AUDIT DECISION CERTIFIED

CERTIFICATION NUMBER US0151925 | 159409

DECISION DATE 05/27/2022

AUDIT TYPE RECERTIFICATION

RECERTIFICATION DATE

AUDIT DATES 04/21/2023

04/26/2022 - 04/28/2022

EXPIRATION DATE

ISSUE DATE 07/05/2023 06/03/2022

AUDIT RATING



Excellent

Facility & Scope

Capitol City Produce, LLC (45240)

Capitol City Produce, LLC 16550 Commercial Avenue Baton Rouge, LA 70816 **United States**

Web Site: http://www.capitolcityproduce.com

Food Sector Categories:

26. Storage and Distribution

Products:

Various fruits and vegetables

Scope of Certification:

Location: 16550 Commercial Avenue, Baton Rouge, LA 70816 Scope Statement: The operation includes whole case-in-case-out order fulfillment/distribution and a repackaging operation which takes bulk produce cases and repacks into smaller saleable units. Exemptions: There were no exemptions claimed or applied for by the site. The entire operation was subject to audit. All areas were included in the audit.

Certification Body & Audit Team

Bureau Veritas Certification NA



16800 Greenspoint Park Drive, Suite 300S Houston, TX 77060 **United States**

Web Site: https://www.bvna.com/

CB#: CB-1-BVC

Accreditation Body: ANSI Accreditation Number: 0747

Lead Auditor: McCommons, Joe (204768) Technical Reviewer: Rice, Ariel (210767)

Hours Spent on Site: 23.5 Hours of ICT Activities: 0 **Hours Spent Writing Report:** 7

12.1.1 Premises Location and Approval

The site is registered with the FDA. The registration is current (exp. 12/31/2022). The City Occupational License certificate was on file with expiry 12/31/2022. The Louisiana Department of Health permit was current (expires 6/30/22). The USDA License No. 20051152 was current and on file. The Louisiana Dept. of Health performed an audit on 3/31/2022. There were 3 non-critical issues noted (standing water, cases on the floor in the freezer, and spillage in the freezer). Corrective actions were documented for the regulatory audit findings. A minor was issued under 12.1.1.1.

12.1.1.1 The site shall assess local activities and the site environment to identify any risks that may have an adverse impact on product safety and implement controls for any identified risks. The assessment shall be reviewed in response to any changes in the local environment or activities. The construction and ongoing operation of the premises on the site shall be approved by the relevant authority.

RESPONSE: MINOR

EVIDENCE: The site maintained a series of aerial photographs which demonstrated the environment of the building with no descriptions, assessment or written conclusion. The site did not have a written assessment of the site to state as the result of the assessment.

ROOT CAUSE: Risk Assessment wasn't provided to auditor; Aerial view was provided but needed the actual document. Oversight when reviewing the SQF Version 9.

CORRECTIVE ACTION: Site Risk Assessment was not provided during the audit.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting completed site risk assessment was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/05/2022 **CLOSEOUT DATE:** 05/26/2022

12.1.4 Dust, Insect, and Pest Proofing

Most doors were properly maintained. All doors with the exception of those in the minor issue met the criteria for exterior doors. The pest devices were located around the building in a manner not to be a danger to personnel or products handled and stored. There was a minor issued under 12.1.4.1.

12.1.4.1 All external windows, ventilation openings, doors, and other openings shall be effectively sealed when closed and proofed against dust, insects, birds, and other pests. External personnel access doors shall be provided. They shall be effectively insect-proofed and fitted with a self-closing device and proper seals to protect against entry of dust, birds, and other pests.

RESPONSE: MINOR

EVIDENCE: There was potential for pest entry at the following points: 1) gap under compactor lip (right compactor – door 19), 2) Gaps overhead in both compactor hoods, 3) Doors observed not closed all the way (6, 17 and 19).

ROOT CAUSE: Usual Wear and Tear (Age) of the Sealant. Notated on the Warehouse Walk-Thru. Proposal for repair had not been approved at the time of the Audit. Work Order has been created and repair date is pending. Training: Both shipping and receiving crews were retrained on GMPs pest control and Security on 05/02/22

CORRECTIVE ACTION: Potential For Pest Entry. Re-seal Trash and Recycle Compactors. Anticipate this to be completed within 90 days. Both Shipping and receiving crews were retrained on GMPs Pest Control and Security on 05/02/2022



VERIFICATION OF CLOSEOUT: The site response through the attached CAPA form, work orders, contracted completion document and training record was reviewed and accepted. The NC is closed. JM 5/27/22

COMPLETION DATE: 05/02/2022 **CLOSEOUT DATE:** 05/27/2022

12.3.2 Handwashing

The sink for handwashing was provided in the repack area. The sink was supplied with tempered water, towels in dispenser and a trash receptacle. There was a sign designating the sink as a hand wash and the sink was not observed to be used for other purposes. Gloves were changed as needed (when dirty or damaged). Training of employees encouraged them to wash hands prior to applying gloves. A minor was issued in this section under clause 12.3.2.3.

12.3.2.3 Handwash stations shall be constructed of stainless steel or similar non-corrosive material and at a minimum supplied with: i. A potable water supply at an appropriate temperature; ii. Liquid soap; iii. Paper towels; and iv. A means of containing used paper towels. An effective hand dryer may be used in instances where there is no direct hand contact of food or food contact surfaces.

RESPONSE: MINOR

EVIDENCE: Hand sink in repack not supplied appropriately at the time of inspection. Soap was not present. Sink was not maintained clean.

ROOT CAUSE: Sink was being repaired and was out of service. Work order completed but not submitted to facilities Manager. There was a breakdown in communication between Practitioner and the Facilities Manager.

CORRECTIVE ACTION: Washing Station. Hand Sink was not clean. Soap was not present. Hand Sink (washing station) has been repaired, Sink was cleaned, and soap station was re-installed.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting photos of the sink and supplies properly provided was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/05/2022 **CLOSEOUT DATE:** 05/26/2022

12.5.1 Water Supply

The last water test for potability was conducted on 2/22/2022. This was performed by the State Public Health Lab on a sample taken at the Capitol City Warehouse location. The backflow tests for the site were conducted last on 3/1/2022. A minor was noted in this section und 12.5.1.2.

12.5.1.2 Contingency plans shall be in place for instances when the potable water supply is deemed to be contaminated or otherwise inappropriate for use.

RESPONSE: MINOR

EVIDENCE: The water management program did not specify a contingency plan for water provision should the municipal source water or site water supply become contaminated.

ROOT CAUSE: Contingency Plan wasn't added to the Water Management Plan. Oversight when reviewing the amendments on the new SQF Version 9.

CORRECTIVE ACTION: Water Management (Contingency Plan) Completed and Updated the Water Management Plan to include the water contingency plan in the event of municipal source failur.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting amended document to include contaminated water contingency was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/17/2022 **CLOSEOUT DATE:** 05/26/2022

Audit Statements	
SQF Practitioner Name	Name the designated SQF Practitioner RESPONSE: Bob Wells, SQF Practitioner
SQF Practitioner Email	Email of the designated SQF Practitioner RESPONSE: bwells@ccpfresh.com
Opening Meeting	People Present at the Opening Meeting (Please list names and roles in the following format Name: Role separated by commas) RESPONSE: Terreca Bates-Wells: Director of Special Projects, Joe McCommons: Auditor
Facility Description	Auditor Description of Facility (Please provide facility description include # of employees, size, production schedule, general layout, and any additional pertinent details
	RESPONSE: Capitol City Produce is a wholesale food distribution facility that is located in an I-12 corridor area in Baton Rouge, LA. The company has been in business for 1947 years and at the current location since 2010 being audited for SQF 9 years with food safety and 6 years for quality. The facility operates 7 days a week, 24 hours a day. There are 2 shifts at the facility that run from 7 am to 6 pm, 6 pm to 4 am. There are 220 total employees at the site with 180 employees on the main shift and 40 employees on the second shift. The operation includes whole case-in-case-out order fulfillment/distribution and a repackaging operation which takes bulk produce cases and repacks them into smaller saleable units. The warehouse handles produce and dairy products. There is no processing of foods at the facility. The warehouse is 90,000 square feet. The warehouse is divided into a freezer room (approximately 5000 sq. ft.), large cooler space, two produce aisles that are held at elevated cooler temperatures for specific produce types. The remainder is office and ancillary areas. Products handled at this facility are distributed in the central south region (such as customers in Louisiana, Mississippi, Alabama, port customers – ships and oil rigs). Location: 16550 Commercial Avenue, Baton Rouge, LA 70816 Scope Statement: The operation includes whole case-in-case-out order fulfillment/distribution and a repackaging operation which takes bulk produce cases and repacks into smaller saleable units. Exemptions: There were no exemptions claimed or applied for by the site. The entire operation was subject to audit. All areas were included in the audit.
Closing Meeting	People Present at the Closing Meeting (Please list names and roles in the following format Name: Role separated by commas) RESPONSE: Terreca Bates-Wells: Director of Special Projects, Bob Wells: SQF Practitioner, Lloyd Antoine: Warehouse Manager, Joe McCommons: Auditor
Auditor Recommendation	Auditor Recommendation RESPONSE: Certification with correction of non-conformances

Section Responses

2.1.1 Management Responsibility (Mandatory)

The SOP 2.1 Commitment (V3, dated 1/24/2022) outlines the company's commitment to food safety and quality and the mechanisms by which this will be achieved. The culture is supported for food safety and quality in the Commitment procedure. The employees were empowered to voice food safety and quality concerns. The document also provides for the SQF Practitioner to have training and program resources to achieve the food safety and quality goals. The SQF practitioner and back up are defined. The SQF practitioner is the Bob Wells (receiving shift supervisor) and is HACCP certified (12/13/2007) and SQF trained in 3/18/2015). The back-up Practitioner is the day receiving lead and is HACCP certified (4/23/2022). The SOP for commitment also outlines the food safety and quality responsibility of the CEO / executive teams, practitioner, which includes employee training, reassessment and review. The policy is in English. All persons understand English at the company. The statement and mission for food safety and quality was signed by the President and dated 1/15/2018. The policy is posted at the employee entrance. The organizational chart is documented with positions responsible for SQF oversite specified (practitioner and back-up). Job descriptions are on file for key individuals and positions within the organization (CEO, Directory of Ops, Inventory Specialist/Food Safety Practitioner and QA associate were among the job descriptions that were defined. The back-ups for key positions were defined in the SOP 2.1 document.

2.1.1.1 Senior site management shall prepare and implement a policy statement that outlines at a minimum the commitment of all site management to: i. Supply safe food; ii. Establish and maintain a food safety culture within the site; iii. Establish and continually improve the site's food safety management system; and iv. Comply with customer and regulatory requirements to supply safe food. The policy statement shall be: v. Signed by the senior site manager and displayed in prominent positions; and vi. Effectively communicated to all site personnel in language(s) understood by all site personnel.

2.1.1.2 Senior site management shall lead and support a food safety culture within the site that ensures at a minimum: i. The establishment, documentation, and communication to all relevant staff of food safety objectives and performance measures; ii. Adequate resources are available to meet food safety objectives; iii. Food safety practices and all applicable requirements of the SQF System are adopted and maintained; iv. Staff are informed and held accountable for their food safety and regulatory responsibilities; v. Staff are positively encouraged and required to notify management of actual or potential food safety issues; and vi. Staff are empowered to act to resolve food safety issues within their scope of work.

RESPONSE: COMPLIANT

2.1.1.3 The reporting structure shall identify and describe site personnel with specific responsibilities for tasks within the food safety management system and identify backup for absence of key personnel. Job descriptions for the key personnel shall be documented. Site management shall ensure departments and operations are appropriately staffed and organizationally aligned to meet food safety objectives.

RESPONSE: COMPLIANT

2.1.1.4 Senior site management shall designate a primary and substitute SQF practitioner for each site with responsibility and authority to: i.

Oversee the development, implementation, review, and maintenance of the SQF System; ii. Take appropriate action to ensure the integrity of the SQF System; and iii. Communicate to relevant personnel all information essential to ensure the effective implementation and maintenance of the SQF System.

RESPONSE: COMPLIANT

2.1.1.5 The primary and substitute SQF practitioner shall: i. Be employed by the site; ii. Hold a position of responsibility in relation to the management of the site's SQF System; iii. Have completed a HACCP training course; iv. Be competent to implement and maintain HACCP-based food safety plans; and v. Have an understanding of the SQF Food Safety Code: Storage and Distribution and the requirements to implement and maintain an SQF System relevant to the site's scope of certification.

