

Audit Report Global Standard Food Safety Issue 9

1. Audit Summary			
Company name	Glebe Farm Foods Ltd	Site code	1026834
Site name	Glebe Farm Foods Ltd - Flaking Flour & Dehulling		
Scope of audit	The dehulling and flaking of oats for flaked oats for further processing. The milling of flaked oats for oatmeal flour and oatmeal products. Products packed into bulk and retail ready bags.		
Exclusions from scope	Production of granola.		
Justification for exclusion	Production and activities carried out in a separate building.		
Audit start date	2023-12-14	Audit finish date	2023-12-15
Re-audit due date	2024-12-14	Head office	No

Additional modules included			
Modules	Result	Scope	Exclusions from Scope

2. Audit Results					
Audit result	Certificated	Audit grade	A	Audit programme	Announced
Previous audit grade	AA		Previous audit date	2022-12-14	
Certificate issue date	2024-01-15		Certificate expiry date	2025-01-25	
Number of non-conformities			Fundamental	0	
			Critical	0	
			Major	0	
			Minor	8	

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3. Company Details			
Site address	School Lane Kings Ripton Huntingdon PE28 2NL		
Country	United Kingdom	Site telephone number	+44 1487 773282
Commercial representative name	Tony Holmes	Email	tony@glebefarmfoods.co.uk
Technical representative name	Kerry Richards	Email	kerry@glebefarmfoods.co.uk

4. Company Profile					
Plant size (metres square)	<10K sq.m	No. of employees	1-50	No. of HACCP plans	1-3
Shift pattern	Monday to Friday 06:30-14:30; 14:00-22:00 (as required).				
Seasonal site	No				
Seasonal opening times (Start/end date)					
Other certificates held	ORGANIC, Kosher, FEMAS				
Outsourced processes	No				
Outsourced process description	Not applicable				
Regions exported to	Europe				
Company registration number	Not applicable				
Major changes since last BRCGS audit	None				

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Company Description	
<p>Established in 2008, Glebe Farm Foods is a privately owned company, and has been at the current site for 12 years. There are approximately 22 employees, working Monday to Friday, 06:30-14:30 and 14:00-22:00 (as required). The site has an annual turnover of £5-10 million, 1,200 tonnes per month. Products include flaked and milled oats which are packed in bulk bags, sacks or retail ready packs. Typical customers include food service, retail and manufacturers for further processing. The audit was undertaken in conjunction with the Gluten Free Certification Programme as a bolt-on. The audit was undertaken within the re-audit due date window.</p>	

5. Product Characteristics					
Product categories		15 - Dried food and ingredients 17 - Cereals and snacks			
Finished product safety rationale		Ambient stable, low water activity <0.6.			
High care	No	High risk	No	Ambient high care	No
Justification for area		Low risk: Product does not support the growth or survival of pathogens under normal storage and use. Enclosed product after cooking and cooling.			
Allergens handled on site		None			
Product claims made e.g. IP, organic		Gluten Free, Organic			
Product recalls in last 12 months		No			
Products in production at the time of the audit		Dehulling of oats for conventional porridge flakes; Gluten Free Jumbo Oats 25kg.			

6. Audit Duration Details			
Total audit duration	16 man hours	Duration of production facility inspection	6 man hours
Reasons for deviation from typical or expected audit duration	Products and processes are limited and similar in nature. Milling area not in production at the time of the audit. Only 1 HACCP plan with small workforce. The audit was undertaken in conjunction with the Gluten Free Certification Programme as a bolt-on.		
Combined audits	Other		
Next audit type selected	Unannounced – mandatory 1 in 3 years		

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Present at audit					
Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref: clause 1.1.11)					
Name	Job title	Opening meeting	Site inspection	Procedure review	Closing meeting
Tony Holmes	COO	X			
Philip Rayner	Managing Director		X		X
Kerry Richards	Technical Services Manager	X	X	X	X
Gavin St Leger	Operations Manager	X	X		
Serena Woolland	Head of Technical	X	X	X	X
Melissa Payne	Technical Compliance Quality Officer	X	X	X	X

GFSI Post Farm Gate Audit History			
Date	Scheme/Standard	Announced/Unannounced	Pass/Fail
2023-12-14	BRCGS Food Safety	Announced	Pass
2022-12-14	BRCGS Food Safety	Announced	Pass
2022-01-27	BRCGS Food Safety	Announced	Pass

Document control			
CB Report number	0645-F (2023)		
Template name	F908 Food Safety Audit Report Template		
Standard issue	9	Template issue date	2022-12-16
Directory allocation	Food	Version	1.1

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Non-Conformity Summary Sheet

Critical or Major Non-Conformities Against Fundamental Requirements

Clause	Detail	Critical or Major	Re-audit date
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Critical

Clause	Detail	Re-audit date
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Major

Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
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Minor

Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1.1.2	There is no action plan indicating how the activities will be undertaken and measured, and the intended timescales.	Head of Technical addressed during the monthly meeting.	Appointment of new head of Technical October 2023 to ensure food safety culture addressed.	No technical management since June 2023.	2023-01-10	K. Barcroft

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Minor						
3.4.1	The risk assessment for internal audits has identified the requirement for bi-annual audits, but this has not been adhered to for 2023.	Internal audits have been re written and will be trained out to the technical department during January to ensure internal audits can be executed in house.	A new risk assessment will be written during the month of January and over seen by the new Head of Technical to ensure all clauses have been assessed and signed off.	Due to no technical management from June 2023, the risk assessment had not been followed through correctly and was unclear what had been actioned and what was outstanding, as lack of evidence was not evident during the audit.	2023-01-10	K. Barcroft
3.4.3	Internal audits do not include objective evidence of the findings. Corrective and preventive actions and timescales for their implementation have not been agreed or their completion verified.	Internal audits have been re written and will be trained out to the technical department during January to ensure internal audits can be executed in house.	Internal audits will be undertaken by trained personnel at Glebe Farm Foods to ensure accuracy of the internal audits, along with supporting evidence.	Due to the lack of trained staff within the technical department, internal audits had fallen behind in accordance with the schedule.	2023-01-10	K. Barcroft
3.11.4	There is no reference to providing the certification body with sufficient information within 21 days in the event of a food safety, authenticity or legality incident.	Document no 124 has been updated to include supplying sufficient evidence to the auditing bodies within 21 days.	New proposed internal audit system within Glebe Farm Foods.	The detail was missed during the system audits/GAP for V9 BRC.	2023-01-10	K. Barcroft
4.7.3	During the site inspection of the milling area, silver tape was seen in use on equipment in the area.	The silver tape had been placed there to hold the repair in place as this had been glued, the tape was	A toolbox talk will be conducted and logged during the month of January for all engineering teams.	The temporary repair was an ad hoc request that was not logged via the shire system.	2023-01-10	K. Barcroft

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Minor						
		removed during the second day of the audit.				
4.14.2	There is no risk assessment in place to determine the frequency of inspections.	Contacted pest management team at 111shires to conduct risk assessment for inspections.	Investigating options for alternate pest management for Glebe Farm Foods during January.	Although the risk assessments had been conducted historically, the evidence was not available within the 111shires folders and not kept up to date.	2023-01-10	K. Barcroft
5.3.3	There is no risk assessment in place to identify routes of contamination.	Risk assessment clearly displaying Kings Ripton Farms as the supplier of Grain	The new internal audit schedule and assessment will be designed to pick up these areas to ensure clarity.	Although the risk assessment was evident within the raw material supplier approval via SAQ, the detail was not clear in the Allergen risk assessment and no reference to KRF	2023-01-10	K. Barcroft
7.1.5	There was no available training against the site's labelling and packing processes.	Bite sized training will commence with all production supervisors and staff during January 2024.	Training matrix in design between Technical and personnel to ensure every member of staff have received refreshers for all areas they are responsible for.	Change in personnel (HR) and no technical management from June 2023.	2023-01-10	K. Barcroft

Comments on non-conformities
None required.

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Additional Modules / Head Office Non-Conformity Summary Sheet

Critical		
Clause	Detail	Re-audit date

Major						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor						
Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

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Audit team

Lead auditor		
Auditor number	First name	Second name
23478	Gill	Seddon

Audit team				Attendance (YYYY/MM/DD, 24hr: MM)			Presence	
First name	Second name	Auditor number	Role	Audit Date	Start time	End time	Remote or physical	Professional recognition number
Gill	Seddon	23478	Lead Auditor	2023-12-14	08:00	18:00	Physical	
Gill	Seddon	23478	Lead Auditor	2023-12-15	07:30	17:30	Physical	

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Detailed Audit Report

1. Senior management commitment

Senior management commitment and continual improvement

Management System Reviewed

The site has a documented policy in place which states the intention of meeting the obligation of producing safe, legal and authentic food to the specified quality, as well as the responsibility the site has to customers. The policy is signed by the person with overall responsibility for the site, is communicated to all staff and includes commitment to continuously improve the site's food safety and quality culture.

The senior management have defined a clear plan for the development and continuing improvement of a food safety and quality culture. The plan includes measures needed to achieve a positive culture change with defined activities established in-line with the requirements of the Standard, an action plan indicating how the activities will be undertaken and measured, including the intended timescales, and a review of the effectiveness of completed activities. The plan is reviewed and updated at least annually.

Clear objectives are defined to maintain and improve the safety, authenticity, legality and quality of products manufactured, in accordance with the food safety and quality policy and this Standard. These were seen to be documented and include clear targets, were clearly communicated to staff, and routinely monitored at least quarterly.

Management review meetings attended by the site's senior management are undertaken at appropriate planned intervals, annually at a minimum, to review the site performance against the Standard and objectives.

The site have a demonstrable meeting programme which enables food safety, authenticity, legality and quality issues to be brought to the attention of senior management. These meetings occur at least monthly.

A confidential reporting system is in place to enable staff to report concerns relating to product safety, authenticity, legality and quality. The mechanism for reporting concerns were seen to have been clearly communicated to staff and a process is in place for assessing any concerns raised.

The site senior management have a system in place to ensure that the site is kept informed of and reviews:

- Scientific and technical developments
- Industry codes of practice
- New risks to authenticity of raw materials
- All relevant legislation in the country where the product will be sold.

The site maintains the appropriate registrations with the relevant authorities.

The COO was present during the opening meeting, with the Managing Director substituting during the closing meeting.

Compliance Evidence

Product safety and quality culture plan

Identification of culture: The site quality policy is in place, reference TEC001 V12 21/03/2023 signed by PR. Displayed on the notice board in reception area and on entry to the production facility and communicated via induction.

Defined activities and action plan: Food Safety Culture Plan V3 31/07/2023 in place, which includes the fact that employee engagement is considered central to maintaining a positive culture, with various initiatives and incentives planned to be instigated throughout the company which are reviewed at management meetings. There is an annual employee satisfaction questionnaire conducted, asking 20 questions under the headings of senior management support, site questions and your opinions. The feedback from the questionnaire is used to define activities / actions which are reviewed at monthly technical meetings.

The same survey has been repeated for the past 3 years. Issues highlighted this year include the fact that employees did not feel that they were praised for doing a good job, and that there was no recognition or monetary reward for doing a good job. However, year on year, there has been an improvement in all scores.

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Other activities include:

- Quarterly Town Hall meetings – presentation from SMT to all employees, business update, praise for team.
- Every new starter gets a welcome pack of products.
- Free tea and coffee in all canteens.
- Christmas party and voucher.
- Open door policy for all staff.
- Staff reviews.

Outcome of effectiveness review: Food safety culture is discussed in the monthly MPR meetings and progress of the defined activities is reviewed. Survey results were reviewed, with a target of 8 score across the board for 2024. Issues highlighted this year include the fact that employees did not feel that they were praised for doing a good job, and that there was no recognition or monetary reward for doing a good job.

Status of plan: The plan is currently on-going, with timescales set for each of the actions.

Review frequency: The product safety and quality culture plan is reviewed at least annually.

Last review date: October 2023.

Quality, safety and legality objectives

A sample of the objectives set for the current year:

- Objective: Incoming BULK materials testing positive for Gluten. Target 0.
- Objective: Total outgoing BULK materials tested positive for gluten >5ppm. Target 0.
- Objective: Number of MAJOR justified complaints per month, target <5 for the whole site.
- Objective: Number of MINOR justified complaints per month, target <10 for the whole site.
- Objective: GMP audit compliance >85%.

A review of the objectives takes place at least quarterly by the senior management team, the last review was undertaken in October 2023, and reviewed September 2023 data.

Review of objectives: All objectives were seen to be beating or meeting targets. Gluten tests – incoming ok, outgoing BULK gluten – 2 results above 5ppm, which passed on retest. GMP compliance – all areas >85%. Complaints – YTD 15 complaints in total. 2 complaints were for a customer reaction to eating oats from Bells and 1 underweight bag of porridge for Nairns. Total number of complaints for 2023 – 15, against a total of 37 in 2022.

Management review

Frequency of management review meetings: Management review meetings are undertaken at least annually.

Typical meeting attendance: All members of the senior management team attend the meeting, with apologies sent if required.

Date of last management review: 24/01/2023. The meeting included all the requirements of the standard with an agenda in place. Actions included to implement BRCGS V9 and a training matrix for site.

How minutes and actions are communicated to staff and recorded: Sent electronically to all members of the senior management team.

Regular Meetings

Operational review meeting frequency: Undertaken at least monthly.

How meetings and discussions are recorded and communicated to staff: Annual Management Review, weekly SMT meeting, daily operational review, monthly technical meeting, HACCP meetings at least annually or as required.

Reporting food safety issues

Issue reporting: Whistleblowing Policy 1.1.6 V2 26/07/2022. The site has a whistleblowing policy in place with a suggestion box situated in each canteen area (outside CCTV coverage). No concerns related to food safety.

System to resolve issues raised: Investigation procedure included within the Whistleblowing Policy, which details how an issue would be resolved. Any issues would be raised and discussed at the SMT meeting.

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Previous Non-conformities

The non-conformances raised during the previous audit have been closed out by the site, with adequate root cause provided and suitable preventive action in place.

**Organisational structure, responsibilities and management authority
Management System Reviewed**

There is an organisation structure in place with clear lines of communication demonstrating the management structure of the site. Systems were seen to be in place to demonstrate that responsibilities for quality, safety, authenticity and legality are clearly defined and understood by all staff. Communication and reporting channels are in place to report on and monitor compliance with the standard. All staff have access to the relevant systems and procedures to support compliance to all aspects of the standard. There is a documented list of deputies for those staff who are involved in decisions made in respect to quality, safety, legality and authenticity.

