



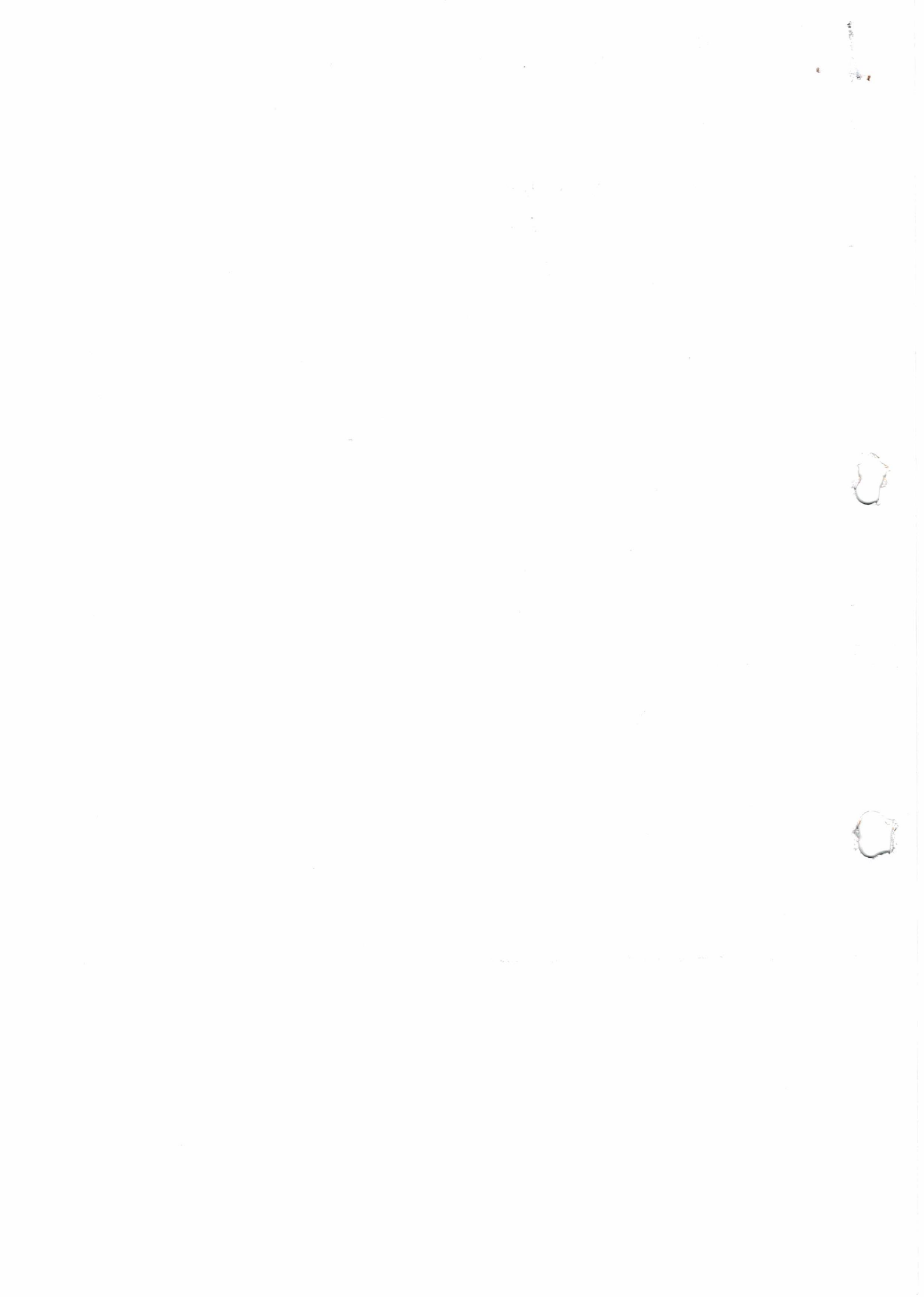
IND-EXPO CERTIFICATION LIMITED

INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME

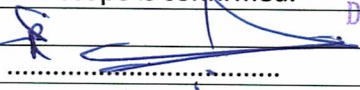
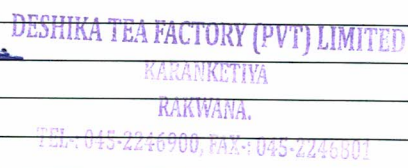
STAGE II AUDIT REPORT

ISO 22000:2005

Deshika Tea Factory (PVT) LTD



**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
STAGE II AUDIT REPORT – ISO 22000:2005**

1. NAME OF ORGANIZATION : Deshika Tea Factory (Pvt) Limited	
2. ADDRESS OF HEAD OFFICE : Karaketiya, Rakwana	
3. ASSESSMENT SITE/S : Same as 2	
4. CONTACT DETAILS :	
4.1 Name : Mr.Wijitha Kumara	Designation : Operations manager
4.2 Tel : - 2246900 Mob: - Fax : 045-2246801 E-mail : deshikatea@yahoo.com	
4.3 E-mail :	
5. NO. OF EMPLOYESS : 130	
6. APPLICABLE STANDARD : ISO 22000:2005	
7. FILE NO. : IMSC-FSMS-054	
8. NACE CODE / SUBCATEGORY : C IV	
9. SCOPE OF CERTIFICATION : Manufacturing of Black Tea	
10. CONFIRMATION FOR SCOPE OF CERTIFICATION :	
The scope is confirmed.	
 Signature	
11. DATE OF AUDIT & Time : 2017-11-13	
12. TYPE OF AUDIT : Stage II	
13. AUDIT TEAM :	
Ms.Kema Arulanandam	Team Leader
Ms.Amani Wijesinghe	Team Member