RESPONSE: COMPLIANT

2.1.1.6 Senior site management shall ensure the training needs of the site are resourced, implemented, and meet the requirements outlined in system elements 2.9 and that site personnel meet the required competencies to carry out those functions affecting the legality and safety of food products.

RESPONSE: COMPLIANT

2.1.1.7 Senior site management shall ensure the integrity and continued operation of the food safety system in the event of organizational or personnel changes within the company or associated facilities.

RESPONSE: COMPLIANT

2.1.1.8 Senior site management shall designate defined blackout periods that prevent unannounced re-certification audits from occurring out of season or when the site is not operating for legitimate business reasons. The list of blackout dates and their justification shall be submitted to the certification body a minimum of one (1) month before the sixty (60) day re-certification window for the agreed upon unannounced audit.

RESPONSE: COMPLIANT

2.1.2 Management Review (Mandatory)

The full SQF compliance review was held with all management on March 21, 2022. The review included the meeting and signature of the VP of Ops, Special Projects Manager and the SQF Practitioner. The yearly review included SQF policies, internal and External Audit Findings, Complaints, corrective actions, hazard and risk management, culture performance for food safety and review of objectives (complaint levels and audit scores), quality reviews. There was also a monthly meeting between SQF Practitioner and Special Projects manager to review SQF performance through a SQF scorecard. The monthly meeting was confirmed through review of all monthly meeting records.

2.1.2.1 The SQF system shall be reviewed by senior site management at least annually and include: i. Changes to food safety management system documentation (policies, procedures, specifications, food safety plan); ii. Food safety culture performance; iii. Food safety objectives and performance measures; iv. Corrective and preventative actions, and trends in findings from internal and external audits, customer complaints, and verification and validation activities; v. Hazard and risk management system; and vi. Follow-up action items from previous management review. Records of all management reviews and updates shall be maintained.

RESPONSE: COMPLIANT

2.1.2.2 The SQF practitioner(s) shall update senior site management on at least a monthly basis on matters impacting the implementation and maintenance of the SQF System. The updates and management responses shall be documented.

2.1.3 Complaint Management (Mandatory)

The site had one complaint (potential food safety complaint) received on 3/7/2022. This was a broccoli that was giving off an odor. The complaint was recorded, investigated to root cause and corrective action documented. The SOP for complaints is 2.1.3 Complaint Management (V3, 1/24/22). The practitioner has the responsibility for overseeing the complaint process. The SOP covers complaints of food safety and quality.

2.1.3.1 The methods and responsibility for handling, investigating, and resolving food safety complaints from commercial customers, consumers, and authorities, arising from products stored or handled on-site shall be documented and implemented.

RESPONSE: COMPLIANT

2.1.3.2 Adverse trends of customer complaint data shall be investigated and analyzed and the root cause established by personnel knowledgeable about the incidents.

RESPONSE: COMPLIANT

2.1.3.3 Corrective and preventative action shall be implemented based on the seriousness of the incident and the root cause analysis as outlined in 2.5.3. Records of customer complaints, their investigation, and resolution shall be maintained.

RESPONSE: COMPLIANT

2.2.1 Food Safety Management System (Mandatory)

The SOPs, policies and organizational chart are documented and maintained. The scope of certification is defined in the procedure as FSC 25 and 26. Changes are documented and verified with training to applicable. staff.

2.2.1.1 The methods and procedures the site uses to meet the requirements of the SQF Food Safety Code: Storage and Distribution shall be maintained in electronic and/or hard copy documentation. It will be made available to relevant staff and include: i. A summary of the organization's food safety policies and the methods it will apply to meet the requirements of this standard; ii. The food safety policy statement and organization chart; iii. The processes and products included in the scope of certification; iv. Food safety regulations that apply to the site and to the country of sale (if known); v. Raw material, ingredient, packaging, and finished product specifications; vi. Food safety procedures, pre-requisite programs, food safety plans; vii. Process controls that impact product safety; and viii. Other documentation necessary to support the development and the implementation, maintenance, and control of the SQF System.

RESPONSE: COMPLIANT

2.2.1.2 Food safety plans, Good Storage and Distribution Practices and all relevant aspects of the SQF System shall be reviewed, updated, and communicated as needed when any changes implemented have an impact on the site's ability to deliver safe food. All changes to food safety plans, Good Storage and Distribution Practices, and other aspects of the SQF System shall be validated or justified prior to their implementation. The reasons for the changes shall be documented.

RESPONSE: COMPLIANT

2.2.2 Document Control (Mandatory)

The SOP 2.2 Document Control and Records (V3, 1/24/2022) was documented and defined. SOP defined responsibility of the document control and how the documents are numbers, versioned and dated. The SOP also defined the methods of storage and retention.

2.2.2.1 The methods and responsibility for maintaining document control and ensuring staff have access to current requirements and instructions shall be documented and implemented. Current SQF System documents and amendments to documents shall be maintained.

RESPONSE: COMPLIANT

2.2.3 Records (Mandatory)

The SOP 2.2.3 Records was documented and dated V2, 1/15/2018. The retention of SQF document was for a minimum of two years as defined in the procedure. The completion and error correction were defined. The records were found to be completed properly to the standard as filed records and records in use were reviewed during the audit.

2.2.3.1 The methods, frequency, and responsibility for verifying, maintaining, and retaining records shall be documented and implemented.

2.2.3.2 All records shall be legible and confirmed by those undertaking monitoring activities that demonstrate inspections, analyses, and other essential activities have been completed.

RESPONSE: COMPLIANT

2.2.3.3 Records shall be readily accessible, retrievable, and securely stored to prevent unauthorized access, loss, damage, and deterioration. Retention periods shall be in accordance with customer, legal, and regulatory requirements, at minimum the product shelf life, or established by the site if no shelf life exists.

RESPONSE: COMPLIANT

2.3.1 Product for Storage and Distribution

The storage program (SOP 12.6.1-6, v3, 1/24/22) was documented. Temperature targets were defined and appropriate from the type of product (45 - 55 F for some types of produce, 0 F for the freezer and below 40 for refrigerated goods). The site does not engage in alternative or temporary storage.

2.3.1.1 Product handling and storage requirements for all products received, stored, and intended for distribution, shall be documented, current, approved by the site and their customer (if applicable), accessible to relevant staff, and include temperature requirements, storage conditions, packaging requirements, and handling and transportation conditions.

RESPONSE: COMPLIANT

2.3.2 Supplier Approval and Incoming Supplies

The SOP 2.3.4 Approved Supplier Program is defined and documented (V2, 1/15/18). The supplier approval for most produce items is managed by purchasing from Pro*Act-approved suppliers. Pro*Act is a procurement organization/buying group that vets suppliers using food safety requirements. The requirements were outlined in the Summary of the Pro*Act Supplier Management Program document dated 1/1/2022. Pro*Act requires audits for GAP and compliance with the 21 CFR 112 as well as compliance to FSMA, GAP/food safety questionnaire, letter of guarantee, HACCP / PC food safety plan and others applicable to the type of operation (processor or shipper). The approved supplier list was documented and dated 3/21/22. The requirement for supplier audits was verified by access the current audits for a dairy item, non-Pro*Act-approved and a Pro*Act approved supplier. The approval program also covers suppliers for packaging materials used for re-pack. The list of packaging suppliers for repack bags and boxes was documented (3/23/21).

2.3.2.1 The methods and responsibility for developing and approving product descriptions shall be documented. Product descriptions for all incoming supplies used by the site but not intended for distribution, including, but not limited to hazardous chemicals, ice, food packaging materials, or janitorial supplies that are used on-site and impact on product safety shall be documented and kept current.

RESPONSE: COMPLIANT

2.3.2.2 All incoming supplies shall comply with the relevant legislation.

RESPONSE: COMPLIANT

2.3.2.3 Incoming supplies shall be verified to ensure product safety is not compromised and the material is fit for its intended purpose.

Verification of incoming materials shall include a review of the product description to determine conformance.

RESPONSE: COMPLIANT

2.3.2.4 Incoming goods that may have an impact on product safety shall be supplied by an approved supplier. The responsibility for selecting, evaluating, approving, and monitoring an approved supplier shall be documented and implemented.

RESPONSE: COMPLIANT

2.3.2.5 Incoming goods received in emergency situations shall be acceptable provided they are inspected or analyzed before use and the supplier has been evaluated.

RESPONSE: COMPLIANT

2.3.2.6 Incoming goods and packaging received from other sites under the same corporate ownership shall be subject to the same product requirements and approved supplier requirements as all other material providers.

RESPONSE: COMPLIANT

2.3.2.7 Specifications, product requirements, and incoming supplies shall be reviewed annually or as changes occur.

2.3.3 Contract Service Providers

The contractor service provider register with the relevant training and description of service defined is documented (1/15/2018, v2). This list was reviewed with the internal audit on 3/8/2022 by the SQF practitioner.

2.3.3.1 Description of services for contract service providers that have an impact on product safety shall be documented, current, include a full description of the service to be provided, and the relevant food safety training requirements of all contract personnel prior to conducting work.

RESPONSE: COMPLIANT

2.3.3.2 Contracted services that have an impact on product safety shall be reviewed against the description. The methods and responsibilities for contracted services review shall be documented and validated as needed or at a minimum of annually.

RESPONSE: COMPLIANT

2.3.3.3 A record of all contract service descriptions that have an impact on product safety shall be maintained.

RESPONSE: COMPLIANT

2.3.4 Contract Third-Party Storage or Distributor

The site does not contract storage and distribution out to a 3rd-Party.

2.3.4.1 The methods and responsibility for ensuring all agreements relating to food safety and customer product requirements and its realization and delivery are specified and agreed shall be documented and implemented.

RESPONSE: NOT APPLICABLE

EVIDENCE: The site does not contract storage and distribution out to a 3rd-Party.

2.3.4.2 The site shall: i. Ensure changes to contractual agreements are approved by both parties and communicated to relevant personnel; ii. Verify compliance with the SQF Code and that all customer requirements are being met at all times.

RESPONSE: NOT APPLICABLE

EVIDENCE: The site does not contract storage and distribution out to a 3rd-Party.

2.3.4.3 Records of all contract reviews and changes to contractual agreements and their approvals shall be maintained.

RESPONSE: NOT APPLICABLE

EVIDENCE: The site does not contract storage and distribution out to a 3rd-Party.

2.4.1 Food Legislation (Mandatory)

The managers maintain up-to-date standards by association with consultant and maintaining subscription to regulatory websites and publications. Registration the FDA was on file and current. The policy for SOP 2.4.2 detailed the notification of SQFI and the certification body in the event of regulatory warning or action.

2.4.1.1 The site shall ensure that food stored and delivered to customers is handled in a manner that complies with the relevant legislation in the country of its production and destination.

RESPONSE: COMPLIANT

2.4.1.2 The methods and responsibility for ensuring the site is kept informed of changes to relevant legislation, scientific and technical developments, emerging food safety issues, and relevant industry codes of practice shall be documented and implemented.

RESPONSE: COMPLIANT

2.4.1.3 SQFI and the certification body shall be notified in writing within twenty-four (24) hours as a result of a regulatory warning or event. Notification to SQFI shall be by email to foodsafetycrisis@sqfi.com.

2.4.2 Good Storage and Distribution Practices (Mandatory)

GMPs and methods for control of food safety at all stages of the warehousing process are defined in the food safety manual. This encompasses all operational standards for safe receiving, storage, repack and shipments of goods. The personnel rules (visitor and employee) and proper storage standards are also defined. Other food safety fundamentals such as pest control and sanitation are documented in procedures and procedures implemented.

2.4.2.1 The site shall ensure the Good Storage and Distribution Practices described in Module 12 of this Food Safety Code are applied or exempted according to a written risk analysis outlining the justification for exemption or evidence of the effectiveness of alternative control measures to ensure that food safety is not compromised.

RESPONSE: COMPLIANT

2.4.2.2 The Good Storage and Distribution Practices applicable to the scope of certification that outline how food safety is controlled and assured shall be documented and implemented.

