



Audit Report
Global Standard Packaging Materials Issue 6: August 2019

1.Audit summary							
Company name	Cumberland Packagir	ng Ltd	BRCGS site code	4477975			
Site name	Shoeburyness	Shoeburyness					
Scope of audit	fibre board to produce with cut or un-cut pure	The flexographic printing, die-cutting, slotting, gluing and stitching, of corrugated fibre board to produce plain and printed multipoint glued cases, trays and inserts with cut or un-cut purchased polystyrene void fitments adhered with PVA glue to use as secondary packaging for food and consumer products.					
Scope exclusions	None	None					
Justification for exclusion	N/A	N/A					
Start date	2024-04-09	2024-04-09 Finish date 2024-04-10					
Re-audit due date	2025-07-06	Previo	ous audit date	2023-06-09			

Additional modules included						
Modules	Result	Scope	Exclusions from Scope			
Choose an item	Choose an item					
Choose an item	Choose an item					

2.Audit results						
Audit result	Certificated		Audit Programme	Unannounced		
Audit grade	AA+		Previous audit grade	AA		
Certificate issue date	Select a date		Certificate expiry date	2025-08-17		
Number of non-conformiti	es	Major against S	OI of Fundamental	0		
Critica		Critical		0		
		Major		0		
		Minor		1		

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3.Company details					
Address	Unit 2 - Bay 6, Campfield Road, Shoeburyness, Southend-on-Sea, Essex, SS3 9BX (Production and Storage)		Unit 19 Aviation Way Southend-on-Sea Essex SS2 6UN (Production and storage)		
Country	United Kingdom Telepho		ne	+44(0)1702 298014	
Commercial representative Name	John Watson	Email		jwatson@cpholdings.co.uk	
Technical representative Name	Samuel Field	Email		sfield@cpholdings.co.uk	

4.Company profile							
Plant size (square metres)	<10K sq.m	No. of employees	1-50	No. HARA Plans	1-3		
Subcontracted ac	ctivities	No		'	1		
Outsourced proce	esses	No					
Other certificates	held	FSC Chain of C	FSC Chain of Custody				
Regions exported	I to	None Choose an item.					
Major changes or auditor observations since last BRCGS audit The site has a new technical contact an Mark Bennet has left the business and Samuel Field took over the role during a three month transition and with support from the external consultant.					a three month		
Company description The Company was established in 1985 by John Watson and product Die cut plain and printed corrugated boxes, and shapes and applies polystyrene packaging for void fitments. The products are manufact for food and consumer products customers. The site has ten machines which include a two-colour printer case maker, a two-colour printer slotter, 3 Die cutters a gluing machine and products customers.				es and applies s are manufactured r printer case			
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If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Paul Blake





4.Company profile	
	various other ancillary machines. The Company has an integrated Quality and Hygiene Management system with procedure and systems that are in compliance with the requirements of the BRCGS Standard for Packaging Materials version 6. The site employs 65 persons with only 35 on site at any one time at Campfield Road, and 20 employed at Aviation Close with a max of 10 on site., production and storage areas work 06:30 to 13:30 and 13:00 to 21:30 Monday to Friday. Campfield Road is 2500 square metres in size. And Aviation Way 5000 sqm in size and 7.3 miles away. The site has been SMETA audited by BVQI and passed, the reports being uploaded to the SEDEX Website. This was an unannounced and the shop floor tour started within 30 minutes.

5.Product and process characteristics				
Manufacturing Categories	02 - Papermaking 07 - Print processes Please select Please select Please select Please select			
Products in production at the time of the audit	Printed and plain glued and stapled boxes and trays for consumer items were in production at the time of the site inspection.			

6.Audit duration details					
Total audit duration	12 hours	Duration of production facility inspection	4 hours		
Reasons for deviation	No deviation, P6060Compliant				
Next audit type selected	Announced				

Audit Duration per day					
Audit Day	Date	Start Time	Finish time		
1	2024-04-09	09:00	16:30		
2	2024-04-10	08:30	13:00		

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Auditor information					
Auditor number	Auditor Name	Role			
20340	Paul Blake	Auditor			
Click or tap here to enter text.		Please select			

Present at audit Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings							
Name/Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting			
Samuel Field – Senior Operation Manager	On site	On site	On site	On site			
Damon Bines – Compliance manager	On site	On site	On site	On site			
MartinShields – Production Manager Aviation Way		On site					
Acwianna Micigolska – Gluing Supervisor		On site					
Arron Lester – Machine Operator		On site					

GFSI Audit History							
Date	Scheme/Standard	Announced/Unannounced					
2021-06-15	BRCGS Packaging Materials	Announced					
2022-06-29	BRCGS Packaging Materials	Announced					
2023-06-08	BRCGS Packaging Materials	Announced					

Document control						
CB Report number UK/BRC/304						
Template Name	P609 Packaging Materials	Audit Report Template v11				
Standard Issue	6	Template issue date	2022-02-15			

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Directory allocation	PackMat	Version	1.0
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Non-Conformity Summary Sheet

Major	Major non-conformity against statement of intent of a fundamental requirement								
No.	Clause	Detail	Critical or Major	Re-audit date					

Critical Control of the Control of t							
No.	Clause	Detail	Re-audit date				

Majo	Major Company of the								
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by		

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Mino	linor									
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by			
1	6.3.3	Mixed personal and workwear on hooks in locker rooms.	Personal and workwear have been segregated in each locker room.	Signage has been implemented and daily checklists have been assigned to the relevant supervisors to ensure compliance.	Internal audits did not identify this issue.	2024-05-10	Paul Blake			

Comments on non-conformities

Click or tap here to enter text.

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Additional Modules/Head Office Non-Conformity Summary Sheet

Critica	Critical Cri						
No	Clause	Re-audit date					

Majo	Major Control of the								
No	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by		

Minc	Minor									
No	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by			

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Detailed Section

1. Senior management commitment

1.1 Senior management commitment and continual improvement

The site has a Company Quality Policy in place, that includes a commitment to produce safe and legally compliant packaging, signed by Managing Director JW, staff are made aware of it by its inclusion in their induction and it is on display on noticeboards.

The Company have produced a development plan for their Quality and Safety Culture that includes an anonymous questionnaire completed February 2023, with results better than expected, 79% of the site believing that they are in a good place. Engaged a new consultant to assist the site forward, annual staff appraisals, open door policy, suggestion boxes, QR code reporting system any issue the staff member may have, whistleblowing Policy, including an impartial individual's telephone number and monitor staff turnover. This is all documented on a culture plan. The plan is reviewed at least annually during the Management review meeting.