DESHIKA TEA FACTORY (PVT) LIMITED

ESTD 1972

KALPA

TEA FACTORY



**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
STAGE II AUDIT REPORT – ISO 22000:2005****14. AUDIT OBJECTIVES:**

The objectives of this audit were:

- to confirm that the management system conforms with all the requirements of the audit standard;
- to confirm that the organization has effectively implemented the planned management system;
- to confirm that the management system is capable of achieving the organization's policy objectives.

15. ANY DEVIATIONS FROM THE AUDIT PLAN AND REASONS:**16. ANY SIGNIFICANT ISSUES IMPACTING ON THE AUDIT PROGRAMME:****17. AUDIT FINDINGS :****17.1 Food Safety Management System (4 of ISO 22000):****General requirements (4.1 of ISO 22000):**

Scope has been defined. Food Safety hazards have been identified. Hazard analysis done and communicated to relevant personnel.

Documentation requirements (4.2 of ISO 22000):**General (4.2.1 of ISO 22000):**

Documented food safety policy and related objectives are included in the system. FSMS Manual, HACCP Manual, Procedures and PRPs are available. All mandatory procedures and records required by standard have been established.

Control of Documents (4.2.2 of ISO 22000):

Documented procedure covering the relevant requirements of ISO 22000:2005 was available and implemented. Procedure has defined controls for approval of documents for adequacy prior to issue, However certain documents were not controlled in the system Ex: Food Safety Team, Dryer temperature records (NCR-01)

Controls of Records (4.2.3 of ISO 22000):

Documented procedure covering the relevant requirements of ISO 22000:2005 was available and implemented. Procedure has defined the controls needed for the identification, storage, protection, retrieval, retention time and disposition of records

17.2 Management Responsibility (5 of ISO 22000):**Management commitment (5.1 of ISO 22000):**

Top management has provided their commitment to the development and implementation of the food safety management system and to continual development.

Food safety policy(5.2 of ISO 22000):

Top management had defined, documented and communicated food safety policy in line with ISO standards and it is supported by objectives.

**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
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Planning of the food safety management is in par with ISO 22000 standard.

Responsibility and authority (5.4 of ISO 22000):

Responsibility & Authority for the proper functioning of the system documented in the food safety manual. They are circulated among relevant personnel.

Food safety team leader (5.5 of ISO 22000):

The Operations Manager has been appointed as the food safety team leader. He has more than 2 years experience in the same industry.

Communication (5.6 of ISO 22000):**External communication (5.6.1 of ISO 22000):**

MD is designated with responsibilities for communicate with external parties such as customer, supplier, contractors and legal authorities. Agreement with customers, suppliers available and implemented.

Internal communication (5.6.2 of ISO 22000):

Designated personnel have responsibility for communication. Internal communication is through discussions, meetings.

Emergency preparedness and response(5.7 of ISO 22000):

Documented procedure is available for Emergency preparedness and response. Fire and power failure have been identified as potential emergencies.

Management review(5.8 of ISO 22000):

Management review has been conducted at planned intervals according to the food safety manual.

17.3 Resource management (6 of ISO 22000):**Provision of resources (6.1 of ISO 22000):**

Resources necessary to implement and maintain the FSMS have been provided.

Human resources (6.2 of ISO 22000):

For year 2017 trainings were done and records were available. Effectiveness of trainings has been evaluated.

Infrastructure (6.3 of ISO 22000):

Organization provided the infrastructure for the establishment and maintenance of the infrastructure needed to implement the requirements of ISO 22000 standard.

Work environment (6.4 of ISO 22000):

Organization had provided adequate resources for establishment, management and maintenance of the work environment needed to implement the requirements of food safety management system.

17.4 Planning and realization of safe products (7 of ISO 22000):**General (7.1 of ISO 22000):**

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**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
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The organization has implemented, operated and effectiveness of planned activities ensured.

Prerequisite programme (7.2 of ISO 22000):

PRPs required by ISO 22000:2005 have been documented in the FSMS manual and implemented. Characteristics of raw materials and end products have been described. Physical, chemical and biological food hazards documented.

However following deviations were observed in PRPs during the audit:

1. Medical report for FSTL was not available (As a food handler with no communicable diseases),
2. Dustbin was not closed at fermenting area
3. Cleaning of floor at fermenting area was not done properly. **(NCR – 02)**

Preliminary steps to enable hazard analysis (7.3 of ISO 22000):

General (7.3.1 of ISO 22000): Relevant information needed to conduct the hazard analysis available and documented.

