Tijule Company Limited

FSSC V5.1 FSMS Audit

Internal Audit Report

Audit Dates: November 2, 2021 - December 8, 2021

Audit Report: FSSC V5.1 FSMS Audit	Audit: Report No. 372
Internal Audit	
Company Limited	

Audited Facility: Company Limited

Address: 30 Paisley Ave. Palmers Cross

Audit Team: Elizabeth Fitzgerald, Sharon Peterson, Anne Marie Henry, Sharlene Williams, Orane Evans, Tracyann Hibbert, Yoniel Edwards, David Gardner, Priscilla Muirhead, Kay Roach

Date Of Audit: November 2, 2021 - December 8, 2021

Scope Of Audit: The full food safety management system of Tijule Company

Limited

Contact Person:

Summary of Non-Conformities Identified in The Internal Audit Process

Process #	Process Names	Non Confor
		mances
1	Food Defense and Additional Requirement Food Defense	1
2	Food Fraud and Additional Requirement Food Fraud Prevention	1
3	Personnel Hygiene and Facilities	2
4	Waste Management	1
	TOTAL	5

Summary of Conformities Identified in The Internal Audit Process

Process #	Process Names	Conformanc
		es
1	Ackee	3
2	Additional Requirement - Management of Services, ISO	3
	22000:2018 7.1.5, 7.1.6	
3	Additional Requirement - Use of FSSc Logo/Certification Mark	3
4	Bammy	3
5	Callaloo	3
6	Chemical Management	4
7	Cleaning and Sanitation, Additional Requirement Environmental	3
	Monitoring	
8	Construction and Layout of Buildings	6
9	Context of the Organization	3
10	Continual Improvement	1
11	Control of Records and Documents and Changes	4
12	Correction and Corrective Action	5
13	Customer complaints	3
14	Emergency preparedness and response	3
15	Equipment Suitability, Cleaning and Maintenance	4
16	Food Defense and Additional Requirement Food Defense	3
17	Food Fraud and Additional Requirement Food Fraud Prevention	2
18	Internal and external communication	3
19	Internal audit	4
20	Jam and Jelly	3

21	Jerk Seasoning	3
22	Layout of Premises and Work Station	4
23	Management of Purchased Materials, Control of Non-Conforming Raw Material and Additional Requirements - Management of	3
24	supplied material Management Review	5
25	Performance Evaluation	1
26	Personnel Hygiene and Facilities	2
27	Pest Control	4
28	Planning and Objectives of the food safety management system	2
29	Prevention of Cross Contamination, Additional Requirement Allergen Management	4
30	Product Information and Additional Requirement Product Labeling	3
31	Product Recall	4
32	Quality Laboratory	4
33	Sauce	2
34	Supplier Approval	3
35	Traceability	7
36	Training	3
37	Utilities	7
38	Verification and Validation	3
39	Warehousing	3
40	Waste Management	3
	TOTAL	136

<u>Summary of Opportunities for Improvement Identified in The Internal Audit Process</u>

Process #	Process Names	Conformanc
		es
1	Management of Purchased Materials, Control of Non-Conforming Raw Material and Additional Requirements - Management of	2
	supplied material	
	TOTAL	2

Food safety and Quality Manager is scheduling the audit of Tijule's FSSC v5.1 full system audit of the FSMS in the final trimester of the year.

AUDIT BRIEF

Audit Ref	16349	936274	Audit of:		FSSC V5.1 FSMS
					Audit
Date Scheduled	Nove	mber 2, 2021 -	Locations 30 Paisley		30 Paisley Avenue,
	Decem	ber 8, 2021	Palmers Cross		Palmers Cross, May
					Pen
Audit Team:		Process Own	wner(s): Roy Newell-Managing		ewell-Managing
Elizabeth Fitzgerald	,		Director		r
Sharon Peterson, Anne				Nicola \	/alentine-Food
Marie Henry, Sharlen	е		Safety Team Leader		Team Leader

Williams, Orane Evans, Tracyann Hibbert, Yoniel Edwards, David Gardner, Priscilla Muirhead, Kay Roach

Audit Team Leader: Elizabeth Fitzgerald

Elizabeth Fitzgerald

-Research & Development

Manager

Sharon Peterson-Production

Manager

Sharlene Williams-Sales and

Marketing Rep.

Orane Evans-Maintenance

Manager

Kadene Wynter-Food Safety

Coordinator

Noel McLean-Factory

Manager

Ricardo Johnson-Food Safety & Quality Manager

Purpose:

The purpose of the audit is to ensure that the FSMS continues to conform to the FSSC 22000 v5.1 regulatory requirements, applicable customer requirements and the company's own internal MS and document requirements.

Background and Context:

The audit is scheduled to meet the internal audit requirements and the requirements of section 9.2 of ISO 22000 standard.

Scope:

The full food safety management system of Tijule Company Limited

Criteria:

ISO 22000:2018 ISO 22002-1:2009 Additional FSSC Requirements Regulatory requirements Customer requirements

Objectives:

To ensure continued conformity, effectiveness and opportunity to improve of the FSMS

Company Limited Audit Plan

Opening Meeting:

Who: Roy Newell, Nicola Valentine, Deen Welch, Elizabeth Fitzgerald, Sharon Peterson, Anne Marie Henry, Roye Harrison, Sharlene Williams, Orane Evans, Tracyann Hibbert, Yoniel Edwards, David Gardner, Glenford Geohaghan, Kadene

Wynter, Noel McLean, Ricardo Johnson, Priscilla Muirhead, Kay Roach

When: Monday, 'October' '25', 2021

Where: Training Room

What to cover: Audit Scope Audit Criteria Audit Schedule

The Audit

Closing Meeting:

Who: Roy Newell, Nicola Valentine, Deen Welch, Elizabeth Fitzgerald, Sharon Peterson, Anne Marie Henry, Roye Harrison, Sharlene Williams, Orane Evans, Tracyann Hibbert, Yoniel Edwards, David Gardner, Glenford Geohaghan, Kadene Wynter, Noel McLean, Ricardo Johnson, Priscilla Muirhead, Kay Roach

When: Friday, 'November' '19', 2021

Where: Training Room

AUDIT SCHEDULE

Processes	Auditor	Auditee	Date/Time
Prevention of	Elizabeth		October 27, 2021
Cross	Fitzgerald		10:00 AM -
Contamination,			FOctober 27, 2021
Additional			11:00 AM
Requirement			

Allergen	1		I
Management			
Ackee	Sharlene Williams		October 26, 2021
			9:00 AM - FOctober
			26, 2021 9:30 AM
Waste	Yoniel Edwards		October 26, 2021
Management			4:00 PM - FOctober
			26, 2021 4:30 PM
Personnel Hygiene	Yoniel Edwards		October 26, 2021
and Facilities			4:00 PM - FOctober
			26, 2021 4:30 PM
Bammy	Tracyann Hibbert		October 26, 2021
			2:30 PM - FOctober
			26, 2021 3:30 PM
Jerk Seasoning	Priscilla Muirhead		October 26, 2021
com codociming	T TIOOMA WANTIOGA		2:00 PM - FOctober
			26, 2021 4:00 PM
Cleaning and	Elizabeth		October 26, 2021
Sanitation,	Fitzgerald		2:00 PM - FOctober
Additional	i negorala		26, 2021 4:00 PM
Requirement			20, 2021 11001 111
Environmental			
Monitoring			
Callaloo	Priscilla Muirhead		October 26, 2021
			12:30 PM -
			FOctober 26, 2021
			1:30 PM
Jam and Jelly	Tracyann Hibbert		October 26, 2021
			11:00 AM -
			FOctober 26, 2021
			12:00 PM
Sauce	Sharlene Williams		October 26, 2021
			10:30 AM -
			FOctober 26, 2021
			11:30 AM
Pest Control	Elizabeth		October 25, 2021
	Fitzgerald		9:00 AM - FOctober
			25, 2021 11:00 AM
Food Fraud and	Yoniel Edwards		November 9, 2021
Additional			9:30 AM -
Requirement Food			FNovember 9, 2021
Fraud Prevention			10:30 AM
Quality Laboratory	Elizabeth		November 9, 2021
	Fitzgerald		9:00 AM -
	J		FNovember 9, 2021
			•
			10:00 AM

A 1 1'4'	D. 110		N
Additional	David Gardner		November 9, 2021
Requirement -			10:30 AM -
Management of			FNovember 9, 2021
Services, ISO			11:30 AM
22000:2018 7.1.5,			
7.1.6			
Internal and	Priscilla Muirhead		November 9, 2021
external			10:15 AM -
communication			FNovember 9, 2021
			11:15 AM
Product	Kay Roach		November 8, 2021
Information and			9:30 AM -
Additional			FNovember 8, 2021
Requirement			10:30 AM
Product Labeling			
Emergency	Tracyann Hibbert		November 8, 2021
preparedness and			9:30 AM -
response			FNovember 8, 2021
			10:30 AM
Chemical	Priscilla Muirhead		November 8, 2021
Management			9:00 AM -
			FNovember 8, 2021
			10:30 AM
Food Defense and	Yoniel Edwards		November 8, 2021
Additional			10:00 AM -
Requirement Food			FNovember 8, 2021
Defense			11:00 AM
Supplier Approval	Orane Evans		November 5, 2021
			9:30 AM -
			FNovember 5, 2021
			10:30 AM
Correction and	Elizabeth		November 5, 2021
Corrective Action	Fitzgerald		10:30 AM -
			FNovember 5, 2021
	İ		1 14076111061 3, 2021 1
			11:30 AM
Verification and	Elizabeth		· ·
Verification and Validation			11:30 AM
	Elizabeth Fitzgerald		11:30 AM November 4, 2021
			11:30 AM November 4, 2021 9:30 AM -
			11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM
Validation Control of Records	Fitzgerald Elizabeth		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021
Validation Control of Records and Documents and	Fitzgerald		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM November 4, 2021 9:00 AM -
Validation Control of Records	Fitzgerald Elizabeth		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM November 4, 2021 9:00 AM - FNovember 4, 2021
Validation Control of Records and Documents and Changes	Fitzgerald Elizabeth Fitzgerald		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM November 4, 2021 9:00 AM - FNovember 4, 2021 10:00 AM
Validation Control of Records and Documents and	Fitzgerald Elizabeth		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM November 4, 2021 9:00 AM - FNovember 4, 2021 10:00 AM November 4, 2021
Validation Control of Records and Documents and Changes	Fitzgerald Elizabeth Fitzgerald		11:30 AM November 4, 2021 9:30 AM - FNovember 4, 2021 10:30 AM November 4, 2021 9:00 AM - FNovember 4, 2021 10:00 AM

		5:00 PM
Management of Purchased Materials, Control of Non-Conforming Raw Material and Additional Requirements - Management of supplied material	Yoniel Edwards	November 4, 2021 10:00 AM - FNovember 4, 2021 11:00 AM
Equipment Suitability, Cleaning and Maintenance	David Gardner	November 19, 2021 9:30 AM - FNovember 19, 2021 10:30 AM
Customer complaints	Orane Evans	November 19, 2021 9:00 AM - FNovember 19, 2021 10:00 AM
Product Recall	Orane Evans	November 19, 2021 11:00 AM - FNovember 19, 2021 12:00 PM
Layout of Premises and Work Station	Anne Marie Henry	November 18, 2021 9:00 AM - FNovember 18, 2021 10:00 AM
Utilities	Tracyann Hibbert	November 18, 2021 3:00 PM - FNovember 18, 2021 4:00 PM
Warehousing	Yoniel Edwards	November 18, 2021 12:00 PM - FNovember 18, 2021 2:00 PM
Planning and Objectives of the food safety management system	Sharlene Williams	November 17, 2021 9:00 AM - FNovember 17, 2021 10:00 AM
Construction and Layout of Buildings	Sharon Peterson	November 17, 2021 2:00 PM - FNovember 17, 2021 4:00 PM
Performance Evaluation	Elizabeth Fitzgerald	November 17, 2021 10:00 AM - FNovember 17,

		2021 12:00 PM
Management	Priscilla Muirhead	November 16,
Review		2021 9:00 AM -
		FNovember 16,
		2021 11:00 AM
Context of the	Sharon Peterson	November 16,
Organization		2021 3:00 PM -
		FNovember 16,
		2021 4:00 PM
Additional	Tracyann Hibbert	November 16,
Requirement - Use		2021 10:00 AM -
of FSSc		FNovember 16,
Logo/Certification		2021 11:00 AM
Mark		
Continual	Sharon Peterson	November 15,
Improvement		2021 8:30 AM -
		FNovember 15,
		2021 10:30 AM
Internal audit	Sharlene Williams	November 15,
		2021 2:00 PM -
		FNovember 15,
		2021 4:00 PM
Traceability	Yoniel Edwards	November 15,
		2021 10:00 AM -
		FNovember 15,
		2021 12:00 PM

Audit of. Ackee	Auditor. Shahene	Audit Chteria. 180	Auditees.
	Williams	22000:2018 (E)	
		Clause 8.5.1.5.1 a-e	
Audit Evidence:			
Two persons was in	terviewed; Mrs. Vale	ntine -Mighty the Food	Safety Leader and
· · · · · · · · · · · · · · · · · · ·		ation was given and do	•
as evidence against t	he standards ISO 22	2000:2018 (E) Clause 8	3.5.1.5. The Ackee
		eptember 15, 2020, Rev	
Revision Date Sept 1	5, 2020, Document I	Number: AKPF-001.	,
Evaluation:	·		
Based on the evider	nce presented it is fo	und to be in conformity	with requirements of
ISO 22000:2018 Clau	use 8.5.1.5	•	•
Effectiveness:			
1			

CONFORMITY REPORTS – ACKEE

Audit of: Ackee	Auditor: Sharlene	Audit Criteria: ISO	Auditees:		
	Williams	22000:2018 (E)			
		CLAUSE 8.5.1.5.2			
Audit Friday					

Audit Evidence:

Three (3) person was interviewed; Mrs Nicola Valentine Food Safety Leader, Ms Kadene Wynter Food Safety Coordinator and Mr. McLean Factory Manager. Ackee Flow Diagram: Version 4 Version Date: October 5, 2021, Revision Date: October 5, 2021, Revision Number 5, Document Number: AKPF-001. Ackee Hazard Analysis: Version 2, Version Date: January 19, 2018 Revision Date: January 19, 2018, Revision Number: 9, Document number: AK-HA-001.

Evaluation:

On Thursday November 10 and November 11, 2021 respectively, an audit was carried out and three (3) persons was interviewed and documents reviewed and was found to be in conform with the standard ISO 22000:2018 (E) 8.5.1.5.2. and ISO 22000:2018 (E) Clause 8.5.2.2.2.

Effectiveness:			

CONFORMITY REPORTS – ACKEE

Audit of: Ackee	Auditor: Sharlene	Audit Criteria:	Auditees:
	Williams	Cleaning, Final	
		Inspection and	
		Sorting AK-CFIS-001	
		Ver.4 (15/9/2020)	
		Rev. 12 (15/9/2020)	
		Section 4.3.2	

Audit Evidence:

Three (3) persons was interviewed, Ms Kadene Wynter Food Safety Coordinator and Mrs Nicola Valentine Food Safety Leader and the Warehouse Supervisor Roy Harrison. Documents was represented for evidence that every 10th code of Ackees there is a testing regime. Title: External Lab Testing Schedule; Version 4, Version Date: September 19, 2018, Revision Date: September 30, 2019, Document Number: ELTS-001 Hypoglycin 1 in 10 batches. The HACCP Procedure clause 4.3.2; Cleaning, Final Inspection and Sorting Version 4, Version Date: Sept 15, 2020, Revision#12 Revision Date: September 15, 2020 Test result-Technological Solution Limited (Certificate of Analysis). Non-Acidified Ackees Trace Code: S3LAKN2221 Lab#202108-658172/10 Hypoglycin Result 34ppm Report Date: 26/08/2021 Bureau

of Standard Jamaica Acidified Canned Ackee: S3AKN0621A Test Report NO. TESR 25/2021/309 Dated Received: 2021/07/13 Hypoglycin A 48 ppm Completed: 24 Aug 2021 Retorting & Cooling CCP 4 & 5 (AK) 2 &3 (Cal) Monitoring Form Version #6, Version Date: September 15, 2020, Revision # 6 Revision Date: September 15, 2020 Non Acidified Ackee in Brine: Code S3LAKSO121C Min IT 122 F Vent time 7 mins Process time 11 mins Retort Temp 246F Cook Chart Batch S3LAKSO121C CCP4 Cook Chart Batch S3LAKS0121C Oct. 1, 2021 Cook Chart Batch S3LAKN2521G July 25, 2021

Evaluation:

Based on the evidence presented it is found, the "External Lab Testing Schedule" and HACCP Procedure, Cleaning, Final Inspection and Sorting" procedures wording are different that speak about ackee testing regime. Opportunity for Improvement The HACCP Procedure clause 4.3.2; Cleaning, Final Inspection and Sorting Version 4, Version Date: Sept 15, 2020, Revision#12 Revision Date: September 15, 2020 states, Periodic checks on approximately every 10th code of canned ackees are also carried out to ensure that the hypoglycin levels are kept below 100 - 150ppm while the External Lab Testing Schedule Version 4, Version Date Sept 19, 2018 Revision Date Sept 30, 2019 Document #ELTS-001 states Hypoglycin is tested 1 in 10 batches. These two statements does not conform. All documents that refers to this process should contain the same information.

Effectiveness:			

CONFORMITY REPORTS – CALLALOO

Audit of: Callaloo	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Muirhead		22000:2018 (E)	
		Clause 8.5.1.5.1 a-e	

Audit Evidence:

Interview was conducted with Mr. Mclean Factory Manager. Callaloo Process Flow, Document Number CALPF-001, Version 2, Version Date April 5, 2016, Revision Number 6, Revision Date, April 5, 2016 was viewed and shows the sequence and interaction of the steps in the operation, outsourced processes, where raw materials ingredients, processing aids, packaging materials, utilities and intermediate products enter the flow. The Flow Diagram also shows where end products, intermediate products and waste are released or removed.

Evaluation:

The company's Flow Diagram conforms with the Audit Criteria in ISO 22000:2018 (E) Clause 8.5.1.5.1 a-e.

Effectiveness:

CONFORMITY REPORTS - CALLALOO

Audit of: Callaloo	Auditor: Priscilla	Audit Criteria:	Auditees:
	Muirhead	Seaming CAL-S 001	
		Ver. 5 (15/09/2020),	
		Rev. 7	
		(15/Sep/2020)	
		Section 4.2.1,	
		4.2.3.1-6	

Audit Evidence:

Mr McLean Factory Manager was interviewed on October 26, 2021 and he directed me to Ms Anne Marie Henry Quality Control Officer to view documents to verify conformity. Three records from the Can Seam CCP 1-Callaloo Monitoring Form Document Number CS-F-001, Version 4, Version Date September 15, 2020, Revision Number 4, Revision Date September 15, 2020 dated 7/01/2021, 25/03/2021, 02.06.21.