The site holds annual management review meeting (not held this year yet, booked 20th April 2024) where clear objectives to maintain and improve the quality, safety and legality of products manufactured, currently these are: -

- Maintain BRCGS certification at AA grade, achieved AA in 2022.
- OTIF target of 90%, achieved 91% in 2021, achieved 88% in 2022.
- Customer complaints to be less than 2% of total orders delivered, achieved 1.8% in 2022.
- Customer satisfaction survey results to be at >85%. Achieved 81% due to board supply issues.

These are documented with clear targets or measures of success and communicated to the relevant staff by in the Atlas communications system following the meeting. The last meeting was held in April 2023 with the next scheduled in the 4th week of this month.

The company has provided the human and financial resources required for the production of safe packaging materials to the required quality and in compliance with this Standard by dedicating a manager to be responsible maintaining the standard on site, supported by Employing an external consultant and the company providing the required buildings, equipment and personnel.

The site keeps up to date with changes to scientific and technical developments, industry codes of practice, all relevant legislation applicable in the country of manufacture and the country of use where known, by the use of an external consultant, follow the FEFCO book, membership of the Sheet Plant Association, and subscribing to a number of industry publications.

The site has a genuine PDF downloaded copy of the Standard available on site.

The site has ensured that this audit has taken place within the required window that ends on the 6th July 2024 The Senior Operation Manager attended the opening and closing meetings, all other persons required were available as required during the audit.

There were no NCRs raised at the last audit and the site has a process in place using root cause analysis to determine the corrective and preventive actions to be implemented within the required time frame.

The site uses the BRCGS logo on their e-mail footers and web site where it follows the required protocol section (Part III, section 5.6).

Audit Evidence:

Product Safety and Quality Policy Dated February 2024. Management Review Meeting Minutes Dated 20th April 2023.

1.2 Management review

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The site old annual management review meeting with the senior managers in attendance last held April 2023. The topics included: -

- · Minutes of the previous meeting
- Results of audits
- Customer performance indicators, complaints and feedback
- The effectiveness of the HARA Study
- Impact of any legislative and certification scheme changes
- Incidents, corrective actions, out-of-specification results and non-conforming materials
- Resource requirements
- Any objectives that have not been met, understand the underlying reasons. This information shall be
 used when setting future objectives and to facilitate continual improvement
- The effectiveness of the product defence and product fraud prevention plans

The meeting has been recorded and the minutes circulated to the attendees (Managing Director JW, Operations Director CM, Production Manager MB, Accounts Manager JM, Administrations Manager PM, Transportation Manager SW, Design Manager SF, Compliance Officer HM, Assistant Administration Manager, Assistant Production Manager). Actions have been allocated and communicated to the responsible persons, via the Atlas communication system following the meeting., with timescales set. Issues of product safety, legality and quality can be brought to the attention of a senior manager for resolution directly.

Audit Evidence:

Management review meeting minutes dated 20th April 2023 with the next scheduled in the 4th week of this month.

1.3 Organisational structure, responsibilities, and management authority

The site has a current organisational chart in place that defines the management structure and reporting lines. The responsibilities are clearly defined in the responsibilities section the manual and Managers and clearly designated with deputies clearly listed.

Staff are made aware of their responsibilities during their inductions and supported and reinforced during subsequent on the job training, have access to the relevant WI or procedures and follow them whilst carrying out their role.

Audit Evidence:

1.5 Company Organisation Chart issue 2 dated 27th February 2024

Non-applicable clauses

1.1.9 no NCR's raised at previous audit,

2. Hazard and risk management

2.1 Hazard and risk management team

The site has a multi-disciplinary HARA Study team in place comprising the following Operations Manager, Managing Director, Compliance Manager, Operations Director and Senior Account Handler. The team leader is Operations Manager and they have been suitably trained and can demonstrate competence and experience of hazard and risk analysis.

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The team is kept up to date with changes to the factory and customer requirements by the senior management team daily.

Audit Evidence:

HARA Study Issue 10 Dated 4th November 2022.

Training certificate for the HARA Team Leader, Operations Manager, by Gareth Jones of Scope 7th September 2009.

2.2 Hazard analysis and risk assessment

The HARA Study has a scope that is defined as 'The flexographic printing, die-cutting, slotting, gluing and stitching, of corrugated fibre board to produce plain and printed multipoint glued cases, trays and inserts with cut or un-cut purchased polystyrene void fitments adhered with PVA glue to use as secondary packaging for food and consumer products'.

The team has maintained awareness of, and considered: -

- Historical, known and foreseeable product safety hazards associated with specific processes and raw materials
- Intended use if product (where known)
- Known likely product defects that affect safety
- Relevant codes of practice or recognised guidelines
- Legislative requirements

The HARA has a full description of the product including: -

- Composition (raw materials, inks, varnishes, coatings and other print chemicals)
- Origin of raw materials, (including the use of recycled materials if used)
- Intended use of the packaging materials and defined restrictions on use; for example, the physical or chemical conditions.

There is a full process flow diagram in place that includes: -

- Receipt and approval of artwork
- Receipt and preparation of materials such as additives, inks and adhesives
- Each manufacturing process step
- Contract and Specification Review
- Artwork receipt and Approval
- Raw Material
- Storage
- Case making
- Die curtttuing
- Printing
- Gluing
- Finising
- Palletisastion
- Delivery
- The use of rework and post-consumer recycled materials
- Customer returns

There is no in-line testing pr measuring equipment or use of outsource/sub-contracted operations.

The process flow was verified by the HARA team at HARA Review.

The HARA team has identified and recorded all potential product safety hazard that are reasonably expected to occur at each step of the process, the hazards include, as appropriate: -

Microbiological hazards

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- Chemical contamination (e.g. taint, odour, allergen, component transfer from inks, varnishes and glues)
- Potential for unintended migration of substances from the packaging material into food or other hygiene sensitive products
- Foreign objects
- · Potential problems arising from using recycled materials
- Foreseeable misuse by the consumer
- Defects critical to consumer safety
- Hazards that may have an impact on the Functional integrity and performance of the final product in
 use
- Potential for malicious intervention
- Potential for raw material fraud

The HARA team have identified any control measures necessary to prevent, eliminate or reduce each product safety hazard to acceptable levels. Where control is through pre-requisite programs as set out in sections 3, 4 and 6 these have been reviewed to ensure that they adequately control the risks identified, and where necessary improvements made. Examples of hazards include chemical. Physical and microbiological contamination, malicious intervention, wrong materials, wrong colours. Missing print, die cut issues, gluing issues, and controls include operational procedures, inspection criteria, work instructions.

