

# The Pickapeppa Company Limited

## Food Safety Management System

### Internal Audit Report

Audit Dates: October 15, 2020 - December 1, 2020

Audit Report: Food Safety Management System Internal Audit Company Limited	Audit: Report No. 289
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Audited Facility: Company Limited

Address:

Audit Team: Khamisha Williams, Tiffani Stewart, Najorie Jennings-Dawkins,  
Oshayne Malcolm, Clayton Berry

Date Of Audit: October 15, 2020 - December 1, 2020

Scope Of Audit: All processes, documentation and activities at The Pickapeppa  
Company Limited to ensure conformance to the audit criteria.

Contact Person:

### Summary of Non-Conformities Identified in The Internal Audit Process

Process #	Process Names	Non Confor mances
1	Construction and Layout of Buildings, Premises and Workspace	3
2	Customer Complaint	1
3	Equipment Suitability, Cleaning and Maintenance	1
4	Recall/Withdrawal	1
5	Traceability/Mock Recall	1
6	Training	1
7	Utilities - air, water, energy	1
8	Verification and Validation	1
	TOTAL	10

### Summary of Conformities Identified in The Internal Audit Process

Process #	Process Names	Conformanc es
1	Barrel Management	6
2	Chemical Control	4
3	Construction and Layout of Buildings, Premises and Workspace	5
4	Continual Improvement	5
5	Control of Sharp Object	4
6	Correction and Corrective Action	4
7	Customer Complaint	2
8	Destruction of Trademark Items	4
9	Equipment Suitability, Cleaning and Maintenance	7
10	Extraction of Pickapeppa Sauce	4
11	Food Defense, Biovigilance and Bioterrorism	8
12	FSSC Additional Requirements (In conjunction with PreRequisite Programs)	1
13	FSSC Additional Requirements (Logo Use)	2
14	FSSC Additional Requirements (TACCP & VACCP)	6
15	HACCP Programme	14
16	Internal and External Issues	2
17	Internal Audit	4
18	Lab Analysis	8

19	Management of Allergens	4
20	Management of Purchased/Supplied Materials and Services	3
21	Management Responsibility	3
22	Measures for Prevention of Cross Contamination	6
23	Milling of Dry Ingredients	3
24	Mixing of Pickapeppa Sauce and Tomato Mixture	5
25	Monitoring	3
26	Needs and Expectations	3
27	Non-conforming Raw Materials and Finished Products	6
28	Personnel Hygiene and Employee Facilities	5
29	Preserved Peppers	7
30	Product Information/Consumer Awareness	4
31	Recall/Withdrawal	4
32	Receival and Verification of Raw and Packaging Materials	10
33	Risks and Opportunities	1
34	Shipping	6
35	Traceability/Mock Recall	7
36	Training	5
37	Utilities - air, water, energy	6
38	Verification and Validation	5
39	Visitor Control	7
40	Warehousing	8
41	Waste Disposal	6
	TOTAL	207

### Summary of Opportunities for Improvement Identified in The Internal Audit Process

Process #	Process Names	Conformances
1	Construction and Layout of Buildings, Premises and Workspace	1
2	Control of Sharp Object	1
3	Correction and Corrective Action	1
4	Customer Complaint	2
5	FSSC Additional Requirements (TACCP & VACCP)	2
6	Management of Purchased/Supplied Materials and Services	2
7	Management Responsibility	1
8	Personnel Hygiene and Employee Facilities	3
9	Product Information/Consumer Awareness	1
10	Risks and Opportunities	3
11	Utilities - air, water, energy	1
12	Warehousing	2
13	Waste Disposal	1
	TOTAL	21

## AUDIT BRIEF

Audit Ref	1602689123	Audit of:	Food Safety
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			Management System
Date Scheduled	October 15, 2020 - December 1, 2020	Locations	The Pickapeppa Company Limited
Audit Team: Khamisha Williams, Tiffani Stewart, Najorie Jennings- Dawkins, Oshayne Malcolm, Clayton Berry  Audit Team Leader: Khamisha Williams	Process Owner(s):	Khamisha Williams-Quality Assurance Manager Tiffani Stewart-Product Development Specialist Najorie Jennings-Dawkins- Production Manager Dianna Tomlinson-General Manager	
Purpose:  To ensure that the Food Safety Management System continues to conform to the Company,s, FSSC, regulatory and customer requirements where applicable. The audit will seek to determine if there are any opportunities of improvement.			
Background and Context:  The Pickapeppa Company Limited is seeking FSSC 22000 recertification. It is a sauce company with local and export customers and is seeking to enhance the safety of its products through the FSSC 22000.			
Scope:  All processes, documentation and activities at The Pickapeppa Company Limited to ensure conformance to the audit criteria.			
Criteria:  ISO 22000:2018, ISO 22002-1:2009, Pickapeppa Food Safety Management System, Pickapeppa Quality Control Manual			
Objectives:  To assess the Food Safety Management System for conformance to the audit criteria and identify any opportunity for improvement.			

## Company Limited Audit Plan

Opening Meeting:

Who: Khamisha Williams, Tiffani Stewart, Najorie Jennings-Dawkins, Oshayne Malcolm, Clayton Berry, Dianna Tomlinson, Everton Powell, Georgette Clarke

When: Friday, `October` `30`, 2020

Where: Board Room

What to cover: Audit Plan

The Audit  
Plan

Closing Meeting:

Who: Khamisha Williams, Tiffani Stewart, Najorie Jennings-Dawkins, Oshayne Malcolm, Clayton Berry, Dianna Tomlinson, Everton Powell, Georgette Clarke

When: To be determined

Where: Board Room

## AUDIT SCHEDULE

Processes	Auditor	Auditee	Date/Time
Food Defense,	Khamisha Williams	Dianna Tomlinson	October 30, 2020

Biovigilance and Bioterrorism			9:46 AM - FOctober 30, 2020 11:46 AM
Chemical Control	Oshayne Malcolm	Tiffani Stewart	October 30, 2020 9:37 AM - FOctober 30, 2020 11:37 AM
Waste Disposal	Clayton Berry	Najorie Jennings-Dawkins	October 30, 2020 9:33 AM - FOctober 30, 2020 11:33 AM
Monitoring	Khamisha Williams	Dianna Tomlinson	October 30, 2020 10:54 AM - FOctober 30, 2020 1:54 PM
Shipping	Tiffani Stewart	Najorie Jennings-Dawkins	October 30, 2020 10:02 AM - FOctober 30, 2020 1:02 PM
Management of Allergens	Oshayne Malcolm	Tiffani Stewart	October 29, 2020 9:38 AM - FOctober 29, 2020 10:38 AM
Non-conforming Raw Materials and Finished Products	Tiffani Stewart	Najorie Jennings-Dawkins	October 29, 2020 9:03 AM - FOctober 29, 2020 11:03 AM
FSSC Additional Requirements (TACCP & VACCP)	Khamisha Williams	Tiffani Stewart	October 29, 2020 1:42 PM - FOctober 29, 2020 3:42 PM
Continual Improvement	Khamisha Williams	Dianna Tomlinson	October 28, 2020 9:39 AM - FOctober 28, 2020 10:39 AM
Preserved Peppers	Clayton Berry	Najorie Jennings-Dawkins	October 28, 2020 9:29 AM - FOctober 28, 2020 10:29 AM
HACCP Programme	Tiffani Stewart	Khamisha Williams	October 28, 2020 9:09 AM - FOctober 28, 2020 12:09 PM
Management Responsibility	Khamisha Williams	Khamisha Williams	October 28, 2020 1:40 PM - FOctober 28, 2020 2:40 PM
Barrel Management	Tiffani Stewart	Carl White	October 28, 2020 1:10 PM - FOctober 28, 2020 3:10 PM
Mixing of Pickapeppa Sauce and Tomato Mixture	Khamisha Williams	Najorie Jennings-Dawkins	October 27, 2020 9:44 AM - FOctober 27, 2020 10:44 AM
Internal Audit	Oshayne Malcolm	Khamisha Williams	October 27, 2020 9:35 AM - FOctober 27, 2020 11:35 AM

Product Information/Consumer Awareness	Najorie Jennings-Dawkins	Tiffani Stewart	October 27, 2020 9:25 AM - FOctober 27, 2020 11:25 AM
Extraction of Pickapeppa Sauce	Khamisha Williams	Najorie Jennings-Dawkins	October 27, 2020 10:45 AM - FOctober 27, 2020 11:45 AM
Correction and Corrective Action	Najorie Jennings-Dawkins	Dianna Tomlinson	October 26, 2020 1:28 PM - FOctober 26, 2020 3:28 PM
Risks and Opportunities	Najorie Jennings-Dawkins	Dianna Tomlinson	October 26, 2020 10:50 AM - FOctober 26, 2020 1:50 PM
Training	Clayton Berry	Dianna Tomlinson	October 23, 2020 9:29 AM - FOctober 23, 2020 11:29 AM
Management of Purchased/Supplied Materials and Services	Najorie Jennings-Dawkins	Dianna Tomlinson	October 23, 2020 9:26 AM - FOctober 23, 2020 11:26 AM
Equipment Suitability, Cleaning and Maintenance	Khamisha Williams	Najorie Jennings-Dawkins	October 23, 2020 1:47 PM - FOctober 23, 2020 3:47 PM
Construction and Layout of Buildings, Premises and Workspace	Najorie Jennings-Dawkins	Dianna Tomlinson	October 23, 2020 1:27 PM - FOctober 23, 2020 3:27 PM
Verification and Validation	Oshayne Malcolm	Khamisha Williams	October 22, 2020 9:45 AM - FOctober 22, 2020 11:45 AM
Control of Sharp Object	Najorie Jennings-Dawkins	Georgette Clarke	October 22, 2020 9:26 AM - FOctober 22, 2020 11:26 AM
Measures for Prevention of Cross Contamination	Clayton Berry	Khamisha Williams	October 21, 2020 9:32 AM - FOctober 21, 2020 11:32 AM
Customer Complaint	Najorie Jennings-Dawkins	Dianna Tomlinson	October 21, 2020 9:13 AM - FOctober 21, 2020 11:13 AM
Recall/Withdrawal	Najorie Jennings-Dawkins	Dianna Tomlinson	October 21, 2020 1:22 PM - FOctober 21, 2020 3:22 PM
Destruction of Trademark Items	Khamisha Williams	Clayton Berry	October 20, 2020 9:48 AM - FOctober 20, 2020 10:48 AM

FSSC Additional Requirements (In conjunction with PreRequisite Programs)	Khamisha Williams	Dianna Tomlinson	October 20, 2020 9:41 AM - FOctober 20, 2020 2:41 PM
FSSC Additional Requirements (Logo Use)	Najorie Jennings-Dawkins	Dianna Tomlinson	October 20, 2020 9:11 AM - FOctober 20, 2020 11:11 AM
Lab Analysis	Najorie Jennings-Dawkins	Khamisha Williams	October 20, 2020 1:12 PM - FOctober 20, 2020 3:12 PM
Warehousing	Tiffani Stewart	Najorie Jennings-Dawkins	October 14, 2020 2:00 PM - FOctober 14, 2020 4:00 PM
Internal and External Issues	Oshayne Malcolm	Dianna Tomlinson	November 6, 2020 9:34 AM - FNovember 6, 2020 11:34 AM
Visitor Control	Clayton Berry	Dianna Tomlinson	November 6, 2020 9:31 AM - FNovember 6, 2020 11:31 AM
Needs and Expectations	Tiffani Stewart	Dianna Tomlinson	November 5, 2020 10:56 AM - FNovember 5, 2020 2:56 PM
Utilities - air, water, energy	Tiffani Stewart	Najorie Jennings-Dawkins	November 4, 2020 10:57 AM - FNovember 4, 2020 1:57 PM
Traceability/Mock Recall	Clayton Berry	Najorie Jennings-Dawkins	November 3, 2020 9:30 AM - FNovember 3, 2020 11:30 AM
Receival and Verification of Raw and Packaging Materials	Tiffani Stewart	Najorie Jennings-Dawkins	November 2, 2020 9:00 AM - FNovember 2, 2020 11:00 AM
Milling of Dry Ingredients	Tiffani Stewart	Carl White	November 2, 2020 1:01 PM - FNovember 2, 2020 3:01 PM
Personnel Hygiene and Employee Facilities	Oshayne Malcolm	Dianna Tomlinson	November 13, 2020 9:36 AM - FNovember 13, 2020 11:36 AM



## CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS, PREMISES AND WORKSPACE

Audit of: Construction and Layout of Buildings, Premises and Workspace	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO 22000:2018;7.13	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Upon inspection, it can be concluded that the basic structure of the building is in adherence to the standard that dictates that " it should be designed, constructed and maintained in a manner appropriate to the nature of the processing operations...". There were no potential sources of contamination from the surrounding areas that could cause any food safety hazard.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS, PREMISES AND WORKSPACE

Audit of: Construction and Layout of Buildings, Premises and Workspace	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 2002-1:2009:4.3	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>In an interview with Collin Green, it was noted that access to the facility is controlled. Workers entering the facility are checked to ensure they do not have a fever. They are also required to use a time card to tell when they enter and leave the facility. Nonworkers who wish to enter the facility has to first enter through the gate but before that is done the security communicates with the General Manager on the phone to advise her of the visit. If permission is granted then the person will enter through the gate, have their temperature checked, then sign in the visitor's book that is by the gate. That individual is then accompanied to the main office. Mr. Green further went on to say that the gate is usually closed if the security personnel have to leave for a short while. The visitors log book was checked and the names of visitors with their time in and time out signature were seen.</p>			
Evaluation:			

Effectiveness:

## CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS, PREMISES AND WORKSPACE

Audit of: Construction and Layout of Buildings, Premises and Workspace	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 4.3	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>No settlement of water was observed on the yard or parking areas even though rain was falling. Most of the land area is sloped -water could be seen running off the property to the outside perimeter, and the yard is free from pitting to which would discourage settlements of water.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS, PREMISES AND WORKSPACE

Audit of: Construction and Layout of Buildings, Premises and Workspace	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 5.2	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>The standard states that the building shall provide adequate space...and physical separation of raw from processed areas. Upon inspection it was observed that the raw materials were in a separate area from the processing areas. The sugar, salt and raisins, etc were stored in an area called " Dry Ingredients". The tomato drums were stored in an area called "Wet Ingredients. The areas for processing were labelled " Processing Area and Cooking Area".</p>			
Evaluation:			

Effectiveness:

## CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS, PREMISES AND WORKSPACE

Audit of: Construction and Layout of Buildings, Premises and Workspace	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 5.5	Auditees: Dianna Tomlinson
Audit Evidence:  According to one of the laboratory personnel, Tiffani Stewart, the laboratory facilities are controlled. Only persons who are authorized to enter those facilities can do so.			
Evaluation:			
Effectiveness:			

## NONCONFORMITY REPORT

Incident Identification Number: 000000.00001

Non-Conformity Report #: 1	Auditor (s): Najorie Jennings- Dawkins	Date: October 23, 2020
Audit of : Construction and Layout of Buildings, Premises and Workspace	Audit Criteria: ISO/TS 22002-1:2009; 4.3	
Statement of Nonconformity:  The standard stipulates that vegetation shall be tendered or removed. However, there were areas of the facility that weeds were observed growing out of control. At the back of the facility near the garage, behind the generator room going up to the boiler, in piles of marl in front of barrel storage area 2, are some examples.		
Responsible Party: Dianna Tomlinson		
Auditor Signature:		Signature:

NONCONFORMITY REPORT		
Incident Identification Number: 000000.00002		
Non-Conformity Report #: 2	Auditor (s): Najorie Jennings Dawkins	Date: October 23, 2020
Audit of : Construction and Layout of Buildings, Premises and Workspace	Audit Criteria: ISO/TS 22002-1:2009; 5.3	
<p>Statement of Nonconformity:</p> <p>While doing the audit, there were doors that were left open, even though the standard states that "doors should be closed when not in use". The door behind the kitchen which was built to self-close was tied open to a nail on the wall. The change room door was also left ajar.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

NONCONFORMITY REPORT		
Incident Identification Number: 000000.00003		
Non-Conformity Report #: 3	Auditor (s): Najorie Jennings Dawkins	Date: October 23, 2020
Audit of : Construction and Layout of Buildings, Premises and Workspace	Audit Criteria: ISO/TS 22002-1:2009; 5.5	
<p>Statement of Nonconformity:</p> <p>All the storage areas of the facility were checked. It was observed that the following areas had items stored on the walls, leading to a nonconformity: 1.The utensils area had stainless steel sinks and pallets with onions, etc, on the wall. 2. The bottling plant had numerous pallets on the wall with no space between them.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

OPPORTUNITY REPORT

Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings-Dawkins	Date: October 23, 2020
Audit of : Construction and Layout of Buildings, Premises and Workspace	Audit Criteria: ISO/TS 22002-1:2009; 5.5	
<p>Statement of Opportunity:</p> <p>A chemical house was identified which had restricted access by means of a lock on the door. The area was used to store bleach and liquid soap. Other chemicals were stored in a maintenance room by the bottling area. That area did not have controlled access.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009 : 6.2	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Khamisha Williams states that water is potable.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009 : 6.2	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>WHO and local standards for drinking water. Test reports TESR 25/2020/2993 and TESR 26/2020/2992 from BSJ dated May 27th and 18th respectively</p>			
<p>Evaluation:</p>			

Reports from BSJ dated May 18th and 27th respectively both conformed to WHO and local standards for drinking water.

Effectiveness:

## CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: PRP/AR-1010:4.1.2.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Water quality Report QC4006 Rev #3 reviewed by K. Williams on Sept 30, 2020.			
Evaluation:			
Khamisha Williams stated that internal quality checks are done on the Pickapeppa Company Ltd water supply. Tests done include ph, bacterial count, Free chlorine and visual tests. Weekly tests are done on ph , free chlorine and visual . Monthly bacterial tests are done .			
Effectiveness:			

## CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: PRP/AR 1010:4.1.2.3	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Evaluation:			
K.Williams stated that internal quality checks are validated by sending water samples to the BSJ twice per year for testing .			
Effectiveness:			

## CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: ISO22002-1 :2009 : 6.6	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			

Observation- All lights seen were shielded
Evaluation:
Effectiveness:

### CONFORMITY REPORTS – UTILITIES - AIR, WATER, ENERGY

Audit of: Utilities - air, water, energy	Auditor: Tiffani Stewart	Audit Criteria: PRP/AR 1010 :4.3.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Barrington Mclean states that air from the compressor is used to power the inkjet printer, milling machine, steam jacketed kettle , capper and filler .It is used to place labels onto bottles, rotate the label bed and rotate the glue pump.			
Evaluation:			
Effectiveness:			

### NONCONFORMITY REPORT

Incident Identification Number: 000000.00004		
Non-Conformity Report #: 1	Auditor (s): Tiffani Stewart	Date: November 4, 2020
Audit of : Utilities - air, water, energy	Audit Criteria: PRP/AR 1010:4.4.1.4	
Statement of Nonconformity:		
The procedure states that lights should be cleaned twice per month however records does not support this. Records for Cleaning Upstairs PRP 1061 Rev#10 for the month of October showed cleaning once per month for Dry Ingredients, Cooking, Barrel Storage 1&2 and Sauce Tank Areas- twice per month for Pre-Processing and Vinegar Plant . No lights were cleaned in the Onion storage, Utensils and Processing Area. Visual inspection showed that lights in certain areas needed cleaning .		
Responsible Party: Najorie Jennings-Dawkins		
Auditor Signature:		Signature:

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Tiffani Stewart	Date: November 4, 2020
Audit of : Utilities - air, water, energy	Audit Criteria: PRP/AR 1010:4.4.1.1	
<p>Statement of Opportunity:</p> <p>Lighting in the sorting and inspecting area ,barrel storage 2, circuit breaker room and packaging area (around the back) still needs to be improved . Lights in the pre-processing , wet ingredients, barrel storage 2 and receival areas need to be replaced or repaired.</p> <p>Responsible Party: Najorie Jennings-Dawkins</p>		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.2.2	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>broken glass bin</p>			
<p>Evaluation:</p> <p>A broken glass bin was stationed at a designated area in the bottling plant area.</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.1.6	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Georgette Clarke, Eric Moran</p>			
<p>Evaluation:</p> <p>An interview was done with two employees and their answers conforms with the procedure</p>			



Effectiveness:

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.4.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Drains, cleaning records form no-PRP:1062			
Evaluation:			
An observation was made of the drains and all drains we cleaned.			
Effectiveness:			

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.5.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Najorie Jennings-Dawkins, verification software			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.1.1-5.1.9	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Colin Green, Rodrick Williams			
Evaluation:			
Two members of the waste management team explained that some of their responsibilities includes the removal of garbage to the garbage house, the lining washing and sanitizing of bins and to ensure that they are placed in there designed areas.			

Effectiveness:

### CONFORMITY REPORTS – WASTE DISPOSAL

Audit of: Waste Disposal	Auditor: Clayton Berry	Audit Criteria: PRP-1020:5.6.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Dianna Tomlinson, SPM ticket dated-15.10.2020 and 26.10.2020			
Evaluation:  Dianna Tomlinson stated that management is responsible for the garbage house to be emptied and that southern parks and market is the company that is contracted to do so.			
Effectiveness:			

### OPPORTUNITY REPORT

Incident Identification Number: 000000.00001

Opportunity Report #: 1	Auditor (s): Clayton Berry	Date: October 30, 2020
Audit of : Waste Disposal	Audit Criteria: PRP-1020:5.1.8,5.2.5	
Statement of Opportunity:  A bin in the processing area was not working properly and the bin at the hand wash station by the urinal had no cover, none of the bins had any label on them.		
Responsible Party: Dianna Tomlinson		
Auditor Signature:	Signature:	

### CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: PRP-1030:4.1.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			

Kettle, homogenizer, dicer and filling machine were smooth accessible, cleanable and self draining.
Evaluation:
It was observed that the equipment surfaces are smooth, accessible, cleanable and self-draining.
Effectiveness:

## CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: PRP-1030:4.1.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Kettle and Cooker were observed.			
Evaluation:			
It was observed that the equipment are rust and corrosion free.			
Effectiveness:			

## CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: PRP-1030:4.2.1.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Cleaning, Sanitizing and Environmental Monitoring, PRP/AR-1030, Rev # 12. The Capping machine is cleaned after each use with detergent and bleach method of cleaning is: 1.Switch machine off and hose down with clean potable water. 2.Using a clean cloth wash down with detergent. 3.Rinse with clean water to remove the detergent 4 Apply disinfectant to kill bacteria and allow for 5 minutes contact time. 5.Rinse with clean water to remove the disinfectant. 6.Wipe down machine using a clean cloth. 7.Allow machine to air dry			
Evaluation:			
Najorie Dawkins stated that a cleaning is documented for all equipment and it includes the name of the equipment, frequency of cleaning, method of cleaning and			

chemicals and materials to use.

Effectiveness:

## CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: PRP-1030:4.3.2.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Preventive Maintenance, PRP-1035, Rev #1			
Evaluation:			
All equipment are identified and the frequency of maintenance. The capper and homogeniser should be maintained on a monthly basis.			
Effectiveness:			

## CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Equipment Corrective Maintenance Form , PRP-1033, Rev # 2			
Evaluation:			
I was informed by Najorie Dawkins that Corrective Maintenance is recorded. On October 14, 2020 the glue was seeping through bearing into the gearbox and the issue was corrected by Barrington McLean on October 15, 2020 where the bearings and gear oil were changed. Corrective maintenance was also done on Capper, Forklift and Variable Frequency Drive.			
Effectiveness:			

## CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING

### AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: ISO 22002-1:8.6	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Post Maintenance Hygiene Clearance Form, PRP-1134, Rev # 1			
Evaluation:			
The production manager stated that no records for clean up after maintenance. Maintenance work done would not have affected the quality of the product hence the form was not filled out, however, a form is available			
Effectiveness:			

### CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment Suitability, Cleaning and Maintenance	Auditor: Khamisha Williams	Audit Criteria: ISO 22002-1:8.6	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Attendance Record, MS-2041, Rev #9, February 12, 2020			
Evaluation:			
Oshayne Malcolm and Barrington McLean were trained in Preventive Maintenance on February 12, 2020.			
Effectiveness:			

### NONCONFORMITY REPORT

Incident Identification Number: 000000.00005		
Non-Conformity Report #: 1	Auditor (s): Khamisha Williams	Date: October 23, 2020
Audit of : Equipment Suitability, Cleaning and Maintenance	Audit Criteria: PRP-1030:4.3.1	
Statement of Nonconformity:		
The Preventive maintenance programme is not fully implemented. The Preventive maintenance is in place for all equipment but checks are not done on all equipment		

and not at the required frequency.

Responsible Party: Najorie Jennings-Dawkins

Auditor Signature:

Signature:

### CONFORMITY REPORTS – MANAGEMENT OF PURCHASED/SUPPLIED MATERIALS AND SERVICES

Audit of: Management of Purchased/Supplied Materials and Services	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1040	Auditees: Dianna Tomlinson
Audit Evidence:  According to the General Manager, The Management of Purchased/ Supplied Materials and Services procedure controls how materials are purchased and how services are supplied.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – MANAGEMENT OF PURCHASED/SUPPLIED MATERIALS AND SERVICES

Audit of: Management of Purchased/Supplied Materials and Services	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 9.3	Auditees: Dianna Tomlinson
Audit Evidence:  In an interview with the General Manager, there is an area for nonconforming products that holds such products. The suppliers are contacted to inform them of the nonconformity and a decision is taken to either return the products or dispose of them. The non conforming area was clearly identified at the inside entrance of the facility.			
Evaluation:			

Procedure does not state what should happen to nonconforming products.
Effectiveness:

## CONFORMITY REPORTS – MANAGEMENT OF PURCHASED/SUPPLIED MATERIALS AND SERVICES

Audit of: Management of Purchased/Supplied Materials and Services	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 9.3	Auditees: Dianna Tomlinson
Audit Evidence:  All incoming materials, according to the General Manager and the inventory clerk/receival personnel, are checked to ensure they are in good condition and that they conform to the company's specifications. On the Transportation Log, PRP 1042, a list of criteria is outlined to ensure goods meet specifications.			
Evaluation:			
Effectiveness:			

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings-Dawkins	Date: October 23, 2020
Audit of : Management of Purchased/Supplied Materials and Services	Audit Criteria: PRP/AR 1040:4.1.1.1	
Statement of Opportunity:  Some of the information was readily available but improvements can be made especially when it comes to requesting specific services from suppliers. Specifications requests can be improved for raw materials such as raisins, which P.O 4159 showed that only the name and the weight were specified.		
Responsible Party: Dianna Tomlinson		
Auditor Signature:	Signature:	

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00002		
Opportunity Report #: 2	Auditor (s): Najorie Jennings-Dawkins	Date: October 23, 2020
Audit of : Management of Purchased/Supplied Materials and Services	Audit Criteria: ISO/TS 22002-1:2009;9.2	
<p>Statement of Opportunity:</p> <p>Response by the General Manager was that an annual audit is usually done on suppliers by the audit team and a yearly appraisal is done. The Vendor Appraisal forms, PRP 1045 showed that appraisal activities were carried out on Dev 18,2019. However were no audit reports done on suppliers over the past 12 months even though procedure, PRP/AR-1040; 4.2.1.1 states that the Audit Team "Does a follow up audit on an annual basis or as the need arises". Records showed that the last audit was done on July 26, 2018.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

## CONFORMITY REPORTS – MEASURES FOR PREVENTION OF CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.1.1.3	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>Michael Nunes</p>			
<p>Evaluation:</p> <p>In an interview with Michael Nunes he stated that had washing helps to prevent cross contamination.</p>			
<p>Effectiveness:</p>			

## CONFORMITY REPORTS – MEASURES FOR PREVENTION OF



### CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.1.1.6	Auditees: Khamisha Williams
Audit Evidence:			
Rodrick Williams			
Evaluation:			
Rodrick Williams explains that equipment should be washed, rinse and sanitized before and after each usage.			
Effectiveness:			

### CONFORMITY REPORTS – MEASURES FOR PREVENTION OF CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.1.1.7	Auditees: Khamisha Williams
Audit Evidence:			
Flow Diagram			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – MEASURES FOR PREVENTION OF CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.1.2.2-4.2.1.5	Auditees: Khamisha Williams
Audit Evidence:			
Shirley Williams			
Evaluation:			
An observation was made of some workers and all were observing the correct dress code. Miss Williams explained that there is also a no jewelry policy.			