Compliance Evidence

Summary of management structure: The site is headed up by a Managing Director, with 3 direct reports. These have Senior Managers below them, with teams below them.
 Organisational structure reference: Form 122 V20 12/12/2023. There is a separate list of deputies for cover in case of absence – Organisational Structure, Responsibilities and Management Authority 1.2 V19 03/10/2023.
 The staff structure was seen to be up-to-date at the time of the assessment.
 Processes to ensure staff are aware of their responsibilities: Job descriptions are in place for all staff which outlines the key responsibilities, which are signed by the relevant members of staff.
 External product safety expertise: The site was not utilising any external consultants at the time of the assessment.

A minor non-conformance was raised against clause 1.1.2 of the Standard - There is no action plan indicating how the activities will be undertaken and measured, and the intended timescales.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
1.1.13	The site does not use the BRCGS logo or make reference to certification

2. The Food Safety Plan – HACCP

Management System Reviewed

A detailed and documented HACCP plan has been implemented by the site which incorporates the principles of Codex Alimentarius. An experienced and suitably trained HACCP Team Leader manages a HACCP team who are all experienced in their field and have been able to demonstrate specific knowledge of HACCP and relevant knowledge of products, processes and associated hazards. HACCP training and qualifications were reviewed for the Team Leader and a selected number of HACCP team members. The scope of each HACCP Plan has been defined and includes the products and processes covered in this assessment. A documented prerequisite programme has been established and was seen to be working effectively, PRPs were challenged as part of the site tour and vertical audit and found to be in place. A documented and detailed list of prerequisite programmes is in place. The control measures and monitoring procedures for the prerequisite programmes are clearly documented and included within the development and reviews of the HACCP plan. Documentation and record-keeping were seen to be sufficient to enable the site to verify that the HACCP

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and food safety controls, including controls managed by prerequisite programmes, are in place and maintained.

Compliance Evidence

HACCP Team

HACCP Team Leader Details:

- Team Leader: FM (Technical Consultant)
- Experience: 6-month contract with the business, with 10+ years food manufacturing experience.
- Training / Qualifications: Intermediate (Level 3) HACCP 10/01/2007 from RIPH.

HACCP Team Details:

- Team Members: PR, GL, RV, DF, KR, RR, MP
- Experience: All team members were observed to have experience commensurate with the defined responsibilities within the HACCP team.
- Training / Qualifications: Various levels of training and qualifications were seen from the HACCP team members, all members were seen to have a suitable level of training for their respective position within the team.

The site has a clearly defined pre-requisite programme in place: HACCP08 V5 27/09/2023 which lists all PRPs including layout, product flow and segregation, calibration, pest control, control of chemicals, air quality, temperature control & storage, PPM, waste control, potable water, laundry & PPE, factory & site hygiene, foreign body control, specifications, personal hygiene, training, RM supplier approval and purchasing, traceability, allergen control, non-conforming product, corrective actions, internal audits, complaint handling, NPD, control of visitors and contractors, transportation, management of incidents / product withdrawals, site security and food defence, product testing, control of operations, hygiene and housekeeping.

PRP Document reference: HACCP08 V5 27/09/2023.

Scope of HACCP

The site manufactures the following group of products:

- Product description: The dehulling and flaking of oats for flaked oats for further processing. Products packed into bulk and retail ready bags.
- Product description: The milling of flaked oats for oatmeal flour and oatmeal products. Products packed into bulk and retail ready bags.

The scope of the HACCP accurately reflects all products on site.

Key processes undertaken: Intake, destoning, de-awning, dehulling, polishing, weighing, metal detection, colour sorting, filling, sieving, steaming, milling, drying, palletising, jet filtering, vibro sifting.

Process flow diagram

Key process steps: The dehulling and flaking of oats for flaked oats for further processing. The milling of flaked oats for oatmeal flour and oatmeal products. Products packed into bulk and retail ready bags.

The following flow diagrams were reviewed as part of the assessment:

- Flow ref / title: Bulk flour line process line BU003 V6 16/08/2023.
- Flow ref / title: Dehulling line BU002 V6 16/08/2023.
- Flow ref / title: Bulk flake line BU001 V11 14/08/2023.

Flow diagrams were last reviewed: 16/08/2023.

All flow diagrams were reviewed and accurately reflect the production processes undertaken by the site.

Hazard analysis

The hazard analysis and risk assessment were seen to be based on comprehensive information sources and the severity of the hazard verses the likelihood of occurrence had been considered.

The following hazards were identified by the site within the HACCP plan and hazard analysis:



- Microorganisms: Coliforms, *E. coli*, *Enterobacteriaceae*, *Staphylococcus aureus*, *Listeria*, *Salmonella*, Yeasts and Moulds, *Clostridium botulinum*, *Bacillus cereus*, Aflatoxin, Mycotoxin.
- Physical Contamination: Raw material packaging, machine parts, knives, pallets, personnel (e.g. jewellery), wood, plastic from crates, natural debris associated with growing process (stones, soil, insects). Contamination from raw materials, from the factory and from pest infestation.
- Chemical & Radiological Contamination: The site have considered radiological contamination and have not considered this to be a significant hazard. Chemicals and lubricants, packaging migration, heavy metals.
- Fraud and Malicious Contamination: The site have considered internal and external threats and have not considered any significant hazards in relation to fraud or malicious contamination.
- Allergens: The site does not handle any allergens and no significant hazards identified in relation to allergens has been identified.

Critical Control Points, limits and controls

The following control measures are used to control specific hazards: Metal Detection.
 Corrective action in event of failure of control measure: Stop production. Place on QA hold. Product will be re metal detected based on incident investigation.
 Validation of control measures: Validation conducted JUL-2015, no changes.

Critical control points have been determined using the HACCP decision tree process, the following critical control points have been determined:
 CCP: Metal Detection

- Critical Limit: Bulk Flour Line Fe 1.0mm, Non-Fe 1.2mm, SS 1.5mm; Bulk Flake Line Fe 1.1mm, Non-Fe 1.2mm, SS 1.5mm; Organic Flour Line Fe 1.5mm, Non- Fe 2.0mm and SS 2.5mm.
- Monitoring & Frequency: Monitoring conducted start and end of each day and every hour in between.
- Corrective Action: Stop production. Place on QA hold. Product will be re metal detected based on incident investigation.
- Validation: Validation conducted JUL-2015, no changes.
- Challenged during audit: Yes, RV.

Validation, verification and review

Validation of HACCP plan: Ongoing as changes are identified, last carried out August 2023.
 Verification of HACCP plan: Ongoing through internal audits, number of product holds, record reviews and customer complaints.
 Date last HACCP review: Annual HACCP 16/08/2023
 Outcome of last HACCP review: Undertaken as part of routine review by the full HACCP team, no significant changes were identified as being required.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification

3. Food safety and quality management system

3.1 Food safety and quality manual, 3.2 Document control, 3.3 Record completion and maintenance

Food safety and quality manual Management System Reviewed
 The site has a food safety quality management system which covers the scope of the BRCGS Food

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Safety Standard and contains the policies, procedures and work instructions required to implement the Standard requirements. The system documents reflect the clauses of the standard and break down into several management procedures, further into policies, work instructions and records. The system is reviewed and communicated as an on-going process at operational meetings and through the internal audit process.

Compliance Evidence

Access & availability by staff to the documented quality system: The Food Safety Quality Manual covers the scope of the Global Standard for Food Safety V9 and contains the appropriate policies, procedures, and SOP's. The site team works with a Quality Manual, Procedures and Work instructions which are available as soft copies, as required. Only the TSM, can do any administration work on them, with only soft copies being kept in the technical office. All documentation challenged and reviewed was observed to be clearly legible, unambiguous, in appropriate languages and sufficiently detailed.

Document Control

Management System Reviewed

There is an effective document control system in place that ensures only correct versions of documents, forms and procedures are in use at any time. There is an index of controlled documents indicating the latest version number. The method for the identification and authorising of controlled documents is through the control system, documents are identified by title, issue number and date and changes are recorded on the list of controlled documents.

Compliance Evidence

The controlled documents seen during the audit were seen to be compliant with the requirements of the Standard.

Record completion and maintenance

Management System Reviewed

The site maintains genuine records to demonstrate effective control of product safety, legality and quality. Records are held for a defined period.

Compliance Evidence

Minimum record retention period based on the shelf-life of the product: Records are retained for a period of the shelf life (12 months) plus 12 months.

Electronic system is password protected with individual forms password protected to prevent alteration. The server is backed up each day to prevent loss via an offsite third-party approved IT company (Nubis). The completed records seen during the audit were seen to be compliant with the requirements of the Standard.

3.4 Internal audits

Management System Reviewed

The site has demonstrated that there is an Internal Audit Plan in place, which covers: HACCP, prerequisite controls and procedures implemented to achieve the Standard. The scope and subsequent programme of internal audits detailed within the schedule covers the HACCP plan, pre-requisite programmes, food defence programmes and procedures implemented to meet the requirements of the Standard. Audits are scheduled and undertaken at a frequency based upon risk and previous audit performance. Internal auditors are suitably trained, and impartiality is maintained, the audit plan is completed and is reviewed during the management review. Internal audit reports have a defined scope and detail conformity as well as non-conformity, results are notified to the person responsible for the process and root cause identified to determine appropriate corrective action. There is also a system which ensures that documented hygiene and fabrication inspections take place at a frequency based on risk.

Compliance Evidence

Audit programme based over a period of time: The internal audit programme is spread across the year,



with audits carried out at least quarterly and based on risk.
 Schedule in place, reference Internal Audit Schedule 2023. Some audits are scheduled for completion twice yearly and all others annually, based on historical risk assessment.
 Risk determination: Systems audit 2023 V1 13/01/2023.
 Details of the internal auditor training: Audits are carried out by consultant (JB). Third Party Auditor BRC Food 22/06/2007.
 Internal auditor competence: All internal auditors demonstrated suitable levels of competence.
 Internal audit reporting and follow up: Completed internal audits are reported to the managers responsible and closed out within defined timescales based on the non-conformity identified.
 Review of the following Internal system audit reports:

- Report: HACCP carried out by JB 02/02/2023. 1 non-conformance raised.
- Report: 5.4 Product Authenticity carried out by JB 27/10/2023. No issues raised.
- Report: 6.1 Control of Operations carried out by JB 10/11/2023. Non conformances raised to do with milk plant (not under this scope).

Review of the following GMP, Hygiene & Fabrication audit report: Monthly – dehulling and flaking and flour.

- Report Date: Dehulling – November 2023
- Report Outcome: 94.12% (target >85%)
- Report Date: Flaking and Flour – November 2023
- Report Outcome: 96.43% (target >85%)

A minor non-conformance was raised against clause 3.4.1 of the Standard - The risk assessment for internal audits has identified the requirement for bi-annual audits, but this has not been adhered to for 2023.

A minor non-conformance was raised against clause 3.4.3 of the Standard - Internal audits do not include objective evidence of the findings. Corrective and preventive actions and timescales for their implementation have not been agreed or their completion verified.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw material and packaging

Management System Reviewed

The site operates an effective supplier approval and monitoring programme, all raw materials bought and used on site are sourced through approved suppliers and monitored at regular intervals, suppliers of ingredients, packaging, products, and services are risk assessed accordingly and approved, then entered onto the approved supplier system before they can be used. The site has ensured that they have the current and up-to-date information regarding the supply chain from the relevant departments responsible. A documented risk assessment has been completed of each raw material or group of raw materials including primary packaging, which considers the potential for allergen contamination, foreign-body risks, microbiological contamination, chemical contamination, variety or species cross-contamination, substitution or fraud and any risks associated with raw materials which are subject to legislative control or customer requirements. The approval procedure is based on, or a combination of, certification to a valid GFSI benchmarked standard with a scope that includes the raw materials purchased, supplier audits, or a completed supplier questionnaire that has been reviewed and verified. Supplier performance is reviewed and where questionnaires are used, these are reissued at least every three years. A documented approved supplier list is retained and is updated as required; this is available to relevant staff. As part of the system a review of suppliers is undertaken as an on-going process, the period of review is dependent on the supplier risk and includes obtaining up to date copies of the relevant GFSI certificates. The risk assessment is updated when relevant changes occur and is reviewed at least every three years. Consideration is also given to the significance of a raw material to the quality of the final product. The system also includes the ability of the supplier to provide traceability of materials and packaging supplied and also details where any exceptions are applicable.

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Compliance Evidence

Raw material risk assessment reference: Risk assessment ‘supplier approval spreadsheet including VACCP’ – 24/02/2023 in place which includes the oats as the only raw material within the scope of manufacture. Assessed on VACCP, Microbiological, Chemical, Allergens, Physical and Species. Organic risk assessed as medium due to risk of adulteration.

Supplier approval procedure reference: Supplier and Raw Material Approval and Performance Monitoring Form 3.5 V14 04/07/2023.

The supplier approval procedure reviewed was seen to be suitable and effective for the site, with no issues noted.

A sample of suppliers reviewed as part of this assessment:

- Raw material supplier: The family-owned farm (Kings Ripton Farm (KRF) is the sole supply of oats to the site who are approved based on SAQ dated 03/03/2022. They are also Red Tractor accredited – Member number 34235, expiry 30/06/2024.
- Packaging supplier: East Riding Sacks (paper bags) SAQ in place dated 27/04/2022. Also have ISO 9001:2015 Certificate number FM 09935, expiry 25/12/2024. Supplier Nordic Paper ISO 9001:2015.
- Packaging supplier: LBK Packaging SAQ in place dated 01/04/2022. Supplier is NNZ Ltd BRCGS site code 1450305, expiry 11/01/2025.

Frequency of on-going approval: Suppliers are reviewed every 3 years, with an annual check in place for their accreditation.

Evidence of effective supplier traceability systems in place: All suppliers were seen to have been certificated to GFSI benchmarked schemes or other third-party scheme with a scope that includes traceability. A number of third party certificates were reviewed during the assessment. Supplier of oats provide traceability information to the site of the grower and variety of each harvest.