RESPONSE: COMPLIANT

2.4.3 Food Safety Plan (Mandatory)

The food safety plan was documented. There was a multi-departmental team consisting of the director of procurement, SQF Practitioner, QA supervisor, director of operations and warehouse supervisor. The plan, analysis (version date 9/12/2017) and flow chart (version date 12/15/14) were last reviewed, signed and dated on 3/21/2022. Each of the team members signed off on the review. The hazard analysis was conducted and identified the following control programs: Supply Chain and Allergen. The adherence to the supplier preventive control and the allergen preventive control was successfully monitored and maintained by the site. The programs were verified as acceptably maintained during the audit. The warehouse distributes dairy, peanut, tree nuts, wheat and egg allergen containing products. All allergen products are contained with packaging. No exposed allergens were handled. The verification of proper allergen storage and shipment was observed.

2.4.3.1 A hazard and risk management system shall be developed and take into consideration relevant legislation in all countries of operation. The system shall be risk based, systematic and comprehensive, and based on HACCP or preventive controls. The food safety plan shall be effectively implemented, maintained, and outline the means by which the site controls and assures food safety of the products or product groups included in the scope of the SQF certification and their associated processes. More than one food safety plan may be required to cover all products included in the scope of certification.

RESPONSE: COMPLIANT

2.4.3.2 The food safety plan or plans shall be developed and maintained by a multidisciplinary team that includes the SQF practitioner and those site personnel with technical, storage and distribution, and facility /maintenance knowledge of the relevant products and associated processes. Where the relevant expertise is not available on-site, advice may be obtained from other sources to assist the food safety team.

RESPONSE: COMPLIANT

2.4.3.3 The scope of each food safety plan shall be developed and documented including the start and endpoint of the processes under consideration and all relevant inputs and outputs.

RESPONSE: COMPLIANT

2.4.3.4 Product requirements shall be developed and documented for all products (or groups of products) included in the scope of the food safety plans. This shall reference the product descriptions (refer to 2.3.2.1) plus any additional information relevant to product safety, such as temperature for storage, how the product is packaged, allergen requirements, raw or cooked, etc.

RESPONSE: COMPLIANT

2.4.3.5 The food safety team shall develop and document a flow diagram covering the scope of each food safety plan. The flow diagram shall include every step in the process, all raw material, packaging, service inputs (e.g., water, steam, gases as appropriate), scheduled process delays, and all process outputs including waste, rework, and recoup. Each flow diagram shall be confirmed by the food safety team during all stages and hours of operation.

RESPONSE: COMPLIANT

2.4.3.6 The food safety team shall identify and document all food safety hazards that can reasonably be expected to occur at each step in the processes, including food products received and stored.

2.4.3.7 The food safety team shall conduct a hazard analysis for every identified hazard, to identify which hazards are significant. The methodology for determining hazard significance shall be documented and used consistently to assess all potential hazards.

RESPONSE: COMPLIANT

2.4.3.8 The food safety team shall determine and document the control measures that must be applied to all significant hazards. More than one control measure may be required to control an identified hazard, and more than one significant hazard may be controlled by a specific control measure.

RESPONSE: COMPLIANT

2.4.3.9 Based on the results of the hazard analysis (refer to 2.4.3.7), the food safety team shall identify the steps in the process where control must be applied to eliminate a significant hazard or reduce it to an acceptable level (e.g., a preventive control {PC} or critical control point {CCP}). In instances where a significant hazard has been identified at a step in the process, but no control measure exists, the food safety team shall modify the process to include an appropriate control measure.

RESPONSE: COMPLIANT

2.4.3.10 For each identified step requiring control (e.g. PC or CCP) the food safety team shall document the limits that separate safe from unsafe product. The food safety team shall validate the critical limits to ensure the designated level of control of the identified food safety hazard(s) and that all critical limits and control measures individually or in combination effectively provide the level of control required (refer to 2.5.1.1).

RESPONSE: COMPLIANT

2.4.3.11 The food safety team shall develop and document procedures to monitor identified steps requiring control (e.g. PC or CCP) to ensure they remain within the established limits (refer to 2.4.3.12). Monitoring procedures shall identify the personnel assigned to conduct testing, the sampling and test methods, and the testing frequency.

RESPONSE: COMPLIANT

2.4.3.12 The food safety team shall develop and document deviation procedures that identify the disposition of affected product when monitoring indicates a loss of control at an identified step requiring control (e.g. PC or CCP). The procedures shall also prescribe actions to correct the process step to prevent recurrence of the safety failure.

RESPONSE: COMPLIANT

2.4.3.13 The documented and approved food safety plan(s) shall be implemented in full. The effective implementation shall be monitored by the food safety team, and a full review of the documented and implemented plans shall be conducted at least annually, or when changes to the process, equipment, inputs, or other changes affecting product safety occur.

RESPONSE: COMPLIANT

2.4.4 Non-conforming Product and Equipment

The facility maintained SOP 2.4.5 for handling of non-conforming product, equipment and returns is documented. Products and equipment are tagged and also put on hold in the management system. There is an ERP program in place that is used to manage/record receiving inspection, inventory, shipping, repack, order entry, accounting, manage procurement and hold. A log of hold product was kept with disposition, trained employee that managed release, lot #, product and date of hold. The log was generated for the auditor review. There was also a place for returned goods staging that was identified with a sign. This was several pallets on the refrigerated dock. The stored items were segregated by allergen type. This area was maintained for assessment of goods on the dock and was segregated from acceptable goods.

2.4.4.1 The responsibility and methods outlining how non-conforming product, raw materials, ingredients, work-in-progress, packaging, or equipment detected during receipt, storage, handling, or delivery and including food found to be damaged and/or returned from customers is handled shall be documented and implemented. The methods applied shall ensure: i. Non-conforming product is quarantined, identified, handled, and / or disposed of in a manner that minimizes the risk of inadvertent use, improper use or delivery, or risk to the integrity of the product; ii. Non-conforming equipment is effectively identified, repaired, or disposed of in a manner that minimizes the risk of inadvertent use, improper use, or risk to the integrity of finished product; and iii. All relevant staff are aware of the organization's quarantine and release requirements applicable to equipment or product placed under quarantine status.

RESPONSE: COMPLIANT

2.4.4.2 Quarantine records and records of the handling, corrective action, or disposal of nonconforming product or equipment shall be maintained.

2.4.5 Product Recoup

Rework / Recoup SOP is documented. Scope of procedure covers quality and safety inspection and rework of stored products or inspection of returned product. This is not a true rework but a working of stored product to remove quality deficient product. A log is kept of the activity. The log entries noted product, lot, culled amount and initials of employees of employee performing cull. The product retains the original lot number and traceability information.

2.4.5.1 The responsibility and methods outlining how product is recouped shall be documented and implemented. The methods applied shall ensure: i. Recouping operations are conducted by trained personnel; and ii. Recouped product is traceable.

RESPONSE: COMPLIANT

2.4.6 Product Release (Mandatory)

Hold and release/disposition records were reviewed. The SOP 2.4.7 Product Release was documented. Quality Assurance department employees are the only personnel that are approved to release product release.

2.4.6.1 The responsibility and methods for releasing products shall be documented and implemented. The methods applied shall ensure the product is released by authorized personnel.

RESPONSE: COMPLIANT

2.4.6.2 Records of all product release shall be maintained.

RESPONSE: COMPLIANT

2.5.1 Validation and Effectiveness (Mandatory)

The validation (Verification of PRP Effectiveness) was conducted on 3/8/2022. The review of procedures and records, observations of employee practices, interviews with employees, observances of conditions and other methods were used in the validation of all PRPs (training, cleaning, maintenance, calibration, control of contamination, supplier approval, waste management and others). The Validation of the food safety plan was documented on 3/8/22. The Temperatures of storage were justified by validation white paper, "Recommended Storage Temperature and Relative Humidity Compatibility Groups" (Ohio State University).

2.5.1.1 The methods, responsibility, and criteria for ensuring the effectiveness of all applicable elements of the SQF Program shall be documented, implemented, and effective. The methods applied shall ensure that: i. Good Storage and Distribution Practices are confirmed to ensure they achieve the required result; ii. Critical food safety limits are reviewed annually and re-validated or justified by regulatory standards when changes occur; and iii. Changes to the processes or procedures are assessed to ensure controls are still effective. Records of all validation activities shall be maintained.

RESPONSE: COMPLIANT

2.5.2 **Verification Activities (Mandatory)**

The schedule for verification Policy 2.5.2.2 (v4, dated 1/24/22) was documented. The schedule included the responsibility, frequency and document/action of all monitoring/verification activities.

2.5.2.1 The methods, responsibility, and criteria for verifying monitoring of Good Storage and Distribution Practices, critical control points, and other food safety controls shall be documented and implemented. The methods applied shall ensure that personnel with responsibility for verifying monitoring activities authorize each verified record.

RESPONSE: COMPLIANT

2.5.2.2 A verification schedule outlining the verification activities, their frequency of completion, and the person responsible for each activity shall be prepared and implemented. Records of verification of activities shall be maintained.

RESPONSE: COMPLIANT

2.5.3 Corrective and Preventative Action (Mandatory)

SOP and Form 2.5.5 Corrective and Preventative Action are completed for complaints, internal inspections, system audits, external inspections, and others as needs are identified. The corrective actions for these programs were verified throughout the audit as programs were reviewed and opportunities were recorded.

2.5.3.1 The responsibility and methods outlining how corrective and preventative actions are determined, implemented, and verified, including identification of the root cause and resolution of non-compliance of critical food safety limits and deviations from food safety requirements, shall be documented and implemented. Deviations from food safety requirements may include customer complaints, non-conformances raised at internal or external audits and inspections, non-conforming product and equipment, or withdrawals and recalls, as appropriate.

RESPONSE: COMPLIANT

2.5.3.2 Records of all investigation, root cause analyses and resolution of non-conformities, their corrections, and implementation of preventative actions shall be maintained.

RESPONSE: COMPLIANT

2.5.4 Internal Audits and Inspections (Mandatory)

The internal audit was conducted 3/7-8/22 and the corrective actions are documented for non-conformances. The modules 2 and 12 are completed. The quality and food safety edition 9 internal audits were completed. The internal audit was conducted by an experienced and knowledgeable consultant that is contracted by the site. The SQF practitioner is responsible for conducting quarterly GMP self-inspections. The dates of audits conducted were 3/10/22, 12/2/21, 9/20/21 and 3/12/21. Corrective actions were recorded on all non-conformances that were identified in the quarterly self-inspections.

2.5.4.1 The methods and responsibility for scheduling and conducting internal audits to verify the effectiveness of the SQF System shall be documented and implemented. Internal audits shall be conducted in full and at least annually. The methods applied shall ensure: i. All applicable requirements of the SQF Food Safety Code: Storage and Distribution are audited as per the SQF audit checklist or similar tool; ii. Objective evidence is recorded to verify compliance and/or non-compliance; iii. Corrective and preventative actions of deficiencies identified during the internal audits are undertaken; and iv. Audit results are communicated to relevant management personnel and staff responsible for implementing and verifying corrective and preventative actions.

RESPONSE: COMPLIANT

2.5.4.2 Staff conducting internal audits shall be trained and competent in internal audit procedures. Where practical, staff conducting internal audits shall be independent of the function being audited.

RESPONSE: COMPLIANT

2.5.4.3 Regular inspections of the site and equipment shall be planned and carried out to verify Good Storage and Distribution Practices and facilities and equipment maintenance are compliant with the SQF Food Safety Code: Storage and Distribution. The site shall: i. Take corrections or corrective and preventative action; and ii. Maintain records of inspections and any corrective action taken.

RESPONSE: COMPLIANT

2.5.4.4 Records of internal audits and inspections and any corrective and preventative actions taken as a result of internal audits shall be recorded as per 2.5.3. Changes implemented from internal audits that have an impact on the site's ability to deliver safe food shall require a review of applicable aspects of the SQF System.

RESPONSE: COMPLIANT

2.6.1 Product Identification (Mandatory)

Products were identified utilizing manufacturer/supplier labels, receiving pallet labels and re-pack labels. These were applied to products and effectively accomplished labeling and facilitated trace. Records of product movement through the warehouse were kept.

2.6.1.1 The methods and responsibility for identifying products during all stages of storage shall be documented and implemented. The product identification system shall be implemented to ensure: i. Proper stock rotation; and ii. Accurate location of product.