Effectiveness:

### CONFORMITY REPORTS – MEASURES FOR PREVENTION OF CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.3.1.1	Auditees: Khamisha Williams
Audit Evidence:			
Tiffany Stewart, material safety data sheet (MSDS)			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – MEASURES FOR PREVENTION OF CROSS CONTAMINATION

Audit of: Measures for Prevention of Cross Contamination	Auditor: Clayton Berry	Audit Criteria: PRP-1050:4.3.1.2	Auditees: Khamisha Williams
Audit Evidence:			
Karron Ashley, chemical storage			
Evaluation:			
the chemical storage area is located separate from the production facilities.			
Effectiveness:			

### CONFORMITY REPORTS – PERSONNEL HYGIENE AND EMPLOYEE FACILITIES

Audit of: Personnel Hygiene and Employee Facilities	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1080: 4.1.6	Auditees: Dianna Tomlinson
Audit Evidence:			

Laundry room PRP-1080 Revision #10
Evaluation:
Upon investigation the establishment has a laundry facility which is in line with the procedure PRP-1080 Revision #10
Effectiveness:

## CONFORMITY REPORTS – PERSONNEL HYGIENE AND EMPLOYEE FACILITIES

Audit of: Personnel Hygiene and Employee Facilities	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1080: 4.1.4	Auditees: Dianna Tomlinson
Audit Evidence:			
Changing rooms PRP-1080 Revision #10			
Evaluation:			
Based on observation the establishment have a proper changing room and this is in accordance with procedure PRP-1080 Revision #10			
Effectiveness:			

## CONFORMITY REPORTS – PERSONNEL HYGIENE AND EMPLOYEE FACILITIES

Audit of: Personnel Hygiene and Employee Facilities	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1080: 4.2.11	Auditees: Dianna Tomlinson
Audit Evidence:			
Dianna Tomlinson Food handlers permit Internal training record MS-2041 Revision #9			
Evaluation:			
Dianna Tomlinson states that there are record to show that all employees are trained to work in the food establishment this was confirmed by the internal trained records and the food handlers permit?			
Effectiveness:			

## CONFORMITY REPORTS – PERSONNEL HYGIENE AND EMPLOYEE FACILITIES

Audit of: Personnel Hygiene and Employee Facilities	Auditor: Oshayne Malcolm	Audit Criteria: ISO 22002-1: 13.2b	Auditees: Dianna Tomlinson
Audit Evidence:			
Kitchen PRP-1080 Revision #10			
Evaluation:			
By observing the kitchen area it was found that the sinks were separated and clearly identified			
Effectiveness:			

## CONFORMITY REPORTS – PERSONNEL HYGIENE AND EMPLOYEE FACILITIES

Audit of: Personnel Hygiene and Employee Facilities	Auditor: Oshayne Malcolm	Audit Criteria: ISO 22002-1: 13.3	Auditees: Dianna Tomlinson
Audit Evidence:			
kitchen Lunch room			
Evaluation:			
Upon observation it has been found that the staff canteen and the area designated for food storage and consumption was separate from the production area to avoid cross contamination			
Effectiveness:			

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Oshayne Malcolm	Date: November 13, 2020
Audit of : Personnel Hygiene and Employee Facilities	Audit Criteria: ISO 22002-1: 13.4	
Statement of Opportunity:		
Based on observation a few employees were found without proper personal		

protective equipment and this is not in accordance with the procedure PRP-1080

Responsible Party: Dianna Tomlinson

Auditor Signature:

Signature:

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00002

Opportunity Report #: 2

Auditor (s): Oshayne  
Malcolm

Date: November 13, 2020

Audit of : Personnel  
Hygiene and Employee  
Facilities

Audit Criteria: ISO 22002-1:  
13.2a

Statement of Opportunity:

By observing different areas of the establishment there are adequate number of wash hand stations, the one at the urinal area mold was found, the sink and the soap dispenser in the male bathroom doesn't have on any cover.

Responsible Party: Dianna Tomlinson

Auditor Signature:

Signature:

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00003

Opportunity Report #: 3

Auditor (s): Oshayne  
Malcolm

Date: November 13, 2020

Audit of : Personnel  
Hygiene and Employee  
Facilities

Audit Criteria:  
PRP-1080:4.1.3

Statement of Opportunity:

Based on observation there are adequate number of toilet in the facility and was in accordance with the procedure PRP-1080 Revision #10 but the female toilets doesn't have on any covers the covers they were put aside on the floor.

Responsible Party: Dianna Tomlinson

Auditor Signature:

Signature:

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### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: PRP 1090:4.1.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
All warehouses were checked and items were stored off the ground .			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009:16.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Finished Product Form HP 3009 Rev#2 Lot numbers 14-17 were manufactured from March 23rd-27th was shipped to Warbac 400 on April 3th, 2020.Lot numbers 18th-22nd were bottled from April 1st-23rd was shipped to Warbac 401 on April. 24th.			
Evaluation:			
Oshayne Malcolm stated that stock rotation systems are in place for both raw materials and finished products. The stock rotation system used by the company is FIFO and FEFO.			
Effectiveness:			

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009:16.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
A chemical room was seen as well as a garbage area.			
Evaluation:			

Effectiveness:

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009:16.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
All storage areas seen were dry and well ventilated.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: PRP 1090:4.1.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Dry and wet ingredients areas were both seen. There was also a Finished product area.			
Evaluation:			
All materials used in production are stored in separate areas from finished products.			
Effectiveness:			

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018: 7.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Attendance Record MS-2041Rev#9 Warehouse Training dated May 7, 2019 and reviewed by T.Stewart. Training is scheduled for November 2020.			
Evaluation:			
Effectiveness:			

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### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: PRP 1090 :4.1.6	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Clayton Berry stated that all containers and trucks are checked to ensure that they are free from contamination. It is point # 2 on the Transportation Log -Sales MS 2201 Rev # 3 forms. Record seen Transportation Log -Sales MS2201 Rev#3 Reviewed by :T.Stewart on April 3, 2020.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – WAREHOUSING

Audit of: Warehousing	Auditor: Tiffani Stewart	Audit Criteria: ISO 22002-1:2009:16.3	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Maurice Smikle stated the company vehicle is used for transporting food and non-food items . It is however cleaned between loads using bleach and water.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### OPPORTUNITY REPORT

Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Tiffani Stewart	Date: October 14, 2020
Audit of : Warehousing	Audit Criteria: ISO 22002-1:2009:16.2	
<p>Statement of Opportunity:</p> <p>Areas were clearly identified. A Mango concentrate drum was seen in the non-conforming raw materials area. No items were seen in the non-conforming packaging</p>		



and finished products area. 2 generators and 2 boxes were seen in the non-conforming raw materials area.

Responsible Party: Najorie Jennings-Dawkins

Auditor Signature:

Signature:

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00002

Opportunity Report #: 2

Auditor (s): Tiffani Stewart

Date: October 14, 2020

Audit of : Warehousing

Audit Criteria: ISO  
22002-1:2009:16.1

Statement of Opportunity:

All storage areas seen were free from dust and other forms of contamination except : The utensils room - had onion trash on the floor Packaging 1 (Bottling Plant) -'rolled up' tissue was seen on top of cartons on a pallet.

Responsible Party: Najorie Jennings-Dawkins

Auditor Signature:

Signature:

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: PRP/AR-1110:4.3.1.7	Auditees: Dianna Tomlinson
Audit Evidence:			
Attendance Records, MS-2041-Food Defense, March 12, 2020			
Evaluation:			
Employees are informed through internal meetings and trainings of the internal issues			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Label Room and CCTV			
Evaluation:			
Labels are stores in a designated area the label room. It is used to store labels and UPC and is kept locked when not in use and only authorized personnel are allowed. There is a camera pointing to the entrance to identify any suspicious activities			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Designated door was observed for entrance and exit and colour coded uniforms were observed.			
Evaluation:			
There are designated areas to enter and leave the facility and uniforms are colour coded.			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
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Audit Evidence:
Police Character Reference Form
Evaluation:
Background check was done for three new employees, Eric Moran, Michael Gosling and Jahvain Mattis. Background checks were done by District Constable Paul Whyne.
Effectiveness:

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Tanks are locked.			
Evaluation:			
It was observed that the water tanks are locked to prevent unauthorised access.			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Evaluation:			
Diana Tomlinson stated that the CCTV are monitored by the CEO, General Manager and IT personnel.			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Food Defense Plan Emergency contact list			
Evaluation:			
There is an updated emergency contact list in the Food Defense Plan. There are contacts for Police, Fire department, Suppliers, Distributors, Contractors and In house emergency contacts.			
Effectiveness:			

## CONFORMITY REPORTS – FOOD DEFENSE, BIOVIGILANCE AND BIOTERRORISM

Audit of: Food Defense, Biovigilance and Bioterrorism	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Attendance Record, MS-2041, Rev #9, March 12, 2020			
Evaluation:			
Employees were trained in the Food Fraud and Food Defense procedures on March 12, 2020 by Dianna Tomlinson.			
Effectiveness:			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging	Auditor: Tiffani Stewart	Audit Criteria: PRP1120: 4.1.1.1	Auditees: Najorie Jennings-Dawkins
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Materials			
Audit Evidence:			
Point # 2 ,PRP 1042 Rev#4 Transportation Log -Purchasing glue reviewed by N.Dawkins May7, 2020			
Evaluation:			
Oshayne Malcolm says that there is a document that covers this .			
Effectiveness:			

### CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.1.1.5	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Najorie Dawkins says that quantities of raw materials are verified against purchase orders.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.1.2.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Carl White stated that fresh produce are sorted and inspected before staging and storage to ensure that they are dry, clean and free from contamination.			
Evaluation:			
Effectiveness:			

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## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.3.3-4.3.5	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Khamisha Williams stated that Items are placed in the non-conforming areas and a "REJECTED" sticker is placed on it. Purchasing department is informed of the non-conformance and then the supplier is contacted and a decision is taken as to what action to take -whether to dispose or return. Non-conformance is recorded on the non-conformance report.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.3.1	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Record :Lab Analysis-Raw Materials QC4002 Rev#3 Reviewed by T.Stewart on Jan 31, 2020. Record: Lab Analysis -Packaging Material QC 4003 Rev#3 Reviewed by T.Stewart on May 22, 2020.</p>			
<p>Evaluation:</p> <p>Quality Manager stated the following: Information recorded on Lab Analysis -Packaging Material: Packaging material and a description of it, weight and dimension, body diameter, screw diameter, height , length, width , length, status-pass/fail/hold ,then signature . Lab Analysis Raw material: Date, lot number, organoleptic evaluation, extraneous matter, measurement, chemistry( pH, Acidity or Brix), overall status(pass ,fail or hold), and initials .</p>			
<p>Effectiveness:</p>			

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## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: ISO22000:2018:7.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Receival and Verification of Raw and Packaging Material Training done by C.Berry and K.Williams on January 16, 2020. Attendance Record MS2041 Rev#9 Reviewed by :Dianna Tomlinson on January 16, 2020			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120 :5.4, PRP 1120:4.1.2.4	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Specification sheet for Raw +Packaging Materials + Service providers PRP1046 Rev#4			
Evaluation:			
Khamisha Williams stated that there is a specification sheet for raw materials			
Effectiveness:			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival	Auditor: Tiffani	Audit Criteria: PRP	Auditees: Najorie
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and Verification of Raw and Packaging Materials	Stewart	1120:4.1.2.4	Jennings-Dawkins
<p>Audit Evidence:</p> <p>Carl White confirmed the information on PRP 1044 Rev#6 Field crop delivery from.</p> <p>-Vehicle used to transport peppers is clean and free from odours. -Farmers are registered with RADA -Peppers are reaped within the recommended period after chemical has been applied.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of Raw and Packaging Materials	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.1.2.4	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Khamisha Williams-All materials are inspected prior to acceptance . They are tested against COA and specification prior to use . For materials that are not covered by COA in-house testing is done to ensure that they meet company specification. When No COA is received for a raw material internal testing is done. For Brown Sugar not covered by COA internal testing was done . Record was as follows QC 4002 Rev #3 Lab Analysis -Raw materials for Brown Sugar reviewed by T.Stewart on May 12, 2020. Ingomar Packing Company Certificate of Analysis for Tomato Paste Received on Oct 22, 2020.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – RECEIVAL AND VERIFICATION OF RAW AND PACKAGING MATERIALS