There have been 0 CCP's identified in the study by utilising a 3 x 3 matrix to score the risk assessments with scores of 9 being determined a CCP.

The HARA study is reviewed at least annually, at management review, and includes the following topics: -

- Process changes
- Product composition changes
- Complaints
- Product failures and finished product recalls from customers (including system tests)
- Product withdrawals
- Results of audits
- New developments in the industry associated with materials, process, or product

Audit Evidence:

HARA Study Issue 10 Dated 4th November 2022. Management review meeting minutes 20th April 2023.

Non-applicable clauses

2.2.9, 2.2.10 2.2.11, no CCP's determined by the HARA Study.

3. Product safety and quality management

3.1 Product safety and quality management system

The sites documented policies, procedures, working methods and practices are collected in a navigable and readily accessible system, digitally that are in English as this is the predominate language and all staff can read and understand English.

All procedures and working methods are available at point of use.

The system is fully implemented and reviewed at appropriate planned intervals, at management review and internal audits, and improved where necessary.

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Audit Evidence:

Quality management system made up of individually controlled documents.

3.2 Document control

The site has a documented document control procedure in place that is supported by: -

- A list of controlled documents indicating the latest revision number
- The method for the identification and authorisation of controlled documents
- A record of the reason for change or amendments to the documents
- A system in place for the replacement of existing documents when these are updated.

Electronic copies of the system and documents are stored on the company's password and permissions-controlled computer system that is backed up daily to prevent loss or malicious intervention.

Audit Evidence:

- 2.0 Document Management Procedure version 1 dated 1st August 2021.
- 2.1 Document Control Log Version 1 dated 1st August 2021.

All checks and records are recorded digitally.

3.3 Record keeping

All records reviewed during the audit were seen to be legible, authorised, retained in good condition and retrievable.

Any alterations were authorised with justification for change recorded.

The senior management have ensured that there are documented procedures in place for the organisation, maintenance, storage and retrieval of all records relating to product safety, legality, regulatory compliance and quality.

The retention period for various records is documented in the Document Management Procedure and is a minimum of 12 months and filed by works order number.

Audit Evidence:

2.0 Document Management Procedure version 1 dated 1st August 2021 Works Orders, Work instruction, BRC Compliance requirement sheets, inspection criteria,

3.4 Specifications

Specifications are suitably detailed, accurate and compliant with relevant product safety and legislative requirements and site specifications include: -

- Size
- Materials (including recycled content where relevant)
- Colours
- Varnish

There are no products with a functional claim.

All specifications are formally agreed with customers for all new and amended products, via approval paperwork or order acknowledgements.

Any logos or trademarks applied as artwork are agreed with the customer before production is started. Specifications are reviewed as part of the contract review process for each order received and processed.

Audit Evidence:

Site specifications include Material Blank size 710 x 1824mm, number up 1, finished size 490 x 400 x 150mm, forme no, Stereo Number 359681, site code CPL587541/A. customer ref COV003 Coveris Flexibles UK Ltd.

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Material specification include blank size 710 x 1824mm, board grade 175K/135T B flute, Cust/Ref RPL587541/A, Qty 7500.

3.5 Internal audits

The site has a scheduled programme of internal audits in place for 20234/24. This is currently up to date. The audit frequency is determined by risk assessment and previous audit performance with all processes being audited at least annually: -

- The scope of the internal audit programme includes
- HARA Study and the activities to implement it (supplier approval corrective actions and verification)
- Pre-requisite programmes
- Product defence and product fraud prevention plans
- Procedures implemented to achieve the standard

Each audit has its own scope and considers specific activities or sections of the HARA or product safety plan. Internal audits are carried out by trained competent internal auditors that are independent of the area/activity being audited to ensure impartiality (i.e., they do not audit their own work).

Internal audit reports reviewed during this audit were found to contain details of compliance and non-compliance where found. Any NCR's raised are sent to the relevant department manager for resolution within agreed timescales. The site has a process in place for all non-conformities to be closed out using root cause analysis to determine the corrective and preventive actions to be implemented, with the relevant department manager responsible for the implementation of any corrective or preventive action.

The site does not manufacture materials intended to come into contact with food or other hygiene sensitive products and does not have a programme of documented hygiene inspections in place to monitor cleaning, housekeeping and the equipment/buildings condition to identify risk to the products.

Audit Evidence:

Internal audit programme 2023/24

3.0 Continual improvement procedure version1 dated 1st August 2021.

Full System Internal audit completed by external consultant in 2 days April 2023 with no NCR's raised. Internal auditor training records for external consultant RH of Packology Ltd, QMS ISO 9001:2015 Lead Auditor 13 – 17 March 2017.

3.6 Corrective and preventive action

The site has a procedure for the completion of root cause analysis in place that is used to determine the corrective and preventive actions to be put in place following: -

- An analysis of non-conformities for trends which shows that there has been a significant increase in a type of non-conformity
- A non-conformity which places the safety, legality or quality of a product at risk (including withdrawals)
- The result of internal, second- or third-party audits
- Customer complaints
- Failure of in-line testing equipment
- Any incidents

The site evaluates the effectiveness of root cause analysis at least annually during the Management review process.

Audit Evidence:

3.0 Continual improvement procedure version1 dated 1st August 2021.

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Customer Complaint Report Number 1607, customer Cedesa Ltd., Issue the load had moved in transit. The root cause, the driver had secured the load to the best of his ability, but the load still moved. Preventive action has been t fit extra ratchet straps in the rear of the vehicle.

3.7 Supplier approval and performance monitoring

The site has a documented Supplier approval and continual improvement process in place in the Supplier Management Procedure the covers the suppliers of: -

- raw materials
- outsourced (subcontracted) production
- suppliers of services

the procedure ensures that the materials and services procured conform to defined requirements where there is a potential impact to product safety, quality and legality.

The approval is based on risk and includes the combination of: -

- A valid certification to the applicable Global Standard or GFSI-Benchmarked standard. The scope of the certification shall include the raw materials purchased, and the site shall validate any BRCGS certificates using the BRCGS Directory.
- Supplier audits with a scope to includes product safety traceability, HARA review and good
 manufacturing practices, undertaken by an experienced and demonstrably competent product safety
 auditor. Where the supplier audit is completed by a second or third-party, the company shall be able
 to: -
 - Demonstrate the competency of the auditor
 - Confirm that the scope of the audit includes product safety, traceability, HARA review and good manufacturing practices
 - Obtain and review a copy of the full audit report

Or: -

Where a valid risk-based justification is provided, a satisfactorily completed supplier questionnaire
may be used for initial approval. The questionnaire shall a scope that includes product safety,
traceability, HARA review and good manufacturing practices, and it shall have been reviewed and
verified by a demonstrably competent person.