RESPONSE: COMPLIANT

2.6.1.2 Records of product receipt and use and product dispatch and destination shall be maintained.

2.6.2 **Product Trace (Mandatory)**

The site demonstrated the records generated in the ERP for the trace of item #1096 Green Pencil Onion (iceless) that was packed on 02/02/22 (Lot X0301101). From the inventory screen on the repack record the item was selected. The inventory usage screen was access to detail the trace of the specific lot number. The repacking employee was recorded as well as the destination customers for the lot number. The customer receiving, delivery date, reference number (invoice number) and quantity were recorded. The customers receiving the lot were listed. The contact information for each customer was available. The vendor (Field Fresh Farms). The product contact packaging tracing was confirmed during the exercise. The lot numbers for product contact bags were recorded on a usage log.

2.6.2.1 The responsibility and methods used to trace product shall be documented and implemented to ensure: i. Traceability of food products to the customer (one step forward); ii. Traceability of product to the supplier or manufacturing supplier with date of receipt (one step back); iii. Traceability is maintained where product is recouped; and iv. The effectiveness of the product trace system is reviewed at least annually as part of the product recall and withdrawal review (refer to 2.6.3.2).

RESPONSE: COMPLIANT

2.6.3 Product Withdrawal and Recall (Mandatory)

The product withdrawal and Recall was documented (v 4, 1/24/22). The site performed a mock recall on 4/24/22. This took 35 minutes to trace 100% of item 316 (1/2-inch coin carrots) with lot number 56013403. The site also participated in the real recall of a supplier (premade salads). The records were kept on time, inventory, shipments, customers and proficiency for the test and the actual recall. The procedure does provide for notification of SQFI and the CB in the event of an actual recall that is initiated by the site.

2.6.3.1 The responsibility and methods used to withdraw or recall products shall be documented and implemented. The procedure shall: i. Identify those responsible for initiating, managing, and investigating a product withdrawal or recall; ii. Describe the management procedures to be implemented including sources of legal, regulatory and expert advice, and essential traceability information; iii. Outline a communication plan to inform employees, customers, consumers, authorities, and other essential bodies in a timely manner appropriate about the nature of the incident; iv. Ensure that SQFI, the certification body, and the appropriate regulatory authority are listed as essential organizations and notified in instances of a food safety incident of a public nature or product recall for any reason.

RESPONSE: COMPLIANT

2.6.3.2 The product withdrawal and recall system shall be reviewed, tested, and verified as effective at least annually. Testing shall include incoming materials (one back), inhouse identification and isolation/quarantine, and where the product is shipped to (one forward).

RESPONSE: COMPLIANT

2.6.3.3 Records shall be maintained of withdrawal and recall tests, root cause investigations into actual withdrawals and recalls, and applied corrective and preventative actions.

RESPONSE: COMPLIANT

2.6.3.4 SQFI and the certification body shall be notified in writing within twenty-four (24) hours upon identification of a food safety event that has been initiated by the site requires public notification. SQFI shall be notified at foodsafetycrisis@sqfi.com.

RESPONSE: COMPLIANT

2.6.4 Crisis Management Planning

The crisis management/ business continuity plan (BCP) was documented (Sept. 2016) for fire, weather/hurricane and active shooter. The test of the BCP was conducted on 3/1/2022 and the exercise was recorded. In the scenario discussed, a fire had threatened the facility and product. The product was assessed and the measures to meet customer needs were discussed.

2.6.4.1 A crisis management plan based on the understanding of known potential dangers (e.g., flood, drought, fire, tsunami, or other severe weather event, warfare or civil unrest, computer outage, pandemic, loss of electricity or refrigeration, ammonia leak, labor strike) that can impact the site's ability to deliver safe food, shall be documented by senior management outlining the methods and responsibility the site shall implement to cope with such a business crisis. The crisis management plan shall include at a minimum: i. A senior manager responsible for decision making, oversight, and initiating actions arising from a crisis management incident; ii. The nomination and training of a crisis management team; iii. The controls implemented to ensure a response does not compromise product safety; iv. The measures to isolate and identify product affected by a response to a crisis; v. The measures taken to verify the acceptability of food product prior to release; vi. The preparation and maintenance of a current crisis alert contact list, including supply chain customers; vii. Sources of legal and expert advice; and viii. The responsibility for internal communications and communicating with authorities, external organizations, and media.

2.6.4.2 The crisis management plan shall be reviewed, tested, and verified at least annually with gaps and appropriate corrective actions documented. Records of reviews of the crisis management plan shall be maintained.

RESPONSE: COMPLIANT

2.7.1 Food Defense Plan (Mandatory)

SOP 2.7.1 Food Defense (V4, 1/24/22) documented the site's approach to security of the premises and of the product during all phases of handling and storage. Challenge conducted and documented on 3/22/2022. This was a visitor procedure test for the proper handling of non-employee personnel visiting the site. Food Defense Self-Assessment Checklist Assessment checklist was conducted and recorded on 4/15/2022.

2.7.1.1 A food defense threat assessment shall be conducted to identify potential threats that can be caused by a deliberate act of sabotage or terrorist-like incident.

RESPONSE: COMPLIANT

2.7.1.2 A food defense plan shall be documented, implemented, and maintained based on the threat assessment (refer to 2.7.1.1). The food defense plan shall meet legislative requirements as applicable and shall include at a minimum: i. The methods, responsibility, and criteria for preventing food adulteration caused by a deliberate act of sabotage or terrorist-like incident; ii. The name of the senior site management person responsible for the food defense plan; iii. The methods implemented to ensure only authorized personnel have access to equipment and vehicles and storage areas through designated access points; iv. The methods implemented to protect sensitive operational points from intentional adulteration; v. The measures taken to ensure the secure receipt and storage of products, packaging, equipment, and hazardous chemicals to protect them from deliberate act of sabotage or terrorist-like incidents; vi. The measures implemented to ensure products, packaging (including labels), work-in progress, and process inputs are held under secure storage and transportation conditions; and vii. The methods implemented to record and control access to the premises by employees, contractors, and visitors.

RESPONSE: COMPLIANT

2.7.1.3 Instruction shall be provided to all relevant staff on the effective implementation of the food defense plan (refer to 2.9.2.1).

RESPONSE: COMPLIANT

2.7.1.4 The food defense threat assessment and prevention plan shall be reviewed and tested at least annually or when the threat level, as defined in the threat assessment, changes. Records of reviews and tests of the food defense plan shall be maintained.

RESPONSE: COMPLIANT

2.7.2 Food Fraud (Mandatory)

The 2.7.2 Food Fraud SOP (V2 1/15/2018) was documented. The food fraud assessment was last conducted on 4/21/2022. A record of the assessment was maintained. An online tool was used. The results of the assessment indicated risk levels were low and there were no high-risk mitigations needed.

2.7.2.1 The methods, responsibility, and criteria for identifying the site's vulnerability to food fraud including susceptibility to product substitution, mislabeling, dilution, or counterfeiting shall be documented, implemented, and maintained.

RESPONSE: COMPLIANT

2.7.2.2 A food fraud mitigation plan shall be developed and implemented that specifies the methods by which the identified food fraud vulnerabilities shall be controlled.

RESPONSE: COMPLIANT

2.7.2.3 The food fraud vulnerability assessment and mitigation plan shall be reviewed and verified at least annually with gaps and corrective actions documented. Records of reviews shall be maintained.

RESPONSE: COMPLIANT

2.7.2.4 Records of reviews of the food fraud vulnerability assessment and mitigation plan shall be maintained.

2.8.1 Allergen Management (Mandatory)

The auditor observed the following associated specifically with allergen management in the warehouse: training, signage at storage areas, separate storage with vertical consideration, staging of returns (signage and separate pallets), and a selector was observed during selection of an order (process followed a pick route and dividers, bags and slip sheets were used to keep allergens separate during shipping). The Allergen SOP 2.8.1 defines allergens handled or potentially handled. The program is identified as a PC in the food safety plan. The storage of allergen containing foods in the warehouse is controlled by vertical orientation. Only allergens over same allergens or non-allergens over allergen containing is accomplished in all areas possible. There is a spill corrective action plan. Observed storage in the warehouse was found to comply to the program. Training to the SOP was observed. No products containing allergens are repacked. Reworking of produce is simply a culling action to remove any sub-standard products, multiple lots or differing products are not combined.

2.8.1.1 The responsibility and methods used to control allergens and to prevent sources of allergens from contaminating product shall be documented and implemented. The allergen management controls shall be based on a risk assessment and include the identification, labeling, and handling of allergen-containing product, including product recoup, to prevent inadvertent cross contact.

RESPONSE: COMPLIANT

2.8.1.2 Recouped product containing food allergens (refer to 2.4.5) shall be repackaged under conditions that ensure product safety and integrity is maintained. Recouped product containing allergens shall be clearly identified and traceable.

RESPONSE: COMPLIANT

2.8.1.3 Sites that do not handle allergenic materials or store allergenic products shall document, implement, and maintain an allergen management program that addresses, at a minimum, the mitigation of introduced or unintended allergens from suppliers, contract manufacturers, site personnel, and/or visitor activities.

RESPONSE: COMPLIANT

2.9.1 Training Requirements

The training requirements are defined in SOP 2.9. Yearly and upon hire training is conducted. The training covers SQF, HACCP, food defense, food safety, allergens, GMP and chemical safety. For specialized training employees with certain responsibilities received training in calibration (refractometer, thermometer and scales), pre-op, pre-op swab, pest control, and internal audit.

2.9.1.1 The responsibility for establishing and implementing the training needs of the organization's personnel to ensure they have the required competencies to carry out those functions affecting product legality and safety shall be defined and documented (refer to 2.1.1.6).

RESPONSE: COMPLIANT

2.9.1.2 Appropriate training shall be provided for personnel carrying out the tasks essential to the effective implementation of the SQF System and the maintenance of food safety and regulatory requirements.

RESPONSE: COMPLIANT

2.9.2 Training Program (Mandatory)

All training was current (2021 and 2022). The training register was maintained. The skills register was current with all personnel trained within the past year and included all information. Supervisor verifications were conducted to measure competency through tests and observation. The date of training on the matrix indicates that they passed the tests and observations and are competent to work at the tasks. The English language is used by all in the plant and all instructions / training was in English. The training covers SQF, HACCP, food defense, food safety, allergens, GMP and chemical safety. For specialized training employees with certain responsibilities received training in calibration (refractometer, thermometer and scales), pre-op, pre-op swab, pest control, and internal audit. The English language is used by all in the plant and all instructions / training was in English. HACCP and Food Safety Plan is included in the training protocol. Yearly training provided for tenured employees. The record of training supports refresher training.

2.9.2.1 A training program shall be documented and implemented that, at a minimum, outlines the necessary competencies for specific duties and the training methods to be applied for personnel carrying out tasks associated with: i. Developing and maintaining food safety plans to meet regulatory requirements and the SQF Code; ii. Monitoring and corrective action procedures for all staff engaged in monitoring critical control points (CCPs); iii. Personal hygiene for all staff involved in handling of food products and food contact surfaces; iv. Good Storage and Distribution Practices and work instructions for all staff engaged in food handling, food storage and transport, and associated equipment; v. Allergen management, food defense, and food fraud for all relevant staff; and vi. Tasks identified as critical to meeting effective implementation and maintenance of the SQF Code. The training program shall include provision for identifying and implementing the refresher training needs of the organization.

2.9.2.2 Training materials, the delivery of training, and procedures on all tasks critical to meeting regulatory compliance and the maintenance of food safety shall be provided in languages understood by staff.

RESPONSE: COMPLIANT

2.9.2.3 Training records shall be maintained and include: i. Participant name; ii. Skills description; iii. Description of the training provided; iv. Date training completed; v. Trainer or training provider; and vi. Verification that the trainee is competent to complete the required tasks.

RESPONSE: COMPLIANT

12.1.1 Premises Location and Approval

The site is registered with the FDA. The registration is current (exp. 12/31/2022). The City Occupational License certificate was on file with expiry 12/31/2022. The Louisiana Department of Health permit was current (expires 6/30/22). The USDA License No. 20051152 was current and on file. The Louisiana Dept. of Health performed an audit on 3/31/2022. There were 3 non-critical issues noted (standing water, cases on the floor in the freezer, and spillage in the freezer). Corrective actions were documented for the regulatory audit findings. A minor was issued under 12.1.1.1.