Evaluation:

This process conforms to the Audit Criteria of Seaming CAL-S 001 Ver. 5 (15/Sep/2020), Rev. 7 (15/Sep/2020) Section: 4.2.1, 4.2.3.1-6 as records pulled verify can seam are checked prior to the start of each batch and that specifications are met.

Effectiveness:

CONFORMITY REPORTS – CALLALOO

Audit of: Callaloo	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
	Muirhead	22000:2018 (E)	
		Clause 8.5.2.2.2	

Audit Evidence:

Mr McLean Factory Manager was interviewed on October 26, 2021. Further discussion with the Research and Development Manager on October 25 led me to view the Callaloo Hazard Analysis, Document Number CAL-HA-AL, Version 2, Version Date January 19, 2018, Revision Number 3, Revision Date January 19, 2018 which identifies potential food safety hazards introduced, controlled or enhanced at each step.

Evaluation:

This process found to be in conformity to the Audit Criteria ISO 22000:2018 (E) Clause 8.5.2.2.2

Effectiveness:

CONFORMITY REPORTS – SAUCE

Audit of: Sauce	Auditor: Sharlene	Audit Criteria: ISO	Auditees:
	Williams	22000:2018 (E)	
		Clause 8.5.1.5.1 a-e	

Audit Evidence:

Three persons were interviewed; Mrs. Nicola Valentine Food Safety Leader, Ms. Kadene Wynter Food Safety Coordinator; Mr. Ricard Johnson Quality Control Manager and Mrs. Sharon Peterson Production Manager and documents seen. SAUCE PROCESS FLOW VERSION #5 VERSION DATE: JUNE 30, 2020 REVISION #8 REVISION DATE: JUNE 30, 2020 DOCUMENT #SPF-001. SAUCES PROCESS FLOW: NARRATIVE DESCRIPTION VERSION #2 VERSION DATE: JULY 27, 2018 REVISION #12 REVSION DATE: JULY 27, 2018 DOCUMENT #S-PFND-001.

Evaluation:

The interview and documents seen was audited against the standard ISO 22000:2018 (E) Clause 8.5.1.5 and was found to be in conformity.

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CONFORMITY REPORTS – SAUCE

Audit of: Sauce	Auditor: Sharlene	Audit Criteria: ISO	Auditees:
	Williams	2200:2018 (E)	
		Clause 8.5.3	

Audit Evidence:

The interview was conducted on Wednesday November 8, 2021. Four (4) persons was interviewed, Mrs. Nicola Valentine, Food Safety Leader, Mr. McLean Factory Manager, Ms Kadene Wynter Food Safety Coordinator, Mrs. Sharon Peterson Production Manager. Records were showed to validate the cooking process. The product that was audited: PRODUCT 1: S3 HHS29MAR2021 and S3HHS12MAY2021 Test reports-CHEMISTRY S3 HHS29MAR2021 REF# CMQ-C/MISC 13264 MICROBOLOGICAL REPORT #TESR 26/2021/4050 REFERENCE#CM-M/MISC 12480 PRODUCT 2: S3HHS12MAY2021 BUREAU OF STANDARD JAMAICA TEST REPORT#TESR25/2021/4345-CHEMISTRY REFERECE#CMQ-C/MISC 13417 MICROBOGICAL REPORT: BUREAU OF STANDARD JAMAICA REPORT# 26/2021/4347/A REFERENCE #M/MISC 12508A ALL REPORTS SHOWS TESTING OF THE PRODUCTS WAS SATISFACTORY.

Evaluation:
This was audited against the Procedures and Standard and found to be in conformity.
Effectiveness:

CONFORMITY REPORTS – JERK SEASONING

Audit of: Jerk	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Seasoning	Muirhead	22000:2018 (E)	
		Clause 8.5.1.5.1 a-e	

Audit Evidence:

Interview was conducted with Mr. Mclean Factory Manager. Jerk Season Hot Filled Process Flow, Document Number JSHFPF-001, Version 2, Version Date April 6, 2016, Revision Number 7, Revision Date, April 6, 2016 and Jerk Season Cold Filled Process Flow, Document Number JSCFPF-001, Version 2, Version Date April 6, 2016, Revision Number 7, Revision Date, April 6, 2016 was viewed and shows the sequence and interaction of the steps in the operation, outsourced processes, where raw materials ingredients, processing aids, packaging materials, utilities and intermediate products enter the flow. The Flow Diagram also shows where end products, intermediate products and waste are released or removed.

Evaluation:

The company's Flow Diagram conforms with the Audit Criteria in ISO 22000:2018 (E) Clause 8.5.1.5.1 a-e.

Effectiveness:

CONFORMITY REPORTS - JERK SEASONING

Audit of: Jerk	Auditor: Priscilla	Audit Criteria: Jerk	Auditees:
Seasoning	Muirhead	Seasoning & Sauces	
		Cooking JS&SC -001	
		Ver.4 (28/1/2020)	
		Rev. 9 (28/1/2020)	
		Section:4.2.1.1-4	

Audit Evidence:

Interview was conducted with Mr McLean Factory Manager. Checks were done on three Cooking CCP 1 Monitoring Form Document Number C - F-001 Version 3, Version Date June 4, 2018, Revision Number 4, Revision Date January 28, 2020

dates August 31, 202	1, September 13, 202	21, October 13, 2021	
Evaluation:			
	•	Conforms with the Au Ver.4 (28/1/2020) Re	
Effectiveness:			
CONFC		<u>S – JERK SEASO</u>	NING
Audit of: Jerk	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Seasoning	Muirhead	22000:2018 (E)	
		Clause 8.5.3	
Audit Evidence:			
		-	
		Factory Manager and	
-		dards Jamaica. Test F	-
TESR26/2021/4049	19.07/2021, No. 1ESF	R25/2021/5305 dated	13.07.2021, No.
Evaluation:			
Evaluation.			
The reports from Ru	reau Of Standards co	onfirms that the cookin	a nrocess is canable
· ·		nting the growth of bid	• • •
		ce. The process confo	_
, ,	ISO 22000:2018 (E) C	•	ino to the react
Effectiveness:	.00000 (_) (7.4400 0.0.0	

CONFORMITY REPORTS - BAMMY

Audit of: Bammy	Auditor: Tracyann	Audit Criteria:	Auditees:
	Hibbert	Cassava Receival B-	
		CR-001 Ver.	
		1(10/May/2018)	
		Rev.3(14/Dec/2020)	
		Section:4.1.1,	
		.4.1.2.1-6.	

Audit Evidence:

Interviewed Bammy room Supervisor Mrs Goloria King, Miss Fay Thompson and Miss Sharlene williams Import & Export Sale, conducted a walk through of the receival process and reviewed the Cassava order form and of sample Names were

take from list 19-09-2021 Roy Thompson/1-6-2021 Winston Farquhenson /8-9-2021 Anthony Wallace/11-10-2021 Andrew Johnson /6-8-2021 Leroy Brown / MS form Title:Cassava Receival .Ver.2 (May11,2018) Rev.#7(Feb.6,2020) Doc.# B-CR-TR-F-009/HAccp Process Title:Bammy process flow Narrative description Ver:#5(March 31,2020)Doc.# B- PFND- 001/ Cassava Receival / B-CR-001/Ver.#1(May102018) Rev.#3(14.Dec.2020) Section: 4.1.1, 4.1.2.1-6.

Evaluation:

An audit of the input step of the raw material,ingredients and Product-contact Materials was conducted on Oct.26,2021, Based on the observation and document reviewed the process is conforming to the requirement of Cassava Receival Ver.#1(May10,2018) Rev.#1(14Dec.2020) Section:4.1.1, 4.1.2.1-6

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CONFORMITY REPORTS – BAMMY

Audit of: Bammy	Auditor: Tracyann	Audit Criteria: Sieve	Auditees:
	Hibbert	Inspection B-SI 001	
		Ver. 2 (25/Sep/2018)	
		Rev.4 (9/Oct/2018)	
		Section: 4.3.1	

Audit Evidence:

Interviewed Miss Althea Wright, Miss Shereen Batchelor Bammy room workers and conducted a walk through of the bammy process, reviewed HACCP procedure / Title:Sieve Inspection Ver.#2(Sep.25,2021) Rev.#4(Oct.9,2019) Section:4.3.1, sieve inspection observe during the process Title: Bammy Sieve inpection (Ver.#2(Aug.13,2021) Rev.#3(Apr.13,2021) Doc.#B-SI-F-001(Oct.26,2021)

Evaluation:

An audit of the control step of the Bammy process was conducted on Oct.26,2021, Based on observation and document review process is conforming to requirement of Sieve Inspection B-SI-001 Ver.#2 (Sep.25,2018)Rev.#3(Oct.9,2018) Section: 4.3.1

Effectiveness:

CONFORMITY REPORTS – BAMMY

Audit of: Bammy	Auditor: Tracyann	Audit Criteria: Sieve	Auditees:
	Hibbert	Inspection B-SI 001	
		Ver. 2 (25/Sep/2018)	
		Rev.4 (25/9/2018)	
		,	

	Section: 4.3.2	
Audit Evidence:		
Interviewed Food co	ordinator Miss Kadene Wynter, Yoneil Edw	ards Quality officer,

Interviewed Food coordinator Miss Kadene Wynter, Yoneil Edwards Quality officer, Reviewed the Sieve Inspection B-SI-001 Ver.#2 (25 Sep.2018) Rev.#4(9.Oct.2019) Section:4.3.2 / HACCP form Title: Bammy Sieve inspection CCP1 Monitoring form Ver.#2 (Aug.13,2021) Rev.#3 (Aug.13,2021) Doc.#B-SI-F-001 Code:S3B13Sep2021 /Code:S3B27Sep2021 /Code:S3B04Oct.2021 /S3B21Oct.2021,

Evaluation:

An audit of the bammy process was conducted on Oct.26,2021, Based on observation and document reviewed the process is conforming to requirements of Sieve Inspection B- SI-001 Ver.#2 (25/9/2019)Rev.#4 (9/Oct/2019) Section:4.3.2

Effectiveness:

CONFORMITY REPORTS – JAM AND JELLY

Audit of: Jam and	Auditor: Tracyann	Audit Criteria: Jam	Auditees:
Jelly	Hibbert	and Jellies Cooking J	
		and J -C- 001 Ver. 2	
		(25/ Sep/2018)	
		Rev.13 (9/Oct/2018)	
		Section: 4.2.1.1	

Audit Evidence:

Interviewed Production Manager. Mrs Sharon Peterson and Jams & Jellies Supervisor Mrs Lovern Sewell, Conducted walk through of the cooking process and reviewed the CCP monitoring procedure Title: Jams & Jellies Cooking J&J C-001 Ver. 2 (Sep.25.2018) Revision #13 (Oct.9.2019) Section 4.2.1.1.

Evaluation:

An audit of the control step of the Jams& Jellies process was conducted on Oct.26,2021, Based on the observation and document review the process is conforming to the Requirements of CCP monitoring procedure: Title Jams & Jellies Cooking Ver. 2 (25 Sep.2018) Rev.# 13(9 Oct.2019) Section:4.2.1.1

Effectiveness:

CONFORMITY REPORTS – JAM AND JELLY

Audit of: Jam and	Auditor: Tracyann	Audit Criteria: Jams	Auditees:	
Jelly	Hibbert	and Jellies Cooking J		

l I	and J -C- 001 Ver. 2
	(25/9/2018)
	Rev.13(25/9/2018)
	Section: 4.2.1.2
Audit Evidence:	
Interview Production	Nangr Sharon Peterson and Jams and Jellies Supervisor

Interview Production Mangr Sharon Peterson and Jams and Jellies Supervisor Lovern Sewell conducted a walk through of the cooking process and reviewed the CCP monitoring cooking Jams & Jellies -001 Ver. 2 (25.Sep.2018) Rev.#13(Oct.9.2019) Section: 4.2.1.2 / Title: Cooking CCP form monitoring form Ver.3(Jun.4,2018)Revision #4(Jan.28.2020)Doc.C-F-001, and sample of records were reviewed Codes: S3Gm31Aug.2021

S3GM28Sep.2021/S3GM27sep.2021/S3GY28Apr2021/S3GY14MAY2021

Evaluation:

An audit of the control step of the Jams and Jellies process was conducted on Oct 26,2021 based on observation and document reviewed the process is conforming to requirement of Monitoring procedure - CCP1 :Title Jams& Jellies Cooking Ver. 2 (Sep.25.2018) Rev# 13 (Oct.9,202019) Section: 4.2.1.2

_									
Н	·tt	Δ	∩t	ı۱	Δ	n	Δ	9	۰

CONFORMITY REPORTS – JAM AND JELLY

Audit of: Jam and	Auditor: Tracyann	Audit Criteria: ISO	Auditees:
Jelly	Hibbert	22000:2018 Clause	
•		8.5.3	
Audit Evidence:			
Interview Miss Kade	ene Wynter Food Safe	ety Coordinator and re	viewed Bureau of
Standard Jamaica Te	est report No.TESR25	5/2021/3346 Sample C	ode
S3Gy28Apr2021/ Re	port No. TESR25/202	21/4489 Sample S3GM	119May2021
Evaluation:			
An audit of the activ	rity step of Validation	of control Measures of	the Jams and jellies
process was conduct	ted on Oct.26,2021, E	Based an observation a	and document
reviewed the process	s is conforming to the	requirements of ISO 2	200:2018(E) Clause
8.5.3.			
Effectiveness:			

CONFORMITY REPORTS - PEST CONTROL

Audit of: Pest	Auditor: Elizabeth	Audit Criteria:	Auditees:
Control	Fitzgerald	ISO/TS	
		22002-1:2009	
		Clause 12.2	
Audit Evidence:			

Interviewed Kadene Wynter, Food Safety Coordinator and Process Owner on October 26, 2021. Pest Management Program was documented in the Pest Control Procedure PC-001 Ver. 3 (Sep. 19, 2018), Rev. 6 (Sep. 19, 2018) which specifies the scope and purpose of the Program and the Pest Control Mastersheet PCMS-001 Ver. 5 (June 30, 2019), Rev. 11 (Feb. 25, 2021) which documents the Target Pest, Control Measures applied, Frequency of control measure, chemicals needed, records kept and verification

Evaluation:

The input process step of Pest Management Program was audited on October 26, 2021. Interviews with the process owner and review of documents confirm that the process is in conformity with the requirements of ISO/TS 22002-1:2009 Clause 12.2

Effectiveness:

CONFORMITY REPORTS – PEST CONTROL

Audit of: Pest	Auditor: Elizabeth	Audit Criteria:	Auditees:
Control	Fitzgerald	ISO/TS	
		22002-1:2009	
		Clause 12.2	

Audit Evidence:

Interview with Kadene Wynter, Process Owner, Review of Chemical List CL-001 Ver. 5 (Nov. 7, 2019), Rev. 5 (Feb. 6, 2020) which showed a list of chemicals that are used in pest control activities

Evaluation:

The input step of Approved Chemicals was audited on October 26, 2021. Interviews with the process owner and document reviews confirmed that the process is in conformity with the requirements of ISO/TS 22002-1:2009 Clause 12.2

Effectiveness:

CONFORMITY REPORTS – PEST CONTROL

Audit of: Pest	Auditor: Elizabeth	Audit Criteria:	Auditees:	

Control	Fitzgerald	ISO/TS			
		22002-1:2009			
		Clause 12.3			
Audit Evidence:					
		ce Manager. A walk th	•		
		Facility. Inspections			
windows and drain ex Evaluation:	ats. The buildings was	s found to be in reaso	nabiy good repair		
Evaluation.					
The resources step	of the Pest Control P	rocess was audited or	October 26, 2021.		
		who has direct respon	· ·		
	•	n of the interior and ex	•		
confirms that this pro-	cess step is in confor	mity with the requirem	ents of ISO/TS		
22002-1:2009 Clause	12.3				
Effectiveness:					
CONF	ODMITY DEDOD	TO DECT CONT	DOI.		
	,	TS – PEST CONT	Y		
Audit of: Pest Control	Auditor: Elizabeth	Audit Criteria: ISO/TS	Auditees:		
Control	Fitzgerald	22002-1:2009			
		Clause 12.2			
Audit Evidence:		014400 12.2			
Interview with Ms. K	adene Wynter, Proce	ess Owner. Pesticides	are applied by		
licenses Pest Control	operators who are co	ontracted by the Comp	oany. Review of		
Spraying records date	ed October 9, 2021, F	Pest Control Monthly S	Spraying Form PC-		
, ,		r. 23, 2020) and Rento			
Prevention Service Report # 50098 Rev. 5. The chemicals used was listed as					
Lambda-cyhalothrin/[DEMAND C.				
Evaluation:					
The Input Step of Documented Program for the Pest Control Process was audited					
1	_	ess owner and review			
1	•	the requirements of IS	•		
Clause: 12.2	is in comorning with	and requirements of to	O, 10 22002 1.2000		

CONFORMITY REPORTS - CLEANING AND SANITATION,

Effectiveness:

ADDITIONAL REQUIREMENT ENVIRONMENTAL MONITORING

Audit of: Cleaning	Auditor: Elizabeth	Audit Criteria:	Auditees:
and Sanitation,	Fitzgerald	ISO/TS 220021:2009	
Additional		Section:11.3	
Requirement			
Environmental			
Monitoring			
Audit Evidonco:			

Audit Evidence:

Interviewed with Kadene Wynter Process Owner. Review of documents: Sanitation Master sheet -Outdoor Sanitation Mater sheet - SOP-OSMO-001 Ver.6 ((Nov. 11, 2019) Rev. 12 (Feb.14 2020) Sanitation Master sheet –In Plant Sanitation Mater sheet – SOP-IPSMS Ver.8 ((April 19, 2021) Rev. 15 (April 19, 2021) These Documents show: the type of sanitation to be done, how it is to be done, chemicals to used, who is responsible, frequency, records, verification

Evaluation:

The input step of Documented Program of the Cleaning and Sanitation, Additional Requirement Environmental Monitoring was audited on October 26, 2021. Interviews conducted and documents reviewed confirms that the process is in conformity with the requirements of ISO/TS 220021:2009 Section:11.3

Effectiveness:			

CONFORMITY REPORTS - CLEANING AND SANITATION, ADDITIONAL REQUIREMENT ENVIRONMENTAL MONITORING

Audit of: Cleaning	Auditor: Elizabeth	Audit Criteria:	Auditees:
and Sanitation,	Fitzgerald	ISO/TS 220021:2009	
Additional		Section:11.3	
Requirement			
Environmental			
Monitoring			

Audit Evidence:

Interview was conducted with Kadene Wynter, Process Owner. The Validation of the cleaning procedure is done through microbiological testing the MicroBiological Testing Water and Equipment MBTWE-001 Ver. 3 (Sep. 10, 2018), Rev. 5 (Mar. 23, 2021) procedure outlines that Equipment are tested once per year for Total Plate Count, Coliform, yeast and mould count. Test Results Seen for Equipment Swab Dated: September 17, 2021 Areas Swabbed: Bammy Room Table, Sauce Kettle, Callaloo, Cutting Room Table, Semi Process Grinder, BSJ Test Report #: TESR 26/2021/6929 K, L, M, N, O

luation:	

The Activity step of Validation for the Cleaning and Sanitation, Additional Requirement Environmental Monitoring was conducted on October 26, 2021.
Interviews conducted and review of documents and test results confirms that the process is in conformity with the requirements of ISO/TS 220021:2009 Section:11.3
Effectiveness:

CONFORMITY REPORTS – CLEANING AND SANITATION, ADDITIONAL REQUIREMENT ENVIRONMENTAL MONITORING

Audit of: Cleaning	Auditor: Elizabeth	Audit Criteria:	Auditees:
and Sanitation,	Fitzgerald	FSSC 22000 Version	
Additional		5.1 Additional	
Requirement		Requirements	
Environmental		Environmental	
Monitoring		Monitoring	

Audit Evidence:

Interviewed Kadene Wynter, Process Owner who indicated that environmental monitoring is done at Least once per year in areas with open products. This was verified in the MicroBiological Testing Water and Equipment MBTWE-001 Ver. 3 (Sep. 10, 2018), Rev. 5 (Mar. 23, 2021) Procedure Section 4.5.1.

