

Quality Auditing Specialists Limited

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Custom Food Control Plan

Audit Report

For

Central N.I. Food Wholesale Ltd, trading as Gilmours Hawke's Bay

39 Edmundson Street, Onekawa, Napier

Audit Number: 21007

Audit Date(s): 27/11/2023

Audit Team: Cynthia McKee

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Introduction:

The purpose of the audit was to verify your documented procedures and operating practices for compliance with the following:

- Multi-Business (Food Control Plan)
- Codex Alimentarius 2003
- Australian New Zealand Food Standards Code
- Food Notice Food Control Plans and National Programmes
- Food Amendment Regulations 2017
- Food Regulations 2015
- Food Act 2014
- Terms and Conditions of Registration Authority

Brief Summary:

The site is currently operating at Step 8, No verification frequency, but, under Foodstuffs, have a client requested frequency of 2 yearly.

The audit finds the Food Control Plan to be generally well managed. Harshal, the Site/Operations Manager and Leanne, Compliance Manager demonstrated goods knowledge of food safety requirements and systems. Documentation is paper based and is being well managed by Leanne.

The site, which has only been in operation for less than three weeks, has been fully renovated and upgraded from its former use and is entirely fit for purpose and was observed to be maintained to a very good standard of cleanliness and housekeeping. Currently the site is only used as a distribution centre, bur may move to online ordering next year. Freezer storage is currently operated by a stand alone portable unit, and new freezers are planned to be built and commissioned in the new year.

There are no non conformances raised. An excellent result. A small number of recommendations have been made for the site's consideration and will be followed up at the next visit.

Both Leanne and Harshal attended the audit.

An acceptable outcome has been achieved, resulting in the verification frequency remaining at Step 8 - No Verification.

A section summary is below - please see Audit Findings pages later in this report for further detail.

| Section | Conforming | Non-conforming | Non-complying | Critical |
|--------------------------|------------|----------------|---------------|----------|
| Food Safety Checklist | | | | |
| Confidence in Management | 2 | | | |
| Compliance History | | | | |
| Environmental Control | 2 | | | |
| Food Safety Behaviour | | | | |
| Process Control | | | | |
| Departments | | | | |

Audit Outcome:

Verification Outcome: Acceptable

Next Verification Due: November 2025

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Regulatory Verification Frequency: Step 8 - No Verification

Client Requested Verification Frequency 2 Yearly

The audit was a sampling exercise and therefore this report is based on observations made during the audit and does not assure the safety of foods processed or sold prior to, during or following the on site audit.

Instructions for the completion of the attached Audit Findings Report and Definitions are in the Appendix of this report.

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| Audit Details | | |
|---------------------------|---|--|
| Organisation / Legal Name | Central N.I. Food Wholesale Ltd, trading as Gilmours Hawke's Bay | |
| Address: | 39 Edmundson Street, Onekawa, Napier | |
| Field of Operation: | Food retail sector where food businesses prepare or manufacture and sell food; Food service sector; Retailers of manufacturer-packaged chilled or frozen food (excluding ice cream, iced confectionery, and iced desserts); Retailers that handle food (but do not prepare or manufacture food); Transporters or distributors of food products Trading operations: Eat in premises; Home delivery; Internet; Retail; Storage provider; Wholesale Trading Products: Baked products, with filling or icing; Baked products, without filling or icing; Bulk food; Chilled food; Dairy products; Eggs; Frozen food; Ice cream; Iced confectionery; Infant formula; Minimally processed fruits & vegetables; Processed fruits & vegetables; Processed meat, poultry & seafood products; Raw meat, poultry & seafood; Ready-to-eat meals & snacks; Sauces, soups, dressings & toppings; Shelf-stable food; Shelf-stable products; Sushi | |
| Scope of Audits: | Receipt, storage, transport, distribution (ambient, chilled and frozen) Trading operations: Storage; Transport Trading Products: Ambient, chilled and frozen food products; fresh produce | |
| Processes of Interest: | Acidification (NA); Handling chilled RTE products (NA); Holding at serving temperature (NA); Processing chilled RTE (ready-to-eat) products (NA); Reheating (NA) | |
| MPI Approval Number: | MPI000139/384 | |
| MPI Approval Date: | 16/11/2023 | |
| MPI Approval Conditions: | To be verified within 6 weeks of opening. | |
| MPI Condition Status: | Condition met | |
| Approved Operator: | Peter Blackwell | |
| Report Version Number: | 1 | |
| Audit Team: | Cynthia McKee | |
| Audit Date: | 27/11/2023 | |
| Audit conducted: | Onsite | |
| Verification outcome | Acceptable | |