12.1.1.1 The site shall assess local activities and the site environment to identify any risks that may have an adverse impact on product safety and implement controls for any identified risks. The assessment shall be reviewed in response to any changes in the local environment or activities. The construction and ongoing operation of the premises on the site shall be approved by the relevant authority.

RESPONSE: MINOR

EVIDENCE: The site maintained a series of aerial photographs which demonstrated the environment of the building with no descriptions, assessment or written conclusion. The site did not have a written assessment of the site to state as the result of the assessment.

ROOT CAUSE: Risk Assessment wasn't provided to auditor; Aerial view was provided but needed the actual document. Oversight when reviewing the SQF Version 9.

CORRECTIVE ACTION: Site Risk Assessment was not provided during the audit.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting completed site risk assessment was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/05/2022 **CLOSEOUT DATE:** 05/26/2022

12.1.2 Building Materials

The walls (concrete block, metal paneling and steal frame) were found to be in good condition. The doors used for shipping/receiving were in excellent condition and pest-proofed. All personnel doors were clean and in good condition. Dock levelers were found to be in good condition and seals present to prevent pests and dust. The only drop ceilings were in office areas. These were accessible for inspection. The floors were in good condition with minimal damage and wear. The drains were long trench drains with grated covers running under racks where wet produce may be stored. There was little to no areas of standing water that presented a hazard to food safety. Drains were found to be clean and drain cleaning was conducted on a regular basis as demonstrated in the cleaning program.

12.1.2.1 Floors shall be constructed of smooth, dense, impact-resistant material that can be effectively graded, drained, is impervious to liquid, and easily cleaned. When drains are present in the warehouse, floors shall be sloped at gradients suitable to allow for the effective removal of all overflow or wastewater under normal working conditions.

RESPONSE: COMPLIANT

12.1.2.2 Drains shall be constructed and located so they can be easily cleaned and do not present a hazard. Drains if located in storage and handling areas, shall be kept clean.

RESPONSE: COMPLIANT

12.1.2.3 Waste trap system shall be located away from any food handling or storage area or entrance to the premises.

RESPONSE: COMPLIANT

12.1.2.4 Walls, partitions, ceilings, and doors shall be of durable construction. Internal surfaces shall have an even and regular surface and be impervious with a light-colored finish and shall be kept clean (refer to 12.2.5). Wall-to-wall and wall-to-floor junctions shall be designed to be easily cleaned and sealed to prevent the accumulation of food debris.

RESPONSE: COMPLIANT

12.1.2.5 Doors shall be of solid construction. Windows shall be made of shatterproof glass or similar material, or otherwise protected.

RESPONSE: COMPLIANT

12.1.2.6 Drop ceilings (where applicable) shall be constructed to enable monitoring for pest activity, facilitate cleaning, and provide access to utilities

RESPONSE: COMPLIANT

12.1.2.7 In warehouses where food products are recouped or exposed, the product contact surfaces shall be constructed of materials that will not contribute a food safety risk

RESPONSE: COMPLIANT

12.1.3 Lightings and Light Fittings

The light installation was adequate to supply sufficient brightness to storage and handling areas. All lights were shielded. All lights in receiving, storage, repack and shipping areas were found to be in good condition and shatterproofed. The areas of storage and repack were supplied with adequate lighting for safe working, inspection and cleaning.

12.1.3.1 Lighting in warehouses where food product is recouped or exposed shall be of appropriate intensity to enable the staff to carry out their tasks efficiently and effectively.

RESPONSE: COMPLIANT

12.1.3.2 Light fittings in areas where food product is recouped or exposed shall be shatterproof, manufactured with a shatterproof covering or fitted with protective covers, and recessed into or fitted flush with the ceiling.

RESPONSE: COMPLIANT

12.1.3.3 Light fittings in other areas of the warehouse where product is covered or otherwise protected shall be designed to prevent breakage and product contamination.

RESPONSE: COMPLIANT

12.1.4 Dust, Insect, and Pest Proofing

Most doors were properly maintained. All doors with the exception of those in the minor issue met the criteria for exterior doors. The pest devices were located around the building in a manner not to be a danger to personnel or products handled and stored. There was a minor issued under 12.1.4.1.

12.1.4.1 All external windows, ventilation openings, doors, and other openings shall be effectively sealed when closed and proofed against dust, insects, birds, and other pests. External personnel access doors shall be provided. They shall be effectively insect-proofed and fitted with a self-closing device and proper seals to protect against entry of dust, birds, and other pests.

RESPONSE: MINOR

EVIDENCE: There was potential for pest entry at the following points: 1) gap under compactor lip (right compactor – door 19), 2) Gaps overhead in both compactor hoods, 3) Doors observed not closed all the way (6, 17 and 19).

ROOT CAUSE: Usual Wear and Tear (Age) of the Sealant. Notated on the Warehouse Walk-Thru. Proposal for repair had not been approved at the time of the Audit. Work Order has been created and repair date is pending. Training: Both shipping and receiving crews were retrained on GMPs pest control and Security on 05/02/22

CORRECTIVE ACTION: Potential For Pest Entry. Re-seal Trash and Recycle Compactors. Anticipate this to be completed within 90 days. Both Shipping and receiving crews were retrained on GMPs Pest Control and Security on 05/02/2022



VERIFICATION OF CLOSEOUT: The site response through the attached CAPA form, work orders, contracted completion document and training record was reviewed and accepted. The NC is closed. JM 5/27/22

COMPLETION DATE: 05/02/2022 **CLOSEOUT DATE:** 05/27/2022

12.1.4.2 Electric insect control devices, pheromone, or other traps and baits shall be located and operate so as not to present a contamination risk to the product, packaging, containers, or processing equipment. Poison rodenticide bait shall not be used inside ingredient of product storage areas where ingredients, packaging, and product are handled, processed, or exposed.

RESPONSE: COMPLIANT

12.1.5 Ventilation

Ventilation was adequate for a refrigerated warehouse. There were no hazards are areas of concern on ventilation. No exhaust vents were used regularly as there were no areas of steam or similar. All areas were controlled under refrigeration.

12.1.5.1 Adequate ventilation shall be provided in enclosed storage and food handling areas.

RESPONSE: COMPLIANT

12.1.5.2 All ventilation equipment and devices in product storage and handling areas shall be adequately cleaned as per 12.2.5 and effectively sealed against dust, insects, and other pests as per 12.1.4.

RESPONSE: COMPLIANT

12.1.6 Equipment and Utensils

The SOP for 11.2.9.1 Equipment, Utensils and Protective Clothing (V1, 4/21/21) was documented and included the specification or description of required properties for utensils, gloves, clothing and equipment. A checklist for purchasing of new equipment was on file as a guide to qualify new equipment. Equipment used in the warehouse was in good condition. The tables in use were observed to be clean and in good condition. Gloves were observed to be changed as needed as gloves that were in use at the time of the audit were clean and in good condition. The racks and shelving were in good condition.

12.1.6.1 Specifications for equipment and utensils and procedures for purchasing equipment shall be documented and implemented.

RESPONSE: COMPLIANT

12.1.6.2 Equipment and utensils shall be designed, constructed, installed, operated, and maintained to meet any applicable regulatory requirements and not pose a contamination threat to products.

12.1.6.3 Equipment storage rooms shall be designed and constructed to allow for the hygienic and efficient storage of equipment and containers. Where possible, food contact equipment shall be segregated from non-food contact equipment.

RESPONSE: COMPLIANT

12.1.6.4 All equipment and utensils shall be cleaned (refer to 12.2.5.1) at a frequency to control contamination and stored in a clean and serviceable condition to prevent microbiological or cross-contact allergen contamination.

RESPONSE: COMPLIANT

12.1.6.5 Vehicles used in handling areas or in cold storage rooms shall be designed, cleaned, and operated so as not to present a food safety hazard.

RESPONSE: COMPLIANT

12.1.6.6 In addition to the above, locations handling exposed products and recouping products on-site shall have: i. Product contact equipment and utensils constructed of materials that are non-toxic, smooth, impervious and readily cleaned as per 12.2.5; ii. Clearly identified equipment and utensils that are used for inedible material; and iii. Clearly identified waste and overflow handling equipment and utensils. The waste material is discharged hygienically and according to local regulatory requirements.

RESPONSE: COMPLIANT

12.1.7 Grounds and Roadways

The exterior of the warehouse was maintained in an excellent condition. The west side of the warehouse was all grass area. The grass was maintained cut low with a zone of no growth at the base of the wall. The north side of the building was maintained with landscaped beds and employee/visitor parking (this was the side of the building with the main entrance). The east and south sides of the building were controlled by a security fence that encompassed the truck dock, waste storage and truck parking areas. All areas were maintained very clean. The waste containment was separated into waste foods for transport to farming (covered dumpsters), trash (compactor) and recycling (compactor). All waste was contained to prevent pest attraction and area around containers were clean. There were no areas of standing water on the exterior of the facility. All exterior equipment was stored properly.

12.1.7.1 The grounds and area surrounding the premises shall be maintained to minimize dust and kept free of waste or accumulated debris so as not to attract pests and vermin.

RESPONSE: COMPLIANT

12.1.7.2 Paths, roadways, and loading and unloading areas shall be maintained so as not to present a hazard to the food safety operation of the premises.

RESPONSE: COMPLIANT

12.1.7.3 Surroundings shall be kept neat and tidy and shall not present a hazard to the hygienic and sanitary operation of the premises or provide harborage for pests.

RESPONSE: COMPLIANT

12.2.1 Repairs and Maintenance

The SOP 12.2.1 Repairs and Maintenance and 12.2.2 Maintenance Staff and Contractors were documented and dated, v3, 1/24/22. The site relied on contractors for most upkeep. Maintenance (building, refrigeration, fork lifts, dock - levelers and transportation) was contracted out to outside service providers. The contracts, workorders and service reports were on file. Refrigeration - storage, refrigeration-fleet, and truck maintenance documentation were reviewed for the audit. Agreements with contractors were kept on file (The contractors for maintenance that are given access to the warehouse to perform duties have training to the GMPs on file. There is a cabinet on site that is secured in which is stored the tools specifically for the lift maintenance contractor and was locked at the time of the audit. There were no temporary repairs noted during the audit. The racks were observed to be maintained in good condition.

12.2.1.1 The methods and responsibility for the maintenance and repair of facility, equipment, and buildings shall be documented, planned, and implemented in a manner that minimizes the risk of product, packaging, or equipment contamination.

RESPONSE: COMPLIANT

12.2.1.2 The maintenance schedule shall be prepared to cover building, equipment, and other areas of the premises critical to the maintenance of product safety. Routine maintenance of plant and equipment in any food handling or storage area shall be performed according to a maintenance control schedule and recorded.

12.2.1.3 Failures of facility and equipment in any food storage and handling area shall be documented, reviewed, and necessary repair incorporated into the maintenance control schedule.

RESPONSE: COMPLIANT

12.2.1.4 Site supervisors shall be notified when maintenance or repairs are to be undertaken in any food handling or storage area.

RESPONSE: COMPLIANT

12.2.1.5 The maintenance supervisor and the site supervisor shall be informed if any repairs or maintenance pose a potential threat to product safety (e.g., pieces of electrical wire, damaged light fittings, and loose overhead fittings). When possible, maintenance is to be conducted outside operating times.

RESPONSE: COMPLIANT

12.2.1.6 Temporary repairs, where required, shall not pose a food safety risk and shall be included in the cleaning program. There shall be a plan in place to address completion of temporary repairs to ensure they do not become permanent solutions.

RESPONSE: COMPLIANT

12.2.1.7 Equipment located over exposed product shall be lubricated with food grade lubricants and their use controlled to minimize the contamination of the product.

RESPONSE: COMPLIANT

12.2.1.8 Paint used in a food handling or contact zone shall be suitable for use, in good condition (i.e., no chips), and shall not be used on any product contact surface.

RESPONSE: COMPLIANT

12.2.2 Maintenance Staff and Contractors

Contractors were handled as any visitor with regards to compliance to the food safety policy. There were signed trainings for contractors reviewed and on file. The maintenance staff were trained just as all other employees with record.

12.2.2.1 Maintenance staff and contractors shall comply with the site's personnel and process hygiene requirements (refer to 12.3).

RESPONSE: COMPLIANT

12.2.2.2 All maintenance staff and contractors required to work on-site shall be trained in the site's food safety and hygiene procedures or shall be escorted at all times until their work is completed. Records of training shall be documented and retrievable.