Audit of: Receival and Verification of	Auditor: Tiffani Stewart	Audit Criteria: PRP 1120:4.1.1.6	Auditees: Najorie Jennings-Dawkins
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Raw and Packaging Materials			
<p>Audit Evidence:</p> <p>Oshayne Malcolm stated that the date and name of incoming material, vendor, batch number, quantity, vehicle license number , container and chassis numbers where applicable and the receivers initial are all recorded when the said materials are received. Record :Transportation Log -Purchasing PRP 1042 Rev#4 Brown Sugar, Reviewed by: NJ Dawkins on August 13, 2020.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – CONTROL OF SHARP OBJECT

Audit of: Control of Sharp Object	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1130	Auditees: Georgette Clarke
<p>Audit Evidence:</p> <p>According to the Quality Manager there is a procedure that controls how sharp objects are handled.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – CONTROL OF SHARP OBJECT

Audit of: Control of Sharp Object	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1130;4.1.1.4	Auditees: Georgette Clarke
<p>Audit Evidence:</p> <p>The supervisor responsible for handling the knives showed an area where the knives are stored. The Quality Manager explained that other sharp objects such as broken bottles are stored in a designated area in the bottling plant.</p>			
Evaluation:			
It is recommended that the storage area for the knives be properly labelled.			
Effectiveness:			

### CONFORMITY REPORTS – CONTROL OF SHARP OBJECT

Audit of: Control of Sharp Object	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1130; 4.2.2	Auditees: Georgette Clarke
<p>Audit Evidence:</p> <p>The Supervisor, Mrs Clarke, stated that the knives are usually checked before and after they are used by workers and the information recorded on the Sharp Object Control Form, PRP 1131, indicating if they are damaged or not. These forms were checked to see if proper monitoring was being done for the period of the onion cooking and it was concluded based on lack of According to the Quality Manager a glass policy is in place to control the breakage of glass bottles when bottling is taking place. If the bottles are broken on the line and could pose a risk to the product then the line is stopped and broken bottle cleaned up. If it doesn't pose a risk then bottling is continued and broken bottle cleaned up. This explanation is in line with the procedure 1130; 4.2.2.1-4.2.2.3</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – CONTROL OF SHARP OBJECT

Audit of: Control of Sharp Object	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1130; 4.1.1.5, 4.1.1.6	Auditees: Georgette Clarke
<p>Audit Evidence:</p> <p>It was said by the Supervisor, Mrs Clarke, that once the knives are damaged then they are taped and placed in a bin that is labelled "Sharp Objects Bin". The content of the bin is later disposed of in the waste disposal area. The presence of such bin was confirmed. The bin was present in the lab and was labelled as "Sharp Objects Bin".</p>			
Evaluation:			
Effectiveness:			

### OPPORTUNITY REPORT

Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings	Date: October 22, 2020

	Dawkins	
Audit of : Control of Sharp Object	Audit Criteria: PRP11:4.1.1.3, 4.1.2.2	
<p>Statement of Opportunity:</p> <p>The Sharp Object Control Form, PRP 1131, shows information on how the knives are controlled. It lists the information such as: date, name of employee , issue without damage and returned without damage and signature of employee. These forms were checked to see if proper monitoring was being done for the period of the onion cooking and it was concluded based on the presence of records that the process was in conformance with the procedure. For the broken bottles , records for 2020 were available up to April 04 on the Broken Bottles Form, PRP 1132. No records were available after that period.</p> <p>Responsible Party: Khamisha Williams</p>		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.3.1	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Terrence Palmar ,Dianna Tomlinson</p>			
<p>Evaluation:</p> <p>Terrence palmer stated that a mask is given to visitors in they don't have any.Dianna Tomlinson then explain that a coat is giving to the visitors at the office if they are to enter the production area</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.1.1.1	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Terrence Palmar, visitors log book</p>			
<p>Evaluation:</p>			

The visitors log book was observed and no issues found
Effectiveness:

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.1.1.8	Auditees: Dianna Tomlinson
Audit Evidence:			
employee parking: DT2080,DT2090 and DT2050			
Evaluation:			
Three employees vehicles was checked and had the badges on them			
Effectiveness:			

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP:1140:4.1.1.3	Auditees: Dianna Tomlinson
Audit Evidence:			
Visitors log book			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.1.1.4-4.1.1.6	Auditees: Dianna Tomlinson
Audit Evidence:			
Lennox Morgan,Eric Moran			
Evaluation:			
Two employees was asked how they identify visitors in the facility and the correct answer was given.			
Effectiveness:			

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### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.1.1.7	Auditees: Dianna Tomlinson
Audit Evidence:			
Domain virgin,jahvian Mattis & Novelette Robinson			
Evaluation:			
The procedure for visitors entering the production area was explained by the three employees that was interviewed			
Effectiveness:			

### CONFORMITY REPORTS – VISITOR CONTROL

Audit of: Visitor Control	Auditor: Clayton Berry	Audit Criteria: PRP-1140:4.2.1-4.2.4	Auditees: Dianna Tomlinson
Audit Evidence:			
Tracey mullings,Dianna Tomlinson			
Evaluation:			
An interview was done with Dianna Tomlinson and the role of management in the visitors control was explained			
Effectiveness:			

### CONFORMITY REPORTS – DESTRUCTION OF TRADEMARK ITEMS

Audit of: Destruction of Trademark Items	Auditor: Khamisha Williams	Audit Criteria: PRP-1150:4.2.5	Auditees: Clayton Berry
Audit Evidence:			
Trademark Destruction Log, PRP-1151, Rev #1			
Evaluation:			
Oshayne Malcolm presented a Trademark Destruction Log and on August 8, 2020, 8 one dozen cartons were damaged and recorded by Oshayne Malcolm.			

Effectiveness:
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#### CONFORMITY REPORTS – DESTRUCTION OF TRADEMARK ITEMS

Audit of: Destruction of Trademark Items	Auditor: Khamisha Williams	Audit Criteria: PRP-1150:4.2.4	Auditees: Clayton Berry
Audit Evidence:			
Destruction of Trademark Items, PRP-1150:4.2.4			
Evaluation:			
Domaine Virgin stated that when cartons are damaged they would be isolated and then informs the supervisor. Upon interviewing a supervisor Oshayne Malcolm he stated that damaged cartons are flattened and torn to destroy the trade mark and taken to the garbage disposal area.			
Effectiveness:			

#### CONFORMITY REPORTS – DESTRUCTION OF TRADEMARK ITEMS

Audit of: Destruction of Trademark Items	Auditor: Khamisha Williams	Audit Criteria: PRP-1150:4.2.2	Auditees: Clayton Berry
Audit Evidence:			
Destruction of Trademark Items, PRP-1150:4.2.2			
Evaluation:			
Oshayne Malcolm stated that if labels are outdated they would be shredded to destroy the trademark.			
Effectiveness:			

#### CONFORMITY REPORTS – DESTRUCTION OF TRADEMARK ITEMS

Audit of: Destruction of Trademark Items	Auditor: Khamisha Williams	Audit Criteria: PRP-1150	Auditees: Clayton Berry
Audit Evidence:			

Trademark Destruction Log, PRP-1150
<p>Evaluation:</p> <p>There is a procedure Destruction of Trademark Items, PRP-1150 Rev #2 that defines how all trademark items should be destroyed.</p>
<p>Effectiveness:</p>

### CONFORMITY REPORTS – CHEMICAL CONTROL

Audit of: Chemical Control	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1160:4.2.1	Auditees: Tiffani Stewart
<p>Audit Evidence:</p> <p>Tiffani Stewart PRP-1160 Revision #1 PRP-1161 Hi-tech bleach MSDS Hi-clean all purpose soap MSDS</p>			
<p>Evaluation:</p> <p>Tiffani Stewart states the there is a material safety data sheet (MSDS) all the chemicals use by the establishment and it was in accordance with the procedure PRP-1160 Revision #1. Two of the chemical were selected from the approved chemical list and the MSDS was found</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – CHEMICAL CONTROL

Audit of: Chemical Control	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1160:4.1	Auditees: Tiffani Stewart
<p>Audit Evidence:</p> <p>Tiffani Stewart PRP-1160 Revision #1</p>			
<p>Evaluation:</p> <p>On interviewing Tiffani Stewart she states that Trecia Smith who is the receptionist is responsible to check that the chemicals are on the approved chemical list and are food safe before ordering and it was in accordance with the procedure PRP-1160 Revision#1.</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – CHEMICAL CONTROL

Audit of: Chemical Control	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1160:4.4.5	Auditees: Tiffani Stewart
Audit Evidence:			
Tiffani Stewart PRP-1160 Revision #1 Chemical store room			
Evaluation:			
Tiffani Stewart states that there is a storage area for all chemicals and it was in accordance with procedure PRP-1160 Revision #1 and the chemical store room.			
Effectiveness:			

### CONFORMITY REPORTS – CHEMICAL CONTROL

Audit of: Chemical Control	Auditor: Oshayne Malcolm	Audit Criteria: PRP-1160:4.4	Auditees: Tiffani Stewart
Audit Evidence:			
Tiffani Stewart PRP-1160 Revision #1			
Evaluation:			
Tiffani Stewart states that the Product Development Specialist/Functional Manager is responsible to establish and review the approved chemicals list and this was in accordance with the procedure PRP-1160 Revision #1.			
Effectiveness:			

### CONFORMITY REPORTS – PRODUCT INFORMATION/CONSUMER AWARENESS

Audit of: Product Information/Consumer Awareness	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009;17.1	Auditees: Tiffani Stewart
Audit Evidence:			
The owner of the process, Tiffani Stewart, was interviewed and she responded by saying that all the relevant information is provided on the labels to help consumers make their decision about using the products. Upon checking a one gallon PPS label, information such as: name of the item, nutritional information, storage information, etc., was found.			
Evaluation:			



Effectiveness:
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## CONFORMITY REPORTS – PRODUCT INFORMATION/CONSUMER AWARENESS

Audit of: Product Information/Consumer Awareness	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 100;4.2	Auditees: Tiffani Stewart
Audit Evidence:  In an interview with the production supervisor it was revealed that the system that is in place is such that the products with the different labels are properly identified on each pallet. In such a situation no product is sent out to the wrong distributor.			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – PRODUCT INFORMATION/CONSUMER AWARENESS

Audit of: Product Information/Consumer Awareness	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1100;4.1	Auditees: Tiffani Stewart
Audit Evidence:  A label control folder was presented by Tiffani Stewart. Random incoming labels were checked to see if checks were done. A sample from the Eve one gallon labels received on the 24/02/2020 was checked on the 25/02/2020. Another sample from the spicy one gallon labels received on the 09/07/2020 was checked on the 14/07/2020. The third check made was on the Wanis labels that were received on the 21/10/2020. Findings revealed that the checks were done on the 27/10/2020.			
Evaluation:  It would appear that even though the labels are always checked, they may not necessarily be checked before use. The receipt of the one gallon labels is not always communicated to label personnel in time and may be used before checks are done. This should be avoided at all cost as errors on labels may not be picked up by others.			
Effectiveness:			

## CONFORMITY REPORTS – PRODUCT INFORMATION/CONSUMER AWARENESS

Audit of: Product Information/Consumer Awareness	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1100;4.1,4.2	Auditees: Tiffani Stewart
<p>Audit Evidence:</p> <p>According to the production supervisor, the person in charge of controlling the labels from when they are received to when they are dispatched are the: Product Development Specialist(PDS), inventory clerk, bottling supervisors and machine operator. The PDS ensures that the information on the labels is correct. The inventory clerk ensures that the label quantity is recorded and the labels taken to the label room. Whenever labels are used the information is updated on the inventory log that is manned by the inventory clerk. The supervisors and machine operator are the only ones authorized to use the labels and will do so only to label products that are to be sent out under the authorization of management.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings-Dawkins	Date: October 27, 2020
Audit of : Product Information/Consumer Awareness	Audit Criteria: ISO/TS 22002-1:2009;17.1	
<p>Statement of Opportunity:</p> <p>Persons with allergy issues could not make informed decisions about the products as information such as ingredients were missing from the website.</p>		
Responsible Party: Tiffani Stewart		
Auditor Signature:	Signature:	

### CONFORMITY REPORTS – MANAGEMENT OF ALLERGENS

Audit of: Management of Allergens	Auditor: Oshayne Malcolm	Audit Criteria: PRP/AR-1170:5.0	Auditees: Tiffani Stewart
Audit Evidence:			
Tiffani Stewart PRP/AR-1170 Revision #1			
Evaluation:			
Tiffani Stewart states that the food safety team is responsible for the risk assessment for allergen and this was in accordance with the procedure PRP/AR-1170 Revision #0.			
Effectiveness:			

### CONFORMITY REPORTS – MANAGEMENT OF ALLERGENS

Audit of: Management of Allergens	Auditor: Oshayne Malcolm	Audit Criteria: PRP/AR-1170:4.0	Auditees: Tiffani Stewart
Audit Evidence:			
Tiffani Stewart PRP/AR-1170 Revision #1 allergen declaration/checklist record			
Evaluation:			
Tiffani Stewart states that the company doesn't use any allergenic ingredients in their products and is in accordance with the procedure PRP/AR-1170 Revision #0 and the allergen declaration/checklist records.			
Effectiveness:			

### CONFORMITY REPORTS – MANAGEMENT OF ALLERGENS

Audit of: Management of Allergens	Auditor: Oshayne Malcolm	Audit Criteria: PRP/ AR-1170:6.1-6.1.2	Auditees: Tiffani Stewart
Audit Evidence:			
Khamisha Williams PRP/AR-1170 Revision #1			
Evaluation:			
Khamisha Williams explain that the quality manager create a list of allergenic ingredients if there is any use by the company and ensure that the supplier provides a			

letter that guarantee the presence and absence of allergenic ingredients.
Effectiveness:

### CONFORMITY REPORTS – MANAGEMENT OF ALLERGENS

Audit of: Management of Allergens	Auditor: Oshayne Malcolm	Audit Criteria: PRP/AR-1170:6.2.1	Auditees: Tiffani Stewart
Audit Evidence:			
Khamisha Williams PRP/AR-1170 Revision #1			
Evaluation:			
Khamisha Williams states that the labels for each product would inform the customers about the allergens and this was in accordance with the procedure PRP/AR-1170 Revision #0.			
Effectiveness:			

### CONFORMITY REPORTS – MANAGEMENT RESPONSIBILITY

Audit of: Management Responsibility	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Khamisha Williams
Audit Evidence:			
Food Safety Objectives, MS-2280			
Evaluation:			
Three objectives were identified for 2020. To purchase and install generator for the Acetator is 50 % completed. To upgrade electrical wiring system is 100% completed. To obtain FSSC22000 V5 is 85% completed			
Effectiveness:			

### CONFORMITY REPORTS – MANAGEMENT RESPONSIBILITY

Audit of: Management Responsibility	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Khamisha Williams
Audit Evidence:			

Food Safety Team Leader-Diana Tomlinson Food Safety Team - Khamisha Williams, Najorie Dawkins, Tiffani Stewart, Clayton Berry, Oshayne Malcolm

Evaluation:

Diana Tomlinson stated that the Food Safety Team and Food Safety leader was appointed by Top Management. Food Safety Team leader was assigned by Stephen Lyn Kee Chow on May 5, 2017 and the Food Safety Team was updated on July 28, 2020.