Evaluation:

The activity step of Environmental Monitoring for the Cleaning and Sanitation, Additional Requirement Environmental Monitoring was audited on October 26, 2021. Interviews conducted and review of records confirms that the process is in conformity with the requirements of FSSC 22000 Version 5.1 Additional Requirements Environmental Monitoring

Effectiveness:			

CONFORMITY REPORTS – WASTE MANAGEMENT

Audit of: Waste	Auditor: Yoniel	Audit Criteria:	Auditees:
Management	Edwards	ISO/TS	
		22002-1:2009	
		Clause 7.1	

Audit Evidence:

Interviewed Sharon Peterson Production Manager and Process owner. WCD-001 Ver 3 (09/19/2018) Rev 3 (09/09/2018) Clause 4.1.3.1.1; 4.1.3.2.1.1.2; 4.1.3..2.1.1;

4.1.3.2.1.2				
Evaluation:				
WCD-001 Ver 3 (0	WCD-001 Ver 3 (09/19/2018) Rev 3 (09/09/2018) Clause 4.1.3.1.1.1;			
Clause4.1.3.2.1.1.2	; Clause 4.1.32.1.1;	Clause4.1.3.2.1.2 and	d a interviewed was	
		ss is in conformity with		
22002-1:2009 Claus		,		
Effectiveness:				
CONFOR	RMITY REPORTS	- WASTE MANA	GEMENT	
Audit of: Waste	Auditor: Yoniel	Audit Criteria:	Auditees:	
Management	Edwards	ISO/TS		
		22002-1:2009		
		Section 7.3		
Audit Evidence:	•	•	•	
Interviewed Sharo	n Peterson the Produ	ction Manager and Pr	ocess Owner. Walk	
Through (Observation	on).			
Evaluation:				
The inspection was	s done and there was	no accumulation of w	aste in the food	
handling or storage	areas. The process is	s in conformity with IS	O/TS 22002-1:2009	
Clause 7.3.				
Effectiveness:				
CONFOR	RMITY REPORTS	- WASTE MANA	GEMENT	
Audit of: Waste	Auditor: Yoniel	Audit Criteria:	Auditees:	
Management	Edwards	ISO/TS	/ tuditooo.	
Management	Lawaras	22002-1:2009(E)		
		Clause 7.4		
Audit Evidence:		Clause 7.4		
Addit Evidence.				
Interviewed Sharo	n Peterson the Produ	ction Manager and pro	ocess owner	
Evaluation:	Tr otoroon the rioda	otion manager and pro	50000 OWNOT.	
Evaluation.				
A walk through ob	servation was done w	which confirms that the	design construction	
		he risk of contamination	• .	
		22002-1:2009 Clause		
Effectiveness:				

	NONCONFOR	MITY RFP	ORT		
	NONCON ORWITT ILLI ORT				
Incid	dent Identification	Number: 000	000.000	01	
Non-Conformity Report	Auditor (s): Yon	iel Edwards	Date: C	October 26, 2021	
#: 1					
Audit of : Waste	Audit Criteria: IS				
Management	22002-1:2009 CI	ause 7.2 a-e			
Statement of Nonconfor	rmity:				
Of all the waste Sood B	uckate that was a	nacked in the	cutting r	room only 1 was	
Of all the waste Seed B labelled. Organization sh			•	<u>▼</u>	
the requirements of the I				ci. This is contrary to	
ino roquiromonio or ino r	00,10 22002 1.20	oo olaaco i.	2 a 0.		
Responsible Party: Sha	ron Peterson				
Auditor Signature:		Signature:			
CONFORMITY REPO				1	
Audit of: Personnel Au		Audit Criteri	a:	Auditees:	
1 70	wards	ISO/TS			
Facilities		22002:1:2009	9		
A 150 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Section:13.2			
Audit Evidence:					
Interviewed Sharon Pet	orson Broduction	Managar and	l proces	s owner And did a	
I		•	•		
walk through and observed that personal hygiene facilities are located close to the points where hygiene requirements apply and are they clearly designated.					
Evaluation:					
October 27 2021 An inte	ernal audit of the I	nput Process	Step (E	mployee facilities)	
was done. An interview a	and physical inspe	ction conduct	ed confir	ms that the process	
is in conformity with the I	SO/TS 22002-1:2	009 Clause 1	3.2.		
Effectiveness:					

CONFORMITY REPORTS – PERSONNEL HYGIENE AND FACILITIES
Audit of: Personnel | Auditor: Yoniel | Audit Criteria: | Auditees:

24 / 86

Hygiene and Facilities	Edw	ards	ISO/TS22002 Clause 13.4	2-1:2009	
Audit Evidence:			Clause 13.4		
Addit Evidence.					
Interviewed Sharon	Pete	rson Production	Manager and	process	owner and Marisha
Taylor Laundry Assist			J	•	
Evaluation:					
An interview was cor			•		
response (the clothes					•
laundry room) which o		•	ess is in conf	omity wit	h ISO/TS
22002-1:2009 Clause	13.4	1.			
Effectiveness:					
		NONCONFOR	MITY REP	ORT	
	'	NONCOM OF	KIVIII I IXLI	OICI	
	ncide	ent Identification	Number: 000	000.0000)2
Non-Conformity Rep		Auditor (s): Yon			ctober 26, 2021
#: 1		(-)			
Audit of : Personnel		Audit Criteria:			
Hygiene and Facilities	s	ISO/TS22002-1:2	2009 Clause		
		13.4			
Statement of Noncor	nforn	nity:			
As it relates to ISO/T					•
clothing was clean. He					• • • • • • • • • • • • • • • • • • • •
jeans which is not in o	contc	ormity with ISO/I	S 22002-1:20	009 Claus	e 13.4.
Responsible Party: S	Shar	on Potorson			
Auditor Signature:	Jilait	JII F G G I SOII	Signature:		
/ dattor digitature.			Oignature.		
			1		
	1	NONCONFOR	RMITY REP	ORT	
	-	· · · · · · · · · · · · · · · ·	· · · — ·	=	
lı lı	ncide	ent Identification	Number: 000	000.0000)3
Non-Conformity Rep	ort	Auditor (s): Yon	iel Edwards	Date: O	ctober 26, 2021
#. 2		` ,			

Audit Criteria:

13.8

ISO/TS22002-1:2009 Clause

Audit of : Personnel

Hygiene and Facilities

Statement of Nonconformity:

GMP-001 Ver 2 (05/24/2020) Rev 2 (07/07/2020) is an Evidence Shown that there is a documented policy that describe the behavior required of personnel in processing, packaging and storage areas for Question A to E. QA Clause 5.2.2 QB Clause 4.1.1 QC Clause 5.2.3 and 5.5.10 QD Clause 5.1.1 and 5.5.6 QE Clause5.5.5. which is in conformity with ISO/TS 22002-1:2009 Clause 13.8 While there was no evidence of a documented policy that describe the behavior required of personnel in processing, packaging and storage areas for; QF) Maintenance of personal Lockers so that they are kept free from rubbish and soiled clothing and; QG) Prohibition of storage of product contact tools and equipment in personal lockers; hence it is not in conformity with ISO/TS 22002-1:2009 Clause 13.8.

Responsible Party: Sharon Peterson

Auditor Signature:

Signature:

CONFORMITY REPORTS – PREVENTION OF CROSS CONTAMINATION, ADDITIONAL REQUIREMENT ALLERGEN MANAGEMENT

Audit of: Prevention	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
of Cross	Fitzgerald	22002-1:2009	
Contamination,		Clause 10.1	
Additional			
Requirement			
Allergen			
Management			

Audit Evidence:

Interview Mrs. Nicola Valentine Mighty, Process Owner. Review of Prevention of Cross Contamination Procedure PCC-001 Ver. 0 (Mar. 18, 2020), Scope: All Areas where physical, chemical and biological contamination might be introduced into foods during processing. It also highlights Personnel Hygiene, Glass and Brittle Policy, Cleaning and Sanitation Equipment Maintenance, Allergen Management and Hygienic zoning as areas where actions are taken to prevent Cross Contamination. Glass Policy GP-001 Ver. 3 (Oct. 7, 2019), Rev. 4 (Feb. 22, 2021) was reviewed the Scope: Covers glass used in the Production Area including Product Containers, Glass Equipment, glass fixtures and Eye Glasses

Evaluation:

The input process of Documented Program for the Prevention of Cross Contamination, Additional Requirement Allergen Management process was audited on October 27, 2021. Interviews with the process owner as well as review of

I .	-	is in conformity with th	e requirements of
ISO/TS 22002-1:2009 Effectiveness:	Specification 10.1		
Eliectiveness.			
		PREVENTION OF	
CONTAMINAT	·	L REQUIREMENT	ALLERGEN
	MANAGE	1	
Audit of: Prevention		Audit Criteria: ISO	Auditees:
	Fitzgerald	22002-1:2009	
Contamination, Additional		Clause 10.4	
Requirement			
Allergen			
Management			
Audit Evidence:			
Interview with Nicola	a Valentine Mighty, Pr	ocess Owner. Verifica	tions are scheduled
monthly to check Sha	atter proofing of windo	ws, covering of Light t	tubes, integrity of
		electronically and was	s seen in the e-
platform used by the	company		
Evaluation:			
The input step of Do	ocumented Program fo	or the Prevention of C	ross Contamination
1	•	nent was audited on O	
1	•	ew of records on the	
1		vith the requirements of	
22002-1:2009 Specifi		,	
Effectiveness:			
0015001	UT) / DEDODTO		
		PREVENTION OF	
CONTAMINAT	•	L REQUIREMENT	ALLERGEN
	MANAGE	MENT	
Audit of: Prevention		Audit Criteria:	Auditees:
	Fitzgerald	FSSC 22000 Version	
Contamination,		4.1 Additional	
Additional		Requirements	

Allergen

Management

Requirement

Allergen

CONFORMITY REPORTS – PREVENTION OF CROSS CONTAMINATION, ADDITIONAL REQUIREMENT ALLERGEN MANAGEMENT

Audit of: Prevention	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
of Cross	Fitzgerald	22002-1:2009	
Contamination,		Clause 10.4	
Additional			
Requirement			
Allergen			
Management			

Audit Evidence:

Management

Interview with Miss Jean Constable, Production worker assigned to bottle sanitation, Yoniel Edwards, Food Safety Officer, Nicola Valentine Mighty, Process Owner. Glass breakage records were reviewed in the Broken Bottle Book with Headings: Date, Bottle Type, Area and Quantity Broken. Records were seen for April 15, 2021 (2) Jam Jars Broken, August 25, 2021 (2) Jam Jars Broken October 26, 2021 (1) sauce Bottle Broken, Jerk Seasoning and Sauce Line

Evaluation:

The output step of the Records for the Prevention of Cross Contamination, Additional Requirement Allergen Management was audited on October 27, 2021. Interviews and records confirms that the process is in conformity with the requirements of ISO/TS 22002-1:2009 Specification 10.4

Effectiveness:

CONFORMITY REPORTS – CHEMICAL MANAGEMENT

Audit of Charainal	A dita w. Dwia ailla	A alit	Ad:40.00.		
Audit of: Chemical	Auditor: Priscilla	Audit Criteria:	Auditees:		
Management	Muirhead	ISO/TS			
		22002-1:2009			
		Section:11.2			
Audit Evidence:					
Interview was condu	cted with Mrs. Nicola	Mighty, Food Safety	Team Leader who		
indicated that cleaning	g and sanitizing agen	ts are clearly identified	d, are food grade and		
stored separately and	l used in accordance	with the manufacturer	's instruction. I was		
directed to the Chemi	cal Storage Room an	d was accompanied b	y Mr. Johnson, Food		
	_	ed the storage room w	-		
1	_	how that containers cl			
	-	provided me with the			
1		rsion 3 Version Date S	•		
		ber 21, 2021 that indic	-		
	•	manufacturer's Divers			
			•		
1 ' '	supplier of Dufome and Divosan K, their brochure was also viewed to verify. Bleach is				
used according to the Guidelines for use as a sanitizer in Food Processing Operations using the universal dilution. Food and Agricultural Products Research and					
'		_			
1	•	was presented which			
	nitizing equipment an	d food handling article) S.		
Evaluation:					
1 '	ns with the Audit Crite	eria in the ISO/TS 220	1002-f:2009 Section:		
11.2					
Effectiveness:					

CONFORMITY REPORTS - CHEMICAL MANAGEMENT

OOM OM			OLIVILITI
Audit of: Chemical	Auditor: Priscilla	Audit Criteria:	Auditees:
Management	Muirhead	Chemical	
		Management	
		CM-001 Ver. 3	
		(2/2/2018) Rev. 4	
		(11/10/2019) Section	
		4.7.1	
Audit Evidence:			

An interview with Mr	s. Mighty, Food Safe	ty Team Leader was c	onducted and she
indicates that Dufome, Divosan K, Super Take off and Bleach are used on the			
production equipment	t. Inspection of the Ch	nemical Storage room	in the Production
Office revealed that o	nly Dufome, Divosan	K, Super Take off and	d Bleach were
present.			
Evaluation:			
This process conform	ms to the Audit Criter	ia Chemical Managem	ent CM-001 Ver. 3
(2/2/2018) Rev. 4 (11	/10/2019) Section 4.7	7.1, evidence revealed	that only approved
cleaning chemicals ar	re used on productior	n equipment.	
Effectiveness:			
CONFORMI	TY REPORTS - (CHEMICAL MANA	GEMENT
Audit of: Chemical	Auditor: Priscilla	Audit Criteria:	Auditees:
Management	Muirhead	Chemical	
		Management	
		CM-001 Ver. 3	
		(2/2/2018) Rev. 4	
		(11/10/2019) Section	
		4.5	
Audit Evidence:			
An interview was co	nducted with Mrs, Mig	ghty who stated that th	e Quality
Department issues th	e Chemicals and if th	ey are not available, s	omeone from the
Production office will	issue. Yoniel Edward	s, Quality Officer was	also interviewed who
indicates that the Che	emicals do not leave t	he designated storage	e room.
Evaluation:			
		ws conducted, the Auc	
Management CM-001	l Ver. 3 (2/2/2018) Re	ev. 4 (11/10/2019) Sec	tion 4.5 conforms as
the cleaning chemica	Is are not removed from	om the designated sto	rage area.
Effectiveness:			
CONFORMI	TY REPORTS - (CHEMICAL MANA	GEMENT
Audit of: Chemical	Auditor: Priscilla	Audit Criteria:	Auditees:
	Muirhead	Chemical	
1 2 3 2 3 1 1		Management	
		CM-001 Ver. 3	
		(2/2/2018) Rev. 4	
		Γ '	

	(11/10/201 4.1	19) Section
Audit Evidence:		
directed me to Yoniel	nducted with Mrs. Nicola Mighty, Edwards Quality Officer. Miss E when transporting chemicals.	, Food Safety Team Leader who Edwards stated that gloves and
Evaluation:		
Management CM-001	ns with the Audit Criteria as state Ver. 3 (2/2/2018) Rev. 4 (11/10 t protective gears are worn and	0/2019) Section 4.1 as the
Effectiveness:		

CONFORMITY REPORTS – CONTROL OF RECORDS AND DOCUMENTS AND CHANGES

Audit of: Control of	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
Records and	Fitzgerald	22000:2018 Clause	
Documents and	_	7.5.3.1 a-b	
Changes			

Audit Evidence:

Interviewed Mrs. Nicola Valentine Mighty, Food Safety Team Leader and Ms. Kadene Wynter, Food Safety Co-ordinator. They reported that all documented information is kept in a folder on the food safety drive which have limited access. Documents and procedures are updated to reflect changes, these changes are communicated in food safety meeting. Obsolete documents are stored in obsolete folder which is also located on food safety drive. These documents are watermarked with the word obsolete Reviewed Cleaning and Sanitation Operating Procedure CSOP-001 Ver. 8 (Oct. 22, 2021), Rev. 9 (Oct. 22, 2021)

Evaluation:

The input step of Control of Documented Information for the Control of Records and Documents and Changes process was audited on November 4, 2021. Interviews conducted and documents reviewed confirms that the process is in conformity with the requirements of ISO 22000:2018 Clause 7.5.3.1 a-b

Effectiveness:

CONFORMITY REPORTS – CONTROL OF RECORDS AND

DOCUMENTS AND CHANGES

	DOCCIVILITIO / II	15 011/11/020	
Audit of: Control of	Auditor: Elizabeth	Audit Criteria: N/A	Auditees:
Records and	Fitzgerald		
Documents and			
Changes			
Audit Evidence:			
Interviewed Ms. Kad	dene Wynter, Food Sa	afety Coordinator who	indicated the
following: Identification	on and description and	Format: She indicate	d that documents
are identified by Title	and Document Numb	er. They are also cate	gorized as either
HACCP, MS, PRPs a	and/or (AR) Additional	Requirements. Docur	ment control
information is created	d using the first letter o	of each name in the tit	le of the document
and 001, this was cor	nfirmed with a review of	of Chemical Managen	nent Procedure which
conformed to the forn	nat CM-001 When dod	cuments are created a	and reviewed are
they are brought to th	ne food safety team for	r approval and then as	ssigned to the
appropriate category.	. The Minutes of Food	Safety Meeting held	October 21, 2021
where: Internal Audit,	, Control of Records a	nd Documents and Cl	eaning and
Sanitation were revie	wed and the Minutes	of Food Safety Meetir	ng September 21,
2021 where Training,	Customer Complaint,	, Correction and Corre	ective Action
Procedures were revi	ised was reviewed as	objective evidence. T	he Customer
Complaint, Internal A	udit and Training Prod	cedures were verified	and the effective
date was concurrent	with the dates for the	meeting held. Camera	a Monitoring form
were also verified			
Evaluation:			
The input process st	tep of Document Crea	ation for the Control of	Records and
1	nges Process was aud		
conducted and reviev	v of documents confire	med that the process	is in conformity with
	SO 22000:2018 Claus	•	-