RESPONSE: COMPLIANT

12.2.2.3 Maintenance staff and contractors shall remove all tools and debris from any maintenance activity once it has been completed and inform the area supervisor and maintenance supervisor so that appropriate hygiene and sanitation can be completed and an inspection conducted prior to restarting site operations. The inspections shall be documented.

RESPONSE: COMPLIANT

12.2.3 Calibration

The calibration SOP 12.2.3 was documented V3, 1/24/22. The directory of calibration activity was defined to the equipment, device ID, frequency, method and responsibility. The calibration certificates for the NIST thermometer (exp. 2/23/2023), the scales (performed 9/7/2021), and the weight used for daily scale monitoring (exp. 2/23/23). The daily scale calibrations conducted by in-house employees were recorded. This was accomplished by using a 5 lb. weight. The weekly (receiving and shipping) thermometer calibrations were recorded. These were conducted by in-house personnel. The record of the previous year was reviewed.

12.2.3.1 The methods and responsibility for calibration and re-calibration of measuring, testing, and inspection equipment used for monitoring activities outlined in prerequisite programs, food safety plans, and other process controls, or to demonstrate compliance with customer specifications, shall be documented and implemented. Software used for such activities shall be validated and secured as appropriate.

RESPONSE: COMPLIANT

12.2.3.2 Equipment shall be calibrated against national or international reference standards and methods or to an accuracy appropriate to its use. In cases where standards are not available, the site shall provide evidence to support the calibration reference method applied. A list of measuring, testing, and inspection equipment requiring calibration shall be maintained.

12.2.3.3 Calibration shall be performed according to regulatory requirements and/or to the equipment manufacturers' recommended schedule.

RESPONSE: COMPLIANT

12.2.3.4 Procedures shall be documented and implemented to address the disposition of potentially affected products should measuring, testing, and inspection equipment be found to be out of calibration state.

RESPONSE: COMPLIANT

12.2.3.5 A directory of measuring, testing, and inspection equipment requiring calibration and records of calibration tests shall be maintained.

RESPONSE: COMPLIANT

12.2.4 Pest Prevention

The SOP for Management of Pests and Vermin (12.2.9 (v1, 12/15/20214). The contracted service is monthly. There are traps placed on the floor/wall junction around exterior walls and on both sides of doors. The exterior bait stations are positioned around the entire facility, are secured and locked. The program was signed as reviewed by the SQF Practitioner and the pest control technician on 4/25/2022. The training of employees with inspection and knowledge on bait poison and pest control was recorded. The SDS for the rodenticide was on file and the usage for the rodenticides was recorded. The insurance certificate was current (exp. 6/15/22). The current license was on file. The site map was current and accurate. The record of pest activity and trends was documented and current. There was no interior activity or catches over the past year. There was no significant outside activity trends for feeding in the bait stations. There were no signs of activity or infestation observed on the interior during the audit. The GMP training for the contracted technician was on file and current (1/31/2022). Past months service reports for in-house and contracted checks were documented and reviewed for compliance.

12.2.4.1 A documented pest prevention program shall be effectively implemented. It shall: i. Describe the methods and responsibility for the development, implementation, and maintenance of the pest prevention program; ii. Record pest sightings and trend the frequency of pest activity to target pesticide applications; iii. Outline the methods used to prevent pest problems; iv. Outline the pest elimination methods and the appropriate documentation for each inspection; v. Outline the frequency with which pest status is to be checked; vi. Include on a site map the identification, location, number, and type of applied pest control/ monitoring devices; vii. List the chemicals used. They are required to be approved by the relevant authority and their Safety Data Sheets (SDS) made available; viii. Outline the methods used to make staff aware of the bait control program and the measures required when they come into contact with a bait station; ix. Outline the requirements for staff awareness and training in the use of pest and vermin control chemicals and baits; and x. Measure the effectiveness of the program to verify the elimination of applicable pests and identify trends.

RESPONSE: COMPLIANT

12.2.4.2 Pest contractors and/or internal pest controllers shall: i. Be licensed and approved by the local relevant authority; ii. Use only trained and qualified operators who comply with regulatory requirements; iii. Use only approved chemicals; iv. Provide a pest prevention plan (refer to 12.2.4.1), which includes a site map indicating the location of bait stations traps and other applicable pest control/monitoring devices; v. Report to a responsible authorized person on entering the premises and after the completion of inspections or treatments; vi. Provide regular inspections for pest activity with appropriate action taken if pests are present, and vii. Provide a written report of their findings and the inspections and treatments applied.

RESPONSE: COMPLIANT

12.2.4.3 Pest activity risks shall be analyzed and recorded. Inspections for pest activity shall be undertaken on a regular basis by trained site personnel and the appropriate action taken if pests are present. Identified pest activity shall not present a risk of contamination to food products, raw materials, or packaging. Records of all pest control inspections and applications shall be maintained.

RESPONSE: COMPLIANT

12.2.4.4 Food products, raw materials, or packaging that are found to be contaminated by pest activity shall be effectively disposed of and the source of pest infestation investigated and resolved. Records shall be kept of the disposal, investigation, and resolution.

RESPONSE: COMPLIANT

12.2.4.5 Pesticides shall be clearly labeled and stored per 12.6.4 if kept on-site.

RESPONSE: COMPLIANT

12.2.4.6 No animals shall be permitted on-site in food handling or storage areas.

12.2.5 Cleaning and Sanitation

The Cleaning and Sanitation SOP 12.2.5 (v3, 1/24/22) was documented. The cleaning schedule was maintained with daily, weekly, monthly, quarterly, yearly and bi-annual (twice per year) tasks. The employees performing the task reported completion and the supervisor or SQF Practitioner verified the completion of the work. A verification signature was evident on all completed schedules. Schedules for the past year were reviewed. There were thorough procedures on file for cleaning (chemicals, tools and cleaning steps defined). Schedules completed had a final review by the SQF practitioner sign-off. Sanitation training was on file conducted by the SQF Practitioner. The training was conducted in February of 2022 with verification of competency. SDSs confirmed on file were for the chemicals in use. San-T 10 Plus (sanitizer) and Inspector's Choice (cleaner). Cleaner and sanitizer mix and concentration verifications of metering devices were conducted and recorded monthly. Pre-op swabbing is conducted on totes and tables with ATP protein swabs. This is conducted in the repacking operation (2021 and 2022 ongoing results logs were reviewed). Training in the sanitation was recorded and current. The pre-op visual inspection is conducted daily with record (all records 2021 year to current 2022 were verified). The verification of removal of trash and waste is included on the pre-op/operational inspection. Chemical usage was logged. All chemicals in use were properly labeled when in spray bottles and dispensing containers. The staff amenities (restrooms and breakrooms) were cleaned and inspected daily.

12.2.5.1 The methods and responsibility for the effective cleaning of the food storage and handling areas, staff amenities, and toilet facilities shall be documented and implemented. Consideration shall be given to: i. What is to be cleaned; ii. How it is to be cleaned; iii. When it is to be cleaned; iv. Who is responsible for cleaning; v. Validation of cleaning procedures; vi. Methods used to confirm the correct concentrations of detergents and sanitizers, and vii. The responsibility and methods used to verify the effectiveness of the cleaning and sanitation program.

RESPONSE: COMPLIANT

12.2.5.2 Detergents and sanitizers shall be suitable for use in a food and storage and handling environment, labeled according to regulatory requirements, and purchased in accordance with applicable legislation. The organization shall ensure: i. The site maintains a list of chemicals approved for use; ii. An inventory of all chemicals purchased and used is maintained; iii. Detergents and sanitizers are stored as outlined in element 12.6.4; iv. Safety Data Sheets (SDS) are provided for all detergents and sanitizers purchased; and v. Only trained staff handle sanitizers and detergents.

RESPONSE: COMPLIANT

12.2.5.3 Detergents and sanitizers that have been mixed for use shall be correctly mixed according to manufacturers' instructions, stored in containers that are suitable for use, and clearly identified. Mix concentrations shall be verified and records maintained.

RESPONSE: COMPLIANT

12.2.5.4 Provision shall be made for the effective cleaning of equipment, utensils, and protective clothing.

RESPONSE: COMPLIANT

12.2.5.5 Cleaning equipment, tools, racks, and other items used in support of the cleaning and sanitizing program shall be clearly identified, stored, and maintained in a manner that prevents contamination of processing, product handling equipment, and storage areas as well as the tools themselves.

RESPONSE: COMPLIANT

12.2.5.6 Staff amenities, sanitary facilities, and other essential areas shall be inspected by qualified personnel to ensure the areas are clean and at a defined frequency.

RESPONSE: COMPLIANT

12.2.5.7 Records of cleaning and sanitation activities, verification, and inspections shall be maintained.

RESPONSE: COMPLIANT

12.2.5.8 Staff amenities, sanitary facilities, and other essential areas shall be inspected by qualified personnel at a defined frequency to ensure the areas are clean.

RESPONSE: COMPLIANT

12.3.1 Personnel Welfare

The GMP documented policy for staff and visitors defined health requirements which excluded those persons suffering from or with symptoms of illness. The employees observed in the warehouse were observed to be healthy with no appearance of illness or injury that could threaten workplace or product safety.

12.3.1.1 Personnel suffering from infectious diseases or who are carriers of any infectious disease shall be restricted from working on the site or in the transportation of food and shall not engage in food handling operations or be permitted access to storage areas where the product is exposed or there is a risk of contamination of food.

RESPONSE: COMPLIANT

12.3.1.2 The site shall have measures in place to prevent contact of materials, ingredients, food packaging, food, or food contact surfaces from any bodily fluids from open wounds, coughing, sneezing, spitting, or any other means. In the event of an injury that causes spillage of bodily fluid, a properly trained staff member shall ensure that all affected areas, including handling and storage areas, have been adequately cleaned and that all materials and products have been quarantined and/or disposed of.

RESPONSE: COMPLIANT

12.3.1.3 Personnel with exposed cuts, sores, or lesions shall not engage in handling exposed products, recoup, repack or processing products, or handling primary packaging or food contact surfaces. Minor cuts or abrasions on exposed parts of the body shall be covered with a protective bandage or alternative suitable dressing. A colored bandage or alternative suitable waterproof and colored dressing is recommended for handling exposed products, recoup, or repack processes.

RESPONSE: COMPLIANT

12.3.2 Handwashing

The sink for handwashing was provided in the repack area. The sink was supplied with tempered water, towels in dispenser and a trash receptacle. There was a sign designating the sink as a hand wash and the sink was not observed to be used for other purposes. Gloves were changed as needed (when dirty or damaged). Training of employees encouraged them to wash hands prior to applying gloves. A minor was issued in this section under clause 12.3.2.3.

12.3.2.1 All personnel shall have clean hands and hands shall be washed by all staff, contractors, and visitors: i. On entering food handling, storage, and processing areas; ii. After each visit to a toilet; iii. After using a handkerchief; iv. After smoking, eating, or drinking; and v. After sneezing or coughing.

RESPONSE: COMPLIANT

12.3.2.2 Handwash stations shall be available and accessible as required.

RESPONSE: COMPLIANT

12.3.2.3 Handwash stations shall be constructed of stainless steel or similar non-corrosive material and at a minimum supplied with: i. A potable water supply at an appropriate temperature; ii. Liquid soap; iii. Paper towels; and iv. A means of containing used paper towels. An effective hand dryer may be used in instances where there is no direct hand contact of food or food contact surfaces.

RESPONSE: MINOR

EVIDENCE: Hand sink in repack not supplied appropriately at the time of inspection. Soap was not present. Sink was not maintained clean.

ROOT CAUSE: Sink was being repaired and was out of service. Work order completed but not submitted to facilities Manager. There was a breakdown in communication between Practitioner and the Facilities Manager.

CORRECTIVE ACTION: Washing Station. Hand Sink was not clean. Soap was not present. Hand Sink (washing station) has been repaired, Sink was cleaned, and soap station was re-installed.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting photos of the sink and supplies properly provided was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/05/2022 **CLOSEOUT DATE:** 05/26/2022

12.3.2.4 Signage in appropriate languages instructing people to wash their hands shall be provided in a prominent position.

