IND-EXPO CERTIFICATION LIMITED

INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME

SURVEILLANCE AUDIT REPORT

ISO 22000:2005

(Chillico Foods Pvt Ltd)

INDEXPO CERTIFICATION LIMITED

INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
SURVEILLANCE AUDIT REPORT – ISO 22000:2005

1. NAME OF ORGANIZATION : Chillico Foods Pvt Ltd

2. HEAD OFFICE ADDRESS : Industrial estate , Nawalapitiya road, Ulapane

3. SITES AUDITED : same as 2

4. CONTACT DETAILS

4.1 Name : Mr.Subahani Iqbal **Designation:** Managing Director

4.2 **Tel :** -- **Mobile :** +94776266654 **Fax :** --

4.3 E-mail: subahani@chillicofoods.com

5. NO. OF EMPLOYESS : 14

6. APPLICABLE STANDARD : ISO 22000:2005

7. FILE NO. : IMSC-FSMS-061

8. PRODUCTS MANUFACTURED : Spices

9. APPLICABLE SECTOR : (CIV) Processing of ambient stable products

10. SCOPE OF CERTIFICATION : Manufacturing of chillie powder, chillie pieces, curry powder, roasted curry powder, turmeric powder, pepper powder, cumin seed powder

11. TYPE OF AUDIT: Surveillance I

12. DATES OF AUDIT: 2019/01/08

13. AUDIT TEAM :

Mr.D.N.S.Kuruppumullage	Team Leader
Ms. Chalani Jayasuriya	Auditor

14. AUDIT OBJECTIVES:

The objectives of this audit were:

- to confirm that the management system complies with all the requirements of the audit standard;
- to confirm that the organization has effectively continue the planned management system;
- to verify whether there is any changes , incidence that could adversely affect the management system

15. ANY DEVIATIONS FROM THE AUDIT PLAN AND REASONS: none

16. ANY SIGNIFICANT ISSUES IMPACTING ON THE AUDIT PROGRAMME: none

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. Company has no any outsourced process relevant to the operation.

Documentation Requirements (4.2 of ISO 22000) :
General (4.2.1 of ISO 22000): Documented food safety policy and objective has been included in the system. However 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, ensured that externally originated documents are identified and their distribution controlled.

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. Management review meetings were conducted and availability of resources has been ensured.

Food Safety Policy (5.2 of ISO 22000): There is no objectives established on food safety management system for 2018-2019 (NCR 01)

Food Safety Management System Planning (5.3 of ISO 22000): 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): Proprietor has been assigned as a Food safety team leader and having experience in the industry more than 10 year experience.

Communication (5.6 of ISO 22000):
External communication (5.6.1 of ISO 22000): The food safety team leader is responsible for external communication.

Internal communication(5.6.2 of ISO 22000): The Management of the company is responsible for internal communication. Internal communication is through discussions, meetings. Food safety team has been periodically met and discuss changes that affect FSMS implementation.

Emergency Preparedness and Response (5.7 of ISO 22000): Documented procedure is available for Emergency preparedness and response. Fires, power failure, have been identified as potential emergencies.

Management Review (5.8 of ISO 22000): Management review has not been conducted as per the organization policy.(NCR 02)

14.3 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): Training plan not available for 2018-2019 and training has not been done (NCR 03)

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): There is no PPE's given the workers (ex: ear plugs) ,who working inside operations (OB 01)

Trip switches has not checked regularly (OB 02)

Belt drive has been observed without a cover (OB 03)

17.4 Planning and Realization of Safe Food (7 of ISO 22000):
General (7.1 of ISO 22000): The organization has implemented, operated and effectiveness of planned activities ensured.

Prerequisite Programmes (PRPs) (7.2 of ISO 22000):

Medical testing has not been done for few employees. Ex: vindya, senevirathna (NCR 04)

The drying yard used to dry washed spices are not covered (NCR 05)

Certain observations has been noted during the audit which can lead future non conformities such as,

- Raw material spills observed at store area (OB 04)
- Pest controlling not effective .ex: flies observed at production and few rat droppings observed. (OB 05)
- Cooling and mixing process carried out on a tray not adequate for purpose (OB 06)
- Floor damaged observed (OB07)

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. There are three members have been appointed in the team representing Factory, quality assurance and maintenance.