CONFORMITY REPORTS – CONTROL OF RECORDS AND DOCUMENTS AND CHANGES

Audit of: Control of	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
Records and	Fitzgerald	22000:2018 (E)	
Documents and		Clause 7.5.3.2	
Changes			
		•	

Audit Evidence:

Effectiveness:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader and Kadene Wynter, Food Safety Coordinator who indicated that documents are distributed by either the Food Safety Team Leader, Food Safety Coordinator, Food Safety and

Quality Manager. Documents are issued specifically Food Safety and Quality Officers (Yoniel Edwards and Ann Marie Henry) or Supervisors such as Marva Mundle or Maxine Nelson. Records are are signed by the operator and any changes made are initialed by said operator. Records are retained for the shelf life of the product. Sanitation records are maintained four years. Records are disposed via shredder. Records are in some instances scanned to the food safety system drive. Documents are scanned on food safety system evidence of this was seen where scanned Process record for Ackee CCP2 dated April 17, 2021 Ackee Cleaning, Final Inspection and Sorting AK-CFIS-F-001 Ver. 4 (Sep. 15, 2020), Rev. 3 (Sep. 15. 2020) was seen in the records folder on the food safety drive

Evaluation:

The input step of Document Control for the Control of Records and Documents and Changes process was audited on November 4, 2021. Interviews conducted and review of documents and records confirms that the process is in conformity with the requirements of ISO 22000:2018 (E) Clause 7.5.3.2

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CONFORMITY REPORTS – CONTROL OF RECORDS AND DOCUMENTS AND CHANGES

Audit of: Control of	Auditor: Elizabeth	Audit Criteria:	Auditees:
Records and	Fitzgerald	Control of Records	
Documents and		and Documents	
Changes		CRD-001 Ver. 4	
		(Oct. 21, 2021), Rev.	
		5 (Oct. 21, 2021	
		Section 4.1	

Audit Evidence:

Review of documents was conducted to assess conformity. Three documents were reviewed: Callaloo Inspection Form CI-F-001 Ver. 1 (June 6, 2015), Rev. 1 (July 27, 2015), Retorting and Cooling RC-F-001 Ver. 6 (Sep. 15, 2020), Rev. (Sep. 15, 2020), Can Seam CS-F-001 Ver. 4 (Sep. 15, 2020) Rev. 4 (Sep. 15, 2020). All were in conformity to the numbering format specified in the procedure

Evaluation:

The activity step of Controlled Document for the Control of Records and Documents and Changes process was audited on November 4, 2021. All the documents reviewed were numbered in accordance with the specifications of the procedure, this confirms that the process is in conformity with the requirements of Control of Records and Documents CRD-001 Ver. 4 (Oct. 21, 2021), Rev. 5 (Oct. 21, 2021 Section 4.1

Effectiveness:

CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Orane	Audit Criteria: ISO	Auditees:			
	Evans	22000:2018 section				
		7.2a				
Audit Evidence:	Audit Evidence:					
An interview was conducted with Mrs Mighty Food safety team leader and miss						

An interview was conducted with Mrs Mighty Food safety team leader and miss Winter Food safety coordinator on november 4, 2021, evidence was seen for certificate of competency for external providers used by the company; (Rentokil, licence pest control operator.'No.KL1651118. issued date(november 22,2018) Expires(october 17,2021). External provider Bureau of standards Jamaica, seen certificate of accreditation for microbiology laboratory.(issued November 5,2019 by JANAAC Accreditation council)

Evaluation:

Based on information seen and recorded from documents provided. It can be concluded that the competency is in requirement to ISO 22000: 2018 section 7.2a

Effectiveness:

CONFORMITY REPORTS – TRAINING

Audit of: Training	~ I		Auditees:
	Evans	22000:2018 Section 7.2b	

Audit Evidence:

interviewed Mrs Mighty food safety team leader, seen certificate for Yoniel Edwards and Ann-Marie Henry for canning and retorting from Agro processing technology, also certificate from the university of the west indies in better processing control (for thermally process foods, closure for double seamed metal and plastic.)

Evaluation:

it can be concluded that based on the evidence presented, competence assessment is in conformity with ISO 22000:2018 section 7.2b.

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CONFORMITY REPORTS – TRAINING

Audit of: Training	Auditor: Orane	Audit Criteria:	Auditees:
	Evans	training program	
		TP-001	
		ver.2(sep.22.2021)	
		rev.2(sep.22,2021)	
		4.2.5,4.2.1.5-2	

Audit Evidence:

An interview was conducted with Mrs mighty food safety team leader on november 4, 2021. information provided showed that there were only two customer complain recorded at the time of audit. document seen: title: customer complaint record sheet. ver.1 ver. date(april 27, 2015) rev.1 rev. date(april 27,2015) document#. CCRS-F-01) The Ochi Rios Atlanta Inc, (JULY 5,2021) product; (ackee in brine). product code(S3LAKH2021D) Island Spice Ltd,(October 8, 2021) product(Browning) product code(S3BG19NOV2021). information was also seen in fsscverification platform on quality circle website, for process of verification and validation which October 4, 2021 verified with no issues.

Evaluation:

based on information provided on customer complaint and verification and validation which are used to assess the need for training as triggers. it can be concluded that it conforms to training program TP-001 ver.2(sep.22, 2021) rev.2(sep 22, 2021) 4.2.5, 4.2.1.5.1-2

Effectiveness:			

CONFORMITY REPORTS – ADDITIONAL REQUIREMENT - MANAGEMENT OF SERVICES, ISO 22000:2018 7.1.5, 7.1.6

Audit of: Additional	Auditor: David	Audit Criteria:	Auditees:
Requirement -	Gardner	FSSC 22000 Version	
Management of		5.1 Additional	
Services, ISO		Requirements	
22000:2018 7.1.5,		Management of	
7.1.6		Services and	
		supplied Materials	
		2.5.1a	

Audit Evidence:

Interview Mrs Nicola Valentine Food Safety Team Leader. Certification of Accreditation Bureau of Standards Jamaica Chemistry Laboratory, Accreditation number BSJCCO14/LA/2018/CERT04. Expires 19 September 2022, Scope=sauces and canned Ackee in brine. Technological Limited valid April 30 2022, Certification

number 5391.02,scop	pe=Hypoglycin in Ack	ee.	
Evaluation:			
laboratory analysis so these services are co produce precise and practices is conforme Requirements of Serv	ervices are used for version ducted by a compet repeatable test resulted to the audit criteria	21,The organization e erification and validation ent laboratory that has s using validated meth FSSC 22000 Version aterials 2.5.1a,Bass of	on of food safety, that s the capability to nods and best 5.1 Additional
Effectiveness:	y ramaato odon miamig	,	
		DDITIONAL REQU 5, ISO 22000:2018	
Audit of: Additional	Auditor: David	Audit Criteria: ISO	Auditees:
Requirement - Management of	Gardner	22000:2018 Clause 7.1.6 d	
Services, ISO			
22000:2018 7.1.5,			
7.1.6			
commercial Sterility 2		ety Team Leader. 1= A esr 26/2021/5156,{s3l 21	
Evaluation:			
evaluation, selection a	·	Documents retained formance for external p 2018 clause 7.1.6 d	
Effectiveness:			
		DDITIONAL REQU 5, ISO 22000:2018	
Audit of: Additional Requirement -	Auditor: David Gardner	Audit Criteria: ISO 22000:2018 Clause	Auditees:

22000:2018 Clause 7.1.6 d

Management of

Services, ISO 22000:2018 7.1.5,

7.1.6									
Audit Evidence:									
Interview Mrs Nicola	Valentine Food Safe	ty Team Leader.Servi	ce Provider						
Requirement ver 0,ve	r date dec.16.2019,R	evision 0,doc num spi	-oo1						
Evaluation:									
products,the organiza evaluation,selection,n	Audit was done on the 11th November 20121 on Providers of process, service or products, the organization established and applied criteria for the evaluation, selection, monitoring of the performance and re-evaluation of external providers of processes; products and or services. was conformed with the audit								
Effectiveness:									
CONFORMITY REPORTS – PRODUCT INFORMATION AND									
ADDITIONAL REQUIREMENT PRODUCT LABELING									
Audit of: Product	Auditor: Kay Roach	Audit Criteria:	Auditees:						
Information and	-	ISO22000:2018							
Additional		Clause 8.5.1.3							
Requirement Product									

Audit Evidence:

Labeling

Interviewed Ms. Elizabeth Fitzgerald, Process Owner who indicated that product descriptions are maintained containing the information required. Evidence of this was seen in product description for Jerk Seasoning Product Description JS - PD - 001 ver. 2 (July 5, 2017), rev. 8 (April 15, 2021)., Ackee in Brine Product Description AK - PD - 001 ver. 2 (November 20, 2017), rev. 6 (April 14, 2021)., Product Description Sweet Pineapple Sauce SPS - PD - 001 ver. 2 (July 5, 2017), rev. 5 (April 15, 2021)., Scotch Bonnet Sauce Product Description SBS - PD - 001 ver. 2 (July 5, 2017), rev. 9 (April 15, 2021).

Evaluation:

The finish product process step of the Product Information and Additional Requirement Product Labeling process was audited on November 8, 2021. Interviews conducted and documents reviewed confirms that the process is in conformity with the requirements of ISO22000:2018 Clause 8.5.1.3

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CONFORMITY REPORTS – PRODUCT INFORMATION AND ADDITIONAL REQUIREMENT PRODUCT LABELING

Audit of: Product Information and Additional Requirement Product Labeling		CRS:5 2012 Jamaican Standard Specification for Labeling of Packaged Foods	Auditees:
Audit Evidence:		Section 4.3.2.4	
Interviewed Ms. Eliza Sorbate is added to two confirmed with the reventage of the potassium sorbate was Peterson was also interfered the Dry Jerk Seasoning Potassium	wo products; cassava view of the labels for the seen in the ingredicterviewed; she confirming; document reviewer (17), rev. 6 (February)	hese products where ents listing for both proned that Potassium Sold Product Material Shy 6, 2021). Product Na	seasoning. This was a declaration for oducts. Mrs. Sharon orbate was added to neet PMS - TR - F -
Evaluation:			
Effectiveness:			

CONFORMITY REPORTS – PRODUCT INFORMATION AND ADDITIONAL REQUIREMENT PRODUCT LABELING

Audit of: Product	Auditor: Kay Roach	Audit Criteria:	Auditees:
Information and		FSSC 22000 Version	
Additional		5.1 Additional	
Requirement Product		Requirements	
Labeling		Management of	
		Supplied Materials	

Audit Evidence:

Interviewed Ms. Elizabeth Fitzgerald Process Owner who confirmed that Product Labelling was according to two standards requirements; Jamaica Standard Specification for Labelling of pre-packaged foods JS CRS 5:2010 ICS 67.230 and FDA Labelling requirement: Name of the food; list of ingredients; net content and drained weight; name and address; country of origin; lot identification; date marking and storage instructions; instructions for use. Reviewed product was Ackee in Brine, everything was listed except storage instructions.

Evaluation:

Effectiveness:	

CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
and Corrective	Fitzgerald	22000:2018 Clause	
Action		8.9.2.1	

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader who highlighted that there is a procedure to manage correction and corrective actions. A review of the Correction and Corrective Actions Procedure CCA-001 Ver. 4 (Sep. 21, 2021) Rev. 6 (Sep. 21, 2021) was done. The Purpose of which was stated as: to describe the methods for corrective actions taken on CCPs/PC, PRPS, OPRPs Preventive Controls, Customer Complaints, Internal Audit, External Audit, Verification and non-conforming Raw materials and all food safety issues. The procedure highlights the actions to be taken when deviations are experienced in the process or PRPS, Deviations that occurred during process the corrections are Prescribed by process authority and the are verified at the final review of the product.

Evaluation:

The input step of Documented Program for the Correction and Corrective Action process was audited on November 5, 2021. Interview conducted and review of documents confirmed that the process is in conformity with the requirements of ISO 22000:2018 Clause 8.9.2.1

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CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
and Corrective	Fitzgerald	22000:2018 Clause	
Action		8.9.2.4	

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader, who indicated that documented information are retained for corrections made for non-conforming products and process. Reviewed System Deviation Report SDR-F-001 Ver. 2 (Feb 5, 2020), Rev. 7 (Mar. 23, 2020) dated April 2021 for Non-Acidified Ackee in Brine S3LAKH2021D. In this record the Nature of the non-conformity is identified as: Low

initial Temperature, Cause of the failure: Mechanical Breakdown, The Consequences as a result of the non-conformity: Product released as deviation schedule was followed. On the Verification platform the Corrective Action Resolution History Report Number 1616512787 Dated March 23, 2021 was reviewed. This documented the corrective action for Verification and Validation Process; the Nature of Nonconformity/Reason: One Verification Past Due (training) 34 days. The Cause and the consequence of the non-conformity was not seen as a field on the document

Evaluation:

The input step of Documented Information Retained for the Correction and Corrective Action process was audited on November 5, 2021. Interview conducted and records reviewed confirmed that the process is in conformity with the requirements of ISO 22000:2018 Clause 8.9.2.4

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CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
and Corrective	Fitzgerald	22000:2018 Clause	
Action		8.9.3	

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader who indicated that the documented information maintained regarding correction and corrective action has been documented in the Correction and Corrective Actions Procedure CCA-001 Ver. 4 (Sep. 21, 2021) Rev. 6 (Sep. 21, 2021) Section 4.5.1.2 of the procedure specifies that information is documented on CAR form. Root Cause is also conduced to identify the cause of the issue and the corrective action plan is developed to address the issue and prevent recurrence. Corrective Action Form # 1628634636 for the Training Nonconformity issued in the March 22, 2021 External Audit was reviewed. The Root Cause analysis, Corrective Action Plan and Plan for Verification of effectiveness were all seen as components of the form.

Evaluation:

The input step of Documented Information Maintained for the Correction and Corrective Action Process was audited on November 5, 2021. Interview conducted and review of documents and records confirms that the process is in conformity with the requirements of ISO 22000:2018 Clause 8.9.3

Effectiveness:			

CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
and Corrective	Fitzgerald	22000:2018 Clause	
Action		8.9.1	

Audit Evidence:

Interviewed Nicola Valentine Mighty Food Safety Team Leader and Kadene Wynter, Food Safety Coordinator who indicated that members of the food safety team are trained in processes and products to be aware of the actions which are to be taken when non- conformities are issued. Training Record was seen for Canning and Retorting Workshop held November 12 and 19 and December 4, 2019 which was conducted by Maurice Lewis Agro Processing Technologies. Training Register seen with participants: Sharon Peterson, Demar Thomas, Yoniel Edwards, Adam Birt, Durran Vassel, Deen Welch, Nicola Mighty, Tracy Hibbert, Shemar Anderson, Ann Marie Henry, Orane Evans, Kadene Wynter, Micheal Brown, Glenford Geohaghan, Elizabeth Fitzgerald. These individuals were process owners, operators or Food Safety and Quality Officer

Evaluation:

The activity step of Monitoring for the Correction and Corrective Action process was audited on November 5, 2021. Interviews conducted, documents and records reviewed confirmed that this process is in conformity with the requirements of ISO 22000:2018 Clause 8.9.1

Effectiveness:			

CONFORMITY REPORTS – CORRECTION AND CORRECTIVE ACTION

Audit of: Correction	Auditor: Elizabeth	Audit Criteria:	Auditees:
and Corrective	Fitzgerald	Correction and	
Action		Corrective Action	
		CCA-001 Ver. 4	
		(Sep. 21, 2021),	
		Rev.6 (Sep. 21,	
		2021) Section	
		4.1.1.1	

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader, who indicated that the Bammy process has a sieve inspection as a process step prior to the sieving of the flour. This prevents the likely hood of the flour being affected and having to be placed on hold. This information was confirmed in an interview with Gloria Frazer King, supervisor for the bammy baking.

-va	luation:	

The control step of CCP/PC Bammy Correction for the Correction and Corrective Action process was audited on November 5, 2021. Interviews conducted confirmed that the process is in conformity with the requirements for Correction and Corrective Action CCA-001 Ver. 4 (Sep. 21, 2021), Rev.6 (Sep. 21, 2021) Section 4.1.1.1
Effectiveness:

CONFORMITY REPORTS – FOOD DEFENSE AND ADDITIONAL REQUIREMENT FOOD DEFENSE

Audit of: Food	Auditor: Yoniel	Audit Criteria:	Auditees:
Defense and	Edwards	ISO/TS	
Additional		22002-1:2009	
Requirement Food		Clause 18.2	
Defense			

Audit Evidence:

Interviewed Elizebeth Fitzgerald Research and Develpoment Manager. Walk through observation. Log Book and Locks on door

Evaluation:

Τ

Potentially sensitive areas with in the establishment has been identified, mapped and subjected to access control. These areas are Cold Storage, Spiceroom, Finish Goods Warehouse and Packaging material. Restricted areas was seen with locks on the doors. this is conformity with the ISO/TS 22002-1:2009 Clause 18.2

Effectiveness:

CONFORMITY REPORTS – FOOD DEFENSE AND ADDITIONAL REQUIREMENT FOOD DEFENSE

Audit of: Food	Auditor: Yoniel	Audit Criteria: Food	Auditees:
Defense and	Edwards	Defense FD-001	
Additional		Ver.3 (22/02/18)	
Requirement Food		Rev.2 (22/02/18)	
Defense		Section: 3.4	

Audit Evidence:

Interviewed Kay Roach Human Research Manager. Background Check Form Fd-F-001 Ver 1(mar 7 2016) Rev 0 Daniel Charles Blackwood dated (8.11.2021); Chester George Blake date (20.09.2021); Sharlene Williams (17.05.2016).

Evaluation:

Three documents was reviewed and the information seen was current for all three employees. Employee information seen was Sharlene Williams, Dated 17.05.2016, Chester Blake, Dated 20.09.2021 and Daniel Blackwood dated 8.11.2021. This is in conformity with Food Defense/ Food Fraud Plan FD-001 Ver 3 (22.02.18) Rev 2 (22.02.18) Clause 3.4.

Effectiveness:

CONFORMITY REPORTS – FOOD DEFENSE AND ADDITIONAL REQUIREMENT FOOD DEFENSE

Audit of: Food	Auditor: Yoniel	Audit Criteria: Food	Auditees:
Defense and	Edwards	Defense FD-001 Ver	
Additional		3 (22.02.18) Rev 2	
Requirement Food		(22.02.18) Section	
Defense		3.1.2	

Audit Evidence:

Interviewed Mervin Morgan Lifeshield Security. Life Shield Lab Book

Evaluation:

Interviewed Mr Mervin Morgan, he said that routine security checks of the premises is done in the evening, in the day it is not feasible due to the task they perform in the day. Lab book evidence Showed Patrol 8:00pm (07.11.2021) M. Morgan 11:45pm (28.10.2021) M. Walters 7:30pm (15.09.2021) M. Walters This is in conformity with Food Defense FD-001 Ver 3 (22.02.18) Rev 2 (22.02.18) Clause 3.1.2.