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The Purpose

Significant changes and whether notified to audit body/MPI

The audit confirms that there have been no significant changes to the enterprise ownership, processes, premises or key staff since opening.

Complaints and Recalls

- 0 MPI Investigations/Enforcements
- 0 Notifiable Breaches
- 0 Food Safety Complaints
- 0 Withdrawals
- 0 Recalls

0 Supplier Recalls

Managed Via GS1

- GS1 system

Performing

Critical Control Point Summary:

- 1. 1. Inwards Goods Chilled <7°C; Carcass <10°C(NA); Fresh Fish <5°C; Live Shellfish <6°C (NA) or 16°C Frozen -12°C; Icecream -15°C
- 2. 2. Storage Temperatures Chilled 7°C; Fresh Fish 5°C; Live Shellfish <4°C or 16°C (NA) Frozen -6°C, Icecream -15°C
- 3. 3. Cooking/Reheating Temperatures >75°C (NA)
- 4. 4. Hot Holding >60°C (NA)
- 5. 5. Marinated Raw Fish pH 4.5 or less (Liquid) (NA)
- 6. 6. Sushi Rice pH 4.6 or less (NA)

Please see Audit Findings pages later in this report for further detail

Legal Requirements

Compliance with all legal requirements including those relating to health and safety is the responsibility of your organisation. Auditing for compliance to legal requirements outside of the legislation stated in the introduction is outside the scope of this audit.

| Report Prepared by | Cynthia McKee | Cherles |
|--------------------|---------------------------|---------|
| Report Reviewed By | Maree Haddon 1/12/2023 | MACOL |

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AUDIT CHECKLIST - SECTION SUMMARY









