# Audit Report

## Global Standard Packaging and Packaging Materials Issue 5: July 2015

| Audit summary | | | |
|---|---|---|---|
| Company name | Tielman Sweden AB | BRC site code | 4103275 |
| Site name | Tielman Sweden AB | | |
| Hygiene Category | High Hygiene | | |

| Audit scope | |
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| Scope of audit | Manufacture of baking trays by flexo printing, punching and forming of grease proof paper and carton for food industry. |
| Exclusions from scope | None |
| Justification for exclusion | N/A |

| Voluntary modules included | | |
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| Modules | Result | Details |
| Choose a module | Choose an item | |
| Choose a module | Choose an item | |

| Audit results | | | |
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| Audit result | Certificated | Audit type | Announced |
| Audit grade | AA | Previous audit grade | AA |

| Number of non-conformities | | |
|---|---|---|
| | Major against SOI of Fundamental | 0 |
| | Critical | 0 |
| | Major | 0 |
| | Minor | 4 |

| Company details | | | |
|---|---|---|---|
| Address | Alkagatan 2, 582 77 Linköping | | |
| Country | Sweden | Telephone | +46(0)13 12 97 30 |
| Commercial representative Name | Björn Tielman | Email | bjorn@tielman.com |
| Technical representative Name | Maria Boman | Email | maria@tielman.com |

| Company profile | | | | | |
|---|---|---|---|---|---|
| Plant size (square metres) | <10K sq.m | No. of employees | 51-500 | No. of key processes | 1-3 |
| Subcontracted processes | Yes | | | | |
| Other certificates held | FSC Chain of Custody | | | | |
| Regions exported to | None<br>Europe<br>North America<br>Choose a region<br>Choose a region | | | | |
| Major changes or auditor observations since last BRC audit | No major changes | | | | |
| Company description | Tielman Sweden AB is a privately owned company, by the Tielman family who is involved in the day to day work. Tielman Sweden AB was founded in 1993 with a history dating back to the 1930's.<br>Customers are mostly industrial bakeries but also some stores. 85% of the sales are exported to approximately 15 countries mainly in Europe and North America.<br>The products are baking forms, cake forms, pie forms, muffin forms, mini trays for baking and cake plates made from paper, grease proof paper and/or carton board.<br>Development is part of the processes handled on site as well as production and sales. The production process is in general printing, cutting, forming and packaging on several equipment's.<br>Production and storage areas cover approximately 4500 sqrm, and the no of HACCP plans is one. The no of employees are appr. 65 working 3 shifts 5 days per week and a night shift. Increased during the year due to increased volumes.<br>Totally three factorises, one in Sweden one in Denmard and one in Toronto | | | | |

| Company profile | |
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| | Canada.<br>Lead Auditor is Finnish but speaks Swedish fluently, therefore no extra time for language difficulties was added as no translator was needed. |

## Product and process characteristics

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| **Field of Audit** (Glass<br>Paper<br>Metal<br>Rigid plastic<br>Flexible plastic<br>Wood and other material<br>Print<br>Chemical processes) | 02 - Papermaking<br>07 - Print processes<br>Category<br>Category<br>Category<br>Category<br>Category |
| Products in production at the time of the audit | Several types of baking trays and forms in different sizes; printed and with no print |

## Audit duration details

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|---|---|---|---|
| Finish date | 2018-03-28 | | |
| Re-audit due date | 2019-04-19 | Previous audit date | 2017-03-23 |
| On-site duration | 12 hr | Duration of production facility inspection | 3 hr |
| Reasons for deviation from typical or expected audit duration | No deviation | | |
| Next audit type selected | Announced | | |

## Audit duration per day

| Audit days | Date | Audit start time | Audit finish time |
|---|---|---|---|
| 1 (start date) | 2018-03-27 | 08:30 | 16:30 |
| 2 | 2018-03-28 | 08:30 | 12:30 |
| | | | |

## Auditor information

| Auditor number | Auditor Name | Role |
|---|---|---|
| 053108 | Pekka Sulkamo | Lead Auditor |
| N/A | | |

| 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 1.1.7)<br>Name / Job Title | Opening meeting | Site inspection | Procedure review | Closing meeting |
| Magnus Leuhusen, COO, Plant manager | x | | | x |
| Maria Boman / Quality Manager, HACCP team leader | x | x | x | x |