Effectiveness:

NONCONFORMITY REPORT						
Incid	Incident Identification Number: 000000.00004					
Non-Conformity Report	Auditor (s): Yoniel Edwards	Date: November 8, 2021				
#: 1						
Audit of : Food Defense	Audit Criteria: Food Defense					
and Additional	FD-001 Ver 3 (22.02.18) Rev					
Requirement Food	2 (22.02.18) Section 3.6.2.1					
Defense						

Statement of Nonconformity:

No evidence was presented to support the question.

Responsible Party: Roy Newell	
Auditor Signature:	Signature:

CONFORMITY REPORTS – EMERGENCY PREPAREDNESS AND RESPONSE

Audit of:	Auditor: Tracyann	Audit Criteria: ISO	Auditees:
Emergency	Hibbert	22000:2018 Clause	
preparedness and		8.4.1	
response			

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader, who explained that the company has a Emergency response plan which is detailed in the Emergency Response Plan ERP-001 Ver. 3 (Jan. 26, 2021), Rev. 10 (Jan 26, 2021). The scope of the document is applicable to all potential emergency situations or incidences that could have an impact on Food Safety at Tijule Company Limited. Emergencies addressed: Fire, Person Injuries in the Form of Burns cut, falls etc. Hurricane, Earthquake, Public health emergencies such as: Epidemic and Pandemic

Evaluation:

The input step of Documented Procedure for the Emergency preparedness and response process was audited on November 8, 2021. Interview conducted and document reviewed confirmed that the process is in conformity with the requirement of ISO 22000:2018 Clause 8.4.1

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CONFORMITY REPORTS – EMERGENCY PREPAREDNESS AND RESPONSE

Audit of:	Auditor: Tracyann	Audit Criteria: ISO	Auditees:
Emergency	Hibbert	22000:2018 Clause	
preparedness and		8.4.2 c	
response			

Audit Evidence:

Interviewed Nicola Valentine Mighty, Food Safety Team Leader who stated that currently the company verifies the fire preparedness, through Fire Drills. Review of report on the Fire Drill conducted May 14, 2021 was reviewed. The report was prepared by the Jamaica Fire Brigade who observed the Drill being conducted. The

place have been school Needham Deputy Sule Evaluation: The activity step of Spreparedness and reserved.	eduled as follow up a perintendent (Acting) Verification of Emerge sponse process was a ments reviewed confired.	ency Procedures for the audited on November med that the process	ne Emergency 8, 2021. Interview
CONFORMITY		RGENCY PREPAR	DEDNIESS AND
CONFORMITY	RESPORTS – EINER		KEDINESS AIND
Audit of: Emergency preparedness and response	Auditor: Tracyann Hibbert	Audit Criteria: ISO 22000:2018 Clause 8.4.2 d	Auditees:
Emergency response COVID 19 pandemic documented under P ERP-001 Ver. 3 (Jan	plan was updated in and its effects on the	d Safety Team Leade January 2021 to addr operational. This info cies in Emergency Re Jan 26, 2021)	ess the on-going rmation is
audited on Novembe	r 8, 2021. Interview co	gency preparedness a onducted and docume equirements of ISO 22	ent review confirms
	COMMUN		
Audit of: Internal and external communication Audit Evidence:	Auditor: Priscilla Muirhead	Audit Criteria: ISO 22000:2018 Clause 7.4.1 a-e	Auditees:

Mr. Newell was unavailable hence an interview was conducted with Mrs. Nicola Mighty Food Safety Leader. Mrs. Mighty said the organization has determine the internal and external communication that is relevant to the food safety management system. She stated the organization communicates changes to the Food safety system, requirements from external stakeholders such as FDA, Bureau of Standards etc, feedback from customers. Once there is an update from external stakeholders or any major change within the Food Safety System, members of the food safety team are informed and where applicable general production. Meetings are usually held by the Food Safety Team Leader who passes the information to supervisors who in turn passes it to line personnel or general workers. Minutes from a meeting dated July 2, 2021 was viewed as evidence for a Customer Complaint meeting in regards to ackees that were received by an customer that was soft and mushy and in attendance was Managers, Supervisors and Line Leaders from different areas of Production and Marketing personnel. Communication via letters dated July 5, 2021 was also sent via email to ten customers (Distributors) to inform them of the effect of the rainy season on the product (Ackee). A copy of the company's Internal and External Communication Procedure Version 4 Version Date November 2, 2021 Revision Number 3 Revision Date November 2, 2021 was also presented which specifies the requirements for Internal and External Communication.

Evaluation:

Communication within the organization conforms to the Audit Criteria in the ISO 22000:2018 Clause: 7.4.1 a-e standard as organization has identified and demonstrated what it will communicate, when to communicate, with whom to communicate, how to communicate and who communicates.

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CONFORMITY REPORTS – INTERNAL AND EXTERNAL COMMUNICATION

Audit of: Internal	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
and external	Muirhead	22000:2018 Clause:	
communication		7.4.2 a-d	

Audit Evidence:

Interview was conducted with Mrs. Nicola Mighty Food Safety Team Leader who said that the organization has established, implemented and maintained effective communication with: a) External Providers and contractors. An evidence presented was communication with Rentokil who provides the company with Pest Control services. Email were viewed starting on April 29, 2021 to October 19, 2021 in regards to Bait Stations. b) customer and/or consumers in relation to: 1. Product information relating to Food safety, handling and display, storage, preparation and usage are visible on the labels of the products. For example, the Jerk BBQ Dip label displays

allergen information that the product contains soy and wheat and the Sweet Pineapple Pepper sauce label has information that the item should not be used if the band around the cap is broken or missing and that the item should be store in a cool dry place and stored in refrigerator after opening, suggested usage is also displayed on the label. 2)Food safety hazards has been identified that need to be controlled by other organization in the food chain, evidence provided is the recall of Hell Hot Pepper sauce in January 2020 for a suspected case of metal contamination and was declared unfit for sale to consumers. Communication between the company and National Compliance and Regulatory Authority and Bureau of Standards with letters and reports and minutes of meeting held was presented in a folder (Withdrawal Jan 16, 2020) which was viewed. 3) Contractual arrangements, enquiries and orders including amendments are dealt with by Ms. Sharlene Williams Marketing and Export Officer who I was directed to by Mrs. Mighty. she showed emails between herself and distributors with orders and revised orders, one particular customer is Finese Foods with Ackee order #129 which shows communication from July 7, 2021 to November 8, 2021 re Ackee order #129 and revision for that particular order. 4) Ms Williams said communication in regards to customer and/or customer complaints are received through various channels such as website, emails or telephone and are maintained effectively. Evidence shown in regards to this was a complaint from Ocho Rios Atlanta who complained about Ackee being soft and mushy on July 1, 2021. emails show that communication was between the company and the customer in regards to the complaint from July 1st to 5th, 2021 when the complaint was closed off c)Mrs Mighty stated that communication are established, implemented and maintained with Statutory and Regulatory authorities. Evidence presented was an email between the company and National Compliance and Regulatory Authority on August 5, 2021 for Registration exercise for August 24, 2021 d) Communication is also established, implemented and maintained with organization that have an impact on or will be affected by the effectiveness or updating of the FSMS. Evidence shown by Mrs Mighty was an email on June 30, 2020 to Intertek (Auditing Body) addressed to Ms. Castenada informing her of the changes made to the Food Safety Team.

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Evidence presented shows that this process conforms with the Audit Criteria in the ISO 22000:2018 Clause: 7.4.2 a-d.

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CONFORMITY REPORTS – INTERNAL AND EXTERNAL COMMUNICATION

Audit of: Internal	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
and external	Muirhead	22000:2018 Clause:	
communication		7.4.2 a-d	
Audit Evidence:			

This process conforms with the Audit Criteria in the ISO 22000:2018 Clause 7.4.2 and Effectiveness: CONFORMITY REPORTS – VERIFICATION AND VALIDATION Audit of: Verification and Validation Fitzgerald Pitzgerald
CONFORMITY REPORTS – VERIFICATION AND VALIDATION Audit of: Verification Auditor: Elizabeth and Validation Fitzgerald Pitzgerald Pit
CONFORMITY REPORTS – VERIFICATION AND VALIDATION Audit of: Verification Auditor: Elizabeth and Validation Fitzgerald 22000:2018 Clause: 8.8.1 Audit Evidence: Interviewed Ms. Kadene Wynter, Process Owner who indicated that the results of verification are in Food Safety Meetings. She indicated that CCPs are verified throug monitoring checks as external lab analysis such as Microbial Analysis and extraneous Matter. PRPs are verified using the Verification Software provided by Quality Circle
Audit of: Verification and Validation Fitzgerald 22000:2018 Clause: Audit Evidence: Interviewed Ms. Kadene Wynter, Process Owner who indicated that the results of verification are in Food Safety Meetings. She indicated that CCPs are verified through monitoring checks as external lab analysis such as Microbial Analysis and extraneous Matter. PRPs are verified using the Verification Software provided by Quality Circle
and Validation Fitzgerald 22000:2018 Clause: 8.8.1 Audit Evidence: Interviewed Ms. Kadene Wynter, Process Owner who indicated that the results of verification are in Food Safety Meetings. She indicated that CCPs are verified throug monitoring checks as external lab analysis such as Microbial Analysis and extraneous Matter. PRPs are verified using the Verification Software provided by Quality Circle
Interviewed Ms. Kadene Wynter, Process Owner who indicated that the results of verification are in Food Safety Meetings. She indicated that CCPs are verified throug monitoring checks as external lab analysis such as Microbial Analysis and extraneous Matter. PRPs are verified using the Verification Software provided by Quality Circle
verification are in Food Safety Meetings. She indicated that CCPs are verified throug monitoring checks as external lab analysis such as Microbial Analysis and extraneous Matter. PRPs are verified using the Verification Software provided by Quality Circle
conformities
Evaluation: The Output Process Step of Records for the Verification and Validation Process wa audited November 4, 2021. Interviews conducted and records reviewed confirms that the process is in conformity with the requirements of ISO 22000:2018 Clause: 8.8.1
Effectiveness:
CONFORMITY REPORTS – VERIFICATION AND VALIDATION
Audit of: Verification Auditor: Elizabeth and Validation Fitzgerald Verification and Validation Planning VVP-001 Ver. #1 (July 7, 2015). Rev. 2 (Dec. 23. 2020)

Reviewed Completed Corrective action form seen in FSSC Software on Quality Circle Platform Incident Identification Number 1616512787 Process Verification and Validation dated March 23, 2021 Effective Closed out date April 20, 2021							
Evaluation:							
audited November 4,	2021. Review of corr ity with the requireme	ne Verification and Vali ective action reports c ents of Verification and ec. 23. 2020)	onfirms that the				
Effectiveness:							
CONFORMITY	REPORTS – VEF	RIFICATION AND	VALIDATION				
Audit of: Verification and Validation	Auditor: Elizabeth Fitzgerald	Audit Criteria: ISO 22000:2018 Clause: 8.8.2, 9.2 a-e	Auditees:				
verification activities a the management revi 13, 14, 19, 21 & 26, 2	are conducted. These ew. The Minutes of M	s Owner who indicate to results are presented fanagement review Me ection Seen for Analys	in meetings such as eeting held January				

Evaluation:

The Output Step of Analysis of Results of Verification for the Verification and Validation Process was audited on November 4, 2021. Interviews conducted and records reviewed confirms that the process is in conformity with the requirements of ISO 22000:2018 Clause: 8.8.2, 9.2 a-e

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CONFORMITY REPORTS – FOOD FRAUD AND ADDITIONAL REQUIREMENT FOOD FRAUD PREVENTION

Audit of: Food	Auditor: Yoniel	Audit Criteria:	Auditees:
Fraud and Additional Edwards		FSSC 22000 Version	
Requirement Food		5.1 Additional	
Fraud Prevention		Requirements Food	
		Fraud Mitigation	
		2.5.4.1	
Audit Evidence:			

Interviewed Elizebeth Fitzgerald Research and Development Manager. Food Fraud/Defense FF-001 Ver 2 (sep 15 2020) Rev 2 (sep 15 2020) Clause 4.0 Evaluation:

An internal Audit was conducted on the Vulnerability Assessment process step; Does the organization have a documented procedure in place to: (a) Conduct a food fraud vulnerability assessment to identify and assess potential vulnerabilities. (b) Develop and implement measures for significant vulnerabilities. Based on the evidence reviewed, it was seen that the Vulnerability Assessment of each Product Process Flow was listed, process step broken down, and score assessment for (V) Vulnerability and (A) Assessment was seen. which is in conformity with the FSSC 22000 Version 5.1 Additional Requirements Food Fraud Mitigation 2.5.4.1

Effectiveness:

CONFORMITY REPORTS – FOOD FRAUD AND ADDITIONAL REQUIREMENT FOOD FRAUD PREVENTION

Audit of: Food	Auditor: Yoniel	Audit Criteria:	Auditees:
Fraud and Additional Edwards		FSSC 22000 Version	
Requirement Food		5.1 Additional	
Fraud Prevention		Requirements Food	
		Fraud Mitigation	
		2.5.4.2	

Audit Evidence:

Interviewed Elizebeth Fitzgerald Research and Development Manager. Food Fraud/Defense FF-001 Ver 2 (sep 15 2020) Rev 2 (sep 15 2020) Clause 4.0

Evaluation:

The organization has a documentation of elements of the Food Fraud mitigation plan included in the Food Fraud/ Defense Procedure but there is no stand alone documented plan specifying mitigation measures covering the process and products within the FSMS scope of the organization, which is in conformity with the FSSC 22000 Version 5.1 Additional Requirements Food Fraud Mitigation 2.5.4.2. I recommend that a Stand alone documented Food Fraud mitigation plan be implemented.

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NONCONFORMITY REPORT

Incid	dent Identification	Number: 000	000.000	5
Non-Conformity Report	Auditor (s): Yor	niel Edwards	Date: No	ovember 9, 2021
#: 1				
Audit of : Food Fraud	Audit Criteria: F			
and Additional	Version 5.1 Addi			
Requirement Food Frauc	•			
Prevention	Mitigation 2.5.4.2	2		
Statement of Nonconfo	mity:			
The Food Fraud mitigat not up to date. Steps of the Procedure, the Steps are returned goods and shipped Defense Procedure but reconformity with the FSSC Mitigation 2.5.24.2	he process flow a (Packed in bags bing and sales). Do not in the process	re not include and weighed, Distribution wa flow. this sect	d in the F Seaming s seen in ion of the	Food Fraud/ Defense g, Rejected Cans, the Food Fraud/ e Process is not in
Responsible Party: Roy	Newell			
Auditor Signature:		Signature:		
	TY REPORTS uditor: Orane	– SUPPLIE Audit Criteri		ROVAL Auditees:
		22002-1:200	9	
		Clause 9.1		
Audit Evidence: interviewed Mrs might for seen: for raw material action date: august 29,2017. Resinformation seen (title: a Rev.9, Rev date: june 19 training register VER.0. Valuy 28, 2021) Evaluation:	kee(title: ackee dev.1. Rev date: Auckee suppliers: re , 2020. Doc# AK- /er date. Rev. 0. I	lepot check au ugust 29, 2017 equirements vo SR-001) Trair Rev date. Doc	udit check 7. Doc.#: er.3. ver. ning inforr #. TR-F-	klist , Ver.3, Ver AK-DAC-F-001. date june 19. 2020, mation seen: (title : 002) Training date:
Based on the information with ISO 22002-1:2009 of		concluded that	at the pro	cess is in conformity
Effectiveness:	เนนงธ			
LITOUIVEITESS.				

CONFORMITY REPORTS – SUPPLIER APPROVAL

Audit of: Supplier	Auditor: Orane	Audit Criteria: ISO	Auditees:
Approval	Evans	22002-1:2009	
		Clause 9.2	
Audit Evidence:			
interviewed miss wi	nter on November 8	3, 2021 Food Safety Cod	ordinator. information
seen: Title; suppliers	approval process, v	ver.3 ver.date: January 2	28, 2021. rev.#. 3 rev.
date: January 28,202	21. Doc#. SAP-001.		
Evaluation:			
Based on information	on seen supplier sel	ection and monitoring co	onforms to to ISO /TS
22002-1:2009 clause	9.2		
Effectiveness:			

CONFORMITY REPORTS – SUPPLIER APPROVAL

Audit of: Supplier	Auditor: Orane	Audit Criteria: ISO	Auditees:
Approval	Evans	22002-1:2009	
		Clause 9.2	

Audit Evidence:

interviewed miss winter on November 8,2021, documented information seen; Title: Ackee- Hazard Analysis, Ver. 3 Ver date: sept 15 2020, Rev.10, Rev date:sept 15,2020. Doc #. AK-HA-001(Potential hazard; hypoglycin) document title: Ackee depot checklist Ver.2. Ver.date: August 29,2017, Rev.1 Rev.1. Rev. date: August 29,2017. Doc #. AK-DAC-F-001. Information seen: Title: Ackee Receival, sampling, shelling and sorting (CCP 1 monitoring form) ver.6 ver. date: july 30,2021. Rev. 6. Rev date. july 30, 2021. Doc.#: AK-RSSS-F-001. date seen (october 4, 2021) information seen: (Title: Ackee suppliers guarantee, Ver.2. Ver, date: Nov. 23, 2015. Rev.7, Rev date: Nov. 23, 2015, Doc #: AK-SG-F-001)

Evaluation:

Based on the information that was presented. It can be concluded that supplier selection and monitoring is in conformity with ISO 22002-1:2009 Clause 9.2.

Effectiveness:

CONFORMITY REPORTS – QUALITY LABORATORY

Audit of: Quality	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
Laboratory	Fitzgerald	22000:2018 Clause	
		8.7 a-e	

Audit Evidence:

Interviewed Mr. Ricardo Johnson, Process Owner, who indicated that instruments in used for monitoring and measuring are indicated on the Calibration inventory Log-CIL-001 Ver. 6 (Aug. 12, 2021) Rev. 5 (August 5, 2021). This document states the: Name of equipment, Serial or ID Number Range/Sensitivity, Location, Last date of calibration and expiry date. Calibration Reports were seen for instruments such as: Can Seam Micrometer (T.C.L 5MM) CALR22/2021/4085A Calibrated by BSJ and Digital Thermometer Wahl Meter #: DST6001/2102368.001 Probe Number: DST607B21303B/2102368.002 Calibrated by Palmer Wahl Instruments Inc. Report Number: 36323, pH Meter by Apera Instruments Report# 07/09/2020 PH20 Value pocket pH Tester, Serial Number T213385070. No Adjustments are done internally. Access is restricted to these instruments and only quality control personnel are able to access. All instruments are used under the supervision of a Food Safety personnel. Stored in secure and safe location with minimal exposure to the environment.

