tests of in-process products and finished products.				
Responsible Person:	Mary Khlok				
Root Cause:	AOCS Lab Proficiency Program was not completed for 2020 and internal program wasn't created.				
Corrective Action:	AOCS Lab Proficiency Program samples were tested and submitted for Q1 2021. An internal Proficiency program (SOP 04.258) was developed for Lab and QC Technicians and operators who conduct in-process testing. In-house samples of refined and bleached (RB) and refined, bleached and deodorized (RBD) were tested. A new hire, who is still undergoing qualification, was the only person who was outside of the standard deviation.				
Containment Plan:					
Preventative Action:	The internal Proficiency program (SOP 04.258) will be conducted annually moving forward which will also include known samples from AOCS.				
Reviewer:	Rich Simmons				
Reviewer Comments:	Approved based on completed test results and updated procedure. BH				
2549194-3		Due Date	08/Jan/2021	Status	APPROVED
Clause:	M2 (MANU) - 2.5.5.3 :Regular inspections of the site and equipment shall be planned and carried out to verify Good Manufacturing Practices and building/equipment maintenance is compliant to the SQF Food Safety Code for Manufacturing. The site shall: i. Take				

	corrections or corrective and preventative action; and ii. Maintain records of inspections and any corrective action taken.
Evidence:	2.5.5.3 Minor: The site does not have documented corrective actions activities for deficiencies identified during the internal audits on the months of August, September and partially for the month of November 2020.
Responsible Person:	Mary Khlok
Root Cause:	Operations were not signing off on monthly task lists from Monthly facility inspections conducted by the Quality Department. Quality Department was not properly following up on completion of task lists.
Corrective Action:	October's monthly task list was appropriately signed off on.
Containment Plan:	
Preventative Action:	Plant Supervisors and Managers have been informed of the expectation to completed the task list generated from monthly audits and shall perform re-training on reoccurring findings. Quality Department shall email monthly report on status of each area's compliance.
Reviewer:	Rich Simmons
Reviewer Comments:	Approved based on audit documents and corrective actions attached. BH
2549194-4	Due Date 01/Feb/2021 Status INREVIEW
Clause:	M2 (MANU) - 2.6.2.1 :The responsibility and methods used to trace product shall be documented and implemented to ensure: i. Finished product is traceable to the customer (one up) and provides traceability through the process to the manufacturing supplier and date of receipt of raw materials, food contact packaging and materials and other inputs (one back); ii. Traceability is maintained where product is reworked; and iii. The effectiveness of the product trace system shall be reviewed at least annually as part of the product recall and withdrawal review (refer to 2.6.3.3).
Evidence:	2.6.2.1 Minor: 1. In the Oil Packing Plant were reviewed packing reports and was noticed that there was no lot number recorded for the caps and the bottles used during packing. This was confirmed also during communication with the Production Supervisor and the FS Manager. 2. Process aids lot numbers were not documented in the production records of RBD Exp Org Soybean oil, form#F02.023.00. The missing lot numbers information is for production days of 04/25/2020 and 07/17/2020.
Responsible Person:	Mary Khlok
Root Cause:	FIFO inventory system is used so product and packaging "consumed" for production reports use the first LOTs in inventory. All information is logged into the ERP system (NAV) and is not confirmed via hard copy production records.
Corrective Action:	We are trying to determine the best way to handle reporting of LOT information on production records. Based on purchasing, we would be able to trace back to possible LOTs used. Only one supplier is used of each type packaging and processing aids.
Containment Plan:	
Preventative Action:	Request for extension. Waiting to hear back from NSF.
Reviewer:	Rich Simmons
Reviewer Comments:	Extended to Feb 1/21. RS
2549194-5	Due Date 08/Jan/2021 Status APPROVED
Clause:	M2 (MANU) - 2.7.1.1 :The methods, responsibility and criteria for preventing food adulteration caused by a deliberate act of sabotage or terrorist-like incident shall be documented, implemented and maintained.