3.5.2 Raw material and packaging acceptance, monitoring and management procedures

Management System Reviewed

Controls on the acceptance of raw materials (including primary packaging) are in place to ensure that these do not compromise the safety, legality or quality of products and where appropriate, any claims of authenticity.

There is a procedure for the acceptance of raw materials and primary packaging where goods are monitored at delivery based on visual inspection and any specific requirements based on the type of product.

The in-take staff are provided with details in respect to the material attributes, and inspection of the goods matches the requirements. As part of the process, an inspection of the goods and the vehicle is undertaken prior to any off-loading.

Compliance Evidence

Raw material acceptance procedure: Goods Intake Procedure SOP16 V8 31/07/2023. This includes all raw materials, and packaging.

Intake of grain is into KRF, who ensure the grain comes from Red Tractor Assured farmers and is transported via TASC approved hauliers. Intake of oats into Glebe Farm Foods is done from the neighbouring KRF building after it has been cleaned, sieved, moisture tested, and gluten tested. No physical inspection of the raw materials takes place. However due to the business set up, the site has full control of the incoming materials. Packaging is visually inspected on arrival recorded on Material Intake Release Form 90 V10 31/07/2023.

3.5.3 Management of suppliers of services

Management System Reviewed

A range of service suppliers are included in the supplier approval process and formal service agreements and/or contracts are in place for all service providers. There is also a process in place which ensures that service providers are regularly monitored and subjected to a formal and on-going review.



Compliance Evidence

Summary of approval and monitoring process: Included in Supplier and Raw Material Approval and Performance Monitoring Form 3.5 V14 04/07/2023.

Reviewed the following key service providers, including agreements in place:

- Pest control: Three Shires, annual rolling contract in place
- Transport and distribution: Masters, Swannells SLA in place dated 23/03/2023.
- Laboratory testing: MS Labs (UKAS 1625), Romer Labs (UKAS 4400), annual review in place.
- PPE Laundering: Elis, 5-year contract in place
- Food safety consultants: Agri Food Consultancy (JB)

3.5.4 Management of Outsourced processing

Management System Reviewed

The site has indicated during this assessment that it does not outsource any processes or manufacturing activities, therefore the requirements of this section of the Standard are not applicable.

3.6 Specifications

Management System Reviewed

Detailed and controlled specifications are available for all products including the raw materials and primary packaging and include details of defined limits for relevant attributes of the chemical, microbiological, physical or allergen standards. The system also includes where specification approval is from other various parts of the business. Information gathered at the assessment showed that these are reviewed when changes to the product, process, formulation or a combination of any have been made, or at least every three years. The site demonstrated that it gains formal approval of specifications between all relevant parties.

Compliance Evidence

Specifications were seen to be available for all products challenged, with the controlled specifications kept electronically. The specifications which were reviewed include limits for relevant attributes.

Raw material specification challenged: Incoming raw materials are oat groats only with agreement in place between the supplier and the site – reviewed Contract terms for the growing of Gluten Free Human Consumption milling oats KRF10 Milling Contract (KRF) V5 20/07/2022.

Packaging material specification challenged: Tote Bags coated white PP fabric dated 21/02/2022.

Finished product specification challenged: Gluten Free Jumbo Product code 40002, dated 31/07/2023.

Last specification review: Specifications are reviewed every 3 years, or as required.

3.7 Corrective and preventive actions

Management System Reviewed

The site has a procedure in place for handling and correcting failures identified within the food safety and quality management system. Where a non-conformity places the safety, legality or quality of products at risk or where there is an adverse trend in quality, this is investigated and documented, which includes:

- Clear documentation of the non-conformity.
- Assessment of consequences by a suitably competent and authorised person.
- The corrective action to address the immediate issue.
- Completion of root cause analysis to identify the fundamental cause (root cause) of the non-conformity.
- An appropriate timescale for corrective and preventive actions.
- The person responsible for corrective and preventive actions.
- Verification that the corrective and preventive actions have been implemented and are effective.

The site has a procedure for the completion of root cause analysis which is used to prevent recurrence of non-conformities, and to implement ongoing improvements when analysis of non-conformities for trends shows there has been a significant increase in a type of non-conformity.



Compliance Evidence

Procedure reference: Corrective and Preventive Action 3.7 V8 31/10/2-23. Where root cause analysis is required, the site shall use the 5 whys method documented on Form 256 V2 12/07/2022.

The corrective action, preventive action and root cause analysis procedure was reviewed with no issues noted, the site have confirmed it has been determined to be suitable and effective.

Example of corrective action close out reviewed: Reviewed NCR 66 raised on GMP audit 06/12/2023. Old roofing with wooden pallet sat on top. Raised on 06/12/2023, closed out 08/12/2023. A month timescale is provided for the closure, and this is tracked on the non-conformance log. No examples of root cause analysis have been conducted in the last 12 months.

3.8 Control of non-conforming product

Management System Reviewed

The site ensures that any out-of-specification or non-conforming product is effectively managed to prevent unauthorised release including quarantine activity. Records are maintained in the various product / customer files, in addition a member of the senior management team is responsible for products which are available for release. There are procedures for managing non-conforming products that include the requirement for staff to identify and report a potentially non-conforming product, clear identification of a non-conforming product, systems to prevent accidental release, management of any product returned to the site, referral to the brand owner where applicable, defined responsibilities for decision-making on the use or disposal of products and records of the decision on the use or disposal of the product or its destruction.

Compliance Evidence

Non-conforming product procedure: Control of non-conforming product 3.8 V7 08/07/2022.

Management of product returned to the site: No returns are accepted due to risk to product.

Review of a non-conforming product: Electronic hold used on the Sage system to prevent product release to the customer. Nothing on hold at the time of the audit.

3.9 Traceability

Management System Reviewed

The site have a documented traceability procedure designed to maintain traceability throughout the site's processes. The procedure includes:

- How the traceability system works.
- The labelling and records required.

The traceability system meets the legal requirements in the country of sale or intended use.

The system ensures the traceability of raw materials and packaging materials from supplier through all stages of processing, and then to the distribution of finished goods to the customer and vice versa.

Compliance Evidence

Traceability procedure reference: Traceability 3.9 V9 08/07/2022.

All incoming groats are processed by the grower and the variety which is used as traceability through the production process. Production batch codes are provided on delivery notes as dispatched to the supplier. Batch numbers work from Julian codes.

Overview of the traceability system: All incoming items are given a unique trace code which follows the product throughout the production process. Production batch codes are provided on delivery notes as dispatched to the supplier.

Traceability test details instigated at this assessment (including product, printed packaging and labels, date of production/packing, quantities reconciled, and key documentation reviewed including process control and quality control documentation):

- Product chosen: Gluten Free Jumbo Oats 800kg, batch code 23265, DOP 22/09/2023. 19 pallets produced.
- Packaging and labels: Tote bags, with outer label.
- Raw material mass balance details: Tote bags – opening stock of 1243 on 30/03/2023, with delivery on 19/04/2023 of 880 bags. Total on site of 2123. Usage between 17/05/2023 and



20/09/2023 reduced stock to 1980. Bags used in production on 20/09/2023, with resulting total of 1961. All stock accounted for.

- Start and finish time: 09:30 – 13:30.
- Key documentation reviewed:
 - Stock transactions batch serial numbers report.
 - Dehulling processing form.
 - Raw oat cleaning records.
 - Oat flakes production record.
 - Vehicle check sheet.
 - Knife/scissor/needle register form.
 - Gluten free test results.
 - Dispatch records.

The site challenges the traceability systems annually, with the last in-house traceability test having occurred within the last 12 months.

3.10 Complaint-handling

Management System Reviewed

The site has a detailed complaints system in place, all complaints are recorded and investigated. Actions resulting from the complaint are carried out promptly and effectively by appropriately trained staff and complaint data is analysed for significant trends. Root cause analysis is used where significant complaints occur.

Compliance Evidence

Process for managing complaints: All complaints are investigated, analysed, a root cause analysis is undertaken where it is required and close out fully documented.

Overview of complaint trends and how analysed: Complaint Handling 3.10 V9 08/07/2022. Complaints are tracked and investigated by the technical team.

Highest complaint type and cause: There have been 15 complaints received YTD, with only 2 justified. This is compared to a total of 37 received in 2022. There are no trends identified.

3.11 Management of incidents, product withdrawal and product recall

Management System Reviewed

Procedures are in place to effectively manage incidents that impact food safety, authenticity, legality or quality. This includes consideration of contingency plans in the event of disruption to key services, staff availability and communications, events such as fire, flood or natural disaster, malicious contamination or sabotage, product contamination indicating a product may be unsafe or illegal, failure of, or attacks against digital cyber security. The site has a plan and effective system in place to manage incidents and enable the withdrawal and recall of products should this be required. Key personnel are involved in assessing potential product withdrawals and the process is managed by the senior management team.

Within the procedure the following activities have been included:

- Identification of key staff.
- Guidelines on the criteria for a product to be withdrawn or recalled.
- Key contact list, including notification to the CB within 3 working days.
- Communication plan.
- External agencies to be contacted.
- Logistics plan for any product recalls instigated.
- Disruption to key services.
- Events such as fire, flood or natural disaster.



Compliance Evidence

Procedure reference: Management of Incidents, Product Withdrawal and Product Recall 3.11 V14 29/11/2023.

Crisis Management Manual Form 124 V15 17/07/2023.

The incident management and product recall procedure was reviewed which was seen to contain sufficient detail and no issues were noted.

Details of latest test: 01/11/2023 carried out on Gluten Free Oats 800kg DOP 22/09/2023, with the scenario of clumps of oats. All product accounted for. No issues raised.

Conclusions and improvements: Successful test carried out, no improvements identified as being required.

Recalls or food safety incidents since last audit: None.

CB notification: The procedure details the requirement to notify the certification body within 3 days of a significant food safety incident, authenticity or legality incident, including a product recall or a regulatory food safety non-conformity.

A minor non-conformance was raised against clause 3.11.4 of the Standard - There is no reference to providing the certification body with sufficient information within 21 days in the event of a food safety, authenticity or legality incident.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
3.5.1.7	There are no exceptions to the supplier approval process.
3.5.4	No process or manufacturing steps are outsourced to a third party.
3.6.3	The site does not manufacture customer branded products.
3.9.4	No reworking is undertaken.

4. Site standards

4.1 External standards and site security

Compliance Evidence

The site was found to be suitable in size for the business and its operations and located in an area which did not present any issues likely to affect the safety or legality of products. The site has stated that there are no local activities seen which may have an adverse impact on the safety or quality of the finished product or raw materials. External areas around the site were found to be well managed and maintained, grassed areas away from the buildings were deemed suitable, external traffic routes which come under the responsibility of the site are suitably surfaced. There is a suitable clear zone surrounding the facility which prevents any threat to the products or processes. External building fabric was inspected during the external site review and was maintained to a good standard to minimise the potential for any product contamination. Adequate site drainage was seen to be in place during the external inspection, this included gutters and drainpipes and drains around the external pathways. The actual measures in place are covered by confidentiality, however various measures seen during the assessment included locked doors to prevent unauthorised access and various areas included in a CCTV system. Staff and visitor access to the site is controlled and the security systems in place ensure that unauthorised access is not permitted. Systems are in place to ensure that only authorised personnel have access to production and storage areas and access by employees, contractors and visitors is controlled. A visitor recording system is in place.

The site is used for alternative businesses including the storage of caravans and motor homes, which is in a segregated area with additional security.

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4.2 Food defence

Management System Reviewed

The site has a documented risk assessment of the security arrangements and potential risks to products from the deliberate attempt to inflict contamination or damage from both internal and external threats. The site security arrangements in place have been assessed to ensure the integrity of products, premises and brands, including malicious actions during all times whilst the products are on site. Where personnel are engaged in threat assessments and food defence plans, the individual or team responsible understand potential food defence risks at the site.

A documented food defence plan has been established and has included the potential threats to the business. The plan is reviewed at least annually.

Compliance Evidence

Plan reference: Site Security and Food Defence Plan Form 4.2 V8 02/12/2022. Risk Assessments file which includes site security 21/08/2023. Food defence plan in place with a series of questions answered to deem the site low risk.

Last reviewed and updated: 21/08/2023

Suitability of the food defence plan: No issues noted with the plan, which has been deemed as suitable by the site.

Examples of threats and control measures: No issues noted with the plan, which has been deemed as suitable by the site. Gated entry, wide dyke surrounding the perimeter and CCTV on site. Keypad entry to production areas. Staff trained in site security.

Improvements to the plan in the last 12 months: As part of the annual review of the defence plan, the site have assessed that no improvements were required.

Training records reviewed: Site security training seen for WC against Site Security SOP 14 V2 dated 08/07/2022.

4.3 Layout, product flow and segregation

Management System Reviewed

The factory layout, flow of processes and movement of personnel are considered to prevent the risk of product contamination and to comply with all relevant legislation. The site has also identified areas where additional requirements including segregation based on risk have been identified. There is a map of the site, which includes production risk zones, access points for personnel, raw materials (including packaging), semi-finished products and finished products.

There is a system in place to control any activities which would require a temporary structure. The site ensures that no products or processes are put at risk during any such activities should they take place.

The process flow from intake to dispatch has been arranged to minimise the risk of contamination or damage to the product. The current premises allow enough working space and storage capacity to enable operations to be carried out properly under safe and hygienic conditions.

Compliance Evidence

Overview of the site layout including segregation and production risk zones: The site was seen to be fit for purpose and of a suitable size. The manufacturing area is located within the centre of the farm with buildings separated into dehulling, flaking and milling. There is also a finished goods warehouse.

Contractors and visitors are required to sign in on arrival and follow the site rules.

Site plan details: Site plan in place with routes for personnel, waste and product within the flow; doc ref 3211-14 Site plan 31/05/2023.

Adequacy of layout: All areas allowed for sufficient working space and facilitated cleaning and any maintenance and calibration activities as required.

Contractors, visitors and drivers' awareness of the requirements for the area visited: Clear instructions are provided for any visitors which require access to areas, with any visitors accompanied by their site contact at all times.



4.4 Building fabric, raw material handling, preparation, processing, packing and storage areas

Management System Reviewed

The fabric of the building is suitable for the intended purpose and in good condition and repair. Walls were seen to be in good condition and of a suitable finish to facilitate cleaning. Where elevated risks are identified due to the status of individual areas, these have been documented in the relevant section of the report.