Evaluation:

The Input Process Step of Measuring Equipment for the Quality Control Laboratory Process was audited on November 9, 2021. Interview conducted and review of records confirms that the process is in conformity with the requirements of ISO 22000:2018 Clause 8.7 a-e

Effectiveness:			

CONFORMITY REPORTS – QUALITY LABORATORY

Audit of: Quality	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
Laboratory	Fitzgerald	22000:2018 Clause	
		8.7	

Audit Evidence:

Interviewed Mr. Ricardo Johnson, Process Owner, who indicated that calibration are conduced by external laboratory where traceable standards are used. The applicable standard for each calibration is stated on the calibration report supplied by the Testing Lab. The following records were reviewed: pH Calibration report contained the following Statement: Apera Instruments certifies that this product has been produced under ISO9001: 2015 Quality Management System (00917Q11358R25), calibrated and tested to meet all applicable Apera procedures, using standards and reference instruments, the accuracy of which is traceable to National Institute of Standards (NIST) in USA or internationally acceptable standards. Micrometer Report states that traceability as: To SI Through NIST and Mahr Inc. Calibration. Report #

		i on reports and Certin	
Quality Management	seen for Bureau of S	tandards Jamaica Lim	ited for Thermometry
Expiry date: 01. Octo	ber 2022		
Evaluation:			
The Activity Step of	Calibration for the Qu	uality Control Lab Prod	ess Was audited on
		nd documents reviewe	
		ements of ISO 22000:2	
Effectiveness:	arros mar aro roquiro		<u> </u>
Enounvonoso.			
CONFORM	/IITY REPORTS -	- QUALITY LABOR	RATORY
Audit of: Quality	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
	Fitzgerald	22000:2018 Clause	7 10.0.110 00.
Laboratory	i itzgoraia	8.7	
Audit Evidence:		ρ. <i>τ</i>	
Audit Evidence.			
latamiaal Ma Dias	anda Jaharana Darana		al thank Davidson to at
	•	ss Owner who indicate	
1	-	on of the results obtain	
Reviewed Process Ro	ecords for Jerk Sauce	e Production Date Sep	tember 10, 2021
S3JS10SEP 2021 Fir	nal pH reported as 3.0	34 BSJ Test Report: T	ESR25/2021/7300
Product Jerk Sauce (S3JS10SEP2021) ph	H reported as 3.55	
Evaluation:	, ·	•	
The Activity Step of	the Assessment of R	esults for the Quality (Control Lab Process
1		ew conducted and rec	
		vith the requirements o	
1	ess is incomorning w	with the requirements of	1130 22000.2016
Clause 8.7			
Effectiveness:			
CONFORM	/ITY REPORTS -	- QUALITY LABOR	ATORY
		·	
Audit of: Quality	Auditor: Elizabeth	Audit Criteria:	Auditees:
Laboratory	Fitzgerald	Additional	
		Requirement	
		Management of	
		Services and	
		Purchased Materials	
Audit Fuidan		2.5.1 a	
Audit Evidence:			
i .			

338463, Documentation of standards seen on reports and Certificate of Approval of

Interviewed Mr. Ricardo Johnson, Process Owner who indicated that the Internal Methods of Measurement used by the Quality Control Laboratory have been compared to External Labs. The results of these were found to be comparable. A report on the Comparative Study under taken June 14-July 14, 2021 was reviewed. Four sets of samples were dispatched for testing as a part of the exercise. Statistical analysis was applied to each result and Z- Scores used to describe to determine the precision of the results. The best-score Is zero while a z-score close to zero means that the results corresponds well with other laboratories

Evaluation:

The Control Step of Capability for the Quality Control Process was audited on November 9, 2021. Interview conducted and review of records confirm that the process is inconformity with the requirements of Additional Requirement Management of Services and Purchased Materials 2.5.1 a

Effectiveness:			

CONFORMITY REPORTS – MANAGEMENT OF PURCHASED MATERIALS, CONTROL OF NON-CONFORMING RAW MATERIAL AND ADDITIONAL REQUIREMENTS - MANAGEMENT OF SUPPLIED MATERIAL

Audit of:	Auditor: Yoniel	Audit Criteria: Non-	Auditees:
Management of	Edwards	Conforming Raw	
Purchased Materials,		Material NCRM-001	
Control of Non-		Ver1 (Jan/28/2020)	
Conforming Raw		Rev1 (Jan/28/2020)	
Material and			
Additional			
Requirements -			
Management of			
supplied material			

Audit Evidence:

Interviewed Sharon Peterson Production Manager, Nicola Mighty Food Safety Team Leader. Raw Material Receival Monitoring form RMRM-TR-F-002 Ver 4 (08.02.2019) Rev 5 (02.06.2020).

Evaluation:

There is a section for Fresh produce that if it does not meet specification at inspection on the Raw Material Receival Monitoring Form Heading (Quantity Rejected), However conducted checks did not show any Quantity of rejected Raw Material for the past 2 months Dated September 01 2021 up until October 04 2021 which is in conformity with the Non Conformity Raw Material NCRM-001 Ver 1 (Jan

28. 2020) Rev 1 (Jan 28 2020)	•
Effectiveness:	

CONFORMITY REPORTS – MANAGEMENT OF PURCHASED MATERIALS, CONTROL OF NON-CONFORMING RAW MATERIAL AND ADDITIONAL REQUIREMENTS - MANAGEMENT OF SUPPLIED MATERIAL

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Management of	Edwards	ISO/TS	
Purchased Materials,		22002-1:2009	
Control of Non-		Clause 9.1	
Conforming Raw			
Material and			
Additional			
Requirements -			
Management of			
supplied material			

Audit Evidence:

Interviewed Sharon Peterson Production Manager and Kadene Wynter Food Safety Coordinator. Ackee Receival, Sampling, Shelling & Sorting AK-RSSS-F-001 Ver 6 (jul 30 20201) Rev 6 (jul 30 2021) Date Checks are Oct 4 2021, Oct 07 2021, Jul 20 2021 and Jul 18 2021.

Evaluation:

Ackee Receival, Sampling, Shelling & Sorting AK-RSSS-F-001 Ver 6 (jul 30 20201) Rev 6 (jul 30 2021) Date Checked are Oct 4 2021, Oct 07 2021, Jul 20 2021 and Jul 18 2021 and Cassava Receival B-CR-TR-009 Ver2 (may 11 2018) Rev 7 (feb 06 2020) Date Checked are 13.09.2021, 15.09.2021,4.05.2021 and 20.10.2021 is an evidence which shows that the conformity of incoming materials which specified purchase requirements are being verified and is inconformity with the ISO/TS 22002-1:2009 Clause 9.1

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CONFORMITY REPORTS – MANAGEMENT OF PURCHASED MATERIALS, CONTROL OF NON-CONFORMING RAW MATERIAL AND ADDITIONAL REQUIREMENTS - MANAGEMENT OF SUPPLIED MATERIAL

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Management of	Edwards	ISO/TS	
Purchased Materials,		22002-1:2009	
Control of Non-		Clause 9.3	
Conforming Raw			
Material and			
Additional			
Requirements -			
Management of			
supplied material			

Audit Evidence:

Interviewed Kadene Wynter Food Safety Coordinator and Sharon Peterson Production Manager. Non Conforming Raw Material NCRM-001 Ver 1 (jan 28 2020) Rev 1 (jan 28 2021) Clause 2.2, Clause 4.1.1.1.1, Clause 4.1.2.1.1, Clause 4.1.2.2.1, Clause 4.1.3.1.1

Evaluation:

Materials that do not conform to the relevant specifications are handled under a documented procedure which ensures they are prevented from unintended use. An inspection was conducted and the Non Conforming Raw Material NCRM-001 Ver 1 (jan 28 2020) Rev 1 (jan 28 2021) Clause 2.2, Clause 4.1.1.1.1, Clause 4.1.2.1.1, Clause 4.1.2.2.1, Clause 4.1.3.1.1 is an evidence which verifies that the process is in conformity with the ISO/TS 22002-1:2009 Clause 9.3.

Effectiveness:

OPPORTUNITY REPORT				
Incid	Incident Identification Number: 000000.00001			
Opportunity Report #: 1	Auditor (s): Yoniel Edwards	Date: November 4, 2021		
Audit of : Management	Audit Criteria: ISO/TS			
of Purchased Materials, 22002-1:2009 Clause 9.3				
Control of Non-	Control of Non-			
Conforming Raw Material				
and Additional				
Requirements -				
Management of supplied				
material				

Statement of Opportunity:

Based on the evidence reviewed it cannot be definitively concluded that the process is in full conformity with requirements ISO/TS 22002-1:2009 Clause 9.3, It was seen that the Ingredients and Semi Processed Receiving Form only checks for Appearance and Colour while the product specification check for colour, appearance

odour, chemical properties and receival conditions, so both forms should be checking for the same thing. Some of the parameters listed in the Product specification sheet is not listed on the COA. This is an area of concern as if its not addressed it could escalate into a non conformity, therefore its an opportunity for improvement. Responsible Party: Noel McLean Auditor Signature: Signature: OPPORTUNITY REPORT Incident Identification Number: 000000.00002 Opportunity Report #: 2 | Auditor (s): Yoniel Edwards Date: November 4, 2021 Audit of : Management Audit Criteria: FSSC 22000 of Purchased Materials. Version 5.1 Additional Control of Non-Requirements Management Conforming Raw Material of Supplied Materials and Additional Requirements -Management of supplied material Statement of Opportunity: Based on the evidence reviewed it cannot be definitively concluded that the process is in full conformity with requirements FSSC 22000 Version 5.1 Additional Requirements Management of Supplied Materials. it was seen that the Specification sheet for cassava specified (colour, flavour, microbiological, packaging) while Cassava Receival specified (colour, flavour, moisture, starch, texture, odour and vehicle condition, both document are not in correspondence. this is an area of concern as if its not addressed it could escalate into a non conformity. Pleased addressed. Responsible Party: Noel McLean Auditor Signature: Signature: CONFORMITY REPORTS – TRACEABILITY Audit of: Auditor: Yoniel Audit Criteria: ISO Auditees: Edwards 22000:2018 Clause Traceability

Audit Evidence:
Interviewed Sharon Peterson Production Manager and Process Owner. Mock Reca Form Ver 0 (jan 28 2016) Rev 0
Evaluation:
The Mock Recall is a system in place that is used to verify and test the effectivenes of the Traceability System. This is in conformance with the ISO 22000:2018 Clause 8.3
Effectiveness:

CONFORMITY REPORTS – TRACEABILITY

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Traceability	Edwards	Traceability T-001	
		Ver 3 (22.08.2017)	
		Rev 3 (22.08.2017)	
		Section 3.1.3.2	

Audit Evidence:

Interviewed Sharon Peterson Production Manager and Process owner. Physical Inspection of the Semi process storage area.

Evaluation:

A visual inspection was carried out and verified that the Semi Processed Drums were labeled with the following information: * Supplier Name * Date of Delivery * Quantity and type of raw materials This is in conformance with the Traceability T-001 Ver 3(22.08.2017) Rev 3 (22.08.2017) Section 3.1.3.2

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CONFORMITY REPORTS – TRACEABILITY

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Traceability	Edwards	Traceability T-001	
		Ver 3 (22.08.2017)	
		Rev 3 (22.08.2017)	
		3.1.3.3, 3.1.3.4	

Audit Evidence:

Interviewed Sharon Peterson Production Manager and Process owner. Product Materials Sheet PMS-TR_F-001 Ver 5 (apr 11 2017) Rev 6 (feb 6 2020)

Evaluation:
The Product Material Sheet that was reviewed contain the product name and code, as well as information relating to the ingredients and raw materials which are used in
that product. Product Materials Sheet PMS-TR_F-001 Ver 5 (apr 11 2017) Rev 6 (feb
6 2020) Non Acidified Ackee, S3LAKP2321A-C. This is in conformance with
Traceability T-001 Ver 3 (22.08.2017) Rev 3 (22.08.2017) Section 3.1.3.3, 3.1.3.4.
Effectiveness:

CONFORMITY REPORTS – TRACEABILITY

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Traceability	Edwards	Traceability T-001	
		ver 3 (22.08.2017)	
		Rev 3 (22.08.2017)	
		Section 3.1.7.1	

Audit Evidence:

Interviewed Sharon Peterson Production Manager and Process owner. Finished Goods Inventory Sheet Ver 1 (apr 25 2017) Rev 1 (jan 24 2020)

Evaluation:

A reviewed of the Finished Goods Inventory Sheet was carried out for if the Warehouse functional personnel keeps record indicating product name, product code, quantity and date of receival for products coming from production and it confirm that the process is in conformance with Traceability T-001 Ver 3 (22.08.2017) Rev 3 (22.08.2017) Section 3.1.7.1

CONFORMITY REPORTS – TRACEABILITY

Audit of:	Auditor: Yoniel	Audit Criteria: ISO	Auditees:
Traceability		22000:2018 Clause	
		8.3	

Audit Evidence:

Interviewed Sharon Peterson Production Manager and process owner. Mock Recall MR-001 Ver 1 (mar 3 2021) Rev 1 (mar 3 2021)

Evaluation:

The Mock Recall is a system used to verify and test for the effectiveness of the

Traceability system a conformance with ISO		d confirms that the process 8.3.	cess is in
Effectiveness:			
CONF	FORMITY REPOF	RTS – TRACEABIL	ITY
Audit of: Traceability	Auditor: Yoniel Edwards	Audit Criteria: Traceability T-001 Ver 3 (22.08.2017) Rev 3 (22.08.2017) Section 3.1.7.2	Auditees:
Audit Evidence: Interviewed Sharon	Peterson Production	Manager. Packing Sli	p (Nov 11 2021)
to/ship to * The produ	uct name- Descriptior	ne name and address on * Quantity of products eability T-001 Ver 3 (22	s being Distributed-
Effectiveness:			
CONF	FORMITY REPOR	RTS – TRACEABIL	.ITY
Audit of: Traceability	Auditor: Yoniel Edwards	Audit Criteria: ISO 22000:2018 Clause 8.3	Auditees:
Material Sheet PMS- (Nov 11 2021). Finish 1 (jan.24.2020)	TR-F-001 Ver 5 (apr.	Manager and process 11.2017) Rev 6 (feb.06 Sheet FGIS-F-001 Ve	6.2020). Packing Slip
of lots or received material	aterials, ingredients a Sheet. * Reworking of Soducts. The packagin	onsider the following a nd intermediate product of materials/products ng Slip and Production e 8.3.	cts to end productsis not applicable *

CONFORMITY REPORTS - CONTINUAL IMPROVEMENT

Audit of: Continual	Auditor: Sharon	Audit Criteria: ISO	Auditees:
Improvement	Peterson	22000:2018 Clause:	
		10.2	

Audit Evidence:

Interviewed the Research and Development Manager Ms. Elizabeth Fitzgerald. Communication Activities Notice: To all Staff: Dated 04.11.21 and Email: To Industrial Chemical Company(Re: Certification of Analysis) Dated November 04,2021. Management review output, Food Safety Management Meeting Dated January 13, 14, 19, 21 26, 2021. Sec 5. Audit results; Internal Audit, Title Corrective Action Plan, Ver. 1 Ver, Date Dec 21, 2020, Revision # 2, Rev. Date Dec, 21, 2020. Document # CAR- F 001 Audit Date December 15, 2020. Individual verification result. Food Safety Management Review Meeting Jan. 13, 14, 19,21, 26, 2020. Analysis of verification results, Food Safety Management Review Meeting Dated January 13, 14, 19, 21, 26, 2021 Sec. 20 Update to Management system. Food safety Management Review Meeting January 13, 14 19 21 26, 2021.

Evaluation:

An Audit of the Food Safety Management System Process Step was conducted on Continual Improvement on the source of information being used to continually improve the Food Safety Management System: Communication activities, management review output, audit results, individual verification results, analysis of verification results, and update to the Food Safety Management System. Evidence reviewed and Interview conducted is in conformance with the Audit criteria ISO 2200:2018 Clause: 10.2.

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CONFORMITY REPORTS – INTERNAL AUDIT

Audit of: Internal	Auditor: Sharlene	Audit Criteria:	Auditees:
audit	Williams	INTERNAL AUDIT	
		VERSION 1	
		VERSION DATE:	
		OCTOBER 21,2021	
		REVISION #2	
		REVISION	
		DATE:OCTOBER	
		21,2021	

		DOCUMENT#IA-001	
Audit Evidence:			
the Auditor Leader as interviewed and docu audit and all the proce conducting to doing to doing to fectiven system. Ms Fitzgeral	arried out on Friday No s well as the General I ument were seen. She sesses that involved fro the report and most im ess and if there is any d further explained that he risk that associated	Manager of Tijule Con explained the proces om the scheduling, pla portantly following up opportunity for impro at the frequency of cor	npany Limited was s of conducting an anning, preparing, to verify the vement of the nducting an internal
Evaluation:			
Effectiveness:			
CONFO	ORMITY REPORT Auditor: Sharlene	S – INTERNAL AI Audit Criteria: ISO	JDIT Auditees:
audit	Williams	22000:2005 CLAUSE:9.2.2d	
Audit Evidence:	1	02, (002.0.2.2.3	
conducted a summar meeting or Managem MEETING FOOD SA JANUARY 13,14,19,	erald was interviewed stry of the findings would nent Review meeting. NFETY MANAGEMEN 21,26, 2021. DISCUS CONFORMITY RECE	d be presented in eith EVIDENT OF LAST IN T REVIEW DATE OF SED THE NUMBER O	er a Food Safety NTERNAL AUDIT MEETINGS:
Effectiveness:			
CONF	ORMITY REPORT	S – INTERNAL AI	UDIT
Audit of: Internal audit	Auditor: Sharlene Williams	Audit Criteria: ISO 22000:2005 CLAUSE:9.2.2	Auditees:
Audit Evidence:			

Version 1 Version Dat 21, 2020 Document n	te: December 21, 202 umber CAR-F-001 Ca	ategory: FSSC Interna	on Date: December al Audit 2020 Audit
Date: December 15, 2			evident that the
audit was closeD out	and the date it was ci	osea.	
Evaluation:			
Effectiveness:			
001150			IDIT
		S – INTERNAL AI	
Audit of: Internal audit	Auditor: Sharlene Williams	Audit Criteria: N/A	Auditees:
Audit Evidence:	VVIIIIaiii5		
Ms Elizabeth explain different department of external training cond done as a fresher before Limited LLC Orane Explained 2019-06-05 1 CE International Limited L Based Internal Date: 2 International Limited Emanagement System FSMS_190 Consultant TRAINER PECB, SEN 22000 LEAD IMPLEM CONSULTANT (FSMSAUDITOR (EMS) FSMSAUDITOR (EMS) EMSAUDITOR (EMS) FSMSAUDITOR (EMS) FSMSAUDITOR (EMS) EMSAUDITOR (EMS) EMSAUDITO	of the operation. She a ucted by certified con ore conducting an aud vans-participate in a d EU Certificate Numbe LC Sharon Peterson 2019-06-05 1 CEU Ce Elizabeth Fitzgerald-H Internal Audit Date: 2 It Owen Glave (Mr.) N NIOR FOOD SAFETY MENTOR EXEMPLAR S, QMS & EMS) LEA MA LEAD INSTRUCT	isultant as well as integrated dit. Certificate-Quality completed of Process of 00001111 Certificated Participated in and control of the certificate Number 0000 das successfully completed in Section 25.8.2021 Certificate of MBA-TQM PECB/DNV LEAD AUDITOR CERTIFICATED AUDITOR CERTIFICATED MAI DAUDITOR (FSMS 800R (HUMAN FOOD,	ersons are engage in rnal training that is Circle International Based Internal Audit e-Quality Circle empleted:Process 21111 Quality Circle eleted Food Safety number:5001 CERTIFIED RTIFIED ISO 9001 & NAGEMENT & QMS) PRINICPAL
Effectiveness:			
CONFORM Audit of:	IITY REPORTS – Auditor: Priscilla	MANAGEMENT I	REVIEW Auditees:
, tadit of.	Addition i modific	, ladit Siltolia. 100	, idditooo.