# Non-Conformity Summary

| Major non-conformity against statement of intent of a fundamental requirement | | | | |
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| **No.** | **Requirement ref.** | **Details of non-conformity** | **Critical or Major ?** | **Anticipated re-audit date** |
| | | | | |

| Critical | | | |
|---|---|---|---|
| **No.** | **Clause.** | **Details of non-conformity** | **Anticipated re-audit date** |
| | | | |

| Major | | | | | | | |
|---|---|---|---|---|---|---|---|
| **No.** | **Clause** | **Details of non-conformity** | **Correction** | **Proposed preventive action plan (based on root cause analysis)** | **Evidence provided document, photograph, visit/other** | **Date reviewed** | **Reviewed by** |
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| Minor | | | | | | | |
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| **No.** | **Clause** | **Details of non-conformity** | **Correction** | **Proposed preventive action plan (based on root cause analysis)** | **Evidence provided document, photograph, visit/other** | **Date reviewed** | **Reviewed by** |
| 1 | 4.3.2 | Latest found microbiology report was dated 08.03.2015, in 2017 test has been done, but no evidence found. | Updated microbiology report from our constructor Sibe | The inspection have been done in January but the reports are not ready yet. | Nonconformity no 1, pdf document | 2018-04-17 | Pekka Sulkamo |
| 2 | 4.8.1 | Tools, tape dispensers, used Nitrile gloves etc things on window sells in print room. | Addition no 4 at our cleaning instructions and inspections. | Deficient routines. | Nonconformity no 2, Word document | 2018-04-17 | Pekka Sulkamo |
| 3 | 4.9.2.3 | Two loose knives were found in printing / punching department | These kind of knives are already in our inspection list. | Meeting with supervisors to be more accurate on their daily check duties. | Nonconformity no 3, Excel document | 2018-04-17 | Pekka Sulkamo |
| 4 | 6.1.5 | No training plan made | Updated training plan | Our existing plan does not show when the activities take place. | Nonconformity no 4, Excel document | 2018-04-17 | Pekka Sulkamo |

**Comments on non-conformities – not tagged, just free text. This is to explain where a large number of NCs have been raised without a major**

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| **No** |

## Voluntary Modules Non-Conformity Summary Sheet

| **Critical** | | | |
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| **No.** | **Clause** | **Details of non-conformity** | **Anticipated re-audit date** |
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| Major | | | | | | | |
|---|---|---|---|---|---|---|---|
| **No.** | **Clause** | **Details of non-conformity** | **Correction** | **Proposed preventive action plan (based on root cause analysis)** | **Evidence provided: document, photograph, visit, other** | **Date reviewed** | **Reviewed by** |
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| Minor | | | | | | | |
|---|---|---|---|---|---|---|---|
| **No.** | **Clause** | **Details of non-conformity** | **Correction** | **Proposed preventive action plan (based on root cause analysis)** | **Evidence provided document, photograph, visit/other** | **Date reviewed** | **Reviewed by** |
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## Detailed Section