Food safety team (7.3.2 of ISO 22000):

A food safety team has been appointed consisting of a combination of multidisciplinary knowledge and experience in food safety.

Product characteristics (7.3.3 of ISO 22000):

Characteristics of Raw materials are described in FSMS manual. Finished products characteristics are also described in the FSMS documentation.

Intended use (7.3.4 of ISO 22000):

Intended use of products has been addressed in the food safety manual.

Flow diagram, process step and control measures (7.3.5 of ISO 22000)

Flow diagrams available for all the processes.

HACCP analysis (7.4 of ISO 22000):

Hazard identification and determination of acceptable levels identified and recorded. Hazard assessment done using risk assessment method. CCP and OPRPs are identified.

Establishing the operational prerequisite program (OPRPs) (7.5 of ISO 22000):

OPRP have been documented and implemented. Control measures and monitoring procedure was available. Responsibilities and authorities have been defined.

Establishing the HACCP plan (7.6 of ISO 22000):

HACCP plan had documented.

Updating of preliminary information and documents specifying the PRPs and the HACCP plan (7.7 of ISO 22000): Organization established HACCP system and HACCP plan and the procedures and instructions specifying the PRPs very first time.

Verification planning (7.8 of ISO 22000):

Verification plan documented and include purpose, method, frequency, responsibility and relevant

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records. PRPs, hazard analysis and OPRPs are verified. Responsibilities for verification activities identified in the verification plan of the FSMS manual.

Traceability system (7.9 of ISO 22000):

Raw material identified by a tag or label indicating the name of the material including the date of receipt and date of expire .Finished products have been tagged with the date of receipt and date of expire, stored in a specified storage location under proper condition. Prepared products traceable via the batch numbers.

Control of non conformity (7.10 of ISO 22000):

Documented procedures are available for corrections and corrective actions, handling of potentially unsafe products as per the requirements of ISO 22000:2005.

17.5 Validation, verification and improvement (8 of ISO 22000):**General (8.1 of ISO 22000):**

The food safety team planned and implemented the processes needed to validate control measures, control measure combinations, and to verify and improve the food safety management system.

Validation of control measure combinations (8.2 of ISO 22000):

Control measures validation done by FST members internally with respect to changes of CCPs, OPRPs.

Control of monitoring and measuring (8.3 of ISO 22000):

Dryer and measuring scales were calibrated. Calibration records were available.

Food safety management system verification (8.4 of ISO 22000):

Documented procedure available for internal audit covering the requirements of 8.4.1of ISO 22000: 2005. Internal audit has been conducted according to the internal audit procedure however internal audit schedule was not available **(OB-01)**

Improvement (8.5 of ISO 22000):

Organization had ensure that the organization continually improves the effectiveness of the food safety management system through the use of communication , management review, internal audit, validation of control measure combination, corrective actions and food safety management system updating.

18. APPLICABLE LEGAL REQUIREMENTS: Food act, Food (hygiene) regulations and other food regulations, EPL

19. ANY UNRESOLVED ISSUES: No

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20. OVERALL CONCLUSION OF THE AUDIT

Audit is based on a sampling process of the available information at the point of auditing and the audit methods used were interviews, observation of activities and review of documentation and records. With consideration to the findings identified on the report the overall conclusions of the audit are as follow:

- The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system. YES NO
- The organization has demonstrated effective implementation and maintenance /improvement of its management system. YES NO
- The organization has demonstrated the establishment and tracking of Appropriate key performance objectives and targets and monitored progress towards their achievement. YES NO
- The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system. YES NO
- The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. YES NO
- Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. YES NO

21. MAJOR NON-CONFORMITIES: None

22. MINOR NON-CONFORMITIES:

1. certain documents were not controlled in the system Ex: Food Safety Team, Dryer temperature records **(NCR-01)**
2. Following deviations were observed in PRPs during the audit:
 1. Medical report for FSTL was not available (As a food handler with no communicable diseases),
 2. Dustbin was not closed at fermenting area
 3. Cleaning of floor at fermenting area was not done properly. **(NCR – 02)**

23. OPPORTUNITIES FOR IMPROVEMENT:

1. Internal audit schedule was not available **(OB-01)**

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24. RECOMENDATION FROM AUDIT TEAM:

The audit team concludes that the organization has has not established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives.

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Granted continued the certification subjected to the completion and subsequent verification of corrective action for all minor non conformities raised. Suspended until satisfactory corrective action is completed.

Signature of Team Leader :  Date: 2017-11-13

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25. RECOMMENDATION BY AUDIT TEAM :

Recommended for the certification subject to corrective action to raised non conformities .

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Signature of Team Leader

2017-11-13
.....
Date

.....
Signature of Team Member -1

.....
Date

.....
Signature of Team Member - 2

.....
Date

26. RECOMMENDATION BY CERTIFICATION MANAGER:

Recommended for the certification .

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Signature of Certification Manager

07/12/2017
.....
Date

27. APPROVAL FOR SUBMISSION TO THE CERTIFICATION COMMITTEE:

Approved

.....
Signature of Director

07/12/2017
.....
Date

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