Management Review	Muirhead	22000:2018 Clause:	
		9.3.2 a	
Audit Evidence:			
Interview was condu	ucted with Mrs. Nicola	a Mighty Food Safety T	eam Leader. Mrs.
0 , 1	•	afety Management Re	•
I		. Meeting was called b	•
Roy Newell. Page 2 c	of the Food Safety Ma	anagement Review hea	ading Matters arising
from last meeting indi	cates that status of a	ctions from previous n	nanagement reviews
are used as inputs int	o Management Revie	ew.	
Evaluation:			
Based on the evider	nce presented this pro	ocess conforms with th	ne Audit Criteria in
the ISO 22000:2018 (Clause 9.3.2 a		
Effectiveness:			

CONFORMITY REPORTS – MANAGEMENT REVIEW

Audit of:	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Management Review	Muirhead	22000:2018 Clause:	
		9.3.2 e	
Audit Evidence:			

Interview was conducted with Mrs. Nicola Mighty Food Safety Team Leader. Mrs. Mighty presented an Agenda from Food Safety Management Review from meetings held on January 13, 14, 19, 21 & 26, 2021. Meeting was called by Process Owner Roy Newell. Page 5, 6, 7 of the Food Safety Management Review headings Recall/Withdrawal, Customer Feedback/Complaints/Communication and Emergency Situations shows that the management review considers any emergency situation, incident or withdrawal/recall that has occurred.

Evaluation:

Evidence presented shows that the process confirms with the Audit Criteria in the ISO 22000:2018 Clause:9.3.2 e

Effectiveness:

CONFORMITY REPORTS – MANAGEMENT REVIEW

Audit of:	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Management Review	Muirhead	22000:2018 Clause:	
		9.3.2 c3	

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Audit Evidence:

Interview was conducted with Mrs. Nicola Mighty Food Safety Team Leader. Mrs. Mighty presented an Agenda from Food Safety Management Review from meetings held on January 13, 14, 19, 21 & 26, 2021. Meeting was called by Process Owner Roy Newell. Page 8 of the Food Safety Management Review section "Analysis of results of Verification" shows that the analysis of the results of verification activities for PRPs and the Hazard Control Plan are used as inputs into the management review.

Evaluation:

Evidence shown indicates that this process conforms with the Audit Criteria in the ISO 22000:2018 Clause 9,3,2 c3

Effectiveness:

CONFORMITY REPORTS – MANAGEMENT REVIEW

Audit of:	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Management Review	Muirhead	22000:2018 Clause	
		9.3.3 a	

Audit Evidence:

Interview was conducted with Mrs. Nicola Mighty Food Safety Team Leader. Mrs. Mighty presented an Agenda from Food Safety Management Review from meetings held on January 13, 14, 19, 21 & 26, 2021. Meeting was called by Process Owner Roy Newell. Page 8 and 9 of the Food Safety Management Review heading "Recommendations for Improvement" speaks to the decisions and actions related to continual improvement opportunities.

Evaluation:

This process conforms with the Audit Criteria in the ISO 22000:2018 Clause: 9.3.3 a Effectiveness:

CONFORMITY REPORTS – MANAGEMENT REVIEW

Audit of:	Auditor: Priscilla	Audit Criteria: ISO	Auditees:
Management Review	Muirhead	22000:2018 Clause	
		9.3.3 b	

Audit Evidence:

Interview was conducted with Mrs. Nicola Mighty Food Safety Team Leader. Mrs.

Roy Newell. Pages 7-8 of the Food Safety Management Review heading "Changes
that could affect the FSMS (to include COVID 19)" speaks to the updates and
changes to the FSMS, including resource needs and revision of the food safety policy
and objectives of the FSMS.
Evaluation:
This process conforms to the Audit Criteria in the ISO 22000:2018 Clause: 9.3.3 b
Effectiveness:

Mighty presented an Agenda from Food Safety Management Review from meetings held on January 13, 14, 19, 21 & 26, 2021. Meeting was called by Process Owner

CONFORMITY REPORTS – ADDITIONAL REQUIREMENT - USE OF FSSC LOGO/CERTIFICATION MARK

Audit of: Additional	Auditor: Tracyann	Audit Criteria:	Auditees:
Requirement - Use	Hibbert	FSSC 22000 Version	
of FSSc		5.1 Additional	
Logo/Certification		Requirements FSSC	
Mark		Logo Use 2.5.5 a	

Audit Evidence:

Interviewed Ms. Priscilla Muirhead, Business Development Manager who indicated that the FSSC Logo is currently used on Product Catalogue only. This digital copy of this document was reviewed and the Logo seen

Evaluation:

The activity step of Use of FSSC Logo/Certification Mark for the Use of Logo and Certification Mark process was Audited on November 16, 2021. Interview conducted and review of documents confirms that the process is in conformity with the requirements of FSSC 22000 Version 5.1 Additional Requirements FSSC Logo Use 2.5.5 a

Effectiveness:			

CONFORMITY REPORTS – ADDITIONAL REQUIREMENT - USE OF FSSC LOGO/CERTIFICATION MARK

Audit of: Additional	Auditor: Tracyann	Audit Criteria:	Auditees:
Requirement - Use	Hibbert	FSSC 22000 Version	
of FSSc		5.1 Additional	
Logo/Certification		Requirements FSSC	
Mark		Logo Use 2.5.5 b	

Audit Evidence:
The digital product catalogue was reviewed where it was observed that the FSSC logo used was compliant with the specification FSSC Logo Guidelines from the certification body on the basis of colour
Evaluation:
The Control Process Step of Specification For Logo for the Use of Logo and Certification Mark was audited on November 16, 2021. Review of records conducted confirms that the process is in compliance with the requirements of FSSC 22000 Version 5.1 Additional Requirements FSSC Logo Use 2.5.5 b
Effectiveness:

CONFORMITY REPORTS – ADDITIONAL REQUIREMENT - USE OF FSSC LOGO/CERTIFICATION MARK

Audit of: Additional	Auditor: Tracyann	Audit Criteria:	Auditees:
Requirement - Use	Hibbert	FSSC 22000 Version	
of FSSc		5.1 Additional	
Logo/Certification		Requirements FSSC	
Mark		Logo Use 2.5.5 c	

Audit Evidence:

Interviewed Ms. Priscilla Muirhead, Business Development Manager who indicated that the Logo was used only on promotional material such as the catalogue. Inspection of product labels and other company documents confirmed the information provided by Miss Muirhead

Evaluation:

The Control Process Step of Logo Use for the Use of Logo and Certification Mark Process was Audited on November 16, 2021. Interview conducted and review of documents confirms that the process is inconformity with the requirements of FSSC 22000 Version 5.1 Additional Requirements FSSC Logo Use 2.5.5 c

	ct				

CONFORMITY REPORTS - CONTEXT OF THE ORGANIZATION

Audit of: Context of	Auditor: Sharon	Audit Criteria: ISO	Auditees:
the Organization	Peterson	22000:2018 Clause:	
		4.1	
Audit Evidence:			

The organisation has assess the Internal and External issues in term of : Social,
Technological, Environmental, Economic . Political, Legal, Market and Regulatory
issues.For each issue it was categorise as Internal and external .Reviewed
Procedure. Title: Strategic Risk, Ver.,0, Ver. Date May 12, 2020, Document #SR-001
Interviewed Ms. Elizabeth Fitzgerald Research and Development Manager.
Evaluation:
An Audit was conducted on the Process Step on the Context of the organisation and is in Conformance with the Audit Criteria ISO 22000:2018 Clause: 4.1.
Effectiveness:

CONFORMITY REPORTS - CONTEXT OF THE ORGANIZATION

<u> </u>	CONTROL CONTRO						
Audit of: Context of	Auditor: Sharon	Audit Criteria: ISO	Auditees:				
the Organization	Peterson	22000:2018 Clause:					
		4.1					
Audit Evidence:							
Interviewed Ms. Eliz	abeth Fitzgerald Res	earch and Developme	nt Manager.				
Procedure seen Title	Strategic Risk' Ver. D	Date 0, Version Date M	lay 12, 2020,				
Document Number S	R-001 PRP Title SW0	OT analysis Ver. 0 Ver	. Date February				
11,2020 Document # SA-001							
Evaluation:							
Audit conducted on	Audit conducted on Process Step Internal and External Issues been identified and						
reviewed is identified as strengths, weakness, opportunties or Threats for the							

organisation. This is in conformance with the Audit Criteria ISO 22000:20218

Effectiveness:

CONFORMITY REPORTS – CONTEXT OF THE ORGANIZATION

Audit of: Context of	Auditor: Sharon	Audit Criteria: ISO	Auditees:			
the Organization	Peterson	22000:2018 Clause:				
		4.2				
Audit Evidence:	Audit Evidence:					
Interviewed Ms. Elizabeth Fitzgerald. Risk List isoimplementationsoftware,com						
Evaluation:						
For all interested parties identified, the risk, potential hazard associated are						

Effectiveness:			
CONFORMITY RE			
	Auditor: Sharlene	AGEMENT SYSTE Audit Criteria: ISO	Auditees:
Audit of: Planning and Objectives of the		22000:2018	Auditees.
food safety	VVIIIIaiiis	Clause:6.1.2	
management system		Clause.o. 1.2	
Audit Evidence:			
which address risk an	nd opportunities assoc	Coordinator. The organizated with internal and don't on the ISO implemen	d external issues.
Evaluation:		•	
Objectives of the food	d safety management anducted confirms that	d Opportunities for the system process was at the process is in corp. 1.2	audited on November
Effectiveness:			

highlighted and the risk identified. Hence the Process step internal and external issues is in conformance with the audit Criteria ISO 22000:2018 Clause 4.2.

CONFORMITY REPORTS – PLANNING AND OBJECTIVES OF THE FOOD SAFETY MANAGEMENT SYSTEM

Audit of: Planning	Auditor: Sharlene	Audit Criteria: ISO	Auditees:
and Objectives of the	Williams	22000:2018	
food safety		Clause:6.1.2	
management system			

Audit Evidence:

Interviewed Kadene Wynter, Food Safety Coordinator, the actions identified to address risk and opportunities have been integrated and implemented into the Food Safety Management System. These actions have been drawn from the procedure associated with the FSMS

Evaluation:

The activity step of Actions to address Assessment of Risk and Opportunities for the Planning and Objectives of the food safety management system process was audited

		ed confirms that the pr 2000:2018 Clause:6.1.	
Effectiveness:	oquitorito of 100 Zi		<u>-</u>
		ERFORMANCE EV	1
Audit of:	Auditor: Elizabeth	Audit Criteria: ISO	Auditees:
Performance	Fitzgerald	22000:2018	
Evaluation		Clause:9.1.1	
Audit Evidence:			
that monitoring and repoints (CCPs), verifications (CCPs), verifications are currently and report to the Management Resuluations. The input step of Merican Performance Evaluations and record conducted and record records.	measuring are done the cations and external to the individual proceduxternal Lab Testing Set). The lab result are pently being done by Fowhich shows the Hypowiew Minutes dated James and onitoring, Measuring, tion Process was Audit	Analysis and Evaluation ited on November 17, that the process is in the process in the process is in the process in the process in the process is in the process indicates in the process in the process in the process in the proce	of Critical Control for monitoring of for external testing is r. 4 (Sep. 19, 2018) nent review: r. Reviewed Ackee course of 2020 in on for the 2021, Interview
CONFORMITY	REPORTS – CON BUILD	ISTRUCTION AND) LAYOUT OF
Audit of:	Auditor: Sharon	Audit Criteria:	Auditees:
Construction and	Peterson	ISO/TS	
Layout of Buildings		22002-1:2009 Section 4.2	

Interviewed Ms. Elizabeth Fitzgerald . A Physical walk through of the facility was

done and the following observation was made. The processing area is in a

commericial area free from Potential contamination such as waste

Audit Evidence:

Evaluation:

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	ysical walk through o contamination. The p	f the area that the buil rocessing area is in	ding is located is not
Effectiveness:		<u></u>	
CONFORMITY	REPORTS – CON BUILD	ISTRUCTION AND INGS	LAYOUT OF
Audit of: Construction and Layout of Buildings	Auditor: Sharon Peterson	Audit Criteria: ISO/TS 22002-1:2009 Section 4.2	Auditees:
Audit Evidence:		•	1
Physical Walk throug	~	search and Developme	ent Manager and a
Evaluation:			
	,	f the area that the buil rocessing area is in a	•
Effectiveness:			
CONFORMITY	REPORTS – CON BUILD	ISTRUCTION AND	LAYOUT OF
Audit of:	Auditor: Sharon	Audit Criteria:	Auditees:
Construction and Layout of Buildings	Peterson	ISO/TS 22002-1:2009 Section 4.3	
Audit Evidence:			
Interviewed Ms. Eliz Physical Walk Through		search and Developme	ent Manager.
Evaluation:			
Based on walk thro			

2009 Section 4.3.						
Effectiveness:						
CONFORMITY		NSTRUCTION AND	D LAYOUT OF			
A 114 6	BUILD		T a 112			
Audit of:	Auditor: Sharon	Audit Criteria:	Auditees:			
Construction and	Peterson	ISO/TS				
Layout of Buildings		22002-1:2009 Section 4.3				
Audit Evidence:		Section 4.3				
	zabeth Fitzgerald. Ph	ysical walk through wa	as done,			
Evaluation:						
Gonoral walk through	ah was dono and tho	general condition of th	o facilities is in good			
1		ea was clear of debris	_			
1 -		in conformance with the	_			
22002-1:2009 Sectio	•	in comormance with the	ie Ciliena 150/15			
Effectiveness:	11 4.0.					
		Ellectiveriess.				
CONFORMITY	REPORTS – COI	NSTRUCTION ANI	D LAYOUT OF			
CONFORMITY	REPORTS – COI BUILD		D LAYOUT OF			
CONFORMITY Audit of:			D LAYOUT OF Auditees:			
	BUILD	INGS	,			
Audit of:	BUILD Auditor: Sharon	Audit Criteria:	,			
Audit of: Construction and	BUILD Auditor: Sharon	Audit Criteria:	,			
Audit of: Construction and	BUILD Auditor: Sharon	Audit Criteria: ISO/TS 22002-1:2009	,			
Audit of: Construction and Layout of Buildings Audit Evidence:	BUILD Auditor: Sharon Peterson	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1	Auditees:			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz	BUILD Auditor: Sharon Peterson zabeth Fitzgerald. Re	Audit Criteria: ISO/TS 22002-1:2009	Auditees:			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug	BUILD Auditor: Sharon Peterson zabeth Fitzgerald. Re	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1	Auditees:			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz	BUILD Auditor: Sharon Peterson zabeth Fitzgerald. Re	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1	Auditees:			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation:	Auditor: Sharon Peterson zabeth Fitzgerald. Rein was done.	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm	Auditees: ent Manager.			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation: The Process step F	Auditor: Sharon Peterson zabeth Fitzgerald. Rein was done.	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm	Auditees: ent Manager. ent patterns of			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation: The Process step F materials, products, p	Auditor: Sharon Peterson zabeth Fitzgerald. Rein was done. acility Layout was audeople and the layour	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm	Auditees: ent Manager. ent patterns of the the potential of			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation: The Process step F materials, products, p contamination hence	Auditor: Sharon Peterson zabeth Fitzgerald. Rein was done. acility Layout was audeople and the layout the Process Step Fa	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm dited and the movement of equipment minimized in the conformation of the con	ent Manager. ent patterns of the the potential of mance with the			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation: The Process step F materials, products, p contamination hence Criteria ISO/TS 2200	Auditor: Sharon Peterson zabeth Fitzgerald. Re h was done. acility Layout was au beople and the layou the Process Step Fa 2-1:2009 Section 5.1	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm	ent Manager. ent patterns of the the potential of mance with the			
Audit of: Construction and Layout of Buildings Audit Evidence: Interviewed Ms. Eliz Physical Walk throug Evaluation: The Process step F materials, products, p contamination hence	Auditor: Sharon Peterson zabeth Fitzgerald. Re h was done. acility Layout was au beople and the layou the Process Step Fa 2-1:2009 Section 5.1	Audit Criteria: ISO/TS 22002-1:2009 Section 5.1 search and Developm dited and the movement of equipment minimized in the conformation of the con	ent Manager. ent patterns of the the potential of mance with the			

CONFORMITY REPORTS – CONSTRUCTION AND LAYOUT OF BUILDINGS

	BUILDINGS				
Audit of:	Auditor: Sharon	Audit Criteria:	Auditees:		
Construction and	Peterson	ISO/TS			
Layout of Buildings		22002-1:2009			
		Section 5.7			
Audit Evidence:					
	abeth Fitzgerald. Phy	sical Walk through wa	is done.		
Evaluation:					
	•	ilding and the materia	'		
	•	ween the material and			
· ·		lk through the Finishe			
		easy walk between Ro			
•		ocess step is conform	ing to the Audit		
Criteria ISO/TS 22002	2-1:2009 Section 5.7				
Effectiveness:					
	ALDODIC LAVO				
CONFORMITY REPORTS – LAYOUT OF PREMISES AND WORK STATION					
Audit of: Layout of	Auditor: Anne Marie	Audit Criteria:	Auditees:		
Premises and Work	Henry	ISO/TS			
Station		22002-1:2009			
		Clause 5.2			
Audit Evidence:					

Interviewed Ms. Elizabeth Fitzgerald. Research and Development Manager. Walk through and observation,

Evaluation:

Walk through was conducted on the Process Step Facility Layout and the following, observation was made Raw Material taken from Semi Process to the grinding area. then to Production Line, the finished good was taken to the warehouse. Based on the observation of the Process step Facility Layout is in Conformance with the Audit Criteria ISO/TS 22002-1:2009 Clause 5,2.