The procedure includes a process for ongoing supplier performance reviews, based on risk and defined performance criteria. Where approval has been based on a questionnaire, this shall be re-issued at agreed intervals. Records of supplier approval are maintained, and a sample reviewed during the audit.

The site has a on up-to-date approved supplier system on the company internet, some managed by group and others by the site.

Where suppliers have been passed by questionnaire, the company has a system in place to ensure that their suppliers have an effective traceability system in place by documenting challenges to the system. One on initial approval and every three years subsequently.

The procedure defines how exceptions are handled, where an unapproved supplier is used, the site must receive a Statement of Compliance prior to or with delivery to be able to ensure that the product is permissible to be used.

Audit Evidence:

8.0 Supplier Management Procedure Version 1 dated 1st August 2023.

Risk assessment 3.7.3 Supplier Assessment.

DS Smith SAQ dated 23rd January 2024, and BRCGS certificated site code 5982654 expires 5th March 2025. With the certificate validated on the BRCGS directory.8

On Board, board Supplier, SAQ Dated 22nd February 2024, ISO 9001:2015 certificated by Interface, expires 10th June 2025, ISO 9001:2015 expires 26th January 2026, FSC Chain of Custody certificates expires 18th

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July 2026 approved based on certifications and approved risk based approach based on previous performance.

3.8 Product authenticity, claims and chain of custody

The Company has processes in place to access information on historical and developing threats to the supply chain which may present a risk of substitution of raw material, this is carried out via trade associations, trade media, discussions with suppliers and customers, accessing government web sites and privates resource centres.

The site has conducted a vulnerability assessment that includes: -

- Historical evidence of substitution
- Economic factors which may make substitution more attractive
- Ease of access to raw materials through the supply chain
- Sophistication of routine and upstream testing to identify substitution
- Nature of raw material

The result of this is a documented Vulnerability assessment that is reviewed at least annually during the management review process.

The risk assessment has not identified any product at risk of substitution.

Audit Evidence:

3.8 Vulnerability assessment dated January 2024.

3.9 Management of subcontracted activities and outsourced processes

There are no sub-contract or outsource processes.

3.10 Management of suppliers of services

Supplier approval of service suppliers follows the same procedure described in 3.7 above, however, most service suppliers do not have an GFSI certifications, therefore their approvals are based on risk and, historical, previous performance, and self-audit questionnaire.

Service suppliers include: -

- Pest control
- Transport and distribution
- Sorting or rework
- Calibration services
- Waste management

Formal contract or agreement are in place for suppliers of service.

Audit Evidence:

8.0 Supplier Management Procedure Version 1 dated 1st August 2023.

Prokill with agreement included in the folder.

Packology Ltd external consultant SAQ Dated 1st June 2023.

3.11 Traceability

The site has a documented traceability procedure in Process Control Procedure. This defines the process of forward and reverse traceability throughout the process including, product/materials in quarantine or under the non-conforming product process.

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Product and materials are traceable throughout the process by raw material suppliers ID or works order number the works order/job number is on all items despatched to the customer along with their order/reference number.

Rework is carried out on site with traceability maintained by using the same works order number for traceability. The system is tested at least annually, both forwards and backwards. Any test data or retained production samples are traceable through the works order.

Audit Evidence:

17.0 Process Control Procedure version 1 dated 1st August 2021

Site Annual Forward Traceability Test conducted 5th May 2023, for a stock board item, 150 K150/T BC flute, sheet size 651 x 2070, received 238 sheets from Progroup on 26th April 2023, purchase order number CPO359004, allocated to 1 jobs CW0301855 with accompanying works order and delivery note. Full traceability was demonstrated. Next forward trace planned for May 2024

Site Annual Reverse Traceability Test – conducted 16th May 2023, customer Crusader Packaging Ltd., product code CPL585847, 0201 printed 1 colour, glued, order quantity 5500, 150WK/150WK B, with accompanying works order 309435, machine maintenance records and delivery note. Full traceability was demonstrated.

Traceability Test conducted during audit – customer HG+Co Ltd, product CPL583980/A, 0201 glued case with dimensions 261mm x 174mm x 248mm, customer order number Stock, material 150K/150T B Flute sheet size 486x 914mm, printed 1 colour, stereo number 364005, with job on and job offline clearance viewed on Abaca Packaging 3000. Full traceability was demonstrated.

3.12 Complaint handling

All complaints received by the site are recorded and investigated using root cause analysis to determine the corrective and preventive actions to be implemented. This is defined in the Continual improvement procedure. All complaints are investigated using the non-conformance report that requires the use of root cause analysis and is filed for reference.

Complaint data is analysed to determine trends at least annually as part of the management review process.

Audit Evidence:

Complaint process is defined in 3.0 Continual Improvement procedure version1 dated 1st August 2021. Customer Complaint Report Number 1607, customer Cedesa Ltd., Issue the load had moved in transit. The root cause, the driver had secured the load to the best of his ability, but the load still moved. Preventive action has been t fit extra ratchet straps in the rear of the vehicle.

3.13 Management of product withdrawals, and incidents and product recalls

The site has documented procedure for product withdrawal, Contingency Planning Procedure, which, as a minimum, includes: -

- Identification of the key personnel involved in assessing potential product withdrawals or returns, with their responsibilities clearly defined
- A communication plan including methods of informing customers
- Root cause analysis and corrective action to implement appropriate improvements as required

The withdrawal process can be operated at any time and will cover the following as required, supply chain, stock return, logistics for recovery, storage of recovered product and disposal.

The disaster recovery plan defines such events that could constitute an incident, such as: -

- Disruption to normal production processes
- Disruption to key services such as water, energy, transport, staff availability and communications

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- Events such as fire, flood or natural disaster
- Malicious contamination or sabotage
- Failure of, or attacks against, digital cyber-security

The procedure determines the activities required to effectively manage an incident to prevent release of product where hygiene, safety or quality may have been affected.

The withdrawal process/procedure, and identified personnel etc, also covers the process of assisting a brand owner with a product recall, the site will also provide any requested information such as traceability as required.

The procedure is tested at least annually. And the results of it or any actual withdrawals is used to review the procedure and implement changes as required.

Audit Evidence:

4.0 Contingency Planning Procedure version 1 dated 1st August 2023.

Site Annual Withdrawal Test conducted 12 February 2024 for customer UK Packaging, for product code reference 577477/A, works order number CWO311725, with email from customer JD at UK Packaging confirming identification and ability to locate of stock. The test took less than 1 hour, and no changes were required.

