

IND-EXPO CERTIFICATION LIMITED

INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME

SURVEILLANCE AUDIT REPORT

ISO 22000:2005

Rasoda Dairies (Pvt) Ltd



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1. NAME OF ORGANIZATION : Rasoda Diaries (Pvt) Ltd		
2. HEAD OFFICE ADDRESS : Alugamuwa Road, Beddegama, Bamunukotuwa.		
3. SITES AUDITED : Same as 2.		
4. CONTACT DETAILS		
4.1 Name : Ms. Anuththara	Designation : Quality Assurance Executive	
4.2 Tel : +94377200560	Mobile : +94711527066	Fax : +94377206306
4.3 E-mail: rasodaquality@gmail.com		
5. NO. OF EMPLOYESS : 85		
6. APPLICABLE STANDARD : ISO 22000:2005		
7. FILE NO. : IMSC-FSMS- 057		
8. PRODUCTS MANUFACTURED: Set plain yogurts, jelly yogurt, drinking yogurt and curd in bulk and retail packs and ice creams in bulk and retail packs & ice lollies.		
9. APPLICABLE SECTOR : (CIV) Manufacturing of Ambient stable products		
10. SCOPE OF CERTIFICATION : Manufacturing of fermented dairies (Set plain yogurt, jelly yogurt, drinking yogurt and curd in bulk and retail packs) and frozen desserts (Ice creams – in bulk and retail packs & ice lollies)		
11. TYPE OF AUDIT: Surveillance II		
12. DATES OF AUDIT: 2019-10-08		
13. AUDIT TEAM :		
Mr.D. N. S. Kuruppumullage	Team Leader	
Ms. Mihiri Fernando	Team Member	
Ms. Buddhika Sajeewani	Team Member	

**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
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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: No deviations have detected on audit plan during the audit.

16. ANY SIGNIFICANT ISSUES IMPACTING ON THE AUDIT PROGRAMME: No significant issues have been raised during 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, 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 was ensured.

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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.

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. However responsibility and authority of food safety team leader was identified and appointment letter has been given to the food safety team leader.

Food Safety Team Leader (5.5 of ISO 22000): The Quality Assurance Executive has been appointed as the food safety team leader.

Communication (5.6 of ISO 22000):

Internal communication (5.6.1 of ISO 22000): Designated personnel have responsibility for communication. Internal communication is through discussions, meetings. Food safety team shall periodically meet and discuss changes that affect FSMS implementation.

External communication (5.6.2 of ISO 22000): Personnel are designated with responsibilities for communicate with external parties such as customer, supplier, contractors and legal authorities. Agreement with customers, suppliers available and implemented.

Emergency Preparedness and Response (5.7 of ISO 22000): Documented procedure is available for Emergency preparedness and response.

Management Review (5.8 of ISO 22000): Management review has been conducted annually. However It has not been conducted as per the process.

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): The food safety team and the other personnel carrying out activities having an impact on food safety are competent and have appropriate education, training, skills and experience. Awareness on food safety management system requirements are not adequate. **(NCR 01)**

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.

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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):

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.

Updating of PRPs, hazard analysis, OPRPs and HACCP plan shall be periodically planned and carried out. Records shall be maintained.

Water test results of report on 02/10/2019 is out of specification limits. But company has not been taken any actions. **(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 Characteristic (7.3.3 of ISO 22000): Characteristics of raw materials & finished products are described in FSMS manual.

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.

Hazard Analysis (7.4 of ISO 22000): Hazard identification and determination of acceptable levels identified and recorded.

Establishing the Operational prerequisite Programmes (OPRPs) (7.5 of ISO 22000): OPRPs have been documented and implemented. Responsibilities and authorities have been defined.

Establishing the HACCP plan (7.6. of ISO 22000): HACCP plan had documented and control points have been established where necessary.

Updating of preliminary Information and Documents Specifying the PRPs and HACCP plan (7.7 of

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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. Responsibilities for verification activities identified in the verification plan of the FSMS manual. Internal audits have been conducted as per the frequency defined in the procedure manual.

Traceability System (7.9 of ISO 22000): Traceability available through incoming inspection check list, invoice and purchase order.

Control of Non Conformity (7.10 of ISO 22000): Calibration for thermometers has been carried out. There is no authorization procedure for disposition of non-conforming products. E.g.: Expired products, spoiled products. **(NCR 03)**

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 by FST members internally with respect to changes of CCPs, OPRPs. There are no any changes of the either CCPs or OPRPs in recent past.

Control of Monitoring and measurement (8.3 of ISO 22000): Calibration for thermometers have been carried out and records maintained. Calibrations are carried out internally company by itself, there is a written procedure to address calibration.

Internal Audit (8.4 of ISO 22000): Documented procedure available for internal audit covering the requirements of 8.4.1of ISO 22000: 2005. Non-conformity reports raised for previous internal audit have been closed after the implementation of corrective actions.

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



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18. **APPLICABLE LEGAL REQUIREMENTS:** Food act and other applicable regulations

19. **ANY UNRESOLVED ISSUES:** None

20. **REVIEW OF PREVIOUS AUDIT REPORT & VERIFICATION OF EFFECTIVENESS OF CORRECTIVE ACTIONS FOR PREVIOUSLY IDENTIFIED NON-CONFORMITIES:**

Previous audit report and effectiveness of corrective actions for previously identified non conformities were verified.

21. **USE OF LOGO:** Logo can be used as per the certification body terms and conditions.

22. **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



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23. MAJOR NON-CONFORMITIES: None

24. MINOR NON-CONFORMITIES:

- 1. Awareness on food safety management system requirements are not adequate. **(NCR 01)**
- 2. Water test results of report on 02/10/2019 is out of specification limits. But company has not been taken any actions. **(NCR 02)**
- 3. There is no authorization procedure for disposition of non-conforming products. E.g.: Expired products, spoiled products. **(NCR 03)**

25. OPPORTUNITIES FOR IMPROVEMENT: None

26. 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 / ~~Suspended~~ until satisfactory corrective action is completed.

ANY OTHER COMENTS:

Signature of Team Leader :Date:.....

• *This page is for internal purposes only.*

27. RECOMMENDATION BY AUDIT TEAM :



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Signature of Team Leader Date
M. Javed
Signature of Team Member -1 2019-10-08
Date
.....
Signature of Team Member - 2 Date

28. RECOMMENDATION BY CERTIFICATION MANAGER:

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Signature of Certification Manager Date

29. APPROVAL FOR SUBMISSION TO THE CERTIFICATION COMMITTEE:

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Signature of Director Date