Effectiveness:			

CONFORMITY REPORTS – LAYOUT OF PREMISES AND WORK STATION

Audit of: Layout of	Auditor: Anne Marie	Audit Criteria:	Auditees:		
Premises and Work	Henry	ISO/TS			
Station		22002-1:2009			
		Section 5.3			
Audit Evidence:					
Interviewed Ms. Eliz	abeth Fitzgerald Rese	earch and Developme	nt Manager. Walk		
through was done.					
Evaluation:					
The present well an	al flacuiaaababla 🔘		in the Ciniology		
· ·	d floor is washable. O				
Goods Warehouse . The Structure is made of concrete which is painted with epoxy					
paint which is washable and cleanable. The Process Step Internal Structures and					
Fittings is in Conformance with the Audit Criteria ISO/TS 22002-1:2009 Section 5.3.					
Effectiveness:					

CONFORMITY REPORTS – LAYOUT OF PREMISES AND WORK STATION

Audit of: Layout of	Auditor: Anne Marie	Audit Criteria:	Auditees:
Premises and Work	Henry	ISO/TS	
Station		22002-1:2009	
		Section 5.3	
Audit Evidence:			
Interviewed Ms. Eliz	abeth Fitzgerald . Res	search and Developm	ent.Manager.
Evaluation:			
Wall floor junction is	designed to facilitate	cleaning base on wal	k through and
observation done in tl	he Cutting Room Th	e corner of the wall is	Coved to prevent
easy accumulation of	debris or dirt in the co	orner of the wall. The	Process Step
Internal Structure and	Fittings(Floor) is in C	Comformance with the	Audit Criteria
ISO/TS 22002-1:2009	9 Section 5.3.		
Effectiveness:			

CONFORMITY REPORTS – LAYOUT OF PREMISES AND WORK STATION

Audit of: Layout of	Auditor: Anne Marie	Audit Criteria:	Auditees:		
Premises and Work	Henry	ISO/TS			
Station		22002-1:2009			
		Section 5.7			
Audit Evidence:					
Interviewed Ms. Eliz	abeth Fitzgerald. Res	earch and Developme	ent Manager. Walk		
through and Observa	tion.	·	-		
Evaluation:					
Storage areas are d	esigned or arranged t	o allow segregation o	f raw material work in		
progress and finished	products based on o	bservation and walk t	hrough done in the		
Packaging Rooms #3	, Spice Storage Roor	m and non Food Cher	nical in the Boiler		
room .Designated sto	rage area are assigne	ed. When items are st	ored out of the		
designated area they	are segregated from	the other material in t	he area. Sited in the		
finished Goods Ware	house where Bottles a	are stored on one side	and Finished goods		
	e Process step is in Co		_		
Section 5.7.	•				
Effectiveness:					
CONF	ORMITY REPORT	ΓS – WAREHOUS	ING		
Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:		
Warehousing	Edwards	ISO/TS			
		22002-1:2009			
		Clause 16.1			
Audit Evidence:		10.0000			
Interviewed Roy Harrison Warehouse Supervisor. Observation (Physical Inspection)					
of Th e Warehouse					
Evaluation:					
A physical inspectio	n was conducted whic	ch confirms that the pr	ocess is in		
1 ' '	S22002-1:2009 Claus	•			
Effectiveness:					

CONFORMITY REPORTS – WAREHOUSING

Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:
Warehousing	Edwards	ISO/TS	
		22002-1:2009	

		Clause 16.2				
Audit Evidence:	Audit Evidence:					
Interviewed Sharon Area. Food Grade Ch		Manager. Boiler Roon	n Chemical Storage			
Evaluation:						
1 ' '	nance chemicals) are	ch confirms that waste stored separately. Th				
Effectiveness:						
		<u> TS – WAREHOUS</u>	····			
Audit of:	Auditor: Yoniel	Audit Criteria:	Auditees:			
Warehousing	Edwards	ISO/TS 22002-1:2009				
		Clause 16.2				
Audit Evidence:						
1	2017) Rev 6 (Feb 06 2	upervisor. Product Ma 2020). Guava Jam S30				
Evaluation:	-					
Product Material Sheet PMS-TR-F-001 Ver 5 (apr 11 2017) Rev 6 (Feb 06 2020). For Guava Jam S3GM27sep2021 and Hell Hot Sauce S3HHS12may2021 was the used. And base on these evidence ingredient (white sugar) was audited for FIFO. For Hell Hot Sause S3HHS12may2021 White Sugar code (Lot # 28R29 was received on 23 Apr 2021) and Gauva Jam S3GM27sep2021 White sugar code (Lot# 28R723 received 30 Jul 2021. These shows that the First in First out is being practiced. This is in conformance with ISO/TS 22002-1:2009 Clause 16.2.						
Effectiveness:						
CONFORMITY REPORTS – UTILITIES						
Audit of: Utilities	Auditor: Tracyann	Audit Criteria:	Auditees:			
	Hibbert	ISO/TS				
		22002-1:2009 Clause:6.2				
	1	piause.u.z	1			

Audit Evidence:

1			I		
Interviewed Mr. Michael Brown, Maintenance Technician who indicated that water is supplied to the facility from the Municipal supply (NWC) and there is additional storage Tank (Operational Fill Volume 4500 gallons). Water is transferred from Storage tank to facility when required. Storage tank and piping system into the facility was confirmed during plant walk through					
Evaluation:					
November 18, 2021.	Interview and site wal	ne Utilities Process wa lk through conducted on ents of ISO/TS 22002-	confirm that the		
СО	NFORMITY REP	ORTS – UTILITIES	3		
Audit of: Utilities	Auditor: Tracyann Hibbert	Audit Criteria: ISO/TS 22002-1:2009 Clause:6.2	Auditees:		
Audit Evidence:					
Audit Evidence: Interviewed Ms. Kadene Wynter, Food Safety Coordinator who indicated that samples of water are sent for testing at external laboratory for: Residual Chlorine, Total Plate Count, Coliform and Feacal Coliform. Reviewed records: Potability Certificate issued by the National Water Commission (NWC), No. PC-July 2, 2021-1 For the Period January –June 2021. Bureau of Standards, Jamaica TEST Report No. TESR 26/2021/4794/A& C for water samples taken in the facility Dated July 13, 2021. and TESR 26/2021/2261/A Dated March 30, 2021. Results were within required limits for all parameters examined Evaluation:					
audited November 18	s, 2021. Interviews co	r Quality for the Utilitien nducted and records requirements of ISO/TS	eviewed confirms		

CONFORMITY REPORTS – UTILITIES

Audit of: Utilities	Auditor: Tracyann	Audit Criteria:	Auditees:
	Hibbert	ISO/TS	

		22002-1:2009 Clause:6.3		
Audit Evidence:		Clause.0.3		
/ Addit Evidence.				
boiler Chemicals use	d are B1000L,, B6000	nance Technician, wh DL and B8000L. These ata Safety Sheet (MSI	chemicals are	
for chemicals.	p Elithica. Material De	ata Garcty Gricot (MGL	oo, were seen on me	
Evaluation:				
on November 18, 202	21. Interviews conduc	emicals for the Utilities ted and review of reco ements of ISO/TS 220	ords confirmed that	
Effectiveness:				
CO Audit of: Utilities	NFORMITY REP Auditor: Tracyann	ORTS – UTILITIES Audit Criteria:	S Auditees:	
	Hibbert	ISO/TS 22002-1:2009 Clause:6.3	Auditees.	
Audit Evidence:				
Chemicals are store walk through of the a	•	rd in the Boiler room T	his was verified in	
was audited on Nove	mber 18, 2021. Inspe	emicals Storage for the ection conducted of the e process is in confornuse:6.3	e designated storage	
Effectiveness:				
CONFORMITY REPORTS – UTILITIES				
Audit of: Utilities	Auditor: Tracyann Hibbert	Audit Criteria: ISO/TS 22002-1:2009 Clause:6.4	Auditees:	

Audit Evidence:

Interview with Mr. Michael Brown, Maintenance Technician, who indicated that, extractor fans are used to assist in the ventilation. The facility has 7 such fans located in the Bammy room, Canning, Generally factory floor, Jerk Seasoning line, Finished goods warehouse. The location of the fans was verified on walkthrough of the fcaility Evaluation:

The Input step of Air Quality and Ventilation for the Utilities process was audited on November 18, 2021. Interview conducted and site walk through confirms that the process is in conformity with the requirements of ISO/TS 22002-1:2009 Clause:6.4 Effectiveness:

CONFORMITY REPORTS – UTILITIES

Audit of: Utilities	Auditor: Tracyann Hibbert	Audit Criteria: ISO/TS 22002-1:2009	Auditees:
		Clause:6.6	
Audit Evidence:			

It was observed throughout the facility that Light Fixtures are shielded to prevent contamination as a result of breakage.

Evaluation:

The input process step of Fixtures for the Utilities process was audited on November 18, 2021. Inspection of the light fixtures throughout the facility confirms that the process is in conformity with the requirements of ISO/TS 22002-1:2009 Clause:6.6

Effectiveness:

CONFORMITY REPORTS – UTILITIES

Au	dit of: Utilities	Auditor: Tracyann	Audit Criteria:	Auditees:
		Hibbert	Utilities UT-001 Ver.	
			1(24/4/2018)	
			Section: 4.4.1	

Audit Evidence:

Interview with Mrs. Jacqueline Williams Francis, Stores Supervisor (includes cold storage), who indicated that a daily log is maintained for Cold Storage. Records of the log were seen in the Cold Storage log book. Reading are recorded twice daily in the morning just at the start of production and the end of the production day. Records

were reviewed for November 12, 2021: 8		•	2 pm – 8Deg C
Evaluation:			
November 18, 2021. I	Interviews conducted	ing for the Utilities pro and records reviewed ents of Utilities UT-001	confirms that the
Effectiveness:			
		CUSTOMER COM	
	Auditor: Orane Evans	Audit Criteria: ISO 22000:2018 Clause 7.4.3 J	Auditees:
Audit Evidence:			
Complaint Form is ser customer complaint m information was confir 2021), Rev. 2 (Sep. 2 Reviewed the Custom Rev. 1 (Apr. 27, 2015)	nt to be completed. Coneeting is convened. The convened in Customer Co. 1, 2021) Section:4.1.4 ner Complaint Record	4.1-3Section 4.1.1.1-4 Sheet CCRS-F-001 \	n is received a is within 5 days. This 2-001 Ver.2 (Sep. 21, & 4.1.2, 4.1.2.1 /er. 1 (Apr. 27, 2015)
Audited on November	r 19, 2021. Interviews at the process is in co	for the Customer Con conducted, records a nformity with the requ	nd documents
Effectiveness:			
CONFORMI	TY REPORTS – (CUSTOMER COM	PLAINTS
Audit of: Customer complaints	Auditor: Orane Evans	Audit Criteria: Customer Complaint CC-001 Ver.2 (Sep. 21, 2021), Rev. 2 (Sep. 21, 2021)	Auditees:

Section:4.1.4.1-3

Audit Evidence:

Interviewed Ms. Sharlene Williams, process Owner Customer Complaint, who indicated that the customer complaint team determines if the complaint is valid. Evidence was seen in the customer complaint records file. The details of the determination of the validity of the complaint and investigation ensuing is document in the minutes of the meeting held November 9, 2021 and November 17, 2021 for customer complaint received from Jamaica Export Trading Co. Limited (JETCO) regarding the lids of 5 gallon Jerk Seasoning Pails which were broken during storage

Evaluation:

The activity process step of Customer Complaint Team for the Customer Complaint Process was Audited on November 19, 2021. Interview conducted and records reviewed confirms that the process is in conformity with the requirements of Customer Complaint CC-001 Ver.2 (Sep. 21, 2021), Rev. 2 (Sep. 21, 2021) Section:4.1.4.1-3

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CONFORMITY REPORTS – CUSTOMER COMPLAINTS

Audit of: Customer	Auditor: Orane	Audit Criteria:	Auditees:
complaints	Evans	Customer Complaint	
		CC-001 Ver.2 (Sep.	
		21, 2021), Rev. 2	
		(Sep. 21, 2021)	
		Section:4.1.4.1-3	

Audit Evidence:

Interviewed Ms. Sharlene Williams, Process Owner, who indicated that Corrective action form is completed for root cause analysis done on valid customer complaints. Evidence seen on Corrective Action No. 1637261106 detailing corrective action plan for Customer Complaint from Jamaica Export and Trading Company Limited for 5 gallon Jerk Seasoning Bucket on November 8, 2021

Evaluation:

The Activity Step of Response to Customers for the Customer Complaint process was audited on November 19, 2021. Interview conducted and evidence reviewed confirms that the process is in conformity with the requirements of Customer Complaint C-001 Ver.2 (Sep. 21, 2021), Rev. 2 (Sep. 21, 2021) Section:4.1.4.1-3

Effectiveness:

CONFO	RIVITY REPORTS	S - PRODUCT RE	CALL
Audit of: Product	Auditor: Orane	Audit Criteria:	Auditees:
Recall	Evans	ISO/TS22002-1:2009	
		Clause 15.2	
Audit Evidence:			
Interviewed Mrs. Nic	cola Valentine Mighty	Food Safety Team Le	ader who indicated
that there is a list of k	key contacts retained	by the organization. Ev	vidence Seen:
Emergency Contact I	EC-001 Ver. 3 (Noven	nber 17, 2021), Rev. 2	(November 17,
2021)	·	•	•
Evaluation:			
An audit of the Doci	umented Programs ar	nd input step for the Pr	oduct Recall Process
	_	erviews conducted an	
		ss is in conformity with	
ISO/TS22002-1:2009		33 13 III COMOTTINE WILL	Title requirements of
Effectiveness:	7 010030 10.2		
Lifectiveness.			
		S – PRODUCT RE	CALL
Audit of: Product	Auditor: Orane	Audit Criteria: ISO	Auditees:
Recall	Evans	22000:2018 Clause	
		8.9.5 a-c	
Audit Evidence:			
Interviewed Mrs. Nie	cola Valentine Mighty,	Food Safety Team Le	eader who indicated
that the company has	s a written procedure	to notify relevant intere	ested parties.

2021) Section 4.2.3.1 -4.2.3.3 **Evaluation:**

The input process step of Documented Information Maintained for the Product Recall Process was audited on November 19, 2021. Interviews conducted and review of documented confirm that the process is in conformity with the requirements of ISO 22000:2018 Clause 8.9.5 a-c

handling Withdrawals and the actions to be taken in a recall. Evidence was seen in the Withdrawals Procedure W-001 Ver. 2 (January 11, 2021), Rev. 2 (January 11,

Effectiveness:

CONFORMITY REPORTS – PRODUCT RECALL

Audit of: Product	Auditor: Orane	Audit Criteria: ISO	Auditees:	

Recall	Evans	22000:2018 Clause	
		8.9.5	
Audit Evidence:			
	•	hty Food Safety Team Le	
		d withdrawals are reporte	•
	•	nt Review meetings. Evid	
	ent Review meetir	ng held January 13-26, 20	021 on Page 5 under
Recall/Withdrawal			
Evaluation:			
T. 0	.		
		esults for the Product Rec	
	•	ews conducted and recor	
·	ocess is in conforn	mity with the requirements	s of ISO 22000:2018
Clause 8.9.5			
Effectiveness:			

CONFORMITY REPORTS – PRODUCT RECALL

Audit of: Product	Auditor: Orane	Audit Criteria: ISO	Auditees:			
Recall	Evans	22000:2018 Clause				
		8.9.5				
Audit Evidence:						
Interviewed Mrs. Nic	cola Valentine Mighty	y, Food Safety Team Le	eader who indicated			
that the Organization	has a Product Reca	Il Team whose membe	rs have assigned			
responsibilities in the	event of a Recall/W	ithdrawals. Evidence w	as seen in the			
Withdrawals Procedu	re W-001 Ver. 2 (Ja	nuary 11, 2021) Rev. 2	(January 11, 2021)			
Evaluation:						
The Resource Step of Personnel for the Product Recall Process was audited on						
November 19, 2021. Interviews conducted and documents reviewed confirmed that						
the process is in conf	ormity with the requi	rements of ISO 22000:	2018 Clause 8.9.5			
Effectiveness:						

CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment	Auditor: David	Audit Criteria:	Auditees:	
Suitability, Cleaning	Gardner	ISO/TS		
and Maintenance		22002-1;2009		

		Section:8.5	
Audit Evidence:			
in cleaning & sanitation in cleaning & sanitation in cleaning & sanitation in cleaning the light sanitation in cleaning with the cleaning & sanitation in cleaning with the cleaning in	on operation proce	arch & Development ma dure ver 9,ver date Nove 1,doc num CSOP 001	•
Evaluation:			
ensure that all plant,u	itensils and equipn	d dry cleaning programs nent are cleaned at defir 002-1;2009 Section:8.5	
Effectiveness:			
CONFORMITY RE		JIPMENT SUITABIL NTENANCE	ITY, CLEANING
Audit of: Equipment		Audit Criteria:	Auditees:
1	Gardner	ISO/TS	Additees.
and Maintenance	Garanoi	22002-1;2009	
		SECTION:8.6	
Audit Evidence:			
Liver to En el ed t	E't a sail I Danie a	I O I a also a a a f Maria	o de Branco de Cons
	•	ch & development Manaq n 6,version date January	•
·	•	L.F.001 Calibration Inve	
	-	ion number 6, revision da	• •
15.2021 Doc number			
Evaluation:			
Preventative of the pr Preventative mainten and/or control food sa 22002-1;2009 Section	ocess ;Equipment ance program imp afety hazards is co	er 19.2021 on the proces Suitability,Cleaning and lemented include all dev nformed to the audit crite	maintenance. ices used to monitor
Effectiveness:			
CONFORMITY RE	EPORTS – EQI	JIPMENT SUITABIL	ITY, CLEANING
		NTENANCE	,

Audit Criteria:

ISO/TS

Audit of: Equipment Auditor: David Suitability, Cleaning Gardner

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Auditees:

and Maintenance	22002-1;2009 SECTION:8.6			
Audit Evidence:				
Interview Elizabeth fitzgerald Research & Development Manager Preventative and corrective maintenance version 6, version date January 20.2020, revision number 6, revision date January 20.2020, document number PCM.001 section 4.1.1.8 Work order form version 1, version date may 12.2020, document number wo-f 001 asset=spice grinder may 17-18-2021/pump 15.3.2021				
Evaluation: An audit was done on the November 19.2021 on the process step activity release of maintained equipment. Procedure for releasing maintained equipment back into production include clean up,sanitizing,where specified in procedures and pre-inspection is in conformance to the ISO/TS 22002-1:2009 Section:8.6				
Effectiveness:				

CONFORMITY REPORTS – EQUIPMENT SUITABILITY, CLEANING AND MAINTENANCE

Audit of: Equipment	Auditor: David	Audit Criteria:	Auditees:
Suitability, Cleaning	Gardner	ISO/TS	
and Maintenance		22002-1;2009	
		Section;8.2 a,c	
Audit Evidonco:			

Interview Elizabeth Fitzgerald Research &development manager Interview Michael Brown Maintenance Personnel Did a physical walk through and on these equipment,48 callaloo blancher,49 callaloo cutting machine,20,21 sauce kettle,38 exhaust box and 6 cassava grinder

Evaluation:

Audit conducted on November 19.2021, on process step Resources ; Equipment Process name; Equipment Suitability, Cleaning and Maintenance walk through was done to check Equipment to see if they are conforming to the ISO/TS 22002-1;2009 Section:8.2 A,C Equipment check on 6 cassava grinder,38 exhaust box,20,21 sauce kettle all was in conformity

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