12.3.2.5 When gloves are used, personnel shall maintain the handwashing practices outlined above.

RESPONSE: COMPLIANT

12.3.3 Clothing and Personal Effects

Personal clothing is worn however there is assessment at the start to make sure that the clothing is clean and that jewelry, hair coverage and glove use is being followed. The employees were observed during the audit to wear clean clothes in good repair. The product being divided into the smaller bagged portions was only contacted by gloved hands.

12.3.3.1 Clothing worn by staff engaged in handling food shall be maintained, stored, laundered, and worn so as not to present a contamination risk to products.

RESPONSE: COMPLIANT

12.3.3.2 Clothing, including shoes, shall be clean at the commencement of each shift and maintained in a serviceable condition.

RESPONSE: COMPLIANT

12.3.3.3 Protective clothing shall be manufactured from material that will not pose a food safety threat and is easily cleaned.

RESPONSE: COMPLIANT

12.3.3.4 Jewelry and other loose objects shall not be worn or taken into a food handling or processing operation or any area where food is exposed. The wearing of plain bands with no stones, prescribed medical alert bracelets, or jewelry accepted for religious or cultural reasons can be permitted, provided it is properly covered and does not pose a food safety risk. All exceptions shall meet regulatory and customer requirements and shall be subject to a risk assessment and evidence of ongoing risk management.

RESPONSE: COMPLIANT

12.3.4 Visitors

Visitors were required to comply to rules for Good Warehousing Practices just as employees were required while in warehousing areas. The rules were reviewed prior to entry to the warehouse. At sign in upon arrival, visitors going into the storage areas are asked to review the GMP and Hygiene Policy. A policy was signed by the visitors and kept on file. The auditor was presented with the policy and asked to review and sign by the reception employee prior to being greeted by management. The policy was again reviewed at the time of walking into the warehouse area. The drivers were controlled so that they could not wonder into the warehouse. If a driver was given access, they are required to follow GMPs.

12.3.4.1 All visitors shall be required to comply with all Good Storage and Distribution Practices and hygiene standards required by the site, including those applying to clothing and personal effects, hand-washing, and illness (refer to 12.3.1, 12.3.2 and 12.3.3).

RESPONSE: COMPLIANT

12.3.4.2 All visitors, including management staff, shall wear suitable clothing and footwear when entering any food storage and handling area.

RESPONSE: COMPLIANT

12.3.4.3 Visitors exhibiting visible signs of illness shall be prevented from entering areas in which food is handled or processed (refer to 12.3.1).

RESPONSE: COMPLIANT

12.3.4.4 Visitors shall enter and exit food handling areas through the proper staff entrance points and comply with all handwashing and personnel practice requirements.

RESPONSE: COMPLIANT

12.3.4.5 All visitors shall be trained in the site's food safety and hygiene procedures before entering any food processing or handling areas or shall be escorted at all times in food handling and storage areas.

RESPONSE: COMPLIANT

12.3.4.6 The site shall have a documented procedure for how driver access is managed to minimize food safety risk and designated driver areas are maintained to prevent food contamination or other food safety risks.

12.3.5 Staff Amenities (change rooms, toilets, break rooms)

The restrooms for the site were inspected and found to be clean, supplied with hot water, soap, towels and dryers, and proper trash receptacles. All restrooms had signage to encourage proper hand washing. The restrooms and toilets installed were located near break areas and offices convenient for warehouse staff and sufficient in number for the number of employees on site. There were sufficient number of sinks inside each restroom. Restrooms and break areas were separated from food storage areas.

12.3.5.1 Staff amenities shall have documented cleaning procedures, be supplied with appropriate lighting and ventilation, and shall be made available for the use of all persons engaged in the handling and processing of product.

RESPONSE: COMPLIANT

12.3.5.2 Provision shall be made for staff to store their street clothing and personal items separate from food contact zones and food storage areas

RESPONSE: COMPLIANT

12.3.5.3 Toilet rooms shall be: i. Designed and constructed so that they are accessible to staff and separate from any food handling operations; ii. Accessed from the warehouse or food handling area via an airlock vented to the exterior or through an adjoining room; iii. Sufficient in number for the maximum number of staff; iv. Constructed so that they can be easily cleaned and maintained; and v. Kept clean and tidy.

RESPONSE: COMPLIANT

12.3.5.4 Sanitary drainage shall not be connected to any other drains within the premises and shall be directed to a septic tank or a sewerage system. Procedure shall be documented and implemented to properly manage sewage back-ups to minimize the potential for contamination.

RESPONSE: COMPLIANT

12.3.5.5 Handwash basins shall be provided immediately outside or inside the toilet room and designed as outlined in 12.3.2.2.

RESPONSE: COMPLIANT

12.3.5.6 Separate break room facilities shall be provided away from a food handling or storage areas. Break rooms shall be kept clean and tidy and free from waste materials and pests.

RESPONSE: COMPLIANT

12.3.5.7 Where outside eating areas are provided, they shall be kept clean and free from waste materials and maintained in a manner that minimizes the potential for introduction of contamination including pests to the site.

RESPONSE: COMPLIANT

12.3.5.8 Signage in languages understood by staff advising people to wash their hands before entering the food storage areas shall be provided in a prominent position in break rooms and break room exits.

RESPONSE: COMPLIANT

12.4.1 Personnel Processing Practices

There is no processing of foods The area for repacking was a segregated portion of warehouse. Sensory evaluations (tasting of foods) are not performed. Visual inspection for quality occurs and is documented daily in storage areas. Employees in repack are trained to visually look for product quality and safety issues while repacking. All employees in the warehouse are required to wear hair and beard restraints. GMPs are clean clothes, no eating/drinking in storage/handling areas, hand washing and gloves for direct fruit contact. Activities of smoking, chewing and eating were prohibited in the warehouse. All employees were following the standard at the time of audit. First aid kits were in place with colored bandages for visibility.

All personnel shall comply with the following practices: i. Personnel entry to food handling areas shall be through the personnel access doors only; ii. All doors are to be kept closed. Doors shall not be left open for extended periods when access is required for waste removal or stock transfer; iii. The wearing of false fingernails or fingernail polish is not permitted when handling exposed food; iv. Materials and products shall be kept in appropriate containers as required and off the floor; v. Waste shall be contained in the bins identified for this purpose and removed from the operational area on a regular basis and not left to accumulate; vi. Staff shall not eat or taste any product in the food storage or handling area; vii. Smoking, chewing, eating, or spitting is not permitted in any food handling or storage areas; and viii. Drinking of water is permissible only under conditions that prevent contamination or other food safety risks from occurring. Drinking water containers shall be stored in clear, covered containers, and used in designated areas only. Code Amendment #1 A medical screening procedure shall be in place for all employees, visitors and contractors who handle exposed product or food contact surfaces.

RESPONSE: COMPLIANT

12.4.1.2 All personnel engaged in storage, transport, and handling of packaged products and materials shall ensure that products and materials are handled and stored in such a way as to prevent damage or product contamination.

RESPONSE: COMPLIANT

12.5.1 Water Supply

The last water test for potability was conducted on 2/22/2022. This was performed by the State Public Health Lab on a sample taken at the Capitol City Warehouse location. The backflow tests for the site were conducted last on 3/1/2022. A minor was noted in this section und 12.5.1.2.

12.5.1.1 Adequate supplies of water drawn from a known clean source shall be provided for use during holding, storage and cleaning of the premises and equipment.

RESPONSE: COMPLIANT

12.5.1.2 Contingency plans shall be in place for instances when the potable water supply is deemed to be contaminated or otherwise inappropriate for use.

RESPONSE: MINOR

EVIDENCE: The water management program did not specify a contingency plan for water provision should the municipal source water or site water supply become contaminated.

ROOT CAUSE: Contingency Plan wasn't added to the Water Management Plan. Oversight when reviewing the amendments on the new SQF Version 9.

CORRECTIVE ACTION: Water Management (Contingency Plan) Completed and Updated the Water Management Plan to include the water contingency plan in the event of municipal source failur.



VERIFICATION OF CLOSEOUT: The site's corrective action that included a CAPA document and supporting amended document to include contaminated water contingency was reviewed and accepted. The NC is closed. JM 5/26/22

COMPLETION DATE: 05/17/2022 **CLOSEOUT DATE:** 05/26/2022

12.5.1.3 Supplies of hot and cold water shall be provided as required to enable the effective cleaning of the premises and equipment.

RESPONSE: COMPLIANT

12.5.1.4 The delivery of water within the premises shall ensure potable water is not contaminated. Testing of the backflow system, where possible, shall be conducted at least annually and records shall be maintained.

12.5.1.5 The use of non-potable water shall be controlled such that: i. There is no cross-contamination between potable and non-potable water lines; ii. Non-potable water piping and outlets are clearly identified; and iii. Hoses, taps, and other similar sources of possible contamination are designed to prevent back flow or back siphonage.

RESPONSE: NOT APPLICABLE

12.5.1.6 Where water is stored on-site, storage facilities shall be adequately designed, constructed, and routinely cleaned to prevent contamination.

RESPONSE: NOT APPLICABLE

12.5.2 Water and Ice Quality

Ice is not produced or received for use on produce.

12.5.2.1 Microbiological analysis of the water and ice supply that comes into contact with food or food contact surfaces shall be conducted to verify the cleanliness of the supply, the monitoring activities, and the effectiveness of the treatment measures implemented. Verification, at minimum, shall be made annually.

RESPONSE: NOT APPLICABLE

EVIDENCE: Ice is not produced or received for use on produce.

12.5.2.2 Water and ice shall be analyzed using reference standards and methods.

RESPONSE: NOT APPLICABLE

EVIDENCE: Ice is not produced or received for use on produce.

12.5.2.3 Ice rooms and receptacles shall be constructed of materials as outlined in elements 12.1.2 and designed to minimize contamination of the ice during storage and distribution.

RESPONSE: NOT APPLICABLE

EVIDENCE: Ice is not produced or received for use on produce.

12.5.3 Air and Other Gases

Air and gases are not used in the storage and repack operations.

12.5.3.1 Compressed air or other gases (e.g. nitrogen, carbon dioxide) that contact food or food contact surfaces shall be clean and present no risk to food safety.

RESPONSE: NOT APPLICABLE

EVIDENCE: Air and gases are not used in the storage and repack operations.

12.5.3.2 Compressed air systems and systems used to store or dispense other gases used in food storage and distribution process shall be maintained and regularly monitored for quality and applicable food safety hazards.

RESPONSE: NOT APPLICABLE

EVIDENCE: Air and gases are not used in the storage and repack operations.

12.6.1 Receipt, Storage and Handling of Goods

The site defined and documented the storage conditions needed to maintain the products safely for selection and delivery to the customers. This included rotation of goods in a FIFO manner but also with respect to inspected quality (produce condition) was closely monitored and recorded through daily inspection. Products are disposed of or inspected more closely and culled dependent upon the quality inspection report. The proper storage of allergen-containing goods was included in the allergen management plan which requires vertical separation of foods with respect to allergen content.

12.6.1.1 The site shall implement an effective storage plan that allows for the safe, hygienic storage of ice, food products (frozen, chilled, and ambient), packaging, equipment, and chemicals.

RESPONSE: COMPLIANT

12.6.1.2 Dry food products shall be received and stored in a way to prevent cross-contamination with frozen and chilled products.

12.6.1.3 The responsibility and methods for ensuring effective stock rotation principles are applied shall be documented and implemented.

RESPONSE: COMPLIANT

12.6.1.4 Procedures shall be in place to ensure that all food products and recouped products are utilized within their designated shelf life.

RESPONSE: COMPLIANT

12.6.1.5 Where goods are held under temporary or overflow conditions that are not designed for the safe storage of goods, a risk analysis shall be undertaken to ensure there is no risk to the integrity of those goods, or contamination, or adverse effects on food safety.

RESPONSE: NOT APPLICABLE

EVIDENCE: The site does not utilize alternate storage.

12.6.1.6 Records shall be available to verify alternate or temporary control measures for storage of raw materials, ingredients, packaging, equipment, chemicals, or finished products.

RESPONSE: NOT APPLICABLE

EVIDENCE: The site does not utilize alternate storage.

12.6.1.7 Racks provided for the storage of food products shall be constructed of impervious materials and designed to enable cleaning of the floors and the storage room. Storage areas shall be cleaned at a predetermined frequency.