| 1. | Senior management commitment |
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| 1.1 | Senior management commitment and continual improvement |
| | Senior management commitment is in place and resources seem to be provided (both in terms of employees and capital expenditure available) to support ongoing certification to the Standard.<br>There is a documented Quality and Hygiene policy which is signed by the CEO Mr Björn Tielman dated 20.03.2018, included within the staff hand book, addressing product safety and quality. The policy outlines e.g. to avoid contamination, commitment follow the requirements in BRC Packaging standard etc. After updating the policy in February all employees signed off to have read the policy.<br>Objectives are documented and shared with staff.<br>Objectives are: Customer reclamations 0,265% of turnover, now 0.08% (July to June). New products / month 50pcs, 60pcs till now. Waste paper amount kg/month 32,3% Also objectives on more new products/designes, likewise on green. Production staff interviewed during the audit was able to demonstrate awareness of these policies and targets. Evidence of ongoing human and financial resources available to team who are responsible for the implementation and maintenance of the requirements of the Standard seen throughout duration of the audit. The QA manager is responsible for ensuring that the organisation is informed of all new legislation and regulatory requirements for the materials i.e. grease proof paper, ink etc. and finished products to ensure conformance with legal compliance. Compliance with legislation demonstrated by DoC (declaration of compliance) contents, ref to legislation, checked for article no 1051896 DAFGÅRD as part of the vertical audit among other products on production during audit. Pdf copy of Issue 5 of the Packaging Standard available on site. Audit conducted within due dates and this time the audit time window was changed to avoid audits near the summer vacation. COO Magnus Leuhusen attended opening and closing meetings.<br>4 minor non-conformities from the previous audit were closed out and have not recurred at this audit. |
| 1.2 | Management review |
| | Company CEO and COO were both present in management review meeting, factory management meeting is once a moth and contains most of revisions items too, and clear input and statistics is coordinated and presented by the QA manager. There is an annual review with monthly progress review sessions with senior management covering from 1 July to 30 June. Minutes of the annual management review meeting and action plan from 22.11.2017 reviewed and included all the required items. The monthly review meetings are used to review progress and QA manager reports statistics and progress to the management. Minutes include timescales and confirmation of completion, progress |

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| | toward agreed targets, e.g. customer complaints, which are then briefed to staff in the quality report displayed on board in the production area. |
| 1.3 | Organisational structure, responsibilities and management authority |
| | The management structure is documented within the quality manual "Organisationsstruktur, ansvar och befogenheter" dated 01.01.2018, with designated deputies in job descriptions ex. Production manager is replaced by MD and production leader, QA manager is replaced by MD. The senior management team is comprised of Production/Development Mananager, QA Manager (also held the role of production leader), Marketing/Sales manager and Financial manager report to the MD.<br>The production leader manages the 2 shifts, storage and maintenance.<br>Job descriptions are available for managers and supervisors and a competence matrix cover staff. Job descriptions currently under review.<br>Work instructions form part of the Quality Manual, ex checked "Styrning av grafisk design" 5.2/1 dated 2016-02-20, "Produktinspektion, provning och mätning" 5.6/1 dated 2016-02-21 among others. Daily shift handover meetings take place coordinated by the production leader. |
| Non-applicable clauses | |

| 2. | **Hazard and risk management system** |
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| 2.1 | Hazard and risk management team |
| | Multi diciplinary team Quality mngr chairing, COO, Purchase / warehouse mngr, Technical Mngr, CEO and if need a representative of the workforce.E.g. if needed other specialty knowhow from outside can pest specialist or microbiology specialist asked to join meeting.<br><br>Quality manager id´s the designated team leader.All team is trained by quality manager. Last time QMngr was trained 01.10.2015 for BRC Packaging Issue 5 standard and she trained other members of quality team. All factory persons have had refressesr training in March 2018, was recorded in training record. |
| 2.2 | Hazard and risk analysis |
| | Scope covers all production from raw material intake to delivery to customer. Total 9 different points to evaluate risks, e.g. physical, chemical, microbiological, allergens. Last revised 18.01.2018. For all products can be found in database two different information blades, an internal and external. In internal is all the needed information for production. For all different product groups is made a flow chart, last updated 25.01.2018. Miller Graphics is doing printing plates according to customer pdf. file of the print. No recirculated materials are used. The last validation was done by HACCP team 25.01.2018. Total 9 different points to evaluate risks, e.g. physical, chemical, |

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| | microbiological, allergens. Last revised 18.01.2018. Control measures are defined in risk evaluation record, according to calculated total risk amount no High risks were found and also using decision tree no CCPs were found. A review is done once a year and always when bigger change comes. E.g. a new Brick machine for new model of trays was installed and already with purchase order was done a risk analysis with the supplier concerning of H&S, The Food safety matters are dealt in the validation of the machine. |
| 2.3 | Exemption of requirements based on risk analysis |
| | No exemptions on the basis of risk were identified. |
| Non-applicable clauses | 2.2.8, 2.2.9, 2.2.10. No CCP identified. |