Floor surfaces are hard wearing, impervious and suitable for purpose. Ceilings were in good condition, this included potential risks to the product from overhead debris. The site has effective lighting available in all parts of the storage and processing areas. These provide adequate illumination for processing and product inspection.

Adequate drainage, ventilation and extraction were seen to be provided where required, in good condition and working effectively.

Compliance Evidence

Materials of fabrication for internal walls: Observed to be in good condition, materials include white washable cladding. Some fork truck damage observed, with low level cladding introduced as a result.

Materials of fabrication for floors: Hardwearing, epoxy coated flooring and fit for purpose.

Materials of fabrication for ceilings: White coated corrugate ceiling. No issues observed.

Drainage provision: Sinks are fitted directly to drains, no issues noted with drainage.

Details of elevated walkways, access steps or mezzanine floors: Elevated walkways in place were observed to be in good condition and not pose a risk to products.

Method of window protection to prevent pest ingress: There were no windows within the production area which were identified as a hazard for pest ingress.

Door suitability: Various doors were observed during the assessment, including fire doors. All doors observed were seen to be close fitting and in suitable condition.

Lighting suitability: Adequate lighting in place.

Suitability of ventilation and extraction: Normal ventilation in place with no pest issues noted. Dust extraction in place.

Details of strip curtains: All maintained in good condition, clean and fitted correctly.

4.5 Utilities – water, ice, air and other gases

Management System Reviewed

Water has been assessed and pose no risk of contamination according to applicable legislation. Water testing takes place in accordance with the schedule and records are available. There is a water testing schedule in place with a frequency of analysis that is based on risk. An up-to-date schematic diagram of the water distribution system is available. The diagram is used were required as a basis for water sampling and the management of water quality.

Compliance Evidence

Summary of water distribution: Water mains system, fed from the water main, includes various sample points.

Water testing: The site has reviewed the water chemical and microbiological results from the local authority.

The site also takes samples of water to send to a contracted laboratory, with all results reviewed seen to be within specification or managed appropriately, the last test was undertaken on 07/12/2023.

Water use: Water is used for handwashing, cleaning and as steam within the production process. The site has reviewed the water chemical and microbiological results from the local authority (Anglian Water).

Annual testing in place, with 17 sample points. Each point tested once per year.

Reviewed canteen sinks x 3 sampled on 07/12/2023. Results acceptable.

Testing limits are TVC at 22°C <1000 cfu/ml, TVC at 37°C <1000 cfu/100 ml, Coliforms <1 cfu/100ml, *E. coli* <1 cfu/100ml.

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Steam: Water is direct from the mains to the steamer which is heated to above 100°C, as the enzyme is destroyed by steaming to avoid rancidity and used to steam the oats. Lipase activity is tested which demonstrates that the water has not fallen below 80°C.

4.6 Equipment

Management System Reviewed

The production and product-handling equipment is relevant, has been designed to be industry specific and is suitable for the manufacture of products. There are documented purchase specifications available detailing the site requirements for the equipment. Materials used include a combination of stainless steel and food grade materials and plastics, including those suitable for direct contact. The design and placement of equipment facilitates effective cleaning and maintenance. The design and construction of equipment is based on risk, to prevent product contamination. Equipment that is in direct contact with food is suitable for food contact and meets legal requirements where applicable. A documented, risk-based commissioning procedure is in place to ensure that food safety and integrity is maintained during the installation of new equipment to site. A procedure is in place to manage the movement of static equipment in production areas, to ensure that food safety is managed and the integrity of the equipment is maintained. Equipment that is not used or is taken out of service is cleaned and stored in a manner that does not pose a risk to the product. During the assessment all equipment was seen to be readily accessible for the purpose of cleaning and maintenance.

Compliance Evidence

Overview of the key equipment: When sourcing new equipment, the intended use, risk of contamination and method of cleaning is considered as well as the ease of access for inspection and hygiene. Equipment on site was seen to be fit for purpose and well maintained. Included within the process are bucket elevators, sieves, magnets, aspirators, rotating drums, table dressers, stitchers, dryers, roller mill. All equipment was seen to be made from stainless steel.
 Purchase specifications: No new equipment has been purchased since the introduction of V9 BRCGS.
 Commissioning procedure: Equipment Checklist (Commissioning) Form 270 V1 17/08/2023 which includes pre-assessment and approval.
 Procedure for movement of static equipment and risk: Movement of Static Equipment Procedure Form 278 V1 25/09/2023.
 Storage of equipment not in use: Any equipment not in use was seen to be correctly stored.
 Battery charging equipment: Not stored in open product areas (unless the batteries are fully sealed and/or maintenance-free) or in areas where there is a risk to products.

4.7 Maintenance

Management System Reviewed

The site has a documented process which includes machinery inspection, this covers items of production equipment, mobile equipment and plant to prevent contamination and reduce the risk of breakdown. There is a system in place which ensures equipment is subjected to regular inspection to ensure that the product is not put at risk following maintenance activities. The maintenance requirements are defined when commissioning new equipment and reviewed after repairing existing equipment. A formal system is in place which ensures that temporary repairs are controlled and managed. The site has established a system which ensures that equipment is only handed back into the process by an authorised member of staff. There is also a documented line clearance procedure in place which records that contamination hazards have been removed. A documented list is available of approved food grade materials used on equipment which have been deemed safe and appropriate, including allergen status.

Compliance Evidence

Planned maintenance programme / schedule details: PPM's are managed using a Shire System, with work planned and allocated to respective engineers using their iPads. All work is planned in over a 12



month period, with work taking place on a risk assessed basis.

Review of maintenance requirements: The onsite maintenance team manage the majority of the equipment and external contractors are used as required.

Post maintenance management: All tools are removed; equipment is cleaned and line is confirmed as ready to start-up.

Temporary repairs: Not routinely carried out.

Records of maintenance work reviewed: Reviewed PPM 0534 for dehulling 3 monthly PPM carried out 13/11/2023. Each job requires 3 signatures post completion – operator, engineer and a third signature to state that the area is clean.

Reviewed reactive job number 0650 raised on 14/12/2023 for pump behind the glycol tank fed from the RO tank leaking on the one-way valve. Completed on the same day.

Evidence of the use of food grade materials included: Food grade lubricants are used, such as Chain lube FG and General purpose lubricant, supplied by CT1.

A minor non-conformance was raised against clause 4.7.3 of the Standard - During the site inspection of the milling area, silver tape was seen in use on equipment in the area.

4.8 Staff facilities

Management System Reviewed

Staff facilities were seen to be in adequate numbers and suitably designed / operated to ensure the minimum risk of product contamination. Sufficient facilities were seen to be in place and were being maintained in a clean and suitable condition. The site has a range of staff facilities which are sufficient to accommodate the required number of personnel and are designed to minimise the risk of product contamination. Suitable and sufficient hand washing facilities are available prior to commencing work and after breaks for all production staff, together with advisory signage to prompt use. There is sufficient quantity of water at a suitable temperature, liquid / foam soap and adequate drying facilities are in place. Adequate toilet facilities are provided which do not open directly into production, packing or storage areas. Toilet hand wash facilities are supplied with hot water, liquid soap and disposable towels. Appropriate Wash Hands signs are provided within the toilet areas. Facilities do not allow direct access to production without passing through the hand wash and changing areas, also appropriate footwear provisions have been put in place. Staff are provided with lockers to store their personal belongings. Facilities have been provided for outdoor clothing, this ensures there is no potential risk to clean production workwear, there are also facilities in place to segregate clean and dirty workwear.

Compliance Evidence

Description of the changing facility: Lockers are on site with PPE and situated just before entry into production and open product areas.

Personal storage provision: Staff are provided with lockers for the storage of outdoor clothes and personal items.

Hand washing: Prior to entry to production, hand basins equipped with soap and sanitiser and blue paper towels.

Facilities for food storage: The staff have been provided a canteen area with a microwave, fridge, kettle. The fridge is temperature controlled and monitored weekly.

Catering and vending: The staff have been provided a canteen area with a microwave, fridge and kettle. The fridge is temperature controlled and monitored through GMP audits.



4.9 Chemical and physical product contamination control: raw material handling, preparation, processing, packing and storage areas

4.9.1 Chemical control

Management System Reviewed

The purchase of chemical supplies is controlled by the Approved Supplier Procedure and there is an approved list of chemicals used on site. Safety data sheets and specifications are available and verified to confirm suitability for use in the food industry. There are procedures for management of spills and for the safe, legal disposal or return of obsolete or out-of-date chemicals and empty chemical containers. Chemicals are required to be securely stored, all containers are suitably labelled, staff who handle chemicals have been trained and there was no evidence during the assessment of the use of strongly scented products, either in production areas or staff facilities.

Compliance Evidence

Details of the types and uses of chemicals used on site: Approved chemicals have been confirmed as suitable for the intended use.

Chemical controls in place, including storage, labelling, issue and use: All chemicals are locked in the chemical store and when in use are observed to be chained to the area, and were seen to be suitability labelled.

Spillage controls: No chemicals are used in the area, as all cleaning is dry cleaning.

Disposal controls: Supplier takes away any empty containers.

4.9.2 Metal control

Management System Reviewed

There is a documented policy for the controlled use and storage of sharp metal implements including knives and cutting blades etc. Snap-off blades are not allowed on site. Controls are in place to manage non-production blades with maintenance engineers and other staff trained not to leave tools and machine parts on equipment. Inspection and hygiene procedures following maintenance interventions ensure that these have been removed, pre-production and start-up checks are in place. There are controls in place to manage and handle any incoming purchased raw materials or packaging which uses staples and there are no staples, paperclips or drawing pins evident in production areas or on process paperwork.

Compliance Evidence

Types of sharp metal equipment used: Safety knives, scissors and needles.

Controls in place: Chemical and Physical Product Contamination Control Form 4.9 V8 08/07/2022.

Knives are signed out and back in as required, with their condition recorded on Knife/Scissor/Needle Register Form 20 V5 12/07/2022, as seen for Knife 051 signed out on 07/12/2023 by PK.

Stitcher needles are checked twice daily at start up and end of production. This is recorded on Oat Flakes Production Record Form 52 V15 03/08/2022, as seen for the traceability dated 22/09/2023. Any damaged / broken needles are returned to the Technical department who will inspect for missing parts. Spare needles are issued by the Technical Manager.

4.9.3 Glass, brittle plastic, ceramics and similar materials

Management System Reviewed

The site has taken all practical steps to identify, eliminate, avoid or minimise the risk of contamination from glass or other brittle materials. There is a glass and brittle plastics procedure in place, this includes instructions on what to do in the event of a breakage. All glass and brittle plastics are controlled on a register which contains reference to the area and the type of glass or brittle plastic at risk. Recorded condition checks are carried out on a frequency based on risk. The site has a glass and hard plastic breakage procedure in place with a requirement to isolate and clean up the affected area and checking of footwear and change of PPE post clean up.



Compliance Evidence

Monitoring process including frequency of inspection: There is a glass breakage procedure in place Glass Policy and Breakage Procedure SOP21 V4 08/07/2022. Any glass breakages are recorded on the glass breakage log.

Weekly or fortnightly audits are carried out based on risk for each area. Recorded on Glass and Hard Plastic audit report form 164 V28 01/08/2023, as seen for dehulling from 13/12/2023 and flaking and flour from 13/12/2023. No issues raised.

Glass windows protection details: All windows present within the production area were seen to be suitably controlled.

Breakages in the last 12 months: There have been no breakages or items damaged in the last 12 months.

4.9.4 Products packed into glass or other brittle containers

Management System Reviewed

There are no products which are packed into glass or other brittle containers, therefore the requirements of this section of the Standard are not applicable.

4.9.5 Wood

Management System Reviewed

Wood is controlled on-site to prevent any potential contamination risk, in addition controls are in place which demonstrated during the assessment that there were no risks to the product.

Compliance Evidence

Details of any wooden equipment used on site and the relevant controls in place: Wood contamination has been assessed within the hazard analysis detailing no perceived risk. Wood is eliminated from production areas where possible and no issues were noted during the assessment.

Wood contamination has been assessed within the hazard analysis detailing no perceived risk. Wood is eliminated from production areas where possible and no issues were noted during the assessment. New pallets are used which are heat treated, pallets are monitored through GMP audits.

4.9.6 Other physical contaminants

Management System Reviewed

Procedures have been implemented to prevent any potential physical contamination from raw material packaging. The site has implemented controls relevant to the use portable handheld equipment, specifically in open product areas, to minimise the risk of physical contamination.

Compliance Evidence

De-bagging and de-boxing procedure: There is no requirement for debagging or deboxing on site as all packaging materials are received on pallets with no boxes or bags used.

Details of the system introduced for the control portable handheld equipment in open product areas: Limited to metal detectable one-piece pens, designed without small parts. No issues noted. Mobile phones are restricted to company issued ones. It is the responsibility of the person to whom it is issued to report any damages. Tablets are in use in flaking and dehulling and are checked as part of start-up checks.

4.10 Foreign-body detection and removal equipment

4.10.1 Selection and operation of foreign-body detection and removal equipment

Compliance Evidence

The risk of product contamination has been reduced or eliminated by the effective use of equipment to remove or detect foreign bodies. The site has undertaken a documented risk assessment of the requirements for foreign-body detection and removal equipment. Type, location, sensitivity and frequency of checking the devices is documented, including suitable corrective action and reporting procedures in the event of a failure of the equipment.

The following equipment is used:

- Sieves.
- Metal Detection.



- Magnets.
- Optical Sorting.

The sensitivity of the control measures is appropriate to minimise the likelihood of product contamination.

4.10.2 Filters and sieves

Compliance Evidence

Filters are of a specified mesh size or gauge and designed to provide the maximum practical protection for the product. These are regularly inspected for damage at a documented frequency based on risk. Records of the checks are maintained.

Sieves are of a specified mesh size or gauge and designed to provide the maximum practical protection for the product. These are regularly inspected for damage at a documented frequency based on risk.

Records of the checks are maintained.

Identification: Sieve

- Location: Bulk processing oats and bran.
- Size and Gauge: 5mm, 6mm, 8mm, and 10mm from groats, steamed groats, flakes and jumbo flakes.
- Corrective action in the event of failure: Quarantine the product since the last good check for any damages to the sieve. Any foreign body detection is investigated by the Technical Manager and Engineering Manager.