Non-applicable clauses

3.4.3 There are no food or hygiene sensitive contact products produced and a Statement of Compliance is not required, 3.4.4 None of the materials used by the site have a manufacturers logo or trademark applied, 3.5.5 noncontact product made so no programme of hygiene inspections required, 3.7.6 The site does not use agents or brokers, 3.9 There are no sub-contract or outsource processes,

4. Site Standards

4.1 External standards

The site is situated to the south of Shoeburyness centre with no near neighbours that could affect their products. The site has a secure perimeter, with all doors closed until needed. The exterior area is well managed with landscaping and car parking. The building is suitably protected from pest infestation, with all doors and windows either screened or secure, with a clean unobstructed path around the building, this is gravel, paving and concrete.

Natural drainage has been augmented with additional drainage that is suitably protected to prevent the entry of pests.

Audit Evidence:

Site tour 9th April 2024.

4.2 Building fabric and interiors: raw materials handling, preparation, processing, packing and storage areas

The walls are brick/block footings with metal insulated cladding over, the roof is the underside if the external cladding with polycarbonate skylights. Floors are of sealed concrete; internal walls are of painted brick/block work to facilitate cleaning.

Where any it constitutes a risk to the product any windows and roof glazing is suitably protected against breakage.

All internal non-production glass such as light bulbs and EFK tubes are adequately protected against breakage.

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Suitable and sufficient lighting is provided to ensure a safe working environment. Suitable and sufficient ventilation is provided.

Audit Evidence:

Site tour 9th April 2024.

4.3 Utilities

All water used on site is provided by the local water authority, Anglian Water, and is of a potable quality and does not come into contact with the products.

The site has carried out a risk assessment for the use of microbiological and chemical quality of water, steam, ice, air, compressed air or other gasses which come into direct contact with the product shall be monitored regularly.

Audit Evidence:

Site tour 9th April 2024

Compressor Service records were viewed for the last full service and filter change for all compressors job No. 0910 dated 12th December 2023.

4.4 Site security and product defence

The site has carried out a full documented risk assessment for security that in includes internal and external from any attempt to deliberately contaminate or damage products, the site has a subsequent product defence plan in place that assess areas according to risk, the defence plan is reviewed at least annually. The site is kept secure with fob access control to all production and storage areas. Contractors and visitors are permitted to enter reception, complete the necessary forms manually or digitally and escorted by their host whilst on site.

Audit Evidence:

Site tour 9th April 2024

4.4 Site security risk assessment January 2024

The site product defence plan is made up for the Vulnerability and site security assessments

4.5 Layout, product flow and segregation

The site has a current plan that defines: -

Access points for personnel

Travel routes for personnel, raw materials and intermediate or finished products

Staff facilities

Routes for the removal of waste

Production and process flows

Storage areas

The site a linear process flow to reduce the risk to the product of contamination or damage.

There is sufficient room for all activities to be carried out properly under safe and hygienic conditions.

Sorting activities are carried out under the same conditions as the production area.

Outer packaging is removed just before the materials are loaded onto a machine for processing to protect the raw material until it is used.

Personnel movement is by simple logical routes.

Audit Evidence:

Site tour 9th April 2024

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Site plans for Campfield Road and Aviation Way, dated 21st May 2023.

4.6 Equipment

The production equipment is designed and manufactured for the role it is being used, lubrication points are out of the product path. They are built of suitable materials and can be easily cleaned.

New equipment is fully specified prior to purchase and installed and commissioned by the manufacturer or their representatives/site engineers, during which time the site determines the necessary cleaning and maintenance schedules to be implemented.

Wooden equipment in the form of work benches is present in the production and storage areas that fully sealed and monitored for use by external consultant and site management monthly. Notices on equipment were seen to be cleanable and secure.

Audit Evidence:

Site tour 9th April 2024

4.7 Maintenance

A documented maintenance programme is in place for all equipment. All maintenance is recorded with a machine return to work signed off completed by maintenance and production staff. Tools and other maintenance equipment is stored away from production equipment to prevent a contamination hazard. Machines are also inspected for loose parts or damage that might compromise the product at the beginning of a shift and after job change overs.

Temporary repairs or modifications are permitted and recorded on a register that defines the reason and expected removal date as a minimum.

There is a maintenance room/store on site, and it is kept to a good standard with debris control in the form of a swarf mat and any entrances.

Contractors are monitored by the site engineers whilst on site.

Audit Evidence:

Maintenance plan 2024

Daily maintenance records viewed during site tour.

Maintenance records for the machine/s involved with the VA job 310363, Appstar casemaker in Aviation Way PPM from September 2023 with sign off form the engineer and the operations staff.

4.8 Housekeeping and cleaning

The site has good standard of hygiene in place supported by a 'clean as you go' policy. All areas of the site and machines have been risk assessed for methods and frequency and the following cleaning schedules are in place for general areas and equipment and include details of;

- · Responsibility of cleaning
- Item/area to be cleaned
- Frequency of cleaning
- Method of cleaning
- Cleaning materials to be used
- Cleaning record and responsibility for verification

The cleaning chemical used are suitably labelled, fit for purpose, used in accordance with the manufacturer's instructions and stored away from the production area and do not have a strong odour or give taint to a product.

Toilet cleaning equipment is stored segregated from that used in other areas and are colour coded to prevent use in the wrong areas.

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The site has carried out a risk assessment for the need for a microbiological environmental monitoring programme, this has resulted in no monitoring required as the product is non-contact, manufactured at high temperatures, materials is not conducive to pathogen life.

Audit Evidence:

Site tour 9th April 2024, during which it was noted the site had a good standard of hygiene in place.

Clean as You Go policy in place defined in 16.1 Cleaning risk assessment dated January 2024.

Cleaning record in use viewed during site tour for all machines.

Cleaning record checks viewed for machine/s involved with the VA Job 310363 for the time of the job January 2023.

4.8.5 Microbiological risk assessment dated January 2024.

4.9 Product contamination control

4.9.1 Glass, brittle plastics, ceramics, and similar materials control

There is no unnecessary glass or brittle plastic in the production or storage areas of the site unless it is required to be there and is recorded on a register to monitored regularly this register documents: -

- A list of items detailing location, number, type and condition
- Recorded checks of condition of items, carried out at a specified frequency that is based on the level of risk to the product
- Details of cleaning or replacing items to minimise the potential for product contemination

The site has a glass breakage procedure that has management requirement for sign off to complete the process, this includes the clean-up operation and to ensure that no other area is allowed to be contaminate due to the breakage. any product that has become contaminated shall be segregated and disposed of.