| 3. | Product safety and quality management system |
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| 3.1 | Product safety and quality management system |
| | A quality handbook is built according to BRC Pack Issue 5 standard demandments. All can be found in company shared file system easily. Once a year whole system is revised, last revision 28.02.2018 recorded in handbook. |
| 3.2 | Documentation control |
| | All documents have informative headline telling name, revision, who done it and who accepted. 3.2.1 Documentstyrning 2016-03-09 (last revised 28.02.2018). Security of document management is handled with a separate procedure within the 3.2.1 Documentstyrning 2016-03-09 in its own chapter. |
| 3.3 | Record keeping |
| | A list of records was seen 2016-03-09 last updated. All documents have informative headline telling name, revision, who done it and who accepted. back ups were described in procedure and mostly done by outside operator Ricoh Ab and they do also testing time to time for bringing back information from back ups. All seen manually filled records were OK, no corrections made. Q Mngr is in charge of all documents and some one in charge of the operation in question in separate record or procedure will accept the document. Retention time for quality / food safety related records is minimum 3 years. |
| 3.4 | Specifications |
| | Internal specifications consist of supplier information of raw materials, own information |

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| | on products, intermediate products were easily found. Checked Nordik paper Candor Slip Easy greaseproof paper, 2016-03-01 for BC103 reels, all information was there. All purchase orders have built in requirements for quality and food safety, with all deliveries a CoA is forwarded, checked NordicPaper delivery 19.03.2018 and was OK and Ink supplier Flint Procel WE 13- v 01/2018 was OK. Appr once a year customers ask for DoC, e.g. Norm-Pack certifate for paper and Innventa lab analysis for VOC and MPPO all three certificates were valid till April this year, validity is always for two years, so new ones are to come this year. No manufacturers trademark used on products. For every production order the specifications are verified to be valid. IT department has made a deal with Ricoh Ab to take care of all back ups management, they also test of bringing back information from back ups. |
| 3.5 | Internal audits |
| | System is described in quality manual in item 3.5. In programme for 2017 was mentioned totally 6 separate aessions and also once amonth quality inspection is regarded as a part of internal audits to take care of GMP principles, checked all done this year and were managed well, some NCs that were dealt with in timely manner. Mainly the GMP audits are defined by risk assessment, others follow BRC Pack Issue 5 demands. Audits are done by Q Mngr, Logistics Mngr, Sales Mngr, Planning assistant And Customer service assistant, all are trained by Q Mngr. Both conformities and NCs were recorded, totally 10 pcs were recorded. No open NCs remained, all was managed in good time. |
| 3.6 | Supplier approval and performance monitoring |
| | Supplier acceptance is done according to procedure 3.6 Godkänning och leverantör bedömning 30.01.2018. All suppliers are devided in three classes A,B abd C,C being not accepted as supplier. Last evaluation was done 30.01.2018. Is inclusive of service providers also. For new suppliers is sent a short form questionnaire and if they refuse to answer no sales done. If answers are acceptable, supplier is added to accepted suppliers list and deliveries can begin, the delivery quality is followed just as normal existing deliverer ability to deliver. List seen last up date was 28.02.2018 one glue supplier was updated. Records of supplier assessment seen, supplier audits have been done to subcontracted process suppliers, such as corrugated board making with their printed paper as the top layer paper. |
| 3.7 | Management of subcontracted processes |
| | All subcontracted processes such as plate making and making of corrugated board are dealt same as supplier acceptance. All customers know that certain processes are out sourced. In HACCP risk analysis was subcontracted processes as separate item and also there Was mentioned when an audit visit was done. Specifications are mentioned |