Product Characteristic (7.3.3 of ISO 22000): Characteristics of Raw materials has been 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 steps and Control measures (7.3.5 of ISO 22000): Flow diagrams available for all the processes. Flow diagram should cover the entire step from raw material receiving to the end product release and the control measures to be sufficiently detailed.

Hazard Analysis (7.4 of ISO 22000): Hazard identification and determination of acceptable levels identified and recorded.one OPRP has identified hazard assessment. NCR raised at 7.3.5

Establishing the Operational prerequisite Programmes (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): CCP has identified and moisture level controlling done. However correction and corrective action mentioned at the HACCP plan is not actual practice (ex:

although company re-drying it as a corrective action, plan mentioned company reject the same when exceeding moisture level.(NCR 06)

Updating of preliminary Information and Documents Specifying the PRPs and HACCP plan (7.7 of ISO 22000): Organization has been updated HACCP system and HACCP plan and the procedures and instructions specifying the PRPs amended.

Verification Planning (7.8 of ISO 22000): Verification plan documented and include purpose, method, frequency, responsibility and relevant 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): Traceability system has implemented and batch numbers, production date and invoice numbers are used to trace the products.

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 of the FSMS(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 and there are no any changes of the either CCPs or OPRPs in recent past.

Control of Monitoring and measurement (8.3 of ISO 22000): Monitoring and measuring equipment calibrated as per calibration schedule and records available

Internal Audit (8.4 of ISO 22000): Internal audit has not been done as per the defined interval mentioned in manual. (NCR 07)

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, evaluation of individual verification results, analysis of results of verification activities, 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.

19. **ANY UNRESOLVED ISSUES:** No any unresolved issues noted during the audit

REVIEW OF PREVIOUS AUDIT REPORT & VERIFICATION OF EFFECTIVENESS OF CORRECTIVE ACTIONS FOR PREVIOUSLY IDENTIFIED NON-CONFORMITIES: Corrective actions have been taken and effectiveness verified.

20. **USE OF LOGO:** Use of logo in par with the "a Conditions for Use of Logo" document issued by Ind-Expo Certification Ltd., Logo is used in only website

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

22. MAJOR NON-CONFORMITIES:

1. Management review has not been conducted as per the organization policy.(NCR 02)

23. MINOR NON-CONFORMITIES:

1. There is no objectives established on food safety management system for 2018-2019 (NCR 01)
2. Training plan not available for 2018-2019 and training has not been done (NCR 03)
3. Medical testing has not been done for few employees. Ex: vindya, senevirathna (NCR 04)

4.The drying yard used to dry washed spices are not covered (NCR 05)

5.CCP has identified and moisture level controlling done. However correction and corrective action mentioned at the HACCP plan is not actual practice (ex: although company re-drying it as a corrective action, plan mentioned company reject the same when exceeding moisture level.(NCR 06)

6. Internal audit has not been done as per the defined interval mentioned in manual. (NCR 07)

24. OPPORTUNITIES FOR IMPROVEMENT:

1. There is no PPE's given the workers (ex: ear plugs) ,who working inside operations (OB 01)

2. Trip switches has not checked regularly (OB 02)

3 .Belt drive has been observed without a cover (OB 03)

4.Raw material spills observed at store area (OB 04)

5. Pest controlling not effective .ex: flies observed at production and few rat droppings observed. (OB 05)

6.Cooling and mixing process carried out on a tray not adequate for purpose (OB 06)

7.Floor damaged observed (OB07)

25. RECOMENDATION FROM AUDIT TEAM:

(Strike off which is not relevant)

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 / ~~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 ~~major~~/minor non conformities raised / S~~uspended~~ until satisfactory corrective action is completed.

ANY OTHER COMENTS:

Signature of Team Leader : .....Date: 2019/01/08.....

- *This page is for internal purposes only.*

26. RECOMMENDATION BY AUDIT TEAM :

Recommended for continuation on successful completion of corrective action for NCRS Raised.

..... 2019-01-08.....
Signature of Team Leader Date

..... 2019/1/08
Signature of Team Member -1 Date

.....
Signature of Team Member - 2 Date

27. RECOMMENDATION BY CERTIFICATION MANAGER:

All NCRs have been closed, it recommended for continuation.

..... 2019/03/23
Signature of Certification Manager Date

28. APPROVAL FOR SUBMISSION TO THE CERTIFICATION COMMITTEE:

Approved

..... 2019/03/23
Signature of Director Date