
IND-EXPO CERTIFICATION LIMITED
MANAGEMENT SYSTEMS CERTIFICATION SCHEME
NON-CONFORMITY REPORT

Name of Organization: Nature's Wellness (Pvt) Ltd

NC No.: 03 of 04

Section: ~~7.2.5.1~~ Production

Team Leader: Mr. Anura Amaradasa.

Relevant Standard: ISO 22000:2005

Auditor: —

Relevant Clause: 7.2.1)

Date of audit: 2017-03-03

Relevant company document: ~~QSR~~ PRP Manual

Non-conformity detected

Category: Major/Minor

- I - Medical test has not been done as per the food hygiene regulation
- II - Personnel hygiene inspection is not effective, It is observed some workers with long nails.


.....
Auditor


.....
Team Leader:

Correction:

I - None

II - Advised the workers to behave hygienically.


.....
Auditee (FSTL)

06.03.2017
.....
Date

Root cause for Non-conformity

- I - Regular refresher training is yet to be implemented.
- I - Since the full cadre of workers have not been recruited, we have postponed the medical test of employees.


.....
Auditee

06.03.2017
.....
Date

Doc. No.: QP-18-F-01

Reviewed and approved by: Director

Issue No.: 06

Issue Date: 2014-06-09
Issued by Management Representative

Page 01 of 02

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IND-EXPO CERTIFICATION LIMITED
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Corrective action

Date of completion: *Immediately*

- i* - Will send the current workers for medical tests.
- ii* - Periodic training on hygiene matters will be enforced.

.....
Kushan
Auditee

.....
06.03.2017
Date

Verification of corrective action

NC Closed/Open

Evidence provided for the corrective action taken is verified.

.....
[Signature]
Auditor

.....
20/03/2017
Date

Effectiveness of corrective action


.....
Auditor

.....
Date

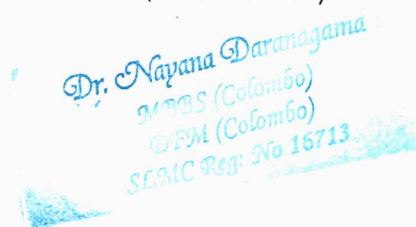
MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. M. S. N. Perera bearer of National Identity Card No. 650640950 V and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017


Name and signature
Registered Medical Practitioner

(Official Seal)



Dr. Nayana Daranagama
M.B.S (Colombo)
D.F.M (Colombo)
S.C.M.C Reg: No 16713



MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. M. M. Gnanarathne bearer of National Identity Card No. 653472404V and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017


.....
Name and signature
Registered Medical Practitioner

(Official Seal)


Dr. Nayana Daramagama
M.D.S (Colombo)
D.F.M (Colombo)
SCMC Reg. No 16713




ST. JOHN'S
UNIVERSITY
LIBRARY
1000 UNIVERSITY AVENUE
ST. JOHN'S, Nfld. A1B 4X6

MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. W. L. SISIRA Kumara..... bearer of National Identity Card No. 533311830 V..... and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017.....


.....
Name and signature
Registered Medical Practitioner

(Official Seal)

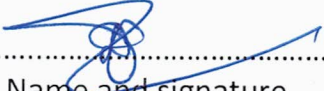
Dr. Nayana Daranagama
MBBS (Colombo)
DPM (Colombo)
SCA'C Reg. No 16713



MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. H. D. Kushan C. Wijesinghe bearer of National Identity Card No. 902940138 V and certify that he/~~she~~ is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/~~she~~ is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017


Name and signature
Registered Medical Practitioner


(Official Seal)

Dr. Nayana Daranagama
MBBS (Colombo)
DPM (Colombo)
SCMC Reg. No 16713

MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./M^s. H. M. Dilanka Lakma..... bearer of National Identity Card No. 940820103 V..... and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017.....


.....
Name and signature
Registered Medical Practitioner


(Official Seal)

Dr. Nayana Daranagama
MBS (Colombo)
DTM (Colombo)
SCMC Reg No 16713

MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. S. A. Duminda Lakshan bearer of National Identity Card No. 910211242 V and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017


Name and signature
Registered Medical Practitioner


(Official Seal)

Dr. Nayana Daranagama
MBBS (Colombo)
DPM (Colombo)
S.M.C Reg: No 16713

MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. W.E. Sreemal Bhagya..... bearer of National Identity Card No. 94.322.1596.V..... and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017.....


.....
Name and signature
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SCDIC Reg: No 16713

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MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of
Mr./Ms. P. M. Madhusani D Lankoon..... bearer of
National Identity Card No. 917801215 V...... and certify that he/she is
not suffering from any communicable disease or carrier of any pathogen which
constitutes a threat or potential threat to food safety and that he/she is not
afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017.....


.....

Name and signature
Registered Medical Practitioner

(Official Seal)


Dr. Nayana Daranagama
MBS (Colombo)
DFM (Colombo)
SLMC Reg. No 16713

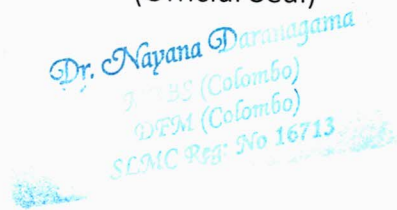
MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. M. A. Ajantha Priyadarshana bearer of National Identity Card No. 802684517 V and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017


Name and signature
Registered Medical Practitioner

(Official Seal)



Dr. Nayana Daranagama
MBBS (Colombo)
DPM (Colombo)
SCMC Reg. No 16713

Dr. Stephen D. ...
(odmalo) ...
(odmalo) ...
1971 ...

MEDICAL CERTIFICATE ISSUED TO FOOD HANDLER

I have physically examined after appropriate laboratory investigations of Mr./Ms. A. M. Dinesh Chathuranga..... bearer of National Identity Card No. 893131540 V..... and certify that he/she is not suffering from any communicable disease or carrier of any pathogen which constitutes a threat or potential threat to food safety and that he/she is not afflicted with infected wounds, skin infection, sores or diarrhoea.

Date: 25/03/2017.....


.....
Name and signature
Registered Medical Practitioner

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Dr. Nayana Daranagama
MBBS (Colombo)
DPM (Colombo)
SEMC Reg: No 16713



Dr. B. S. Prasad
(Dr. B. S. Prasad)
Dr. B. S. Prasad
Dr. B. S. Prasad