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| | in HACCP in operational control to reduce risk. Products come back to site to be inspected and further processed before transportation to customer. |
| 3.8 | Management of suppliers of services |
| | Same applies as 3.6. Approval and monitoring done the same as 3.6. These were the companies listed as suppliers of service: Pest control Anti Simex Ab, ISS for laundry and cleaning, Transport and distribution several companies, Laboratory services Innventia AB (Accredited), Waste Ragnsells AB for paper waste, Metal Stena Recyckling. Checked Anticimex agreement 28.02.2018. and was according to requirements. |
| 3.9 | Traceability |
| | 2016-04-26 Spärbarhet 3.9 procedure describes how to manage products and raw materials. Factory inventory is managed by program NAV and all traceability info is fed in to it for easy access. Incoming raw materials are fed in to the NAV system. Packaging box is the smallest individual package that is traceable, all boxes have unique traceability number. Both directions have been tested Speedibake Bakform 50x45 # 1031389 to find all used raw materials and also all control point recordings were found in appr four hours, this test was done to both directions as the used paper batch was checked also found in 6 other production baches. Auditor tested batch #1051900 Baking Cases 90x25 made 2017-10-25, used paper was 3253311-1, print colour PMS 903, production order # P106173. Information was found in 5 minutes, also the CP recordings. No reworking done on site. |
| 3.10 | Customer focus and contract review |
| | Mainly CEO is in customer contact and he is giving all needed information to production. Persons in charge of customer communication are CEO, customer service two persons, one in marketing. Customer needs and expectations are recorded when doing sales order and revised normally once a year. All information relevant to products is checked always before starting production that all is available. |
| 3.11 | Complaint handling |
| | Documented procedure Reklamationshantering 3.11/1 dated 2016-02-10.<br>All is registered to Excel file total 30 pcs (since 01.07.2017), no open ones was found.<br>Report made for all complaints as input to management meeting. Monthly statistics and discusses at management meetings as well as on daily operation meetings. The number of complaints is on a low level since several years. Statistical analysis is done for collected data to find out improvement possibilities.<br>To reduce complaints is still one of the company objectives. |

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| 3.12 | Management of product withdrawals, and incidents and product recalls |
| | Hantering av incidenter och återkallande 3.12.1 2016-02-10 Procedure. Key personnel are: CEO, Q Mngr, COO, H&S Mngr, final decision is made by CEO who will be included in crisis team. The communication plan included also contact info to DNVGL office. Recall procedure is operating 24/7 vis CEO's mobilephone, always reachable. In case of recall a detailed root cause analysis is done. Training is given in testing the procedure once a year.<br><br>IS a part of handling nonconforming product procedure. Hantering av incidenter och återkallande 3.12.1 2016-02-10 Procedure includes all demands. Needed information is given when required. Tested simultaneously with traceability test 21.03.2018, test result showed that traceability and recall is in good shape, total time was four hours for both exercises. |
| Non-applicable clauses | - |

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| **4.** | **Site Standards** |
| 4.1 | External standards |
| | The plant is located in Linköping surrounded by some light industry and stores. Buildings from 2006 and in good repair and well maintained with investment regularly planned. No local activities that would affect product. The perimeter of the site is not fully fenced and gated but all doors locked with code at all times as well as alarm system and security rounds. Condition of the site and buildings is checked by the maintenance and QA regularly. Very orderly at the audit. No issues with drainage and site's yard and driveways are concrete and in suitable condition.<br>No outside storage. |
| 4.2 | Building fabric and interiors |
| | Floors are constructed of coated painted concrete, maintained as part of the maintenance program. Floors in the 2 separate storage buildings is partly asphalt<br>Protected fluorescent light tubes in use – no evidence of breakage. No evidence of water ingress. Glass windows pose no risk since not near products.<br>Ventilation provided through built in ventilation system. |

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| 4.3 | Utilities |
| | Water, pneumatic air are the utilities used.Water is used for cleaning and also moisturising the atmosphere in forming department, the quality of moisturising is tested regularly for microbiology. Microbiological and chemical assessment is to be done once in every two years.<br>NC #1 latest found microbiology report was dated 08.03.2015, in 2017 test has been done, but no evidence found. |
| 4.4 | Security |
| | All doors are closed, no entry without electronic badge, no guard on site, only during night time check rounds done. According to risk analysis all doors are to be locked. A visitor reporting system is used and no access to production areas without guide. No external silos or tanks for raw materials. |
| 4.5 | Layout and product flow |
| | The flow is U-shaped and seems appropriate, from receiving raw material, during production to loading –Internal transports occur in a safe way between buildings. 2 storage magazines on the same lot mainly containing packed raw material paper and some machine tools/equipment. Packed finished products storage in the same building as production.<br>Storage of work in progress was seen to be satisfactory near the production in the hygiene area. All items were uniquely identified.<br>All items properly labelled and protected, and the site is roomy and adequate space available for all operations and movements. |
| 4.6 | Equipment |
| | All equipment is suitable for the intended purpose, and suitably clean. Procedure for the installation of new equipment in place as part of the investment procedure and includes notification to production and other involved departments. In practice handle by the production manager and MD, but no new equipment last year. Documented procedure Utrustning och konstruktionsutveckling 4.6/1 dated 2016-02-14.<br>Notice on production equipment rare but if used there cleanable. |
| 4.7 | Maintenance |
| | Maintenance seems adequate. Paper based system covering all equipment. Planned maintenance mainly cover lubrications and other maintenance based on rounds and inspections. Two building rounds per year by QA and maintenance to inspect buildings since the building in practice not owned by the company. |