Identification: Sieve

- Location: Flour line
- Size and Gauge: 1.2mm, 0.71mm, 0.5mm varies depending on the product grade produced 9RM & 9HM, 8RM & 8HM and 7RM & 7HM.
- Corrective action in the event of failure: Quarantine the product since the last good check for any damages to the sieve. Any foreign body detection is investigated by the Technical Manager and Engineering Manager.

4.10.3 Metal detectors and X-ray equipment

Compliance Evidence

The site uses metal detection equipment as a foreign-body detection and removal method. The use of metal detection equipment is justified through risk assessment in the HACCP plan and has been verified and validated and any foreign bodies are reported to the senior management team. Metal detection checks are carried out at start / finish of the process and at intervals based on risk and in accordance with specific customer requirements. Metal detection checking procedures include relevant failsafe checks and sensitivity for test piece sizes. Procedures are in place to ensure that product is put on hold when FB equipment is seen to fail during routine tests.

The following is a sample of the units that have been installed within the process:

Equipment type: Metal Detector Loma IQ3+.

- Identification: s/n AFF49401-55517.
- Location: Flaking line.
- Monitoring: Test piece verification undertaken at the start, every hour, at every break, at production change over and at the end of the packing run.
- Corrective action in the event of failure: Stop production. Place on QA hold. Product will be re metal detected based on incident investigation.
- Challenged during the audit: Yes, RV.

Equipment type: Metal Detector Loma IQ4 Vertical fall.

- Identification: s/n V46TCV21SYFT-43303D.
- Location: Flour line.
- Monitoring: Test piece verification undertaken at the start, every hour, at every break, at production change over and at the end of the packing run.
- Corrective action in the event of failure: Stop production. Place on QA hold. Product will be re metal detected based on incident investigation.
- Challenged during the audit: No, line not running.



Failsafe testing is in place and includes: Rejection method is divert rejection shoot for each line. A magnet is also in place at the reject shoot for each line to allow for successful investigation of any finds. The technical team receive the finds from the days production at the end of each run.

4.10.4 Magnets

Compliance Evidence

The type, location and strength of magnets is fully documented, and procedures are in place for the inspection, cleaning, strength testing and integrity checks. Records of checks are maintained.

Magnets are used as a foreign body detection and removal equipment.

The following is a sample of the units that have been installed within the process:

Identification: 11 magnets across the site; 3 in dehulling, 1 in bulk flake, 6 in flour plant and 1 in flaking

- Location: Located throughout the process to prevent damage to equipment
- Type and sensitivity: The sensitivity is measured in house with an annual test in place to determine if the magnet is degrading over time. This is done by a pull test to 2kg.
- Frequency of inspection and testing: At the start and end of each shift.
- Corrective action in the event of failure: Stop production immediately. Report to Operations Manager. Place product on hold. Magnet replaced if found to have degraded.

4.10.5 Optical sorting equipment

Compliance Evidence

Optical sorting equipment is checked in accordance with the manufacturer’s instructions or recommendations and checks are documented.

Optical sorting equipment is used as a foreign body detection and removal equipment.

The following is a sample of the units that have been installed within the process:

Identification: Optical sorting used for quality control and the removal of wheat grains.

- Location: Dehulling plant.
- Frequency of inspection and testing: Inspected by the maintenance team on a 3 monthly basis. Further reviews are made where an increase in rejections is seen. Last serviced by Allcontrols Ltd October 2023.
- Corrective action in the event of failure: Engineering assess the measures required depending on the fails seen.

4.10.6 Container cleanliness – glass jars, cans and other rigid containers

Compliance Evidence

The site does not use container cleaning equipment, therefore the requirements of this section of the Standard are not applicable.

4.10.7 Other foreign-body detection and removal equipment

Compliance Evidence

The site does not use any other foreign body detection and removal equipment, therefore the requirements of this section of the Standard are not applicable.

4.11 Housekeeping and hygiene

Management System Reviewed

Appropriate and documented cleaning systems have been established to ensure that appropriate standards of hygiene are maintained, providing confidence that the risk to product contamination is prevented.

There are documented cleaning procedures which detail: Responsibility / Area to be Cleaned / Cleaning Frequency / Cleaning Method / Cleaning Chemicals and Concentrations / Cleaning Equipment Required / PPE Required / Records / Verification System / Hygiene Instructions for dismantling equipment where relevant, and key inspection points for post clean examination. Cleaning schedules and procedures were challenged during a sampling process and demonstrated compliance to the requirements. The system also includes how limits of acceptable and unacceptable cleaning are presented. All cleaning staff receive suitable training in the expectations in accordance with the standards required. A formal system is in place

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to ensure that equipment is checked prior to release back into the production environment. During the site assessment, cleaning equipment was seen to be hygienically designed and fit for purpose, suitably identified and clean and stored in a hygienic manner. The resources for undertaking cleaning are available. Cleaning staff are adequately trained, or engineering support provided where access within equipment is required for cleaning. Documents from the day of the traceability exercise were reviewed and found to be satisfactory. Cleaning equipment is appropriate, and colour coded based upon area.

Compliance Evidence

Condition and hygiene standards within the facility: The premises and equipment are generally well maintained in a clean and hygienic condition. Housekeeping and hygiene systems are in place to minimise the risk of contamination. Production areas were all seen to be clean and tidy, with good hygiene standards.

Documented cleaning procedures / cards are in place and used for training members of staff. They were clear and legible, using text and photos, and gave details of dosage and contact times for any chemicals used.

The site has a clean as you go policy (CAYG) in place with an additional hygiene team in place for out of hours cleaning. Production team will carry out sweeping and vacuuming as required for any spillages. Vacuuming, sweeping and cleaning of the dryer and roller mill are conducted out of hours.

Reviewed CIC for Vibrating Table ref CIC05, and Steam Vessel CIC01, which includes photos and equipment required.

Cleaning records are in place for dehulling, flaking and milling, with checks completed either daily or weekly. Reviewed Daily/Weekly Cleaning Check list – New Oat Plant form 54 V11 27/11/2023 for w/c 11/12/2023 (Flaking), Dehulling Plant Cleaning Schedule Form 136 V5 27/11/2023 for w/c 11/12/2023 and Daily/Weekly Cleaning Check List – New Flour Plant Form 110 V3 27/11/2023 for w/c 11/12/2023.

Cleaning provided by: CAYG by production staff during the day shift, with a night hygiene team to do deep cleaning.

Cleaning observed during assessment: No cleaning observed, as it is carried out after production hours. Chemicals used on site: Klenzolve, Steriklenz 5 hand soap and hand sanitiser. Due to the nature of the material, water is not used.

Cleaning performance monitoring and acceptable limits: The Production Supervisor carries out a visual inspection within the area to confirm the cleanliness is achieved daily, which is recorded on the cleaning record for the area.

Quarterly swabbing in place post clean on food contact surfaces in flaking and flour. Testing for Yeast and Moulds on all areas, and areas post steaming are tested for *Salmonella* and *Listeria*

Test limits for Yeasts and Moulds <50 per swab, and *Salmonella* and *Listeria* – N/D in 25g.

Reviewed results from 03/11/2023 for flaking bucket elevator, flaking vibrating table, flaking inside tote bag, flaking inside paper bag, flaking tube feed to tote bag, flour infeed hopper 2 and 3, flour hammer mill and flour vibro sifter 2.

All results acceptable apart from OOS mould result on flour infeed hopper 3. Retested on 09/11/2023, and the result was acceptable.

4.11.7 Cleaning in place (CIP)

Management System Reviewed

The site does not use cleaning in place equipment, therefore the requirements of this section of the Standard are not applicable.

4.11.8 Environmental monitoring

Management System Reviewed

The system has been developed to consider environmental monitoring programmes, pathogens or spoilage organisms in open product areas and ready to eat foods. The documented programme and procedures are based on risk and include sampling protocol, sample locations, frequency of tests, target



organism(s), test methods and records, evaluation of results. An annual review programme is in place which covers any changes in processing conditions, process flow or equipment, any new developments in scientific information or alternatively a failure of the programme to identify a significant issue, also positive results and product failures. In addition, consistently positive results where the site has a long history of negative results will result in a review of the programme, also to show whether the testing is being conducted correctly and whether the tests are correct.

Compliance Evidence

Detail of environmental monitoring programme and risk assessment: Documented in Product Inspection and Laboratory Testing 5.6 V18 30/08/2023. The site has conducted an assessment on the water activity on site 0.652 flakes, 0.597 flour. Based on the results, the only microorganisms able to grow are Yeasts and Moulds. Program is reviewed as part of the annual management review with no changes in processing conditions.

Areas reviewed, microorganisms tested for and limits set: Areas tested include food contact surfaces, post clean and post steam, air plates, hand swabs and water testing.

Food contact - Quarterly swabbing in place post clean on food contact surfaces in flaking and flour.

Testing for Yeast and Moulds on all areas, and areas post steaming are tested for *Salmonella* and *Listeria* Test limits for Yeasts and Moulds <50 per swab, and *Salmonella* and *Listeria* – N/D in 25g.

Air plates are carried out quarterly in flaking, testing for Yeasts and Moulds <50 cfu/ml.

Hand swabs are carried out quarterly with 6 tests carried out around the site. Testing for *E. coli* <20 cfu/ml and *Staphylococcus aureus* <20 cfu/ml.

Water - Annual testing in place, with 17 sample points. Each point tested once per year.

Testing limits are TVC at 22°C <1000 cfu/ml, TVC at 37°C <1000 cfu/100 ml, Coliforms <1 cfu/100ml, *E. coli* <1 cfu/100ml.

Results reviewed from the program:

Water - Reviewed canteen sinks x 3 sampled on 07/12/2023. Results acceptable.

Food Contact - Reviewed results from 03/11/2023 for flaking bucket elevator, flaking vibrating table, flaking inside tote bag, flaking inside paper bag, flaking tube feed to tote bag, flour infeed hopper 2 and 3, flour hammer mill and flour vibro sifter 2.

All results acceptable apart from OOS Mould result on flour infeed hopper 3. Retested on 09/11/2023, and the result was acceptable.

Hand swab results seen for PJ and LR from 07/11/2023. Results acceptable.

Air plate results seen from 09/10/2023 for flaking. Result acceptable.

4.12 Waste and waste disposal

Management System Reviewed

There are adequate systems in place to identify, collect, collate and dispose of waste materials. Waste accumulation is kept to a minimum and is clearly identified, waste materials are segregated and removed from site. Licensed contractors are used where required, access to the contractors' licences has been carried out in line with legal requirements. The site has well managed waste handling systems in place which are identified and specific for the intended use. Waste removal from open product areas is managed to ensure that it does not compromise product safety.

Compliance Evidence

Details of the waste facilities within the process and production areas: General waste is put in dark grey bins, recyclable waste is put in green bins and food waste is put in blue bins.

Amey CBDU license number 92319 expiry 14/03/2025. They remove general and mixed recycling waste.

Food waste is burnt in the biomass boiler on site.

Details of waste removal from open product areas: No issues observed during the site inspection.



4.13 Management of surplus food and products for animal feed

Management System Reviewed

A process is in place for the management of surplus customer branded products. A process is in place for the supply of surplus food to staff or charities, including traceability of the products. A process is in place for the management of supplying surplus or downgraded food products as animal feed.

Compliance Evidence

Control measures for surplus products: No customer branded products are produced, and nothing is given to staff or charities.

Controls for materials transferred to the animal feed chain: Bulk oats for animal feed are controlled by Kings Ripton Farms. The hull is removed at the dehulling stage and segregated as animal feed waste. The site is covered by FEMAS, scheme ID no. 56724, certificate number 84358, expiry 31/07/2024.

4.14 Pest management

Management System Reviewed

The Company has implemented a pest management programme which covers all the site and has been designed to meet with legislative requirements, the actual needs of the business and its customers. In doing so, it has minimised the risk of pest presence by contracting a competent pest control organisation. The range of pests covered in the program include all types of crawling, walking and flying pests, those which are likely to cause harm and specific species which are product specific (for example Floor Moths). The contractor undertakes the required number of routine inspections based on the risk assessment that has taken place at the start of the contract and which has been reviewed each year. A service contract is in the pest control manual detailing the type and frequency of visits. The manual also contains the site plan, findings from the scheduled visits, COSHH data for all the materials used on site, contractor training certificates and the requirements of follow up visits when sightings or findings have been identified. Bait stations or other rodent monitoring or control devices are appropriately located and maintained to prevent contamination risk to product. In addition, insect-killing devices are appropriately sited and operational. The site has adequate measures in place to prevent birds from entering buildings or roosting above loading or unloading areas. Pest awareness training is provided for all employees where they are instructed to report any sightings to a designated Manager.

Compliance Evidence

Pest Contractor: Three Shires BPCA 31/12/2023 (29/2/2024) Membership no. M15/1544

- Technician visits per year based on risk: 8.
- Biologist visits per year based on risk: 4.
- EFK inspections per year based on risk: 8.
- EFK tube change: September 2023.

Site individual responsible for control of the pest management activities on-site: MP.

Pest Control measures managed by the site: Break back traps are used around site due to the nature of the farm environment, which are checked on a daily basis.

Training of site staff for Pest Control activities carried out in-house: Staff have been trained by the Pest provider on how to check the traps for evidence of it going off. Pest provider would attend if any had been set off.

Review of the annual pest management survey undertaken by the contractor: Annual pest survey last conducted DEC-2022.

Visit frequency risk assessment: There is no risk assessment in place.

The risk assessment was determined to be suitable for the site.

All routine visits were seen to be undertaken over the last 12 months and actions have been closed out within suitable timeframes.

Pest issues identified since in previous 12 months: No significant pest issues have been identified within the last 12 months.



A minor non-conformance was raised against clause 4.14.2 of the Standard - There is no risk assessment in place to determine the frequency of inspections.

4.15 Storage facilities

Management System Reviewed

All facilities used for the storage of raw materials, packaging, in-process products and finished products are suitable for purpose. Procedures to maintain product safety and quality during storage have been developed based on risk assessment, are understood by relevant staff and implemented accordingly. Packaging is always securely stored away from other materials with primary packaging and part used packaging being protected whilst in the store. There is a detailed system in place to ensure that all materials and products are rotated in accordance with the internal system.