Audit Evidence:

Site tour 9th April 2024,

6.0 Contamination Control Procedure version 1 dated 1st August 2021.

Glass register last checked January 2024 by Compliance Manager and are completed quarterly and no breakages have been recorded since the last audit.

Cleaning records digitally completed on the shop floor (Atlas Citation System).

4.9.2 Sharps and metal control

The site has a documented sharps policy to control the use and storage of sharp implements, including knives and wires to prevent contamination.

Production equipment that incorporates blades and sharps are monitored so that blades or sharp implements shall not contaminate the products.

Snap off blades are not permitted on site.

Audit Evidence:

Site tour 9th April 2024.

6.0 Contamination Control Procedure version 1 dated 1st August 2021.

6.11 Monthly Metal Sharps register V1 dated 2023 last checked June 2023.

Knife 5 challenged; register says issued to Appstar where it was found.

4.9.3 Chemical and biological control

The site has a process in place to manage the use, storage and handling of non-production chemicals and includes: -

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- A list of Chemicals approved for purchase
- Available MSDS sheets from the manufacture/supplier
- No strongly scented products that could give taint or odour
- All products are in suitable containers and labelled correctly
- Stored in designated areas/places
- Used by trained personnel

The site does not handle any allergens as part of the process but has used Hazard and Risk Analysis to identify and manage any potential risk associated from microbiological contamination and any potential allergens in the HARA which is also supported by the Hygiene Policy which require hand washing on entry to production and storage aeras.

Audit Evidence:

Site tour 9th April 2024.

MSDS for Q* Foil 32 issue 1 dated 5th May 2011.

4.9.3 Allergen risk assessment dated January 2024.

16.0 Hygiene Procedure version 1 dated 1st August 2021.

4.10 Waste and waste disposal

Waste is removed by licensed contractors with waste transfer notes provided.

Waste is placed in wheeled bins, extracted straight compactors that have a dust collection system and placed in open topped skips in the yard. There are sufficient bins of the required sort on site for streaming waste for recycling, board and paper and general waste.

External storage areas are well kept preventing pest harbourage.

Audit Evidence:

All waste is removed from site by TLM management Ltd, Waste Carriers Registration Number CBDU110058 expires 24th May 2025.

4.11 Pest management

The site employs a third-party pest control company Prokill, that is registered with BPCA membership No. M15/737 expires 29th February 2024.

The contractor has carried out a risk assessment to determine the frequency of their visits which is reviewed following: -

- Changes to the building or production processes which could have an impact on the pest management programme
- A significant pet issue

The pest control contract is clearly defined in the contractor's documentation.

All pest control equipment is suitably located and secure where necessary.

The site is suitably protected to prevent pest entry with all entry points suitably sealed.

If any of pest infestation is found the contractors are called out for immediate resolution, as per their contract. Fly catch tray analysis is completed at least quarterly to assess and identify any problem areas.

The pest contractor maintains suitable records such as: -

- Up to date, signed plan identifying the pest control points and their type
- Identification of the baits and /or monitoring devices
- · Clearly defined responsibilities for site and contractor
- Details of substances used, including instructions
- Detailed records of inspections and any recommendations made.

The site has closed out any recommendations made within a reasonable time frame.

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Staff awareness of pest infestation and it signs is included in their induction training, including instructions to report any signs of infestation to the management as soon as possible.

Audit Evidence:

Site tour 9th April 2024., during which it was noted that there was no evidence of any kind of pest infestation seen.

Site plan, Campfield Road dated 6th May 2023 and Aviation Way dated 5th June 2023. Last routine visits for both sites 8th April 2024 (Aviation Way), 4th March 2024 (Campfield Road). EFK tubes changed 5th June 2023.

Non-applicable clauses

4.1.5 The external storage of raw materials is not permitted, 4.2.2 There are no suspended ceilings in the production or storage areas, 4.2.3 There are no internal drain openings, 4.2.6 There are no elevated walkways, 4.4.3 There are no external storage tanks, silos or intake pipes, 4.5.6 There are no designated walkways, 4.8.5 Risk assessment for the need for a microbiological environmental monitoring programme, this has resulted in no monitoring required, 4.9.2.4 There are no open notice boards in the production and storage areas, 4.9.3.3 The site does not handle any allergens as part of the process, 4.10.6 Sub-standard trademarked materials are rendered unusable by Bailing, 4.11.3 The site does not undertake their own pest management.

5. Product and process control

5.1 Product development

Customer requirements, including any critical parameters (such as machine running requirements, maximum/minimum use temperatures, use of recycled materials and testing requirements), for any product are fully disclosed and discussed prior to product being made, the includes a sign off from the customer before any consumables are purchased.

Production trials are carried out on special note on Abaca to inform the production staff that the job is a trial, all normal records are kept with any specified extra details and evaluated to ensure that required safety and quality parameters can be achieved.

The site has ensured that the machines and operating practices produce safe and legal product.

For new products technical specifications are agreed with the customer and produced as required, samples for future reference are retained if required.

The transfer of data from a customer enquiry to company operating system is defined in the New Product Development Procedure and final validation is the customer agreement to produce.

Audit Evidence:

7.0 New Product Development Procedure version 1 dated 1st August 2021.

5.2 Graphic design and artwork control

The site has a documented artwork procedure New Product Development Procedure, that includes, as necessary: -

- Collation of information to be included in the artwork
- Receipt of artwork files from the customer
- Completed artwork approval process

The customer approval is documented and retained.

Print trials are run as required and documented as trials in 5.1.

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All printing is checked to ensure that the correct equipment Plates, silk screens, anilox rollers, cylinders and blankets etc.), is being used and are traceable.

Customer -approved reference material, artwork masters and colour standards are controlled to reduce the degradation and stored correctly after use. The site has a process in place to renew approved masters as required.

The site has a documented procedure for managing the change of artwork, including customer approval. Electronic artwork files are stored on the company password and permissions protected computer system that is backed up daily.

Audit Evidence:

7.0 New Product Development Procedure version 1 dated 1st August 2021.

Artwork approval reviewed for VA Job 310363 received 21st December 2023 from AF at HG + Co, by Email.

5.3 Packaging print control

The site has risk assessed the printing process to identify: -

Risks of losing essential information

Mixing of printed product

This has been carried out as part of their HARA with the necessary processes/corrective actions in place. All print equipment is stored to protect it from damage or contamination.

All print runs are checked and approved against master colour standards /Customer samples and signed off before the print run commences after maker ready. Each pallet of finished product is checked to ensure that that it is the same as the first of samples.

For each print run there are samples retained as required by the customer.