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| | Rules are in place to prevent contamination from maintenance activities signed off in the maintenance log.<br>There are two people working at maintenance full time, as well as contractors used. Wooden equipment all in good conditions, and no engineering workshops open directly into production area. |
| 4.8 | Housekeeping and cleaning |
| | Clean as you go principle in use. Rengöring och skötsel 4.8/1 2016-02-14 procedure describes what and when and how is to be cleaned, cleaning programs have been made for daily, weekly, monthly and once a year, for both internal and external (ISS) purposes, Q Mngr does check rounds once a week recorded in check list, seen several and were OK, if NCs found they were also dealt in good time, no open ones seen, were checked in next week's check round to be corrected. Cleaning chemicals were stored properly and were according to industrial standards. Same applies for equipment. Separate equipment used for cleaning toilets.<br>NC#2 4.8.1: Tools, tape dispencers, used Nitrile gloves etc things on window sells in print room. |
| 4.9 | Product contamination control |
| 4.9.1 | Glass, brittle plastics, ceramics and similar materials control |
| | No unnecessary glass found during audit. A list of glass and brittle plastics have been made and is checked every week while machines are cleaned in Thursday mornings. Last was 22.03.2018, nothing to comment, all was in order. In procedure Styrning av kontaminering 4.9/1 2016. 02.14 describes what to do if glass breakage occurs. Good and precise procedure. |
| 4.9.2 | Sharps control |
| | Styrning av kontaminering 4.9/1 2016. 02.14 4.9.2 item is handling sharps. Not seen during audit All knives are personal and recorded, only certain type of carpet knife is allowed and when blade has to be changed it must be asked from Prod Mngr. Snap-off knives not allowed. Magnets used.<br>NC#3 4.9.2.3: Two loose knives were found in printing / punching department |
| 4.9.3 | Chemical and biological control |
| | Hazard and risk analysis gave no need for food grade lubricants due to the nature of the process and equipment except on a few places and food grade lubricants available. Also food grade silicone for transport belt (checked Kem Silicone). List of chemicals including |

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| | safety data sheets in place by subscription to a service provided externally.<br>All persons are trained to know what allergens they might possess in their food brought to canteen in factory, no allergens as such are in production area. |
| 4.10 | Waste and waste disposal |
| | Satisfactory systems in place. Established contractor used for handling waste, Waste Ragnsells AB for paper waste, metal waste Stena Recyckling AB. Designated refuse bins emptied by dedicated staff throughout shifts, waste intended for recycling collected and stored. Waste is categorised according to Swedish legislation. Trademarked goods are all destroyed on site by compressing but a signed contract on no miss use also in place with the waste company. Substandard trademarked waste not transferred to third party companies. No external storage used. |
| 4.11 | Pest control |
| | The company continue to use the same pest control contractor as documented in previous audits – Anticimex. Checked report from 20.03.2018 no special findings. The QA manager is the contact person and keep reports, trends, follow up on findings etc. available by log in to the Anticimex web site. Covers rodents and insects, both internal and external baits are used but no poison bates if not needed. Contract dated 2006-11-14. Last visit was 20.03.2018, no special findings. They visit factory four times per year, once a year a special hygiene visit, with photographs in report and verbal evaluation of situation. No own pest control, all persons are trained to inform pest activities. Good locations for traps and bait stations. Buildings are suitably proofed against pest entry. Staff are aware to report of pest activity. And Anticimex will come after notice asap on site to take care the problem. Trends checked by QA manager. Anticimex report includes always also catch analysis. No evidence of infestation was found or had recently been reported. No issues highlighted through trending reports. Staff aware to report of pest activity. |
| Non-applicable clauses | - |

| 5. | Product and process control |
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| 5.1 | Product development |
| | Product development is described in prodcedure Product utväckling 5.1. Artikkel anmalan comes from sales and a fore calculation is made help sales to price right to product. Trial runs are done always before releasing product to sales. Very detailed operational requirements for different products to make sure the stability of quality. Always in brand products customer gives the final acceptance for product after test runs. 6 months spared |