RESPONSE: COMPLIANT

12.6.2 Cold Storage, Freezing and Chilling of Foods

The freezer was found to be at -6 F. The main cooler was found to be at 35 F. The aisle 10 tempered room was at 55 F (potato room). The shipping / receiving dock was at 40 F. The site was electronically monitoring the temperatures. Graphs were used to illustrate history of the temperatures. The site had records for the entire year. The freezer, cooler and dry storage spaces were all inspected. The temperatures were found to be within safe ranges for the types of products stored within each space. The records were kept electronically. There is an alarm for notification when temperatures were found above established limits. The records were reviewed for the audit. Random days were selected over the last year and temperature levels confirmed to be consistent.

12.6.2.1 The site shall provide confirmation of the effective operational performance of freezing, chilling, and cold storage facilities. Chillers, blast freezers, and cold storage rooms shall be designed and constructed to allow for the hygienic and efficient refrigeration of food and shall be easily accessible for inspection and cleaning.

RESPONSE: COMPLIANT

12.6.2.2 Sufficient refrigeration capacity shall be available to store chilled or frozen food at the maximum anticipated throughput of product with allowance for periodic cleaning of refrigerated areas.

RESPONSE: COMPLIANT

12.6.2.3 Discharge from defrost and condensate lines shall be controlled and discharged to the drainage system.

RESPONSE: COMPLIANT

12.6.2.4 The site shall have a written procedure for monitoring temperatures of storage rooms, including the frequency of checks, and corrective actions if the temperature is out of specification. Cold and chilled storage rooms shall be fitted with temperature monitoring equipment, located to monitor the warmest part of the room, and be fitted with a temperature measurement device that is easily readable and accessible. Records shall be kept of frozen, cold, and chilled storage room temperatures.

RESPONSE: COMPLIANT

12.6.2.5 Procedures shall be in place to identify the methods and responsibilities used to ensure that processes applied to materials prior to distribution (e.g. thawing, slacking, labeling) do not pose a risk to product safety or loss of traceability.

RESPONSE: COMPLIANT

12.6.3 Storage of Dry Goods

The storage of shelf stable foods and packaging were observed in areas of storage away from wet conditions. The racks were found to be in good condition and areas were found to be clean. The lifts and jacks used in the warehouse were found to be in good condition and clean. The battery charging area was kept away from food and food-related storage. The battery area was clean and free of debris

12.6.3.1 Dry goods shall be located away from wet areas to protect the product from contamination and deterioration and to prevent packaging from becoming a harborage for pests or vermin.

RESPONSE: COMPLIANT

12.6.4 Storage of Hazardous Chemicals and Toxic Substances Used On-site

There was a designated and locked area for storage of cleaners and cleaning supplies. This was a closet near the dock office. The chemicals were labeled and there was an inventory of chemicals kept to define approval as well as track usage. The storage area was controlled (locked) and access was only by trained sanitation staff.

12.6.4.1 Hazardous chemicals, toxic substances, and pesticides that are for use on the site with the potential for food contamination shall be: i.

Used only according to manufacturers' instructions; ii. Controlled to prevent contamination or a food safety hazard to raw material,
packaging, work-in-progress, finished product, or product contact surfaces; iii. Included in a current register of all hazardous chemicals
and toxic substances that are stored on-site; iv. Supplemented with a current Safety Data Sheet (SDS) made available to all staff; v.
Controlled to track usage and ensure return to the appropriate storage areas after use; vi. Be compliant with national and local
legislation; and vii. Used so that there is no cross-contamination between chemicals.

RESPONSE: COMPLIANT

12.6.4.2 Hazardous chemicals and toxic substances shall be stored: i. In an area with appropriate signage; ii. Accessible only by personnel trained in the storage and use of chemicals; iii. Separated from the distribution storage area so as not to present a hazard to staff, product, packaging, or product handling equipment; iv. In their original containers, or in clearly labeled secondary containers if allowed by applicable legislation; and v. Stored so that there is no cross-contamination between chemicals.

RESPONSE: COMPLIANT

12.6.4.3 Personnel who handle hazardous chemicals and toxic substances, including pesticides and cleaning chemicals: i. Shall be fully trained in their purpose, storage, handling, and use; ii. Be provided first aid equipment and personnel protective equipment; and iii. Ensure compliance with the proper identification, storage, usage, disposal, and clean-up requirements.

RESPONSE: COMPLIANT

12.6.4.4 The site shall dispose of unused chemicals and empty containers in accordance with regulatory requirements and ensure that: i. Empty chemical containers are not reused; ii. Empty containers are labeled, isolated, and securely stored while awaiting collection; and iii.

Unused and obsolete chemicals are stored under secure conditions while waiting authorized disposal by an approved vendor.

RESPONSE: COMPLIANT

12.6.4.5 In the event of a hazardous spill, the site shall: i. Have spillage clean-up instructions to ensure that the spill is properly contained; and ii. Be equipped with spillage kits and cleaning equipment.

RESPONSE: COMPLIANT

12.6.5 Loading, Transport, and Staging Practices

Form 12.6.7 Loading checklist is completed during loading for shipment. The Transportation Temperature Check Form is completed by drivers at loading and at each stop in the route. The receiving form is completed electronically on every load. During the audit, a loader was interviewed and documents in use were observed. The loading of truck was witnessed during the audit. The employee was very knowledgeable on their food safety responsibilities. The precooling of the trucks was observed. The staging of products was acceptable as it was performed in a cold dock. The staging of frozen items was not performed for lengths of time to allow thawing.

12.6.5.1 The practices applied during loading, transport, and unloading of food products and materials shall be documented, implemented, and designed to maintain appropriate storage conditions and product integrity. Practices shall protect against contamination from biological, chemical, and physical hazards, and under conditions that prevent cross-contamination.

RESPONSE: COMPLIANT

12.6.5.2 Sites shall have a procedure in place that is documented and implemented to ensure trailers are inspected prior to receiving shipments or loading to ensure that the trailer is in good repair, clean, secured and at the required environmental condition and temperature.

RESPONSE: COMPLIANT

12.6.5.3 Vehicles (e.g. trucks/vans/containers) used for transporting food shall be inspected prior to loading to ensure they are clean, in good repair, suitable for the purpose, and free from odors or other conditions that may impact negatively on the product.

12.6.5.4 Receiving, staging, loading, and unloading practices shall be designed to minimize unnecessary exposure of the product to conditions detrimental to maintaining product integrity.

RESPONSE: COMPLIANT

12.6.5.5 Where applicable, food transport vehicles' refrigeration units shall maintain the food at the required temperatures and the units' temperature settings shall be set, checked, and recorded before loading and product temperatures monitored at regular intervals during loading as appropriate. The refrigeration units shall be operational at all times and checks shall be completed of the units' operation, the door seals, and the storage temperature at regular intervals during transit.

RESPONSE: COMPLIANT

12.6.5.6 Upon arrival and prior to opening the doors, the food transport vehicles' refrigeration unit storage temperature settings and operating temperature shall be checked and recorded. Receiving shall be completed efficiently and product temperatures shall be recorded at the commencement of unloading and at regular intervals during unloading.

RESPONSE: COMPLIANT

12.7.1 Process Flow

The handling and storage of products in the warehousing, selection, stocking and rework areas were observed. The flow of products through the operation was designed to prevent contamination.

12.7.1.1 The process flow shall be designed to prevent cross-contamination and organized so there is a continuous flow of product through the process. The flow of personnel shall be managed such that the potential for contamination is minimized.

RESPONSE: COMPLIANT

12.7.2 Control of Foreign Matter Contamination

The 12.7.2-4 SOP Foreign Matter was documented as V2, 1/15/2018. This called for control of glass, wood, other foreign materials and contingency for glass breakage. There storage area checks which included pallet condition. The glass and brittle plastic inspection is conducted and recorded monthly based on a glass and plastic register dated 1/1/2018. The inspections were verified as completed and recorded. The 2021 and year-to-date 2022 records were reviewed.

12.7.2.1 The responsibility and methods used to prevent foreign matter contamination of the product shall be documented, implemented, and communicated to all staff.

RESPONSE: COMPLIANT

12.7.2.2 Inspections shall be performed to ensure plant and equipment remains in good condition and potential contaminants have not been detached or become damaged or deteriorated.

RESPONSE: COMPLIANT

12.7.2.3 Containers, equipment, and other utensils made of glass, porcelain, ceramics, laboratory glassware, or other like material (except where product is contained in packaging made from these materials, or measurement instruments with glass dial covers, or MIG thermometers required under regulation) shall not be permitted in food processing/contact zones.

RESPONSE: COMPLIANT

12.7.2.4 Where glass objects or similar material are required to be used by the site in storage and handling areas, they shall be listed in a glass inventory including details of their location.

RESPONSE: COMPLIANT

12.7.2.5 Product that is in glass or similar material that is for distribution purposes shall be stored and handled in a manner that prevents contamination.

RESPONSE: COMPLIANT

12.7.2.6 Regular inspections of storage and handling zones shall be conducted (refer to 2.5.4.3) to ensure they are free of glass or other like material and to establish changes to the condition of the objects listed in the glass inventory.

RESPONSE: COMPLIANT

12.7.2.7 Glass instrument dial covers on equipment and MIG thermometers shall be inspected at regular intervals.

12.7.2.8 Pallets used in food storage shall be made of a suitable material, dedicated for that purpose, clean, maintained in good order, and their condition subject to regular inspection.

RESPONSE: COMPLIANT

12.7.2.9 Wooden pallets and other wooden utensils used in food handling areas shall be dedicated for that purpose, clean, and maintained in good order. Their condition shall be subject to regular inspection.

RESPONSE: COMPLIANT

12.7.2.10 Loose metal objects on equipment, equipment covers, and overhead structures shall be removed or tightly affixed so as not to present a hazard

RESPONSE: COMPLIANT

12.7.3 Managing Foreign Matter Contamination Incidents

The 12.7.2-4 SOP Foreign Matter was documented as V2, 1/15/2018. This called for control of glass, wood, other foreign materials and contingency for glass breakage. The incident management called for a thorough inspection of the area of concern prior to resuming operations.

12.7.3.1 In all cases of foreign matter contamination the affected food product shall be isolated, inspected, reworked, or disposed of.

RESPONSE: COMPLIANT

12.7.3.2 In circumstances where glass or similar material breakage occurs, the affected area shall be isolated, cleaned, and thoroughly inspected (including cleaning equipment and footwear) and cleared by a suitably responsible person.

RESPONSE: COMPLIANT

12.8.1 Waste Disposal

The dumpsters on the exterior were kept closed and areas around the units were found to be clean. Interior waste handling was managed through verification of removal of trash and waste and verified on the pre-op inspection. Trash on the interior was not allowed to accumulate. There was removal to the exterior waste containers as needed. The waste containment on the exterior was separated into waste foods for transport to farming (covered dumpsters), trash (compactor) and recycling (compactor).

12.8.1.1 The responsibility and methods used to collect and handle dry, wet, and liquid waste and store it prior to removal from the premises shall be documented and implemented.

RESPONSE: COMPLIANT

12.8.1.2 Waste shall be removed on a regular basis and not allowed to build up in food handling or storage areas. Designated waste accumulation areas shall be maintained in a clean and tidy condition until external waste collection is undertaken.

RESPONSE: COMPLIANT

12.8.1.3 Trolleys, vehicles, waste disposal equipment, collection bins, and storage areas shall be maintained in a serviceable condition and cleaned and sanitized regularly so as not to attract pests and other vermin.

RESPONSE: COMPLIANT

12.8.1.4 Where applicable, a documented procedure shall be in place for the controlled disposal of trademarked materials. Where a contracted disposal service is used, the disposal process shall be reviewed regularly to confirm compliance.

RESPONSE: COMPLIANT

12.8.1.5 Inedible waste designated for animal feed shall be stored and handled so that it will not cause a risk to the animal or further processing. If denaturant is used to identify inedible waste, it shall be demonstrated that it does not pose a risk to animal health.

RESPONSE: COMPLIANT

12.8.1.6 Reviews of the effectiveness of waste management will form part of regular hygiene inspections and the results of these inspections shall be included in the relevant hygiene reports (refer to 2.5.4.3).

12.8.1.7 A procedure shall be in place to ensure drainage wastewater is effectively removed from the storage areas (refer to 12.1.2.2). If stored and/or treated on the premises, it shall be stored in a separate storage facility and suitably contained. Inspections of the drainage system and wastewater storage shall be included in the regular site inspections (refer to 2.5.4.3).