Unused printed product s identified and stored until required.

The site does not use light boxes to inspect printed colour.

Audit Evidence:

Site tour 9th April 2024.

Print checks viewed on Apstar Campfield Road for W/O 313191, Apstar Aviation Avenue for W/O 313583.

5.4 Process control

The site has used hazard and risk principle, via its HARA to identify and record potential product defects that are reasonably expected to occur including, where applicable: -

- Product quality defects
- Defects that may have an impact on the functional integrity and performance of the finished product
- Defects that may result in the production of put of specification product

The HARA review also identifies manufacturing process control points to prevent or limit the risk of producing defective products. Only trained and authorised operators are permitted to alter any settings critical to critical to the safety or legality of the product. A bill of materials in the form of works order is accessible to operators for each job in production.

Here are a series of start-up checks completed after makeready/stop/start to ensure the product being produced is correct, these are recorded on the digitally on the system by the operator, with a second sign form another operator/supervisor. These are followed by in process checks that are recorded on the digitally on the system at least once per reel/pallet of raw material processed.

Following and changes to the product composition, processing methods or equipment, all product data is revalidated to ensure the products maintain product safety, legality and quality.

There is a documented line clearance process completed between production runs. The line clearance procedure is documented and includes: -

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- Rolesof person involved in line clearance
- Areas where materials canbecome trapped
- Validation of line clearance
- sign-off for continuing Production

Audit Evidence:

HARA Plan Issue 10 Dated 4th November 2022.

17.0 Process Control Procedure version 1 dated 1st August 2023.

Evidence of documented line clearance procedure on Apstar for W/O 313583, (at Aviation Avenue), Apstar for W/O 313191, Eterna Gluer for W/O 313303, Eterna C/C for W/O 313306 and Auto Box for W/O 513516 (all at Campfield Road).

5.5 Calibration and control of measuring and monitoring devices

The site has no items requiring calibration.

5.6 Product inspection, testing and measuring

Quality checks are carried out at pre-determined intervals during production to ensure that the product produced is within specification tolerances.

Hazard and risk principles have been used to determine the need for in-line product testing within the HARA study. This has determined that in-line testing is not required.

Checks are carried out for each pallet of product produced.

There is no automated inspection equipment.

Audit Evidence:

Site tour 9th April 2024.

Details of production jobs viewed on Apstar for W/O 313583, (at Aviation Avenue), Apstar for W/O 313191, Eterna Gluer for W/O 313303, Eterna C/C for W/O 313306 and Auto Box for W/O 513516 (all at Campfield Road).

5.7 Control of non-conforming product

The site has documented procedure for the control of non-conforming product, Continual Improvement Procedure. This procedure requires the use of root cause analysis to determine the corrective and preventive actions to be implemented.

Non-conforming product are held until released following the investigation where they be sent to the customer, stored or destroyed as required.

Audit Evidence:

3.0 Continual Improvement Procedure version1 dated 1st August 2021.

Customer Complaint Report Number 1607, customer Cedesa Ltd., Issue the load had moved in transit. The root cause, the driver had secured the load to the best of his ability, but the load still moved. Preventive action has been t fit extra ratchet straps in the rear of the vehicle.

5.8 Incoming goods

The site has procedure for the control of incoming raw materials and goods, Intake, Storage and Distribution Procedure, incoming goods are checked against the Purchase order/delivery note and inspected for damage, contamination and that the pallet is in good condition where necessary. Any issues detected are advised to the purchaser directly and the goods off loaded and quarantined until the issue is resolved.

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All materials are entered into the warehouse and scanned into a location that is recorded so that stock can be used on a first in first out basis. All materials are checked on issue and before use to ensure that the correct materials are being used for the product being produced.

Audit Evidence:

Site tour 9th April 2024.

18.0 Intake, Storage and Distribution Procedure version 1 dated August 1st August 2023, no defective product received since the last audit.

5.9 Storage of all materials and intermediate and finished products

All steps of the storage process have been risk assessed and implemented as required to trained staff. All product, WIP, and raw materials are stored on pallets that are wrapped to protect them from damage or contamination (physical, microbiological or taint) until they are required for use.

All materials, WIP and finished product is identified by supplier's labels and site labels containing the job number as applicable. All storage areas are maintained to the same standard as the production area. Finished and intermediate product follow 'first in and first out' principles.

Pallets are stored externally.

The site has a procedure for the storage of raw materials, WIP and Finished product in order to prevent contamination.

Materials intended for recycling are suitably protected from contamination.

Audit Evidence:

Site tour 9th April 2024.

18.0 Intake, Storage and Distribution Procedure version 1 dated August 1st August 2023.

5.10 Dispatch and transport

The site has a documented procedure in place for the despatch and transport of product, Intake, Storage and Distribution Procedure, that include: -

- Any restrictions on combined loads
- Requirements for the security of products

All products are suitably boxed/wrapped to protect the product from contamination, taint and odour during transport.

Pallets are checked before use and only good quality; clean undamaged pallets are used.

All company-owned vehicles used for deliveries are included in the documented cleaning schedules and kept clean and in a condition that minimises the risk of product contamination. They have 4 tractor unts, 7 trailers and 5 18 Tonne vehicles.

Vehicle drivers comply with site rues on site, and they do not have access to production and storage areas.

Audit Evidence:

Site tour 9th April 2024.

18.0 Intake, Storage and Distribution Procedure version 1 dated August 1st August 2023

Non-applicable clauses

5.3.5 Composite printing is not carried out on site, 5.5 The site has no items requiring calibration, 5.6.6 No in line testing equipment, 5.6.9 No in line testing equipment, 5.6.10 The site does not carry out any third-party testing, 5.9.7 There are no hazardous chemicals handled on site, 5.10.6 The company does not employ third party contractors,

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6.	Personnel
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6.1 Training and competence: raw materials handling, preparation, processing, packing and storage areas

All company personnel are trained before they commence work by having at least their induction that includes the site hygiene rules.

Personnel that are to be engaged in processes relating to product safety, quality and legality receive training that covers: -

- Product inspection, testing and measuring
- Calibration
- · Printed packaging controls
- Operatives at manufacturing process control points
- Product defence

Any document that is changed, work instructions, procedures etc. are trained out by toolbox talks or individual retraining as required.

The company has a programme of refresher training that is carried out every year.

All records of training record the date and duration of training, name of the trainee and evidence of attendance, course title or content and the training provider (internal/external).

The site has a documented programme of training that covers the training needs of relevant personnel including: -

- Identifying the necessary competencies for specs for roles.
- Providing training or other actions to ensure staff have necessary competencies
- Reviewing the effectiveness of training and trainers
- The delivery of training in the appropriate language of trainees

Training is given in the English language as this is the language spoken, written and understood by all staff.