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| | samples of all production batches. |
| 5.2 | Graphic design and artwork control |
| | Styrning av grafisk design 5.2 2016-02-20 procedure takes care, that always the right artwork is used for printing. Styrning av grafisk design 5.2 2016-02-20 procedure tells how information is collected, artwork from customer what happens and who is responsible. Verificated either by customer or Q Mngr. The specifier accepts the product in brand products. Print trials are done always and customer accepts the result for production. All printing equipment was described thoroughly in product description sheet for each product in printing phase. All is stored first in electronic form (pdf) that customer has accepted and also customer has accepted used PMS colours. Only Quality Manager can change the accepted pdf file linked to product, so no possibility for printers to use out dated pdf. |
| 5.3 | Packaging print control |
| | No production information is printed on the package. No essential information is printed on the package. All print cylinders are stored in automised Paternoster shelter. The approved pdf picture acts as reference and includes PMS colour codes. Printer checks regularly during print run the quality by comparing colours with PMS colour chart. No composite prints. 6 months is the retention period. Normally the whole print batch is sent to customer, if not so rest is stored until next order. No customer requirements for lighting in measuring cabinets. |
| 5.4 | Process control |
| | Product information is described very precisely in product production sheet. Contol points are stated in Productinspektion, provning och mätning 5.6/1 21-02-2016. as general check points and in individual product production sheet more accurately. The product specification sheet includes this information. Not in use since all control information is given already in general description and product spec sheet. Procedures in place to ensure effective control of operations throughout the process including quality assurance as well as food safety hazards. Extensive control of size and performance in packaging equipment. Checks on colour and print as well, and on equipment settings as temperature. Every production is documented in the control journal as well as in the specific production card covering controls, setting, cleaning and clearance etc. Always new test run is done and either customer or quality Manager accepts it before starting actual production after change. |
| 5.5 | Calibration and control of measuring devices |

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| | Documented procedure Kalibrering och kontroll av mätutrustning 5.5/1 dated 2016-02-20. List RD 5.5. Identified equipment (e.g. balances, Pantone Matching System (PMS), metal detector, callipers) and subject to calibration/checks in general twice per year. Scales, metal detector and PMS latest 2018-02-06. Equipment such as balance is checked between formal calibrations daily by qualified staff using a traceable master. Traceable weights latest 2013-01-23. Not found any deficiencies in equipment calibrations. If found Was described in procedure Kalibrering och kontroll av mätutrustning 5.5/1 what to do. |
| 5.6 | Product inspection, testing and measuring |
| | All seen product checks were done according to procedure and what is stated on product description card. No in-line testing equipment was used , this was also recorded in risk analysis. No in-line testing equipment used. All operators are trained to do checks related to their work, Quality Manager follows their checks randomly, all seen records were OK. Control of intermediate and finished products done by operators during the production e.g. on print, color, size, function, numbers packed. E.g. color checked to PMS standard. No lab on site. Test results are regularly checked also by Quality Manager. External lab. Innventia used for analysis on finished products (every two years) and accredited. |
| 5.7 | Control of non-conforming product |
| | Documented procedure Behandling av avvikande produkt 5.7/1 dated 2016-02-21. Red and yellow tape is used to mark non-conforming products. Out-of-specification products seem to be well handled. Identified, labelled including coloured tape and documented in journals and quarantined. Kept in specified areas. QA is involved in decisions regarding out of spec products. Followed up on management meetings. No main issues but for some quality issues. Raw materials usually returned to supplier. |
| 5.8 | Incoming goods |
| | Documented procedure Inkommande gods 5.8/1 2016-02-22.<br>Raw material transport arranged by suppliers and procedure in place to visually check loads prior to intake into warehouse and sign off.<br>Goods in procedure validates delivery notes against purchase orders. Checked documents for August 2017 to January 2018, all were OK. |
| 5.9 | Storage of all materials and intermediate and finished products |
| | No external storage. One storage for raw material and finished gods but in separate areas in the same building as the production. On the same lot two buildings are rented also used for storage started in 2013. Conditions in general good. Temperature/humidity controlled to some extent. Pallets wrapped in plastics. Appropriate identification, no unidentified |