Evidence:	2.7.1.1 Minor: During the facility inspection was noticed that the site stores packaging materials in trailers and noticed that some of the trailers were not secure and did not have locks on.
Responsible Person:	Mary Khlok
Root Cause:	Packing Personnel were not provided training for trailer security.
Corrective Action:	Locks were purchased and installed on all trailers being used.

Containment Plan:				
Preventative Action:	Food Defense Program was updated to include trailer security to risk assessment for Raw Materials Receiving & Storage. Trailer Security Training was conducted and will be added to the Annual Food Defense Training for 2021. Trailers will be inspected during the monthly facility inspection to confirm compliance.			
Reviewer:	Rich Simmons			
Reviewer Comments:	Revised Food Defense pla, training record and photo of correction showing locks accepted. CAR closed. RS			
2549194-6	Due Date	08/Jan/2021	Status	APPROVED
Clause:	M11 - 11.2.12.2 :Identified pest activity shall not present a risk of contamination to food products, raw materials or packaging.			
Evidence:	11.2.12.2 Minor: In the Packaging Employees' break room, were noticed live spiders in different places such as windows, ceiling corners and different areas of the ceiling.			
Responsible Person:	Mary Khlok			
Root Cause:	Master Sanitation Schedule was not created for the Breakroom in the Packing Facility.			
Corrective Action:	Breakroom was cleaned and webbing cleared.			
Containment Plan:				
Preventative Action:	Master Sanitation Schedule was created for the breakroom at the Packing Facility, which was assigned to the sanitation department. Packing employees are required to clean up after themselves after use.			
Reviewer:	Rich Simmons			
Reviewer Comments:	Approved based on updated MSS and picture attached. BH			
2549194-7	Due Date	08/Jan/2021	Status	APPROVED
Clause:	M11 - 11.2.13.1 :The methods and responsibility for the cleaning of the food handling and processing equipment and environment, storage areas, staff amenities and toilet facilities shall be documented and implemented. Consideration shall be given to: i. What is to be cleaned; ii. How it is to be cleaned; iii. When it is to be cleaned; iv. Who is responsible for the cleaning; v. Methods used to confirm the correct concentrations of detergents and sanitizers, and vi. The responsibility and methods used to verify the effectiveness of the cleaning and sanitation program.			
Evidence:	11.2.13.1 Minor: In the Oil Packing Plant was noticed excessive spider cobwebs. Besides being on the corners of the ceiling, there were some areas where cobwebs were spreading out more than 6 feet on the surface of ceiling.			
Responsible Person:	Mary Khlok			
Root Cause:	Quarterly, Biannual and Annual Master Sanitation Schedule(MSS) was not created for the Packing Facility.			
Corrective Action:	Webbing was cleared on 12/9/2020 and documented on newly created MSS.			
Containment Plan:				
Preventative Action:	Quarterly, Biannual and Annual Master Sanitation Schedule (MSS) was created and shall be followed moving forward. Re-evaluation of frequency shall be conducted if webbing is noted during monthly facility inspections.			
Reviewer:	Rich Simmons			
Reviewer Comments:	Approved based on updated MSS and picture attached, BH			
2549194-8	Due Date	08/Jan/2021	Status	APPROVED
Clause:	M11 - 11.2.13.9 :Detergents and sanitizers that have been mixed for use shall be correctly mixed according to manufacturers' instructions, stored in containers that are suitable for use, and clearly identified. Mix concentrations shall be verified and records maintained.			

Evidence:	11.2.13.9 Minor: In the Oil Packing Plant, was noticed inside the "Cleaning Chemical" cabinet a bottle of liquid that was not identified.
Responsible Person:	Mary Khlok
Root Cause:	As part of the COVID-19 Sanitation activities, bleach solution (1 part bleach to 32 parts water- per Clorox mixing instructions) was used on high touch, non-food contact areas. The writing on the label was removed by the bleach solution.