Compliance Evidence

Suitability of food storage: All food products were seen to be stored off the floor, in the correct location, fully enclosed and in suitable condition.
 Suitability of packaging storage: Packaging materials were seen to be fully covered and off the floor, away from food products and in a suitable condition.
 Segregation controls: Packaging is kept in a separate warehouse. Oats are brought into the area as required from KRF. No allergens are handled on site.

4.16 Dispatch and transport

Management System Reviewed

Procedures are in place to ensure that the processes involved in the loading and dispatch of products onto the respective transport methods does not affect the product safety and integrity and ensures the security of the product. The traceability of the final products in their respective packed formats ensure that the final traceability code or reference is maintained at the point of despatch. The procedures detail vehicle inspection activities for cleanliness and suitability, including any restrictions on the use of mixed loads, requirements for the security of products during transit, instructions in the case of vehicle breakdown, accident or failure of refrigeration systems.
 Maintenance systems and documented cleaning procedures for vehicles and equipment used for loading/unloading were challenged during the assessment and deemed to meet with the requirements.

Compliance Evidence

Vehicle hygiene checks: All vehicles are inspected prior to loading, which is recorded on Vehicle Check Sheet Form 15 V5 12/07/2022. As seen as part of the traceability dated 26/09/2023.
 Subcontract haulier contracts and certification: Swannell's Transport Ltd, BRCGS site code 1319465, expiry 26/10/2024. SLA in place dated 23/03/2023.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.3.6	There were no instances of temporary structures seen during the assessment.
4.4.5	There are no suspended ceilings or roof voids in place.
4.4.7	There are no windows which are designed to be opened within production or process areas.
4.5.3	The site does not use any gases or compressed air which comes into direct contact with the product.

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4.8.8	There are no catering facilities or vending machines on site.
4.9.1.2	Strongly scented or taint forming materials are not used.
4.9.4	The site does not pack any products in glass or any other brittle containers.
4.9.6.3	There are no procedures implemented to minimise other types of foreign body contamination.
4.10.3.5	X-ray equipment is not used on site.
4.10.6	The site does not use container cleaning equipment.
4.10.7	The site does not use any other foreign body detection and removal equipment.
4.11.7	There is no cleaning in place.
4.12.4	There are no trademarked waste materials.
4.13.1	No customer branded product is produced.
4.13.2	Surplus stock is not sold to employees or given to charities.
4.15.3	Temperature controlled storage is not required.
4.15.4	Controlled atmosphere storage is not required.
4.15.5	No products or raw materials are stored in external areas.
4.16.3	Temperature controlled transport is not required.

5. Product control

5.1 Product design/development

Management System Reviewed

The Company has established product design and development procedures for new products or processes and any changes to product, packaging or the manufacturing processes, which ensure that safe and legal products are always produced. The Company provides clear guidelines on any restrictions to the scope of new product developments and any new products and changes to product formulation, packaging or methods of processing are formally approved by the HACCP team before products are introduced into the factory.

Compliance Evidence

Procedure for development of new product and changes to existing product: Product Design and Development Form 5.1 V8 08/07/2022. There has been no NPD on the plant in the last year.

Involvement of HACCP team in NPD processes: Any changes to product would be approved by the HACCP team and follow any necessary procedures relating to trials and recipe formulations.

Specific customer requirements: Any customer requirements would be captured as part of the initial development brief.

Shelf-life validation: 12 months shelf life assigned to the finished goods which is historical, validated annually.

5.2 Product labelling

Management System Reviewed

The systems in place have ensured that product labelling complies with the legal requirements and to enable the safe handling, display, storage and preparation of the product. Those products reviewed were

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seen to meet legal requirements for the country of use and include details to ensure safe handling, display, storage, preparation and use, there is also a process to verify that labelling is accurate against both the product recipe and ingredient specifications. The company have a procedure in place for artwork approval and sign-off.

Compliance Evidence

Legality of product labels: All labels are created in-line with legal requirements for the country of sale, based on product specifications and site specific requirements.

Artwork approval procedure: Product Labelling Form 5.2 V9 08/07/2022. No artwork is generated by site as all product is bulk packed.

5.3 Management of allergens

Management System Reviewed

The site has procedures in place to demonstrate that it has control of allergens in order to minimise the risk of allergen contamination and meet legal requirements for labelling in the country of sale.

A detailed risk assessment has been carried out of raw materials to establish the presence and likelihood of contamination by allergens, the assessment also included a review of the raw material specifications and information from the supplier regarding the supply chain. The conclusion of the risk assessment has been used within the allergen management system to ensure that the controls are adequate and effective, this was demonstrated during the on-site process review. The site has ensured that a full review of the geographical legislation has been undertaken and has been accounted for in the material assessment and the product information provided to the customer.

A documented risk assessment has been carried out to identify routes of contamination which includes consideration of the physical state of the allergenic material, identification of potential points of cross-contamination, assessment of the risk of each process step and identification of suitable controls to reduce or eliminate the risk of cross-contamination. The assessment has also included the handling and storage of allergens right across the site. Cleaning methods have been validated to ensure that they are effective at removing allergens from surfaces. During the assessment the site were able to demonstrate that allergen management was effective during process and product changeovers.

Compliance Evidence

Raw material allergen risk assessment reference: Allergen risk assessment reviewed as part of HACCP07 The Food Safety Plan V11 22/09/2023. Only one raw material handled on site (oat grain).

Details of specific allergens handled on site: None handled.

Site allergen risk assessment: There is no risk assessment in place for oat grains.

Overview of how allergens are handled on site: No allergens are handled on site. Staff are trained as part of induction as to what they are allowed to bring on site for lunch. Handwashing takes place prior to entry to all production facilities.

Free-from claims: Gluten free claims made on all product with gluten testing carried out on raw materials and finished goods.

Reviewed Gluten Free Jumbo Oats DOP 05/12/2023. Gluten free result <5ppm.

A minor non-conformance was raised against clause 5.3.3 of the Standard - There is no risk assessment in place to identify routes of contamination.

5.4 Product authenticity, claims and chain of custody

Management System Reviewed

Personnel engaged in vulnerability assessments, the individual or team responsible understand potential food fraud risks. This includes knowledge of raw materials used by the site and the principles of vulnerability assessment. A formal and documented system has been established which ensures that the risk associated with purchasing fraudulent or adulterated food raw materials is minimised and ensures that all product descriptions and claims are legal, accurate and verified. The site has undertaken a detailed and



documented vulnerability assessment (undertaken and reviewed annually) which has considered historical evidence, economic factors which may encourage fraud, ease of access to raw materials, sophistication of testing and the nature of raw material.

There is a formal system in place which ensures that product authenticity is addressed across the whole range of suppliers, where raw materials or packaging are identified as being at particular risk of adulteration or substitution, the vulnerability assessment plan includes appropriate assurance and/or testing processes to mitigate the identified risks. The site has implemented a number of systems to ensure that suppliers are assessed, and their status is shown within the records, these are based on the type of material, the potential for substitution or adulteration, in a large number of instances the suppliers hold formal certification and therefore have their own authenticity measures in place, such records are shown in the supplier information files.

Compliance Evidence

All individuals involved in vulnerability assessments were seen to have appropriate knowledge.
 Documented vulnerability assessment: Risk assessment 'supplier approval spreadsheet including VACCP' – 24/02/2023 in place which includes the oats as the only raw material within the scope of manufacture. Assessed on VACCP, Microbiological, Chemical, Allergens, Physical and Species. Organic risk assessed as medium due to risk of adulteration.
 Details of review process: Reviewed at least annually or when there is significant change to the ingredient. Last reviewed: 27/10/2023.
 Claims made: Organic claims made on product. Soil association certification attained licence number DA25456 Expiry 30/06/2024.
 Kosher certificate 941705990 dated 22/11/2023.

5.5 Product packaging

Management System Reviewed

The site has a system in place to ensure that product packaging and processes for the purchase of product packaging are suitable for the intended use. Packaging is stored under conditions to prevent contamination or deterioration. The system for purchasing or specifying primary packaging ensures that the supplier is made aware of any characteristics of the food, this includes for primary packaging information regarding declarations of compliance and migration data. The site has a procedure to manage obsolete packaging (including labels) that includes suitable mechanisms to prevent accidental use of obsolete packaging, control and disposal of obsolete packaging and appropriate procedures for the disposal of obsolete printed materials.

Compliance Evidence

Controls measures for the purchase and use of packaging: Packaging materials are limited to brown paper sacks and 1 tonne FIBC bags. Purchased from approved suppliers.
 Packaging suitability: All packaging observed during the assessment were seen to be suitable for the products packed.

5.6 Product inspection, on-site product testing and laboratory analysis

Management System Reviewed

There is a scheduled programme of product inspection, the methods, frequency and specified limits are documented. Test and inspection results are recorded and reviewed regularly to identify trends and the significance of products which do not meet with the standards required. Pathogen testing (including pathogens tested as part of the environmental monitoring programme) is subcontracted to an external laboratory.
 Subcontracted analysis, which is critical to product safety or legality, is conducted in an accredited laboratory. Procedures are in place to ensure reliability of laboratory results.
 The significance of laboratory results are understood and acted upon accordingly with appropriate action undertaken promptly to address any unsatisfactory results or trends.

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Compliance Evidence

Overview of the product inspection carried out: Documented in Product Inspection and Laboratory Testing 5.6 V18 30/08/2023.

Test type and frequency: In process testing in dehulling includes visual and quality checks, which are recorded on Dehulling processing form 118 V7 11/07/2022, and in flaking is recorded on Oat Flakes Production Record 52 V15 03/08/2022. Testing includes colour, taste, bulk density, flake thickness, lipase activity, moisture, and quality checks (husk).

Finished product is tested per batch (flakes) for gluten and per pallet for oat flour (gluten). Microbiological testing is carried out annually for flour, flakes and bran start and end of life. Heavy metals tested annually on groats.

Testing is completed on the groats (raw material) 4 x per year for mycotoxin. Pesticide residue testing annually for oat based bulk products. Ergot testing carried out annually. Chlormequat, Mepiquat and Glyphosate carried out annually.

Summary of tests/inspections undertaken over the last 12 months: In process testing in dehulling includes visual and quality checks, which are recorded on Dehulling processing form 118 V7 11/07/2022, as seen for the traceability dated 20/09/2023.

In process testing in flaking is recorded on Oat Flakes Production record 52 V15 03/08/2022, as seen for the traceability dated 22/09/2023. Testing includes colour, taste, bulk density, flake thickness, lipase activity, moisture, and quality checks (husk).

Finished product is tested per batch (flakes) for gluten and per pallet for oat flour (gluten).

Microbiological testing carried out annually for flour, flakes and bran start and end of life. Reviewed GF Jumbo oats packed 17/01/2023 from start of life and EOL GF Jumbo oats BB 06/04/2023, tested on 26/05/2023. Both results acceptable. Tested for TVC, Enterobacteriaceae, *E. coli*, *Staphylococcus aureus*, *Bacillus cereus*, Yeasts and Moulds and *Salmonella spp.*

Heavy metals tested annually on groats. Reviewed Organic Groats based bulk products tested on 13/02/2023. Results acceptable.

Testing is completed on the groats (raw material) 4 x per year for mycotoxin. Reviewed results from 12/09/2023 for Oat based bulk product. Results acceptable.

Pesticide residue testing annually for oat based bulk products. Reviewed results from 21/02/2023. Acceptable.

Ergot testing carried out annually. Reviewed for Oat based bulk product dated 20/06/2023. Results acceptable.

Chlormequat, Mepiquat and Glyphosate carried out annually. Reviewed results from 08/02/2023 for Groats cereal produced 31/01/2023 and Organic Groat cereal produced 07/02/2023. Results acceptable.

Example of corrective action following out of specification result: Any out of specification results would be identified by the Technical Manager with retesting conducted. As seen for swab results from 03/11/2023 where an OOS mould result on flour infeed hopper 3 was identified. Retested on 09/11/2023, and the result was acceptable.

Typical shelf-life testing undertaken on-site: Microbiological testing is carried out annually for flour, flakes and bran start and end of life. Reviewed GF Jumbo Oats packed 17/01/2023 from start of life and EOL GF Jumbo Oats BB 06/04/2023, tested on 26/05/2023. Both results acceptable.

Overview of the laboratory testing system: Romer Labs used for gluten testing UKAS 4400, MS Labs UKAS 1625.

Most recent shelf-life validation: 12 months shelf life assigned to the finished goods which is historical, validated annually.

Knowledge of the significance of laboratory results: All results received by the Technical Department, who have a good understanding of test results.

5.7 Product release

Management System Reviewed

The site ensures that finished product is not released unless all agreed procedures have been followed.

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Compliance Evidence

Details of how products are released: Every batch requires positive release following confirmation that gluten is <5ppm.

Details of positive release: All product is positive released for gluten after the flaking process. All product is held in quarantine until results are received and the product slip is stamped.

5.8 Pet food and animal feed

Compliance Evidence

The site does not manufacture pet food or animal feed, therefore the requirements of this section of the Standard are not applicable.

5.9 Animal primary conversion

Compliance Evidence

The site does not undertake any animal primary conversion, therefore the requirements of this section of the Standard are not applicable.

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
5.2.3	There are no customer created labels.
5.2.4	There are no cooking instructions on labels or packs.
5.3.5	No reworking is undertaken.
5.3.6	No alibi labelling is used.
5.3.8	There are no allergen containing raw materials or finished products handled on-site.
5.4.4	No raw materials have been identified as being at risk.
5.4.7	No claims made.
5.6.5	There are no testing laboratories located on-site.
5.8	Pet food or animal feed is not handled or processed on site.
5.9	Animal primary conversion is not undertaken by the site.

6. Process control

6.1 Control of operations

Management System Reviewed

The site has an established system and procedures to ensure that it produces consistently safe and legal product against the detailed specifications in place and including the relevant quality requirements meeting all safe and legal criteria. Process monitoring is undertaken against the set product criteria, such monitoring has been designed to ensure that the process is adequately controlled, and that ongoing continual data is recorded to ensure that product and processes are in accordance with the relevant specifications. Equipment settings critical to the safety or legality of the product are changed by trained and authorised staff with restricted access. A system is in place which ensures that in the case of equipment failure or deviation from specification, then action is taken to establish the safety status and

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quality of the product to determine what further action is to be taken. Products or materials handled which are outside the scope of the audit, they are controlled to ensure that they do not create a product safety, authenticity or legality risk to the products within the scope.