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| | products/raw materials seen in warehouse. No off-site storage used. Storage of finished product on site normally for a short period due to produce as per customer order. Intermediate goods stored at appointed area in the production. Hazardous chemicals are stored in a separate room or cabinet to minimise risk of cross-contamination. Recycled materials are baled in a press and stored separately. |
| 5.10 | Dispatch and transport |
| | The company has no own trucks. Mainly road transport used. Finished products transport is subcontracted to be managed by contractors, mainly DHL and Schenker applying to hygiene requirements as well as products protected by plastic wrapping. Sufficient identification and protection against hazards seen. Generally good condition of pallets seen. No company owned vehicles. Procedure in place to check hygiene of vehicles prior to loading, stamped and signed delivery documents archived at storage office seen. Seen Schenker agreement and it contained the requirements for this section. Transport personnel have no access to production. |
| Non-applicable clauses | 5.6.3 No in line equipment |

| 6. | Personnel |
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| 6.1 | Training and competence |
| | Good training given on food safety matters, the introduction training is very comprehensive. Used a template check list to help trainer remember all needed information, after this a coach is nominated to control the hands on practise part, this takes normally 2 to 4 weeks, printer 6 to 9 months. All jobs include more or less control points to be recorded and is trained to all according job's needs. Competence matrix is in use and is up dated once a year, checked one new comer for the introductory training and she was already validated to competence matrix to be able to do some machines. Training records seen and was up to date. If special training is needed this is agreed in development discussions. No other planning made for training on yearly basis.<br>NC#4 6.1.5: No training plan made |
| 6.2 | Personal hygiene |
| | Documented procedure: Personlig hygien 6.2/1 dated 2016-01-30. No watches, no jewellery, but plain wedding ring, wedding band in wrist allowed, perfume nor after shave forbidden. On entry to production, proper washing places available. Radio listening with ear plugs is allowed if telephone is under garments in inner pocket. Medicines must be stored in locker room cabinet. Short finger nails, no varnish nor false nails.Blue plasters in use. No monitoring of usage. |
| 6.3 | Staff facilities |
| | Separate locker rooms for men and women. Not in strait contact to production, situated in cellar. All have one locker with separation plate for civil clothes. Eating only in canteen. Several hand washing places in entry points to production area, warm water, paper towels, soap, disinfectant, advisory signs. Toilets not opening directly to the production area. Same lockers for subcontractors than for workers. Refrigerators in canteen for storing food. No eating outside canteen. Water is available from bottle dispenser (cooled). Two smoking places outside covered right next to entry door. |
| 6.4 | Medical screening |
| | AVONOVA medical center takes care of health control every third year<br>Typical symptoms of infection or contagious deceases have been trained to personnel, if travelling to countries exposed to salmonella or similar deceases must employee strictly follow health condition when coming back.<br>Health questionnaire was filled when coming in to factory in reception and diary was signed to prove I had read and understood hygiene regulations and I am healthy. |

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| 6.5 | Protective clothing |
| | T-shirts, jackets, trousers, hair nets all can be changed daily if needed, safety shoes only for maintenance workers. According to HACCP plan this set of clothing was decided to use. Not allowed to use working clothes outside factory area. All clothes can be changed daily. No pockets on upper torso. Risk assessment states that only those persons who work in conditions that something is possible to drop on their foot safety shoes must be worn, e.g. forklift drivers, maintenance technicians. If beard is longer than one cm a snood must be worn, always hair must be covered with hairnet. Only Nitrile gloves used in cleaning.<br><br>ISS is doing laundry in Factory premises with factory machines. No self-care laundry. Separation plate in lockers. Disposable clothing is disposed after usage. |
| Non-applicable clauses | |