Effectiveness:

## CONFORMITY REPORTS – MANAGEMENT RESPONSIBILITY

Audit of: Management Responsibility	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Khamisha Williams
Audit Evidence:			
Organisational Chart, MS-2270, Rev # 4			
Evaluation:			
Diana Tomlinson states that there is an organizational chart with all employees(Owners, Managers, Supervisors and line workers)			
Effectiveness:			

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00001

Opportunity Report #: 1	Auditor (s): Khamisha Williams	Date: October 28, 2020
Audit of : Management Responsibility	Audit Criteria: N/A	
Statement of Opportunity:		
There is a Food Safety Policy that was reviewed in the management review on November 12, 2019, however, the date on the policy was May 5, 2017.		
Responsible Party: Dianna Tomlinson		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – VERIFICATION AND VALIDATION

Audit of: Verification and Validation	Auditor: Oshayne Malcolm	Audit Criteria: MS-2050: 4.1-4.1.6	Auditees: Khamisha Williams
Audit Evidence:			
Khamisha Williams FSSC verification software.com			
Evaluation:			
Khamisha Williams states that the company do there verification by using the quality circle international software which has a checklist and the frequency of when the verification activities should be done.			
Effectiveness:			

### CONFORMITY REPORTS – VERIFICATION AND VALIDATION

Audit of: Verification and Validation	Auditor: Oshayne Malcolm	Audit Criteria: MS-2050: 4.3.1	Auditees: Khamisha Williams
Audit Evidence:			
Tiffani Stewart FSSC verification software.com/index.php/company/performance			
Evaluation:			
Tiffani Stewart states that Oshayne Malcolm, Khamisha Williams, Tiffani Stewart, Dianna Tomlinson and Vaughn Turland are persons responsible for the e-verification tool this was confirmed by the verification tool			
Effectiveness:			

### CONFORMITY REPORTS – VERIFICATION AND VALIDATION

Audit of: Verification and Validation	Auditor: Oshayne Malcolm	Audit Criteria: MS-2050: 4.3.1.1-4.3.1.4	Auditees: Khamisha Williams
Audit Evidence:			
Tiffani Stewart MS-2050 Revision #1			
Evaluation:			
Tiffani Stewart states that responsibilities of the verifiers/process owners is to check the status report of processes, conducts verification as scheduled, input the			

information in the verification activity and inform other verifiers about activities past due.

Effectiveness:

## CONFORMITY REPORTS – VERIFICATION AND VALIDATION

Audit of: Verification and Validation	Auditor: Oshayne Malcolm	Audit Criteria: ISO 22000:2018-8.5.3	Auditees: Khamisha Williams
Audit Evidence:			
Tiffani Stewart Form No: MS-2041 Revision #9 dated September 5 2019			
Evaluation:			
Tiffani Stewart states that the food safety team is responsible to do the validation for the control measures and combination of control measures this was confirmed by the record Form No: MS-2041 Revision #9 dated September 5 2019.			
Effectiveness:			

## CONFORMITY REPORTS – VERIFICATION AND VALIDATION

Audit of: Verification and Validation	Auditor: Oshayne Malcolm	Audit Criteria: ISO 22000:2018-8.5.3	Auditees: Khamisha Williams
Audit Evidence:			
Khamisha Williams TEST REPORT No.TESR 26/2020/4491 TEST REPORT No.TESR 25/2020/4492			
Evaluation:			
Khamisha Williams states that the company validate there products and this done by the Bureau of Standards Jamaica and this was proved by the record TEST REPORT No.TESR 26/2020/4491 and TEST REPORT No.TESR 25/2020/4492 and the result were satisfactory for all products.			
Effectiveness:			

## NONCONFORMITY REPORT

Incident Identification Number: 000000.00006

Non-Conformity Report #: 1	Auditor (s): Oshayne Malcolm	Date: October 22, 2020
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Audit of : Verification and Validation	Audit Criteria: MS-2050: 5.1	
<p>Statement of Nonconformity:</p> <p>Khamisha Williams states that there is a record of the verification report and this was confirmed by the verification tool. However seven of the process date were past due.</p> <p>Responsible Party: Khamisha Williams</p>		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.3.1.1	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Marlon Bailey, videojet excel 2000</p>			
<p>Evaluation:</p> <p>In the interview done with Marlon Bailey he stated that the format used on products are month,day,year and lot number with the exception of products going to New Zealand and the uk which used the format day,month and year.</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.1.1.2	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Carl white,Khamisha Williams</p>			
<p>Evaluation:</p> <p>Khamisha Williams explains that there are only two fresh produce used by pickapeppa onions and red peppers,the format for the red pepper is surname of the supplier along with the date it was received and for the onions the name of supplier and the date it was received.</p>			



Effectiveness:

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.1.2.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Tiffany Stewart			
Evaluation:  Tiffany Stewart stated that if the incoming material doesn't meet the specifications of the company it is rejected, it is then placed in the respective nonconforming area to be returned are discarded.			
Effectiveness:			

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.3.1.2-4.3.1.3	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  pickapeppa sauce lot #-I15O044PCL			
Evaluation:  Six bottles from two different cases of lot 44 pickapeppa sauce was checked and the lot Numbers were printed clearly.			
Effectiveness:			

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.3.1.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Barrington McLean, videojet excel 2000			

Evaluation:
Effectiveness:

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060-4.3.1.4	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Tablet, production log book and OSHAYNE MALCOLM			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – TRACEABILITY/MOCK RECALL

Audit of: Traceability/Mock Recall	Auditor: Clayton Berry	Audit Criteria: MS-2060:4.5.2.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Najorie Jennings-Dawkins,traceability/mock recall form no.MS-2061 dated August 20,2020			
Evaluation:			
Effectiveness:			

### NONCONFORMITY REPORT

Incident Identification Number: 000000.00007		
Non-Conformity Report #: 1	Auditor (s): Clayton Berry	Date: November 3, 2020
Audit of : Traceability/Mock Recall	Audit Criteria: MS-2060:4.1.1.1	

Statement of Nonconformity:	
<p>Oshayne Malcolm stated that all incoming raw materials should be recorded on the transportation log however the transportation log was observed and the lot numbers for the brown sugar dated, 24, 26 and the 29 of October were not logged.</p>	
Responsible Party: Najorie Jennings-Dawkins	
Auditor Signature:	Signature:

### CONFORMITY REPORTS – RECALL/WITHDRAWAL

Audit of: Recall/Withdrawal	Auditor: Najorie Jennings-Dawkins	Audit Criteria: ISO/TS 22002-1:2009; 15.1	Auditees: Dianna Tomlinson
Audit Evidence:  According to the General Manager, the procedure, MS 2090, dictates how products are handled in the event they do not meet specifications and need to be recalled.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – RECALL/WITHDRAWAL

Audit of: Recall/Withdrawal	Auditor: Najorie Jennings-Dawkins	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:  According to General Manager, the facility has never done a recall to date. No evidence of a recall was present to support that one was done.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – RECALL/WITHDRAWAL

Audit of: Recall/Withdrawal	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2090;4.2.5	Auditees: Dianna Tomlinson
Audit Evidence:  The General Manager stated that in the event of a recall the distributors are notified within 24 hours. This agrees with MS 2090 section 4.2.5 which states that affected distributors are contacted within 24 hours.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – RECALL/WITHDRAWAL

Audit of: Recall/Withdrawal	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2090;4.5.1	Auditees: Dianna Tomlinson
Audit Evidence:  According to the General Manager, In the event of a recall the items would be stored in the nonconforming area. There were no recalled items in the nonconformity area when checks were done.			
Evaluation:			
Effectiveness:			

### NONCONFORMITY REPORT

Incident Identification Number: 000000.00008		
Non-Conformity Report #: 1	Auditor (s): Najorie Jennings- Dawkins	Date: October 21, 2020
Audit of : Recall/Withdrawal	Audit Criteria: MS 2090;4.2.9	
Statement of Nonconformity:  According to the procedure MS 2090;4.2.9, the system should be checked with a mock recall on an annual basis. No records were available to show the last time a mock recall was done.  Responsible Party: Dianna Tomlinson		

Auditor Signature:	Signature:
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### CONFORMITY REPORTS – INTERNAL AUDIT

Audit of: Internal Audit	Auditor: Oshayne Malcolm	Audit Criteria: MS-2100:4.1.2	Auditees: Khamisha Williams
Audit Evidence:			
Clayton Berry MS-2100 Revision #10 Audit report 2019 and 2018			
Evaluation:			
Clayton Berry states that the frequency of the food safety management system is done once per year this was confirmed by the procedure MS-2100 Revision #10 document.			
Effectiveness:			

### CONFORMITY REPORTS – INTERNAL AUDIT

Audit of: Internal Audit	Auditor: Oshayne Malcolm	Audit Criteria: MS-2100:4.1.4	Auditees: Khamisha Williams
Audit Evidence:			
Khamisha Williams Certification Attendance Certificate for Khamisha Williams, Oshayne Malcolm, Tiffani Stewart, Clayton Berry and Najorie J. Dawkins			
Evaluation:			
Khamisha Williams states that all internal auditors are certified and this was confirmed by the certification attendance certificate dated September 4 2017			
Effectiveness:			

### CONFORMITY REPORTS – INTERNAL AUDIT

Audit of: Internal Audit	Auditor: Oshayne Malcolm	Audit Criteria: MS-2100:4.3.1-4.3.2	Auditees: Khamisha Williams
Audit Evidence:			
Najorie Jennings Dawkins MS-2100 Revision #10			
Evaluation:			

Najorie Jennings Dawkins states that the responsibility of the process owners in internal audit is to discuss the non conformance and determine the root cause and correction and corrective action with the food safety team this was confirmed by the procedure MS-2100 Revision #10.

Effectiveness:

## CONFORMITY REPORTS – INTERNAL AUDIT

Audit of: Internal Audit	Auditor: Oshayne Malcolm	Audit Criteria: MS-2100:4.2.1-4.2.6	Auditees: Khamisha Williams
Audit Evidence:			
Tiffani Stewart MS-2100 Revision #10			
Evaluation:			
Najorie Jennings Dawkins states that her role as an internal auditor is to audit for conformity through related documents and records and generates a report of the non conformance and opportunities for improvement and then inform the process owner of the findings and then verify the effectiveness of the corrective action for the closure of the non conformance.			
Effectiveness:			

## CONFORMITY REPORTS – MILLING OF DRY INGREDIENTS

Audit of: Milling of Dry Ingredients	Auditor: Tiffani Stewart	Audit Criteria: MS 2110:4.2.1-4.2.8	Auditees: Carl White
Audit Evidence:			
Carl White was interviewed and he stated that spices are weighed before milling and the information is recorded .They are then milled using a milling machine, weighed and weights are recorded after which the milled spices are placed in designed drums. Un-milled spices are returned to the dry ingredients storage area where they are stored.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – MILLING OF DRY INGREDIENTS

Audit of: Milling of Dry Ingredients	Auditor: Tiffani Stewart	Audit Criteria: MS 2110:5.1	Auditees: Carl White
Audit Evidence:			
Spice Mill Log MS-2111 Rev#1 Reviewed by : K.Williams on October 1, 2019			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – MILLING OF DRY INGREDIENTS

Audit of: Milling of Dry Ingredients	Auditor: Tiffani Stewart	Audit Criteria: ISO22000:2018:7.2	Auditees: Carl White
Audit Evidence:			
Attendance Record MS 2041 Rev# 9 for Milling Training dated January 30, 2019. Carl white explained process which corresponded to the procedure .			
Evaluation:			
Last training was done in 2019 none was scheduled for 2020.			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:4.1.12	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Everton Powell,MS-2150:4.1.12			
Evaluation:			
In an interview with Everton Powell one of persons in charge of the preserved peppers process he stated that 10 percent of vinegar is used in the process.			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS:4.1.1-4.1.8	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Carl white			
Evaluation:			
in the interview done with Carl white the steps in the preserved peppers process was explained and corresponded with the procedures			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:4.1.13	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
preserved peppers storage, three drums, two dated- marchalleck-28-9-20 and one dated marchalleck-22-9-2020			
Evaluation:			
an observation of the preserved peppers storage area was done and was found to be satisfactory			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:4.1.10	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Everton Powell			
Evaluation:			
the correct procedure was outlined be Everton Powell			
Effectiveness:			



### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:4.1.10	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Najorie Jennings- Dawkins			
Evaluation:			
Najorie Jennings- Dawkins explained that the lot numbers for the preserved peppers are assigned different from the aged ones and that salt is used in the preserved peppers with the amount used labeled on the drums which is not the case for the aged ones.			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:Revision #4	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Carl white, Najorie Jennings- Dawkins,MS-2150:Revision #4			
Evaluation:			
carl white stated that the salt percentage was changed from 5% to 15% which was reflected in MS-2150:Revision #4.			
Effectiveness:			

### CONFORMITY REPORTS – PRESERVED PEPPERS

Audit of: Preserved Peppers	Auditor: Clayton Berry	Audit Criteria: MS-2150:4.1.9	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Form no:HP-3006			
Evaluation:			
Upon observation records were satisfactory			
Effectiveness:			

## CONFORMITY REPORTS – EXTRACTION OF PICKAPEPPA SAUCE

Audit of: Extraction of Pickapeppa Sauce	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2160:4.1.1			
Evaluation:			
Everton Powell stated that the barrels are selected based on the number and the production date.			
Effectiveness:			

## CONFORMITY REPORTS – EXTRACTION OF PICKAPEPPA SAUCE

Audit of: Extraction of Pickapeppa Sauce	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2060:4.1.3			
Evaluation:			
It was observed that Carl White steams and rinses the Pickapeppa Sauce barrels before they are used in the extraction process.			
Effectiveness:			

## CONFORMITY REPORTS – EXTRACTION OF PICKAPEPPA SAUCE

Audit of: Extraction of Pickapeppa Sauce	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Mixing of Extracted PPS and Tomato Mixture, MS-2181, Rev # 2.			
Evaluation:			
I was informed by Carl White that the barrel numbers used in the production of the Pickapeppa Sauce are recorded. The barrel numbers used on October 28, 2020 are B1017 - B1025.			
Effectiveness:			

## CONFORMITY REPORTS – EXTRACTION OF PICKAPEPPA SAUCE

Audit of: Extraction of Pickapeppa Sauce	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Attendance Record, MS2041, Rev # 9, March 13, 2020			
Evaluation:			
Two employees were seen extracting the Pickapeppa sauce, Everton Powell na Carl White and both employees were trained in Extraction of PPS process on March 13, 2020.			
Effectiveness:			

## CONFORMITY REPORTS – MIXING OF PICKAPEPPA SAUCE AND TOMATO MIXTURE

Audit of: Mixing of Pickapeppa Sauce and Tomato Mixture	Auditor: Khamisha Williams	Audit Criteria: MS-2180:4.1.3	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2180:4.1.3			
Evaluation:			
I was informed by Everton Powell that he covers the kettle while it is mixing to prevent the sauce from being contaminated.			
Effectiveness:			

## CONFORMITY REPORTS – MIXING OF PICKAPEPPA SAUCE AND TOMATO MIXTURE

Audit of: Mixing of Pickapeppa Sauce and Tomato Mixture	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2180:4.1.4			
Evaluation:			

Everton Powell stated that he mixes the tomato mixture and the extracted sauce for 45 mins.

Effectiveness:

## CONFORMITY REPORTS – MIXING OF PICKAPEPPA SAUCE AND TOMATO MIXTURE

Audit of: Mixing of Pickapeppa Sauce and Tomato Mixture	Auditor: Khamisha Williams	Audit Criteria: MS-2180:4.3.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2180-4.3.1			
Evaluation:			
Tiffani Stewart stated that the tests done are pH, Acidity, Brix, Sensory Evaluation, Viscosity, Extraneous Matter, Mold and Yeast.			
Effectiveness:			

## CONFORMITY REPORTS – MIXING OF PICKAPEPPA SAUCE AND TOMATO MIXTURE

Audit of: Mixing of Pickapeppa Sauce and Tomato Mixture	Auditor: Khamisha Williams	Audit Criteria: MS-2180:4.3.2	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Lab Analysis-Pickapeppa Sauce, QC-4001a, Rev # 3 Lab Analysis-Yeast Test, QC-4001g, Rev # 0			
Evaluation:			
Records were observed for the tests carried out on the Pickapeppa Sauce and they are pH, Acidity, Organoleptic Evaluation, Extraneous Matter, Brix Viscosity Howard Mold Count and Yeast. For Lot 50 which was tested on October 5, 2020 the results are pH-3.23, Acidity-3.00, Organoleptic Evaluation-Good, Extraneous Matter-Nil, Brix-29.6, Viscosity-12.0cm Howard Mold Count-0% and Yeast-Absent			
Effectiveness:			

## CONFORMITY REPORTS – MIXING OF PICKAPEPPA SAUCE AND TOMATO MIXTURE

Audit of: Mixing of Pickapeppa Sauce and Tomato Mixture	Auditor: Khamisha Williams	Audit Criteria: MS-2180:4.2.3	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS-2180:4.2.3			
Evaluation:			
<p>Everton Powell states that he is informed by the laboratory and he informs the Bottling Plant team when the sauce is ready to be bottled.</p>			
Effectiveness:			

## CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS 2200	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Najorie Dawkins stated that yes there is . MS 2200 Rev#5			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS 2200:4.1.5.1- 4.1.5.6	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
<p>Dianna Tomlinson states that the role of the police is to observe the loading of the container. To ensure that there are no contrabands in the container. To ensure that the correct items and quantities are placed in the container. To sign off on documents .</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS 2200:4.1.2.2	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Oshayne Malcolm stated that all containers are inspected on arrival to ensure that they are clean , free from dust and off odours and are suitable for transporting finished products.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS2200:5.1-5.4	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Certificate of Excellence MS 2202 Rev#3 for Warbac 402 signed by N.dawkins, K.Williams and Dianna Tomlinson and dated June 2, 2020. Packing List MS2191 Rev#5 for Warbac 402 Inspected by :Clayton Berry and Reviewed by :NDawkins on June 2, 2020. Transportation Log-Sales MS2201 Rev#3 for Warbac 402 Reviewed by NJ-Dawkins on June 2, 2020. Sauce quantities were consistent on all records.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS2200:5.1	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Clayton Berry stated that the Name of the Distributor, Date, Products, Batch No, Quantity, Vehicle Lic #,Container #, Chasis #, Sender Initial. Record: Transportation Log -Sales MS2201 Rev#3 Reviewed by T.Stewart on April 3, 2020.</p>			
Evaluation:			

Effectiveness:

### CONFORMITY REPORTS – SHIPPING

Audit of: Shipping	Auditor: Tiffani Stewart	Audit Criteria: MS 2200:6.1	Auditees: Najorie Jennings-Dawkins
Audit Evidence:  Record :Police Confirmation Contact Certificate 40' container loaded on November 2, 2020 between 8-10.30am Quantities 2457 cases Container # TLLU478825-8 Seal Numbers ZZC SB300263/PAJ0195619 Signed by: DC Nadine Henry #95521 Dated : November 2 , 2020			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – CUSTOMER COMPLAINT

Audit of: Customer Complaint	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2240	Auditees: Dianna Tomlinson
Audit Evidence:  There was a procedure available, MS 2240, that was last updated on July 18, 2020.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – CUSTOMER COMPLAINT

Audit of: Customer Complaint	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2240: 4.2.8	Auditees: Dianna Tomlinson
Audit Evidence:  According to one of the members of the food safety team, Oshayne Malcolm, the customer complaint findings are usually discussed with the Food Safety Team. As to			

whether or not it is discussed before it reaches the customer, he was unsure.

Evaluation:

Effectiveness:

## NONCONFORMITY REPORT

Incident Identification Number: 000000.00009

Non-Conformity Report #: 1	Auditor (s): Najorie Jennings- Dawkins	Date: October 21, 2020
Audit of : Customer Complaint	Audit Criteria: MS 2040	
Statement of Nonconformity:  No evidence of training was found for the individual responsible for logging complaints.  Responsible Party: Dianna Tomlinson		
Auditor Signature:		Signature:

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00001

Opportunity Report #: 1	Auditor (s): Najorie Jennings- Dawkins	Date: October 21, 2020
Audit of : Customer Complaint	Audit Criteria: MS 2240: 4.1	
Statement of Opportunity:  According to the secretary there were no complaints to be logged since 2020. However, when the records were checked there were complaints logged. Upon investigation these complaints were received via email and passed on to the Quality Manager or the General Manager without first sending it o the secretary for her to log such. The logs were made by the Quality Manager. It would be recommended that all complaints be sent to the secretary for her to log the information before it is passed on to others.  Responsible Party: Dianna Tomlinson		



Auditor Signature:	Signature:
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OPPORTUNITY REPORT		
Incident Identification Number: 000000.00002		
Opportunity Report #: 2	Auditor (s): Najorie Jennings-Dawkins	Date: October 21, 2020
Audit of : Customer Complaint	Audit Criteria: MS 2240: 4.2.11	
<p>Statement of Opportunity:</p> <p>When complaints are received and investigation reveal that the parameters of the products are within range no recommendation for prevention is necessary. It makes it seem as though there is a genuine issue and the results didn't pick it up.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

## CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-conforming Raw Materials and Finished Products	Auditor: Tiffani Stewart	Audit Criteria: MS2070 :4.3.1.1-4.3.1.7	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Clayton Berry- Non-conforming finished products are reported to the Quality/Production Manager and are placed in the designated area. Date and quantity of nonconforming finished products are recorded. Production /Quality Manager will instruct Supervisor on what action to take. Actions include: Pouring out non-conforming sauce in drums or buckets. Adding water to dilute non-conforming sauce . Pouring diluted mixture into the drain. Cleaning drains , buckets and drums after pouring out nonconforming sauce . Non- conforming area was clearly identified.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-conforming Raw Materials and Finished Products	Auditor: Tiffani Stewart	Audit Criteria: MS 2070: 4.2.2.1-4.2.2.4	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Everton Powell-For the tomato, vinegar and in process liquid mixtures water is added and mixture is poured down the drain. For solid in process mixtures they are placed in drums and sent to the garbage area .</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

## CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-conforming Raw Materials and Finished Products	Auditor: Tiffani Stewart	Audit Criteria: MS 2070: 4.1.3.1	Auditees: Najorie Jennings-Dawkins
<p>Audit Evidence:</p> <p>Dianna Tomlinson states that she ensures that non-conforming raw materials are returned to the supplier or discarded if they do not meet specifications . Customs Department are advised before disposal is done. For finished goods the date and quantity are recorded , pictures are taken and customs are advised before disposal.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

## CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-	Auditor: Tiffani	Audit Criteria: MS	Auditees: Najorie
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conforming Raw Materials and Finished Products	Stewart	2070: 4.1.1.2, 4.3.1.2	Jennings-Dawkins
Audit Evidence:			
Areas were clearly identified.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-conforming Raw Materials and Finished Products	Auditor: Tiffani Stewart	Audit Criteria: MS2070:4.1.1.1-4.1.2.5	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
Oshayne Malcolm states that when a non-conforming raw material is received , the Quality/Production Manager is informed, the non-conforming raw material is then placed in its designated area. The Quality/Production Manager will advise the Inventory Personnel/Supervisor at a later date on what action is to be taken -whether to discard or dispose .			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – NON-CONFORMING RAW MATERIALS AND FINISHED PRODUCTS

Audit of: Non-conforming Raw Materials and Finished Products	Auditor: Tiffani Stewart	Audit Criteria: MS2071	Auditees: Najorie Jennings-Dawkins
Audit Evidence:			
MS 2071 Rev#5 Non-conformance Report 3 reviewed by :T.Stewart on October 6, 2020. One Drum of Mango Concentrate that was swollen was seen in the non-			

conforming raw material area.. The lot # was MC-129T and drum number was 2103. Action to be taken : Remove from storage area and discard. This issue was reported to the supplier.

Evaluation:

Effectiveness:

## CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction and Corrective Action	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2080;4.1.3	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Upon interviewing the Quality Manager, it was revealed that nonconforming products are recorded on the Non-conformance Report, MS 2071. To date, three non conformances have been logged and corrections and corrective actions recorded for each. She further went on to say that other non conformances are logged on the Verification Software and on the Process Audit Template manned by Quality Circle International. The verification platform was checked and there were no non-conformances under the Corrective Action Resolution Log. The process based template software showed that non conformances were identified in the 2019 audit activity. The audit activity for 2020 was underway and so no non conformances were yet generated.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction and Corrective Action	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2080;4.2	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Four workers were interviewed and they all responded by saying that issues are communicated by using the suggestion box. Some also responded by saying they communicate those issues and nonconformance directly. The responses agreed with procedure MS 2080, section 4.2.</p>			

Evaluation:
Effectiveness:

## CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction and Corrective Action	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2080	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>According to the Quality Manager, there is no set time for all actions on non-conformances to be carried out. The auditor or the verifier, based on the nature of the issue, will set a target date for the owner of the process to close out a non conformance.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction and Corrective Action	Auditor: Najorie Jennings-Dawkins	Audit Criteria: MS 2080: 4.6	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Three members of the Food Safety Team were interviewed separately and the basic response from all members was that the Food safety Team is responsible for deciding on what corrections and corrective actions should be taken. The Team also meets to review the effectiveness of the corrections or corrective actions. If non conformances are recurring then corrections are changed to corrective actions or set corrective actions changed. The explanation given by all members is a precise summary of Procedure 2080, section 4.6 which states the role of the Food Safety Team.</p>			
Evaluation:			
Effectiveness:			

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings- Dawkins	Date: October 26, 2020
Audit of : Correction and Corrective Action	Audit Criteria: PRP 1090: 4.2.1	
<p>Statement of Opportunity:</p> <p>Even though there were two separate areas identified for conforming and nonconforming products, items that fit neither description were found in nonconforming area. Boxes of labels were seen in the area as well as pallet straps and cartons.</p> <p>Responsible Party: Dianna Tomlinson</p>		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Clayton Berry	Audit Criteria: MS-2040:4.2.8.1	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>MS-2043 Revision #8, Khamisha Williams</p>			
<p>Evaluation:</p> <p>Khamisha Williams explains that refresher trainings are conducted on an annual basis. Trainings are done based on the needs assessment.</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Clayton Berry	Audit Criteria: MS-2040:4.2.1.1.3	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>Tiffany Stewart</p>			
<p>Evaluation:</p>			

Tiffany Stewart states that there are many reasons that may trigger needs assessment training which includes customer complaint, non conformity and internal audit findings.