Compliance Evidence

Overview of the control of operations and monitoring: All processes were observed to be under control and carried out correctly. Operatives are trained against SOP's. Copies are available on computers, as required. Cleaning cards for equipment are also available. Finished product specifications are also in place for each product. The Sage system controls the movement of product from flaking to finished products and dispatch.

Key parameters and controls: Equipment process controls include the steam heating of oats and rolling into flakes. Finished product specifications instruct how to set up the oat mill in terms of the flake thickness. The steam vessel is monitored to ensure that the incoming temperature and external temperature is above 100°C. Where the temperature falls below 80°C, this is indicated in the lipase test. Equipment failure results in not producing the product. In addition to the in-process checks, there are pre-start up checks, end of shift checks, and glass and hard plastic checks carried out daily. Line changeover checks also take place, covering cleaning, packaging, coding and allergens. Any corrective actions raised are handled following the QA hold procedure.

6.2 Labelling and pack control

Management System Reviewed

Formal procedures are in place to ensure that product packaging is allocated to the process / production / packing areas. In addition, documented start up and changeover checks are undertaken to ensure that production lines have been suitably cleared, with all products and packaging from previous production being removed.

Processes in place to check label use is reconciled with expected use and the cause of any inconsistencies investigated.

Procedures are also in place to ensure that products are packed into the correct packaging and correctly labelled and coded. Packaging checks, including coding and any other printing, are carried out as a minimum at the start and end of packing runs, also when changing batches of packaging materials and at a pre-determined frequency throughout the production run.

Compliance Evidence

Witnessed product changeover during the assessment: There is a procedure in place - Product Labelling Form 5.2 V9 08/07/2022. All packaging is generic with information printed onto the bags. A label check is confirmed at the start, middle and end of run. No changeovers occur within the day, with one processing area flaking oats and one processing area grinding oats for flour. The pack format may change from 1 tonne bags to 25kg sacks but there is no line clearance as all materials are generic.

Description of packaging and labels allocated to the line: Bags are generic and issued to the line as required.

Overview of label use and reconciliation: Labels are printed at point of use.

Packaging and label check procedure reference: Finished Product Packaging and Labelling Procedure SOP23 V4 08/07/2022.

6.3 Quantity, weight, volume and number control

Management System Reviewed

The site has established and operates a quantity control system, which conforms to legal requirements in the country where the product is sold and in addition, any additional industry sector codes or specified customer requirements.



Compliance Evidence

System used for quantity control of finished product: Minimum weight for bag and pallet. There is an auto weighing system directly into the bag, with an hourly check on bag weights with 5 samples recorded. Reviewed Bag Weight Check – Bulk Production Plant Form 03 V9 27/11/2023, on Day 1 of the audit. Legislative and customer requirements: Products packed into 1 tonne bags with pallet weights recorded. Reviewed Pallet Weight Check Form 176 V4 11/07/2022, on Day 1 of the audit.

6.4 Calibration and control of measuring and monitoring devices

Management System Reviewed

The site has systems in place for the control and calibration of measuring equipment and that such equipment is accurate and reliable to provide confidence in measurement results. Systems are in place to identify and control measuring equipment used to monitor critical control points and those aspects which affect product safety, legality and quality. The system includes a documented list of equipment and its location, identification code, calibration due date, the prevention from adjustment by unauthorised staff and protection from damage, deterioration or misuse. Identified measuring equipment was seen to be managed based on risk assessment and possible calibration methods based on recognised national or international standards where possible.

Compliance Evidence

Trends of calibration outcome: No significant trends have been identified over the last 12 months, all equipment has been calibrated successfully.

Calibrated equipment sampled during this assessment included the following:

Equipment type & serial number: Metal Detector Loma IQ3+ s/n AFF49401-55517 (Flaking)

- Last Calibration Date: 25/01/2023
- Frequency: Annually
- Certificate reference: 17225
- Calibration house/NPL laboratory: UK Inspections Systems
- Corrective actions: None required

Equipment type & serial number: Metal Detector Loma IQ4 Vertical fall s/n V46TCV21SYFT-43303D (Milling)

- Last Calibration Date: 25/01/2023
- Frequency: Annually
- Certificate reference: 17248
- Calibration house/NPL laboratory: UK Inspection Systems
- Corrective actions: None required

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
6.1.4	In-line monitoring equipment is not used.
6.1.5	There are no processes undertaken which may result in a variation of process conditions.
6.1.7	There are no by-products outside of the scope of the audit.
6.2.4	On-line vision equipment is not used.
6.3.3	On-line check weighing equipment is not used.

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7. Personnel

7.1 Training: raw material handling, preparation, processing, packing and storage areas

Management System Reviewed

The site ensures that all personnel performing work that affects product safety, legality and quality are demonstrably competent to carry out their activity through training, work experience or qualification. Systems are in place for training and monitoring of full time and temporary staff on site including contractors. The site has a comprehensive training programme for staff on induction, specific on the job training and refresher training.

All relevant personnel receive general allergen awareness training and are trained in the site's allergen handling procedures. Records are provided for training undertaken in different languages or alternatively by the agency used on behalf of the site. In addition, all relevant personnel receive training in the site's labelling and packing processes designed to ensure the correct labelling and packing of products. Records of all training includes details of the name of the trainee, the date and duration of the training, course title, the trainer and for internal courses, a reference to the material, work instruction or procedure that is used in the training. The site has a detailed training program based on the needs of the business, in addition, a number of activities undertaken constantly review the competencies of its staff, this includes but is not limited to internal system and hygiene audits, on the job assessments by team leaders, supervisors and managers. During the on-site process and facility assessment those employees / team members engaged in the review were found to be knowledgeable and had a good understanding of their roles and responsibilities.

Compliance Evidence

Personnel are engaged in activities relating to control measures and critical control points are suitably trained and have their competency assessed.

Specific CCP/control measure training reviewed: Metal detection training seen for RV dated 02/11/2022 and WC dated 08/07/2022 against Metal detection procedure SOP 01 V12.

General allergen awareness training: Allergen and Nut Control Policy SOP 127 V5 seen for WC dated 05/07/2023 and Allergen Control Procedure SOP81 V1 seen for RV dated 04/11/2023.

Specific labelling and packing process training: No training available.

Details of the competence review: Competence is assessed post training and signed off on the respective training card record. It is also assessed during internal audits and monthly GMP inspections.

Site security training seen for WC against Site Security SOP 14 V2 dated 08/07/2022.

Checkweigher training seen for RV against Checkweigher Procedure SOP 24 V2 dated 04/11/2022.

Weight and Temperature Control SOP02 V5 training seen for RV dated 02/11/2022.

Glass Policy and Breakage Procedure SOP21 V4 training seen for WC on 12/07/2022.

Induction includes site security, PPE, whistleblowing, food hygiene, glass breakage, pest control allergens, cleaning, knife control, waste, pens, gluten awareness/coeliac disease, personal hygiene, food borne disease, reporting issues, as seen for PK on 27/09/2022.

A minor non-conformance was raised against clause 7.1.5 of the Standard - There was no available training against the site's labelling and packing processes.

7.2 Personal hygiene: raw material handling, preparation, processing, packing and storage areas

Management System Reviewed

The site has established and implemented a policy which covers all aspects of personal hygiene and is applicable to all staff across the whole site, this also includes agency staff were appropriate.

Such policies as a minimum include; no watches or similar wearable devices, jewellery except for a plain wedding ring, wedding wristband or medical alert jewellery, no rings and studs in exposed parts of the body, fingernails must be kept short, clean and unvarnished and false fingernails and nail art are not permitted, excessive perfume or aftershave must not be worn. There are also detailed procedures in place



which cover subject topics such as hand cleaning, management and use of the first aid facilities, plaster control and the use of metal detectable plasters were this is relevant, the bringing onto site personnel medicines, and subsequent controls including safe storage.

The site's personal hygiene standards have been developed to minimise the risk of product contamination from personnel; they have been communicated to all personnel including agency supplied staff, contractors and visitors to the production facility. The systems and standards implemented have been designed to meet as a minimum all of the legal requirements stipulated within legislation.

The requirements for personal hygiene are documented and communicated to all personnel. The business ensures that it includes all of these during the induction process, this includes the need to report any illness or sickness prior to coming on site, updates and continual reminders are provided to staff in a variety of formats. The site has also included such activities in the culture program. Compliance with personal hygiene requirements is checked routinely. Hand washing is performed on entry to the production areas.

Blue, metal detectable plasters are controlled via a plaster log and batch tested through a metal detector. The use and storage of personal medicines is controlled via notification to management.

Compliance Evidence

Personal hygiene witnessed: Staff were seen to be following the sites personal hygiene rules during the on-site inspection with a high level of compliance.

Hand washing witnessed: Observed handwashing taking place as part of site tour, all observed in compliance with site requirements. Handwashing was available at the entrance to production areas.

7.3 Medical screening

Management System Reviewed

The site has procedures in place to ensure that staff, agency staff, contractors or visitors are not a source of transmission of infections, diseases (including food-borne diseases) or conditions to products.

Staff, visitors and contractors are made aware of the symptoms of infection, disease or conditions which would prevent them from working with open food and are required to report relevant symptoms, infection, disease or condition with which they may have been in contact or be suffering from.

Where required, visitors are required to complete a health questionnaire to confirm that they are not suffering from any symptoms which may put product safety at risk, prior to entering the process areas.

Return to work interviews are carried out following absence/illness and this is detailed in the site handbook/rules issued to all staff members.

Compliance Evidence

Details of medical screening: All visitors, including contractors, are subject to medical screening prior to entry to the production area which is undertaken in the form of a visitor questionnaire. All staff are made aware of reportable symptoms and raise this to management where required.

7.4 Protective clothing: staff or visitors to production areas

Management System Reviewed

The site ensures that suitable site issued protective clothing is worn by staff, contractors or visitors working in or entering production areas.

It documents and communicates the rules regarding the wearing of protective clothing and includes policies relating to the wearing of protective clothing away from the production environment.

Compliance Evidence

Details of the typical PPE issued: White overalls, hairnets, safety shoes and beard snoods. Ear plugs are available.

Laundering arrangements: External laundry with sufficient clothing for daily change.



Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
7.4.6	There is no PPE which is not suitable for laundering.



8. Production risk zones – high risk, high care and ambient high care production risk zones
8.1 Layout product flow and segregation in high-risk, high-care and ambient high-care zones
<p>Management System Reviewed The site has carried out a risk assessment in-line with the BRCGS production zone decision tree and have determined that all products fall within the low-risk requirements. There are no high-risk, high-care or ambient high-care production zones located on-site.</p>
8.2 Building fabric in high-risk and high-care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>
8.3 Equipment and maintenance in high-risk and high-care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>
8.4 Staff facilities for high-risk and high-care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>
8.5 Housekeeping and hygiene in the high-risk high-care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>
8.6 Waste/Waste disposal in high risk, high care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>
8.7 Protective clothing in the high-risk high-care zones
<p>Management System Reviewed There are no high-risk or high-care production zones located on-site.</p>

Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
8.0	There are no high-risk, high-care or ambient high-care facilities on-site.



9. Requirements for traded products
9.1 The food safety plan - HACCP
Management System Reviewed There are no traded goods handled on-site, therefore the requirements of this section are not applicable.
9.2 Approval and performance monitoring of manufacturers/packers of traded food products
Management System Reviewed There are no traded goods handled on-site.
9.3 Specifications
Management System Reviewed There are no traded goods handled on-site.
9.4 Product inspection and laboratory testing
Management System Reviewed There are no traded goods handled on-site.
9.5 Product legality
Management System Reviewed There are no traded goods handled on-site.
9.6 Traceability
Management System Reviewed There are no traded goods handled on-site.



CERTIFICATE OF CONFORMITY

This is to certify that

Glebe Farm Foods Ltd

School Lane
Kings Ripton
Huntingdon
PE28 2NL

Having been audited, meets the requirements set out in the

**BRCGS Gluten Free Certification Program (Issue 3: February 2019)
With GF314 AO ECS Position Statement taken into consideration**

Scope of activities:	Ambient stable products not involving sterilisation as heat treatment; 15, Dried foods and ingredients. Ambient stable products not involving sterilisation as heat treatment; 17, Cereals and snacks.
Product categories:	GFCP plus AO ECS
Audit programme:	Announced

BRCGS site code:	1026834
Date(s) of audit:	14 & 15 December 2023
Certificate issue date:	15 January 2024
Re-audit due date:	14 December 2024
Certificate expiry date:	25 January 2025
Auditor number:	23478
Certificate reference:	0645-GF

Authorised by



Oliver Hynes
Operations Director

BRCGS | Gluten-Free



Gluten Free Certification Program

1. Audit Summary					
Company name	Glebe Farm Foods Ltd		Site Code	1026834	
Site name	Glebe Farm Foods Ltd - Flaking Flour & Dehulling				
Stand Alone / Combined Audit	Combined	What scheme?	BRCGS Food	Head Office	No
Scope of audit	Ambient stable products not involving sterilisation as heat treatment; 15, Dried foods and ingredients. Ambient stable products not involving sterilisation as heat treatment; 17, Cereals and snacks.				
Audit Start Date	2023-12-14	Audit Finish Date	2023-12-15		
Re-audit due date	2024-12-14	Previous audit date	2022-12-14		

2. Audit Results			
Audit result	Certificated	Audit Programme	Announced
Certificate issue date	2024-01-15	Certificate expiry date	2025-01-25
Number of non-conformities	1		

3. Company Details			
Address	School Lane Kings Ripton Huntingdon PE28 2NL		
Country	United Kingdom	Site Telephone Number	+44 1487 773282
Commercial representative Name	Tony Holmes	Email	tony@glebefarmfoods.co.uk
Technical representative Name	Kerry Richards	Email	kerry@glebefarmfoods.co.uk

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4. Company Profile					
Plant size (metres square)	<10K sq.m	No. of employees	1-50	No. of HACCP plans	1-3
Dedicated gluten free plant	Yes				
Shift Pattern	Monday to Friday 06:30-14:30; 14:00-22:00 (as required).				
Subcontracted processes	No				
Other certificates held	Organic, Kosher, FEMAS				
Regions exported to	Europe				
Company registration number	Not applicable				
Major changes since last GFCP audit	None				
<p>Company Description</p> <p>Established in 2008, Glebe Farm Foods is a privately owned company, and has been at the current site for 12 years. There are approximately 22 employees, working Monday to Friday, 06:30-14:30 and 14:00-22:00 (as required). The site has an annual turnover of £5-10 million, 1,200 tonnes per month. Products include flaked and milled oats which are packed in bulk bags, sacks or retail ready packs. Typical customers include food service, retail and manufacturers for further processing. The audit was undertaken in conjunction with BRCGS Food Safety as a bolt-on. The audit was undertaken within the re-audit due date window.</p>					

5. Product Characteristics	
Audit Category	GFCP plus AOECs
Allergens handled on site	None
Product claims made e.g. IP, organic	Organic, Gluten Free
Gluten-free product recalls in last 12 Months	No
Gluten-Free products in production at the time of the audit	Dehulling of oats for conventional porridge flakes; Gluten Free Jumbo Oats 25kg.
Products listed in schedule A	Certificate of licence exp JAN-2024.