Audit Evidence:

12.0 Training Competence Procedure version 1 dated 1st August 2021

Site Training Matrix 2023 viewed on Operation Manager's PC with durations recorded for each topic. Employee Training records – JL, Machine Competence check, in house, by MB Operation Manager 26th June 2023. Hygiene refresher training March 2023. 10 minutes duration.

Employee Training records – LH, in house Machine Competence check, by JL casemaker supervisor dated 19th June 2023. Hygiene refresher training March 2023. 10 mins duration.

6.2 Personal hygiene: raw materials handling, preparation, processing, packing and storage areas

The site has a hygiene policy that includes: -

- Wrist bands and wrist-worn devices or watches shall not be worn
- Jewellery including piercings shall not be won on exposed parts of the body, with the exception of a plain wedding ring, wedding wrist band or medi-alert jewellery
- Fingernails shall be kept short and clean and free from nail varnish
- False fingernails, nail varnish or nail art shall not be worn.
- Excessive perfume and aftershave shall not be worn

These requirements are checked daily by management and supervisors whilst in the production and storage areas

Hand washing is performed on entry to the production areas every time you pass a hand wash station, but especially after visiting the toilet, eating or drinking or having a smoke.

Personal items, including mobile telephones are not taken into the production areas unless management has given permission.

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Personal medicines have been risk assessed as part of the HARA and are not permitted to be taken into production areas of the site unless the general manager has given written permission.

The site has a process in place whereby visitors that cannot comply with hygiene rules have other control measures in place, such as blue nitrile gloves for visitors with nail varnish/art or false nails.

All cuts and grazes are covered with blue metal detectable plasters issued by the site. In addition, a finger stall or gloves may also be worn.

Audit Evidence:

Site tour 9th April 2024.

16.0 Hygiene Procedure version 1 dated 1st August 2021.

6.3 Staff facilities

Locker rooms are accessed without the need to enter production areas.

Staff are provided with a locker one for personal belongings. Lockers are of a suitable size and workwear and personal clothing are not in the same lockers.

Eating (including the eating of confectionery and chewing of gum or tobacco), drinking and smoking is not permitted in the locker rooms: -

- Suitable and sufficient hand-washing facilities have been provided with
- Sufficient warm water to encourage hand washing
- Unscented liquid antibacterial soap
- Adequate hand drying facilities, hand dryers/paper towels and bins
- Advisory signage to prompt the washing of hands.

Toilets do not open directly on to production or storages areas to prevent the risk of contamination, toilet are provided with suitable and sufficient hand-washing facilities.

There are suitable facilities for visitors to comply with the site hygiene policy. There is adequate storage in the fridge in the canteen for the storage of foodstuffs. Eating (including the eating of confectionery and chewing of gum or tobacco), drinking and smoking is not permitted in the production or storge areas. The drinking of water from spill proof bottles is permitted at with bottles stored designated locations in the production and storge areas.

Smoking is permitted at a designated well-kept smoking shelter outside the building, this includes using ecigarettes/vapes.

Audit Evidence:

Site tour 9th April 2024.

Mixed personal and workwear on hooks in locker rooms. NC 1

6.4 Medical screening

The site does not manufacture goods intended to come into contact with food or other hygiene sensitive products.

Staff are made aware of the symptoms of infection, disease or condition which would prevent a person working during their induction.

Visitors and contractors must complete a health questionnaire prior to being given permission to enter the production and storage areas of the site.

Audit Evidence:

Auditor completed the site questionnaire both day of the audit when signing in

6.5 Protective clothing

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The site does not manufacture goods intended to come into contact with food or other hygiene sensitive products and therefore hair nets and beard snood are not required in production and storage areas. The site has used hazard and risk principles to determine the need for personal protective clothing and where it is permitted to worn as part of their risk assessment pack. The risk assessment also outlines where the clothing is permitted to be worn, everywhere on site (production, raw materials preparation, storage areas, toilets, smoking and canteen) and to and from the workplace.

The site has issued sufficient sets of clothing that the staff should always have a clean set available if required. The clothing issued includes trousers, polo shirts, jumper, high vis vest baseball cap, beanie hat and safety shoes that provide adequate protection to the product, with no external pocket on clothing covering the upper torso, with spare clothing held on site if needed.

Based on hazard and risk principles, protective footwear is required on site for all production, warehouse staff but not visitors.

Gloves are used and changed as required with the old ones being disposed of correctly.

Laundry is by way of self-laundering with company guidance issued as part of the staff induction which includes: -

- Written instructions regarding the laundering process to be used and these shall be reinforced as part of the induction or other in-house training programme
- Employees shall be provided with a bag or suitable means to safely transport washed garments from to the workplace
- There is a defined process within the site for monitoring the effectiveness of the system
- There is a procedure and system for dealing with any case where employees are unable to perform home laundry effectively, either through lack of diligence or inadequate facilities

Clean and dirty clothing is kept segregated at all times.

Disposable clothing is used and disposed of, after a single use, in the proper manner.

Audit Evidence:

Site tour 9th April 2024.

Non-applicable	,
clauses	

None

Requirements for traded products

- 4			• • • •		
/ 1	Approval and performance	monitoring of n	naniitacti irare/nackare	of traded had	rkanına nradılata
	Approvar and performance		ilaliulaciuleis/backeis	UI LIAUEU DAL	Mauliu biouuci

Not applicable

7.2 Specifications

Not applicable

7.3 Product inspection and laboratory testing

Not applicable

7.4 Product legality

Not applicable

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7.5	Traceability	
Not app	licable	
Non-app	olicable	Not applicable

Additiona	Module: Plastic Pellet Loss Prevention			
10.1.1	Senior management commitment and control improvement			
Not applica	able			
10.2.2	2.2 Hazard analysis and risk assessment			
Not applicable				
10.3.5	Internal audits			
Not applica	able			
10.3.6	Corrective and preventive action			
Not applicable				
10.3.13	Management of incidents			
Not applicable				
10.4.2	Building fabric and interiors: raw materials handling, preparation, processing, packing and storage areas			
Not applicable				
10.4.4	Site security			
Not applicable				
10.4.5	Layout			
Not applicable				
10.4.8	10.4.8 Housekeeping and cleaning			
Not applicable				

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10.4.10	Waste and waste disposal		
Not applicable			
10.5.8	Incoming goods		
Not applicable			
10.6.1	Personnel: training and competence		
Not applicable			
Non-applicable clauses		Not applicable	

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