Effectiveness:

### CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Clayton Berry	Audit Criteria: MS-2040:4.1.5	Auditees: Dianna Tomlinson
Audit Evidence:			
Training assignment form #MS-2045			
Evaluation:			
Dianna Tomlinson states that training are validated through testing.			
Effectiveness:			

### CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Clayton Berry	Audit Criteria: MS-2040:4.2.5.2	Auditees: Dianna Tomlinson
Audit Evidence:			
Attendance records MS-2041			
Evaluation:			
An observation was made of the attendance training records for verification.			
Effectiveness:			

### CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Clayton Berry	Audit Criteria: MS-2040:4.2.8	Auditees: Dianna Tomlinson
Audit Evidence:			
Domain Virgin, Marlon Bailey, Shirley Williams, Mary Lake and Michael Nunes			
Evaluation:			
A few employees were interviewed and asked if they were trained in their respective			

areas and to explain the procedures in the area that they worked and the explanations conformed to the company procedures.

Effectiveness:

## NONCONFORMITY REPORT

Incident Identification Number: 000000.00010

Non-Conformity Report #: 1	Auditor (s): Clayton Berry	Date: October 23, 2020
Audit of : Training	Audit Criteria: MS-2040:4.2.2.1	
Statement of Nonconformity:  Three new employees were interviewed and none were trained in the specific area they assigned to.		
Responsible Party: Dianna Tomlinson		
Auditor Signature:		Signature:

## CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:8.5.2.2.2	Auditees: Khamisha Williams
Audit Evidence:  Khamisha Williams- Hazard Analysis is done on raw materials /ingredients. HP 3070			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO2 2000:2018:8.5.1.4	Auditees: Khamisha Williams
Audit Evidence:  Yes it is described and found in document HP 3000 Rev#9 for all Pickapeppa			



Products. For the Pickapeppa Sauce its intended use is a ready to eat condiment for meat and vegetables .

Evaluation:

Effectiveness:

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: HP3000-3090	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>Khamisha Williams-The HACCP programme consists of HACCP scope, product description, intended use ,product ingredients and incoming materials, process flow chart, process flow description, plant schematic , hazards analysis, OPRP determination and plan,</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO2 2000:2018:8.1.5.1-2	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>There is a flow diagram for each product manufactured which shows process steps, where raw materials and ingredients enter the process and where end products are released . This is found in HP 3020 Rev#10 reviewed August 28, 2020 by K.Williams.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP	Auditor: Tiffani	Audit Criteria: ISO2	Auditees: Khamisha
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Programme	Stewart	2000:2018:8.5.1.3	Williams
Audit Evidence:			
End products are described in document HP3000 Rev#10			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO2 2000:2018:7.2,8.5.1.5.1,8.5.1-3	Auditees: Khamisha Williams
Audit Evidence:			
Oshayne Malcolm states that the Food Safety Team validates that selected control measures are capable of achieving the intended control of the hazard; maintains and update flow diagrams, determines what corrective actions and corrections are taken for non-conformances identified. Khamisha Williams states that the food safety team conducts hazard analysis, update the food safety management system and analyze results of verification that shall be used as an input to the performance evaluation of the FMS.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:5.3.2	Auditees: Khamisha Williams
Audit Evidence:			
Dianna Tomlinson-To ensure that the FSMS is established , implemented, maintained and updated .To ensure that the food safety team is trained and competent. Managing and organizing the work of the food safety team .			
Evaluation:			
Effectiveness:			

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### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:8.5.2.2.2	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>Khamisha Williams-Hazard Analysis is done at process steps as was seen in document HP 3070, Hazard Analysis &amp; OPRP Determination.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO2000:2018:8.5.2.2	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>HP-3070 For physical fragments the size should be less than 7mm-that is the acceptable level.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:8.5.2.4	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>HP3070. Khamisha Williams stated that control measures are in place for each hazard identified . Control measures for receival include :Procedure-Management of Purchased Material, COA, Specification sheet , and Phytosanitary Certificate to prevent and reduce hazards at the receival step.</p>			
Evaluation:			

Effectiveness:

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: ISO2 2000:2018:8.5.4.1-2	Auditees: Khamisha Williams
Audit Evidence:  Khamisha Williams -A quantitative table is used to determine which hazards are significant or not. Significant hazards are classified as OPRP or CCP . It was determined that we have OPRPs at the facility. HP3070			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: HP 3100	Auditees: Khamisha Williams
Audit Evidence:  Khamisha Williams, QC Manager stated that the time and the temperature are recorded for Cooking (OPRP 1). Initial and final filling temperatures and sterilization time are recorded for bottling (filling) (OPRP 2) OPRP1 Records seen: HP 3003 Rev#9 Cooking Log-Tomato Mixture reviewed on Sept 7, 2020. HP 3002 Rev#7 Cooking Log-onions reviewed by T.Stewart on November 4, 2020. HP 3006 Rev #6 Cooking Log -Hot Pepper reviewed on July 31, 2019 OPRP 2 HP 3007 Rev#2 Temperature and Headspace Sterilization reviewed on Sept 11,2020 by Tiffani Stewart. HP 3004 Rev#9 reviewed by T.Stewart on October 28, 2020			
Evaluation:  All cooking times and temperatures adhered to targets set in the OPRP Plan.			
Effectiveness:			

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: HP 3100	Auditees: Khamisha Williams
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<p>Audit Evidence:</p> <p>HP 3100 OPRP Plan- if process deviation occurs, correction and corrective actions are listed in the plan .</p>
<p>Evaluation:</p> <p>Khamisha Williams stated that there has never been any deviation from the OPRP plan but if it occurs as stated in the OPRP plan- corrections and corrective actions will be taken</p>
<p>Effectiveness:</p>

### CONFORMITY REPORTS – HACCP PROGRAMME

Audit of: HACCP Programme	Auditor: Tiffani Stewart	Audit Criteria: HP 3100	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>HP 3003 Rev#9 Cooking Log-Tomato Mixture reviewed on Sept 7, 2020 by T.Stewart HP 3002 Rev#7 Cooking Log-onions reviewed by T.Stewart on November 4, 2020 HP 3006 Rev #6 Cooking Log -Hot Pepper reviewed on July 31, 2019 OPRP 2 HP 3007 Rev#2 Temperature and Headspace Sterilization reviewed on Sept 11, 2020 HP 3004 Rev#9 reviewed by T.Stewart on October 28, 2020 For all the records seen the intended targets were met.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: HP 3110	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>It was reported by the Quality Manager that no nonconforming products have been handled to date. However, there is a document, HP 3110- Process Deviation, that has measures outlined in the event a deviation is encountered. When such document was check, the various methods used to correct a deviation was listed. For example, if the pH of the sauce is less than 2.5, water is added.</p>			
<p>Evaluation:</p>			

Effectiveness:

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1120: 4.3.1	Auditees: Khamisha Williams
Audit Evidence:  According to PRP 1120; 4.4.1, all incoming materials should be tested for quality against the Company's Specifications Sheets. Evidence showed that all raw materials used in products are tested before they are used. The QC 4002, Lab Analysis-Raw Material Form, shows the date when the raw materials are checked and the different tests done. The tests for the raw materials used in the onion cooking on the 22/10/2020 were requested. The Lab Analysis form showed that all the tests were done prior to using the ingredients in the process. The onions for example were tested on the 08/10/2020, the salt on the 05/10/2020, the brown sugar on the 13/10 and the 14/10,2020. Based on checks done, there were no nonconformity identified with the testing of the raw materials.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: QC 4000	Auditees: Khamisha Williams
Audit Evidence:  Based on checks done no reagent that is currently being used in the lab has expired. Two reagents were chosen and information recorded. The Potato Dextrose Agar(PDA) with a lot number 426052 had an expiry date of 08/08/2021. The Sodium Hydroxide Pellets with a lot number of 186083 had an expiry date of January 2024. Based on findings there was no nonconformity recorded.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: HP 3080;4.6.3.1	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>According to procedure HP 3080, section 4.6.3.1, the following tests are supposed to be carried out on all finished products: Acidity, pH, Brix, Sensory Evaluation, Extraneous Matter, Yeast, Howard Mould Count and Viscosity. When the Quality Manager was asked about the various tests done on the products her response was in line with the procedure. PPS Lot 52 was randomly picked and records reviewed. Form QC 4001 showed that tests with the following results were done on October 13, 2020: pH- 3.28, acidity-3.23, organoleptic tests- ticked, extraneous matter- nil, Brix-30.3, viscosity-12.5, mould-0. There were no results available for the yeast test. According to the QC Manager the yeast tests are usually done in bulk and was not yet done.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1120: 4.3.1	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>PRP 1120; 4.3.1 stipulates that all packaging materials must be tested before they are used. Different packaging materials were checked and all the relevant tests were done. The Form, QC 4003-Lab Analysis-Packaging Materials, shows the description, weight, dimensions and the overall status of the material whether it has passed or failed the tests.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: PRP 1030: 4.3.3	Auditees: Khamisha Williams
Audit Evidence:			

According to PRP 10:30;4.3.3, all laboratory equipment must be calibrated yearly by an external source and calibrated before use. In an interview with the QC Manager it was revealed that the refractometer and the pH are calibrated yearly and before use while the thermometer are done yearly and the scales twice per year. External calibration record, CALR/21/20/3648 showed that the digital thermometer and the liquid in glass thermometer was calibrated by the Bureau of Standards Jamaica on the 12th of June, 2020. Calibration reports, CALR/21/2020/0978 and CALR/21/2019/6745 were also seen for the pH meters with batch codes of 860031 and 860033, respectively. The Hanna refractometers, serial numbers B0095849 and G0016022 were calibrated on 21/08/2020 and 18/02/2020, respectively. These were done by the Bureau of Standards Jamaica as seen on the report, CALR 25/2020/5405 and CALR25/2020/0977, correspondingly. The small platform scale, serial number B339750079, the large platform scale, serial number WT600LS-HS049 and the laboratory table top scale, serial number I1601, were last calibrated on 25/11/2019. No 2020 records are available since they are supposed to be done every 6 months but the scales were checked and up to date calibration stickers are affixed. Internal Calibration records for the pH meter and the refractometer showed that these devices are calibrated before use. The 13th of October was given as a day when different tests were done for PPS lot 52. Checks were done and the pH and refractometer calibration records, QC-4004 and QC 4005 for that date was found.

Evaluation:

Effectiveness:

### CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: N/A	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>According to the QC Manager product samples are kept for the shelf life of the products, that is, 3 years. A random sample was requested for a product that was done 3 years ago and was found. The product was PPS with a lot number of : L14L156PCL.</p>			
Evaluation:			
Effectiveness:			



## CONFORMITY REPORTS – LAB ANALYSIS

Audit of: Lab Analysis	Auditor: Najorie Jennings-Dawkins	Audit Criteria: N/A	Auditees: Khamisha Williams
<p>Audit Evidence:</p> <p>It was revealed by the QC Manager that three resources are used to control testing activities in the lab: 1. Compendium of Methods, 5th Edition, 2015 by Yvonne Salfinger 2. Official Methods of Analysis of AOAC International, 18th Edition, 2005 3. Quality Control Laboratory Manual, WC 4000, last updated 2019.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (LOGO USE)

Audit of: FSSC Additional Requirements (Logo Use)	Auditor: Najorie Jennings-Dawkins	Audit Criteria: Additional Requirements	Auditees: Dianna Tomlinson
<p>Audit Evidence:</p> <p>According to the standard, the certified organization may use the FSSC logo, but only in conjunction with the certification mark. The Pickapeppa Company's website, <a href="https://pickapeppasauce.co/certification-and-quality/">https://pickapeppasauce.co/certification-and-quality/</a> was checked to find out if the FSSC logo was present. On the Certification and Quality page, the FSSC 22000 logo was present with the accompanying certifying body name, Intertek. The Pickapeppa sign that was at the front of the facility also had the FSCC 22000 logo in conjunction with the certifying body, Intertek.</p>			
Evaluation:			
Effectiveness:			

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (LOGO USE)

Audit of: FSSC Additional	Auditor: Najorie Jennings-Dawkins	Audit Criteria: Additional	Auditees: Dianna Tomlinson
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Requirements (Logo Use)		Requirements	
<p>Audit Evidence:</p> <p>To avoid the impression that the certifying body has certified or approved any product, processor service supplied by the certified organization the FSSC 22000 logo is not allowed to be used on: a product; its labeling, its packaging, in any other manner that implies FSSC 22000 approves a product, process or service. With respect to this information , all the product labels and packaging materials were checked and none of them had any FSSC logo imprinted. It stands to reason that the company was in compliance with the standard.</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
<p>Audit Evidence:</p> <p>CCTV and security guard</p>			
<p>Evaluation:</p> <p>It was observed that the property perimeter is fenced and is being monitored by CCTV. A security guard is also at the entrance.</p>			
Effectiveness:			

### CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
Audit Evidence:			

Lights around the entire facility.
Evaluation:
It was observed that sufficient lighting was around the facility
Effectiveness:

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
Audit Evidence:			
Key Log, PRP-1112			
Evaluation:			
There is a key log in place which allow keys to be signed out and signed in by authorized personnel.			
Effectiveness:			

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
Audit Evidence:			
Processing employees have burgundy shirts and bottling plant employees have yellow shirts and there access are restricted. Supervisors wear red and blue shirts and have access to all areas. Doors are locked.			
Evaluation:			
Observations were made where the doors to production areas, storage areas, sauce holding area and bottling plant are locked and keys have to be signed for before persons are allowed to enter the areas. Uniforms for the bottling and processing areas are colour coded.			
Effectiveness:			

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
<p>Audit Evidence:</p> <p>Food Defense Plan Builder Vulnerability Assessment was reviewed and all the process steps have a score of 4 hence the steps are not vulnerable or accessible.</p>			
<p>Evaluation:</p> <p>Tiffani Stewart stated that the vulnerability assessment is done by evaluating the process steps in production to identify the steps that are at risk by using the food defense plan builder. For vulnerability and accessibility there are 5 levels and a score is attached to each level. Vulnerability: Accessibility: Highly vulnerable 9-10 Easily accessible 9-10 Vulnerable 7-8 Accessible 7-8 Somewhat vulnerable 5-6 Partially accessible 5-6 Barely vulnerable 3-4 and Hardly accessible 3-4 and Not Vulnerable 1-2 Not accessible 1-2 Both scores are added for each level which would give the Vulnerability Assessment Score. Any process step with a score above 6 would be an actionable step.</p>			
<p>Effectiveness:</p>			

## CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (TACCP & VACCP)

Audit of: FSSC Additional Requirements (TACCP & VACCP)	Auditor: Khamisha Williams	Audit Criteria: Food Defense Plan	Auditees: Tiffani Stewart
<p>Audit Evidence:</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Khamisha Williams	Date: October 29, 2020
Audit of : FSSC Additional Requirements (TACCP & VACCP)	Audit Criteria: Food Defense Plan	
<p>Statement of Opportunity:</p> <p>There is an emergency alert system that alerts all areas of the facility but there is no record that the system is tested regularly.</p>		
Responsible Party: Tiffani Stewart		
Auditor Signature:		Signature:

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00002		
Opportunity Report #: 2	Auditor (s): Khamisha Williams	Date: October 29, 2020
Audit of : FSSC Additional Requirements (TACCP & VACCP)	Audit Criteria: Food Defense Plan	
<p>Statement of Opportunity:</p> <p>Tiffani stated that a procedure is in place to receive and store all reagents where items are verified and logged, however there was no log sheet.</p>		
Responsible Party: Tiffani Stewart		
Auditor Signature:		Signature:

### CONFORMITY REPORTS – FSSC ADDITIONAL REQUIREMENTS (IN CONJUNCTION WITH PREREQUISITE PROGRAMS)

Audit of: FSSC Additional Requirements (In	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
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conjunction with PreRequisite Programs)			
Audit Evidence:			
Evaluation:			
FSSC Additional Requirements in conjunction with PRPs are audited in the following Prerequisite Programs: Utilities, Management of Purchased Materials, Cleaning, Sanitizing and Environmental Monitoring and Product Information and Consumer Information			
Effectiveness:			

### CONFORMITY REPORTS – CONTINUAL IMPROVEMENT

Audit of: Continual Improvement	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Diana Tomlinson			
Evaluation:			
Diana Tomlinson stated that the continual improvement of the Food Safety Management System by discussing all non conformances in the Food Safety Team who will identify and implement Correction and Corrective Action. They are then brought to Top Management who will provide resources.			
Effectiveness:			

### CONFORMITY REPORTS – CONTINUAL IMPROVEMENT

Audit of: Continual Improvement	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Food Safety Management Review, November 12, 2019, 10am to 4pm			
Evaluation:			
Tiffani Stewart stated that Management Reviews are carried out on an annual basis. The Management Review was conducted on November 12, 2019. The report had the Agenda, Findings of Internal and External Audit, customer complaints, status of			

corrective action and analysis of verification activities.
Effectiveness:

### CONFORMITY REPORTS – CONTINUAL IMPROVEMENT

Audit of: Continual Improvement	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Internal Audit, MS-2100			
Evaluation:			
Internal Audits are conducted at minimum once per year. Internal audit assist in continual improvement because it helps to determine whether the food safety management system is conforming to the requirements and the findings are used to update the management system.			
Effectiveness:			

### CONFORMITY REPORTS – CONTINUAL IMPROVEMENT

Audit of: Continual Improvement	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Verification Software			
Evaluation:			
Verification activities are carried out on the processes on the Food Safety Management System. The verification activities are analysed and is a part of the management review.			
Effectiveness:			

### CONFORMITY REPORTS – CONTINUAL IMPROVEMENT

Audit of: Continual Improvement	Auditor: Khamisha Williams	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
Verification Software Tool, Corrective Action Form			

<p>Evaluation:</p> <p>Diana Tomlinson stated that Corrective Actions are recorded in the Verification software on the Corrective Action Form.</p>
<p>Effectiveness:</p>

### CONFORMITY REPORTS – BARREL MANAGEMENT

Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: MS 2290:4.1.1.1- 4.1.1.6	Auditees: Carl White
<p>Audit Evidence:</p> <p>Carl White- ensure that barrels are intact they have no dents, hoops are not missing or damaged, there are no worm holes.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – BARREL MANAGEMENT

Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: MS 2290 :4.1.2.1- 4.1.2.8	Auditees: Carl White
<p>Audit Evidence:</p> <p>Carl White states that new barrels are prepared before usage by: a) Removing the head and de-charring b) Rinsing barrel with water to remove any charred remains c) Filling barrel with water and allow it to stand for 1-7 days to stop leakage and to allow for sealing . d) Tightening and plugging holes if there are still signs of leakage e) Changing water in the barrels monthly or as the needs arises f) Discarding barrel if it cannot be repaired.</p>			
<p>Evaluation:</p>			
<p>Effectiveness:</p>			

### CONFORMITY REPORTS – BARREL MANAGEMENT



Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: MS 2290: 4.1.3.1-4.1.3.4	Auditees: Carl White
<p>Audit Evidence:</p> <p>Carl white states that barrels are cleaned by rinsing both inside and outside with water, steaming for 3-5 mins and then rinsing again . Barrels are then drained and stored until they are ready to be used .</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – BARREL MANAGEMENT

Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: MS 2290:4.1.4.1-4.1.4.5	Auditees: Carl White
<p>Audit Evidence:</p> <p>Barrel storage areas 1 and 2 were in good condition with barrels showing minimal to no leakage. Carl White - Barrels are checked daily for leakage . If leakage occurs holes are plugged and or bands tightened. Hot pepper barrels are stirred once per week and checked daily. If barrels cannot be repaired they are changed . New barrels are steamed and rinsed and water sample taken to the lab for testing . Once approved, sauce is transferred from an old barrel to new barrel via a funnel and and the new barrel is labelled .</p>			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – BARREL MANAGEMENT

Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: MS 2290 :4.2.1.2	Auditees: Carl White
<p>Audit Evidence:</p> <p>QA Manager states that after barrels are cleaned ,extraneous matter tests are done on the final rinse water from the barrels . Record seen- Steaming of Barrels QC 4014 Rev#1,Reviewed by; K.Williams on 9/7/2020.</p>			
Evaluation:			

Effectiveness:

### CONFORMITY REPORTS – BARREL MANAGEMENT

Audit of: Barrel Management	Auditor: Tiffani Stewart	Audit Criteria: ISO22000:2018:7.2	Auditees: Carl White
Audit Evidence:  MS 2041 Rev# 9 Attendance Record for Barrel Management training dated July 4, 2019. Last training was done in 2019 , there is one scheduled for November 2020.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – INTERNAL AND EXTERNAL ISSUES

Audit of: Internal and External Issues	Auditor: Oshayne Malcolm	Audit Criteria: MS-2320:4.0	Auditees: Dianna Tomlinson
Audit Evidence:  Tiffani Stewart MS-2320 Revision #0			
Evaluation:  Tiffani Stewart states that internal and external issues are identified by using STEPLRMCCFF technique and this was confirmed by the procedure MS-2320 Revision #0.			
Effectiveness:			

### CONFORMITY REPORTS – INTERNAL AND EXTERNAL ISSUES

Audit of: Internal and External Issues	Auditor: Oshayne Malcolm	Audit Criteria: MS-2320:3.4	Auditees: Dianna Tomlinson
Audit Evidence:  Tiffani Stewart MS-2320 Revision #0			
Evaluation:  Tiffani Stewart states that the SWOT analysis is the technique that is used by			

company to determine the strength, weaknesses, opportunities and threats.

Effectiveness:

### CONFORMITY REPORTS – NEEDS AND EXPECTATIONS

Audit of: Needs and Expectations	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:4.2	Auditees: Dianna Tomlinson
Audit Evidence:  Diana Tomlinson says that needs and expectations have been clearly identified and can be found in the iso process and risk based tool.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – NEEDS AND EXPECTATIONS

Audit of: Needs and Expectations	Auditor: Tiffani Stewart	Audit Criteria: ISO 22000:2018:4.2	Auditees: Dianna Tomlinson
Audit Evidence:  Dianna Tomlinson says that needs and expectations have been evaluated for potential risks and this can be found in the iso process and risk based implementation software. Hazards are identified and the level of risks determined.			
Evaluation:			
Effectiveness:			

### CONFORMITY REPORTS – NEEDS AND EXPECTATIONS

Audit of: Needs and Expectations	Auditor: Tiffani Stewart	Audit Criteria: Isoimplementationsoftware.com	Auditees: Dianna Tomlinson
Audit Evidence:  Dianna Tomlinson -We recognize that there are hazards associated with the needs and expectations of interested parties hence control measures are put in place which			

are monitored.
Evaluation:
Effectiveness:

### CONFORMITY REPORTS – MONITORING

Audit of: Monitoring	Auditor: Khamisha Williams	Audit Criteria: Isoim plementationsoftwar e.com	Auditees: Dianna Tomlinson
Audit Evidence:			
ISO implementation software, Monitoring Activity.			
Evaluation:			
A frequency table was generated which have the area to be monitored, the frequency of each area to be monitored, the process owner, responsible person, status and action to take.			
Effectiveness:			

### CONFORMITY REPORTS – MONITORING

Audit of: Monitoring	Auditor: Khamisha Williams	Audit Criteria: Isoim plementationsoftwar e.com	Auditees: Dianna Tomlinson
Audit Evidence:			
Third Party Certification should be monitored annually and is due in 344 days. Updated devices should be monitored semi annually and is due in 144 days.			
Evaluation:			
Monitoring was done according to schedule as the areas were highlighted green with a due date.			
Effectiveness:			

### CONFORMITY REPORTS – MONITORING

Audit of: Monitoring	Auditor: Khamisha	Audit Criteria: Isoim	Auditees: Dianna
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	Williams	plementationsoftwar e.com	Tomlinson
Audit Evidence:			
Corrcetive Action Resolution Log			
Evaluation:			
At the time of the audit no non-conformances were identified and hence no corrective actions were done.			
Effectiveness:			

## CONFORMITY REPORTS – RISKS AND OPPORTUNITIES

Audit of: Risks and Opportunities	Auditor: Najorie Jennings-Dawkins	Audit Criteria: N/A	Auditees: Dianna Tomlinson
Audit Evidence:			
According to the Quality Manager, operational risks are identified and control measures put in place by the company's hazard analysis program. Upon investigation it was seen that the document HP-3070, Hazard Analysis and CCP-OPRP Determination, showed the different process steps for the different products, and biological, chemical and physical hazards/ risks identified. There was also a column-8- that had the control measures identified for each process step.			
Evaluation:			
Effectiveness:			

## OPPORTUNITY REPORT

Incident Identification Number: 000000.00001		
Opportunity Report #: 1	Auditor (s): Najorie Jennings-Dawkins	Date: October 26, 2020
Audit of : Risks and Opportunities	Audit Criteria: N/A	
Statement of Opportunity:		
Even though the list of the risks was present, it was not easy to identify the category of risk. For more information to be retrieved for each risk, the risk had to be opened up and time spent to go through it.		

Responsible Party: Dianna Tomlinson	
Auditor Signature:	Signature:

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00002		
Opportunity Report #: 2	Auditor (s): Najorie Jennings- Dawkins	Date: October 26, 2020
Audit of : Risks and Opportunities	Audit Criteria: N/A	
<p>Statement of Opportunity:</p> <p>The response from the Quality Manager was that for the operational risks, the finished products are sent to an external lab for testing and the results are usually favourable, indicating that control measures are effective. The strategic risks were recently identified so not much evaluation activity has taken place to date. The frequency for the monitoring of the strategic risks have been set and is now waiting on the time for them to be carried out.</p>		
Responsible Party: Dianna Tomlinson		
Auditor Signature:	Signature:	

OPPORTUNITY REPORT		
Incident Identification Number: 000000.00003		
Opportunity Report #: 3	Auditor (s): Najorie Jennings- Dawkins	Date: October 26, 2020
Audit of : Risks and Opportunities	Audit Criteria: N/A	
<p>Statement of Opportunity:</p> <p>The tool that the facility uses showed a control measure for each of the risk identified. However, to view the control measures one would have to go through each of the listed risk. The control measures were not in a document that could be easily viewed.</p>		
Responsible Party: Dianna Tomlinson		
Auditor Signature:	Signature:	

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