6. Audit Duration Details			
Total GFCP audit duration	4 man hours	Duration of production facility inspection	2 man hours
Reasons for deviation from typical or expected audit duration	Audit conducted as a bolt-on to the BRCGS Food Safety audit.		
Next audit type selected	Unannounced		

Audit Duration per day			
Audit Day	Date	Start Time	Finish time
1	2023-12-14	08:00	18:00
2	2023-12-15	07:30	17:30

Key Personnel		
Auditor number	Name	Role
23478	Gill Seddon	Lead Auditor
N/A		Please select

Present at audit				
Name/Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
Tony Holmes COO	X			
Philip Rayner Managing Director		X		X
Kerry Richards Technical Services Manager	X	X	X	X
Gavin St Leger Operations Manager	X	X		
Serena Woolland Head of Technical	X	X	X	X
Melissa Payne Technical Compliance Quality officer	X	X	X	X

Document control			
CB Report number	0645-GF (2023)		
Template Name	GF301 Gluten-Free Audit Report Template v8		
Standard Issue	1	Template issue date	2023-02-14
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Non-Conformity Summary

Sheet

Non-Conformity							
No	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1	1.4	There is no certificate available for the GFCP industry training course for FM (previous team leader).	Courses are booked for January for the Head of Technical and Technical Systems Manager	To ensure compliance, several of the technical HACCP team will be trained during 2024	The technical consultant employed by GFF, left in December and was the only one trained in GFMS	2023-01-10	P. Swift

Comments on non-conformities
Same NC raised in previous assessment – but different Team Leader.

Detailed Audit Report

1. Senior leadership commitment
<p>The site's Quality Policy TEC001 V12 21/03/2023, signed by PR, demonstrates commitment to the GFMS. Management commitment to continued conformance to the site's GFMS is demonstrated by providing routine meeting minutes showing participation from all the GFMS team members. The gluten free management system Team Leader FM (Technical Consultant) has since left the business at the end of his contract. There is no copy of his training certificate available on file. The newly appointed GFMS Team Leader (SW) has training booked for Gluten Free Certification ELearning in January 2024. The gluten free management team are the HACCP team members who represent production, engineering and senior management. The team discuss the requirements of the gluten free program during the annual HACCP review (16/08/2023) and as part of the annual management review meeting (24/01/2023).</p>
2. Prerequisite programs
<p>A documented and detailed list of prerequisite programmes is in place, which is subject to review at least annually. The site has a clearly defined pre-requisite programme in place: HACCP08 V5 27/09/2023 which lists all PRPs including layout, product flow and segregation, calibration, pest control, control of chemicals, air quality, temperature control & storage, PPM, waste control, potable water, laundry & PPE, factory & site hygiene, foreign body control, specifications, personal hygiene, training, RM supplier approval and purchasing, traceability, allergen control, non-conforming product, corrective actions, internal audits, complaint handling, NPD, control of visitors and contractors, transportation, management of incidents/product withdrawals, site security and food defence, product testing, control of operations, hygiene and housekeeping. PRP Document reference: HACCP08 V5 27/09/2023. Reviewed as part of the annual HACCP review last conducted 16/08/2023.</p>
3. Gluten controls
3.1 Gluten awareness training
<p>The induction program has been created by the Technical Manager which includes gluten awareness training. Reviewed the content as part of the audit which included symptoms of gluten related disorders, ingredients which contain gluten and the site controls in place. This is trained out to all staff prior to commencing work. The training includes a competence assessment questionnaire. Reviewed for PK dated 27/09/2022.</p>
3.2 Product development
<p>Product Design and Development Form 5.1 V8 08/07/2022, which includes HACCP sign off for any new products. To date, there has not been any development in oat flour or flakes.</p>

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3.3 Supplier approval, purchasing, and incoming ingredients and inputs
<p>Supplier approval procedure is in place with only one supplier of groat oats to the site - Supplier and Raw Material Approval and Performance Monitoring Form 3.5 V14 04/07/2023. The only raw material used on site is oats which are supplied by the onsite farm (KRF). The grain supplier (KRF) assesses the grain on intake from the farms, with a wheat and barley grain per kg test conducted prior to arrival on Glebe Farm Foods. The groats are also cleaned by the farm (KRF) prior to transfer to Glebe Farm Foods.</p> <p>Risk assessment 'supplier approval spreadsheet including VACCP' – 24/02/2023 in place which includes the oats as the only raw material within the scope of manufacture. Assessed on VACCP, Microbiological, Chemical, Allergens, Physical and Species. Organic risk assessed as medium due to risk of adulteration.</p> <p>Incoming raw materials are oat groats only with agreement in place between the supplier and the site – reviewed Contract terms for the growing of Gluten Free Human Consumption milling oats KRF10 Milling Contract (KRF) V5 20/07/2022. This states that the oats are gluten free.</p>
3.3 GF314 Additional requirement for GFCP+AOECS audits
<p>Site does not render ingredients gluten free. All ingredients are purchased with Gluten Free requirements stipulated.</p>
3.4 Approval and control of labels
<p>All products are packed into bulk format. Approval of labels is carried out by the technical team with the legal requirements for the country of sale met. Information on the labels on product includes product name, batch, weight, best before date and time of packing. All products are sold for further processing. Label checks are completed at the start, middle and end of the run and recorded on Product Coding Check Form 177 V3 11/07/2022. As seen during the site inspection on Day 1 of the audit.</p>
3.4 GF314 Additional requirement for GFCP+AOECS audits
<p>All products produced are currently bulk products only and are further processed by end customers, so no Crossed Grain Trademark is required on the label.</p>
3.5 Marketing claims
<p>Coeliac UK Certificate of license to use the crossed grain Trademark in place, expiry 31/01/2024. The sites schedule was reviewed at the time of assessment, seen to be signed and agreed by AOECS with no issues raised.</p>
3.5 GF314 Additional requirement for GFCP+AOECS audits
<p>All products produced are currently bulk products only and are further processed by end customers, so no Crossed Grain Trademark is required on the label.</p>



3.6 Finished product specifications
Reviewed finished product specification for Gluten Free Jumbo Product code 40002, dated 31/07/2023. The specification was seen to be up to date and reflects the product.
3.7 Contamination control
All groats received by the supplier and stated as gluten free, with additional cleaning completed by the supplier (KRF). On site, the company passes all oats through an optical sorting system to remove any foreign matter including husks. Personal hygiene policy is in place with staff washing hands on entry to the facility, removal of overalls prior to eating and no food and drink permitted in the production and storage areas. There are no requirements for specific storage segregation / utensils or equipment as all raw materials are confirmed to be Gluten Free. During this assessment all cleaning equipment was found to be maintained in a hygienic condition and overall site standards of hygiene were being maintained to a good level.
3.8 Work in progress
N/A - The production facility handles gluten free oats only. No rework or WIP is carried out.
3.9 Segregation and disposal of obsolete and waste material
N/A – All material handled is gluten free so there is no requirement for segregation or risk from cross contamination.
3.10 Laboratory and testing
A gluten testing program is in place. Every batch of flaked oats produced is tested for gluten and every pallet of oat flour is tested. A retest is completed for any results >5ppm with results exceeding 20ppm rejected and disposed of. Reviewed results for Reviewed Gluten Free Jumbo Oats DOP 05/12/2023. Gluten free result <5ppm. All samples are tested by UKAS accredited laboratory 4400 Romer Labs.
3.10 GF314 Additional requirement for GF314+AOECS audits
All raw materials used on site are gluten free. All products produced are currently bulk products only and are further processed by end customers, so no Crossed Grain Trademark is required on the label.
3.11 Complaint handling
The site has a detailed complaints system in place and details are documented in Complaint Handling 3.10 V9 08/07/2022 confirming that all complaints are investigated, trended, and recorded by suitably trained staff and where any complaint received about gluten free product suggesting a high probability of failing to comply with requirements then BRCGS would be notified. All customer complaints are investigated, analysed and documented. There have been 15 complaints received YTD, with only 2 justified. The 2 justified complaints were for a customer reaction to eating oats from

UK Food Certification Ltd. Winnington Hall. Winnington. Northwich. Cheshire. CW8 4DU

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Report No: 0645-GF (2023)

Auditor: Gill Seddon



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Bells and 1 underweight bag of porridge for Nairns. Both have been investigated by site and closed out.
3.12 Recall
Recall procedure in place for the site Management of Incidents, Product Withdrawal and Product Recall 3.11 V14 29/11/2023 and Crisis Management Manual Form 124 V15 17/07/2023. The recall procedure includes the requirement to notify the certification body and BRCGS within 24 hours of the recall notice. Details of latest test: 01/11/2023 carried out on Gluten Free Oats 800kg DOP 22/09/2023, with the scenario of clumps of oats. All product accounted for. No issues raised. There have been no recalls or food safety incidents in the past 12 months.
3.12 GF314 Additional requirement for GF314+AOECS audits
Included in Crisis Management Manual Form 124 V15 17/07/2023 to notify AOECS within 24 hours from the date of release of the official recall or withdrawal notice.
4. HACCP principles
The site has a HACCP plan in place reference HACCP08 V5 27/09/2023. The HACCP was last reviewed 16/08/2023. Gluten free positive release identified as a QCP for the site. The HACCP team comprises of FM – Technical Consultant and additional team members being PR, GL, RV, DF, KR, RR, MP. The following flow diagrams were reviewed as part of the assessment: <ul style="list-style-type: none"> • Flow ref / title: Bulk flour line process line BU003 V6 16/08/2023. • Flow ref / title: Dehulling line BU002 V6 16/08/2023. • Flow ref / title: Bulk flake line BU001 V11 14/08/2023. Critical control points have been determined using the HACCP decision tree process: CCP: Metal Detection <ul style="list-style-type: none"> • Critical Limit: Bulk Flour Line Fe 1.0mm, Non Fe 1.2mm, SS 1.5mm; Bulk Flake Line Fe 1.1mm, Non Fe 1.2mm, SS 1.5mm; Organic Flour Line Fe 1.5mm, Non- Fe 2.0mm and SS 2.5mm. • Monitoring & Frequency: Monitoring conducted start and end of each day and every hour in between. • Corrective Action: Stop production. Place on QA hold. Product will be re metal detected based on incident investigation. • Validation: Validation conducted JUL-2015, no changes. • Challenged during audit: Yes, RV. Date last HACCP review: 16/08/2023 The site is a gluten free site, with the main control measure for the prevention of gluten being targeted at staff hygiene and supplier approval.



5. Records
<p>All records were found to be completed in a legible, accurate and good condition and all records requested were retrieved in a timely manner.</p> <p>Various results of Gluten free testing reviewed during the audit from the accredited laboratory. No out of specification results reported in the last 12 months.</p> <p>All records are retained for shelf life of the product plus 12 months and backed up to an external server to prevent loss.</p>
6. Document control
<p>The site has an index of documents in place which is controlled by the site Technical Manager. All documents are password protected to prevent unauthorised altering.</p> <p>Electronic system is password protected with individual forms password protected to prevent alteration. The server is backed up each day to prevent loss via an offsite third-party approved IT company (Nubis).</p>
7. Validation
<p>For validation of controls, each batch or pallet of finished product is positive released based on gluten testing results <5ppm as tested using an accredited laboratory (UKAS 4400) using the accredited R5 Mendez method.</p>
8. GFMS maintenance and reassessment
<p>The GFMS is reviewed at least annually as part of the AMR (24/01/2023) and HACCP review (16/08/2023), or as required if there are any changes that may affect product safety (gluten related specifically). The agenda is based on the requirements in 8.1 of the BRCGS Gluten-Free Certification Program Issue 3.</p>
9. Internal audits
<p>The programme of audits detailed within the schedule covers the HACCP plan, pre-requisite programmes, food defence programmes and procedures implemented to meet the requirements of the Food Safety Standard. The internal audit programme is spread across the year, with audits carried out at least quarterly and based on risk and managed by a schedule - Internal Audit Schedule 2023.</p> <p>Audits are carried out by Consultant (JB). Third Party Auditor BRC Food 22/06/2007. All internal auditors demonstrated suitable levels of competence. Completed internal audits are reported to the managers responsible and closed out within defined timescales based on the non-conformity identified.</p> <p>Reviewed internal audit report for 5.3 Management of Allergens dated 23/10/2023 and GFMS dated 23/03/2023. No issues raised.</p>



CERTIFICATE OF CONFORMITY

This is to certify that

Glebe Farm Foods Ltd

School Lane
Kings Ripton
Huntingdon
PE28 2NL

Having been audited, meets the requirements set out in the

BRCGS for Food Safety (Issue 9: August 2022)

Grade achieved:	A
Scope of activities:	The dehulling and flaking of oats for flaked oats for further processing. The milling of flaked oats for oatmeal flour and oatmeal products. Products packed into bulk and retail ready bags.
Exclusions:	Production of granola.
Product categories:	15 - Dried foods and ingredients 17 - Cereals and snacks
Audit programme:	Announced
BRCGS site code:	1026834
Date(s) of audit:	14 & 15 December 2023
Certificate issue date:	15 January 2024
Re-audit due date:	14 December 2024
Certificate expiry date:	25 January 2025
Auditor number:	23478
Certificate reference:	0645-F

Authorised by



Oliver Hynes
Operations Director



UK Food Certification, Winnington Hall, Winnington, Northwich, Cheshire CW8 4DU



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