Corrective Action:	All secondary bottles used were reviewed and new labels applied.
Containment Plan:	
Preventative Action:	Retraining of Packing personnel on Chemical Control, including the proper use, labeling and storage of chemicals. Monthly inspections will focus on inspection of secondary bottles for proper labels in Packing.
Reviewer:	Rich Simmons
Reviewer Comments:	Approved based on training and pictures attached. BH
2549194-9	Due Date 01/Mar/2021 Status APPROVED
Clause:	M11 - 11.5.5.2 :Compressed air systems, and systems used to store or dispense other gases used in the manufacturing process that come into contact with food or food contact surfaces shall be maintained and regularly monitored for quality and applicable food safety hazards.
Evidence:	11.5.5.2 Minor: The site uses compressed air in the oil packing line and no testing for quality and applicable food safety hazards have been conducted for the months of December 2019 through December 9, 2020.
Responsible Person:	Mary Khlok
Root Cause:	Testing is not currently being done on the compressed air line used to dispense bottling line caps.
Corrective Action:	The a new 0.01 micron filter was installed on the compressed air line. Risk assessment performed to determine the efficacy of the 0.01 micron filter controlling hazards (based on data from Adams Grain Company with the same filter installed). This has been added to the PM schedule to be replaced annually.
Containment Plan:	
Preventative Action:	Extension Requested.
Reviewer:	Rich Simmons
Reviewer Comments:	The code requires testing of compressed air systems, new filter is not sufficient. Please submit a copy of the completed testing a training record of personnel responsible for collecting the test samples and an updated policy to address the testing requirements. BH Extension approved to Mar 1/21. To be checked next re-certification. CAR closed.
2549194-10	Due Date 08/Jan/2021 Status APPROVED
Clause:	M11 - 11.6.4.5 :Hazardous chemical and toxic substance storage facilities shall: i. Be compliant with national and local legislation and designed such that there is no cross-contamination between chemicals; ii. Be adequately ventilated; iii. Be provided with appropriate signage indicating the area is a hazardous storage area; iv. Be secure and lockable to restrict access only to those personnel with formal training in the handling and use of hazardous chemicals and toxic substances; v. Have instructions on the safe handling of hazardous chemicals and toxic substances readily accessible to staff; vi. Be equipped with a detailed and up-to-date inventory of all chemicals contained in the storage facility; vii. Have suitable first aid equipment and protective clothing available close to the storage area; viii. In the event of a hazardous spill, be designed such that spillage and drainage from the area is contained; and ix. Be equipped with spillage kits and cleaning equipment.
Evidence:	11.6.4.5 Minor: During the audit were reviewed 6 chemicals that were stored on site, and noticed that 3 out of 6 chemicals were not in the register F02.018.13 "AVO Approved Chemical List" dated 12/08/2020. The chemicals were Zep-Brake Part Cleaner, DeWalt Pneumatic Fastening Lubricant and Rust-Oleum Plastic.

Responsible Person:	Mary Khlok
Root Cause:	Unused chemicals (Zep-Brake Part Cleaner, DeWalt Pneumatic Fastening Lubricant) were not properly removed from the Packing facility and Rust-Oleum Plastic was not properly placed on the Approved Chemical List during the review of the chemical cabinets as part of our Internal audit.
Corrective Action:	Zep-Brake Part Cleaner and DeWalt Pneumatic Fastening Lubricant were removed from the cabinet in the Packing facility. Rust Oleum Plastic (actual name per the container is Specialty Plastic Spray (Rust-Oleum)) was added to the Approved Chemical List.
Containment Plan:	
Preventative Action:	Quarterly inspection of chemical cabinets and review of Approved Chemical list by maintenance/QC. Monthly facility inspections will do spot verification of different cabinets and compare to the Approved Chemical List. Results will be kept with the Monthly audit documents.
Reviewer:	Rich Simmons
Reviewer Comments:	Approved base on updated Approved Chemical Register. BH