| Section Confidence in Management | | | |
|--|---|--------------|----|
| Confidence in Management | Food Act CA2 CTO Food Postellaria | Canfamaira | C |
| Registration scope of operations | Food Act S42, S79 Food Regulations S6, S41 | Conforming | |
| Competency of Management | Food Act S50, S80 Food Regulations S31, S77 | Conforming | C |
| Delegation | Food Regulations S33, S79 | Performing | 2 |
| Documentation and Record Keeping | Food Act S50, S110 Food Regulations S10, S35-38, S81-82 | Performing | 2 |
| Improvements and Corrective Actions | Food Regulations S33, S34, S79, S80 | Performing | 2 |
| Operator Verification | Food Regulations S32, S78 | Performing | 2 |
| Identification and Traceability | Food Regulations S24, S26, S71 | Performing | 2 |
| Compliance History | | | |
| Customer Complaints or Recalls | Food Regulations S27, S72 | Performing | 2 |
| Non Compliances | Food Regulations S27, S33-34, S72, S79-80 | Performing | 2 |
| Managing Unsafe or Unsuitable Food | Food Regulations S34, S80 | Performing | 2 |
| Environmental Control | | · c. romming | |
| | Food Pogulations \$42, \$40,00, \$46 | Conforming | C |
| Design of Facilities and Services | Food Regulations S13, S19-20, S46, S52-53, S56-57 | Comorning | |
| Pest and Animal Control | Food Regulations S18, S51 | Conforming | C |
| Waste Management | Food Regulations S17, S50, S63-64 | Performing | 2 |
| Cleaning and Sanitising | Food Regulations S14, S54 | Performing | 2 |
| Water | Food Regulations S21, S55 | Performing | 2 |
| Maintenance | Food Regulations S15-16, S48-49 | Performing | 12 |
| Environmental Monitoring | Food Regulations S30, S76 | NA | NA |
| · · · · · · · · · · · · · · · · · · · | 1 000 Regulations 000, 070 | NA NA | |
| Food Safety Behaviour | | Deaf contra | 12 |
| Training Supervision and Competency | Food Act S50, S80 Food Regulations S31, S77 | Performing | |
| Personal Hygiene and Behaviour | Food Regulations S29, S60-62, S74 | Performing | 2 |
| Health and Sickness | Food Regulations S29, S74 | Performing | C |
| Food Standards Code Compliance Ingredients | Food Regulations S23, S30, S32, S68, S76, S78 | NA | NA |
| Food Standards Code Compliance Micro | | NA | NA |
| Opening After an Emergency | Food Regulations S28, S30, S73, S76 | NA | NA |
| Process Control | | | |
| Design of Equipment | Food Regulations S19-20, S22, S65-67 | Performing | 2 |
| Use of Equipment | Food Regulations S20, S53 | Performing | 2 |
| Suppliers and Purchasing | Food Regulations S23, S25, S68, S70 | Not audited | NA |
| Inwards Goods | Food Regulations S23, S68 | Performing | 2 |
| Storage and Stock Controls | Food Regulations S24, S28, S30, S58-59, S69, S73, S75-76 | Performing | 2 |
| Defrosting and Reheating Food | Food Regulations S28, S30, S73, S76 | NA | NA |
| Time Temperature Control | Food Regulations S28, S30, S73, S76 | NA NA | NA |
| Controls | Food Regulations S28, S30, S73, S76, Part 6 | Performing | 2 |
| Calibration | Food Regulations S22, S66 | Performing | 2 |
| Transport | Food Regulations S28, S30, S75 | Performing | 12 |
| Food Labelling and Advertising | Food Act 2014 Food Regulations Part 6, Part 7 | NA | NA |
| Hazard Analysis | Food Act 2014 | Performing | 12 |
| Hazara Allaryold | Food Regulations S30 | Not audited | _ |

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Hazards identified and analysed Food Regulations S30 Not audited

CCP Performing

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AUDIT FINDINGS - BREAKDOWN



Performing









The audit findings identified in this report are to be submitted by the dates indicated in the summary of findings. Documentary evidence is required to verify the corrective action has been satisfactory. To enable the corrective actions to be reviewed in a timely manner please ensure your site name is included. When submitting your corrective actions please only send when all the corrective actions have been completed.

Submission of Corrective Actions:

- Email all findings together when completed
- · Save each finding as separate PDF's, include all documents for each finding as one PDF
- Name each PDF file as per the identifier in the report e.g. FS1, FS2 etc

Overall Audit Close Out date: 27/11/2023

CLOSE OUT DUE

Title and Module

Registration scope of operations

FOOD SAFETY CHECKLIST



Conforming

MPI Registration Certificate displayed in a public place

Recommend to display the site certificate when it becomes available.

Competency of Management

FOOD SAFETY CHECKLIST



Conforming

Training records kept

It is recommended that the management HACCP and or 167/168 or equivalent training records are located and filed or that new training is booked.

Design of Facilities and Services

FOOD SAFETY CHECKLIST



Conforming

Design, Construction and Use of Place appropriate and compliant including storage, laundry and personal hygiene

Recommend to seal the wooden shelving in the credit bay zone so that any spills can be effectively cleaned without the unsealed wood absorbing the moisture.

Pest and Animal Control

FOOD SAFETY CHECKLIST

C

Conforming

Documentation and Records

Recommend that Harshal is also given access to Pest net online

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INSTRUCTIONS FOR THE COMPLETION OF AUDIT FINDING REPORTS

Failure to provide corrective action within the nominated time frames will lead to an unacceptable outcome being issued and an increase in verification frequency.

Situation Observed i.e. Non Conformance (Refer Definitions)

To be completed by the QAS Auditor

Agreed Action - Completed by the Auditor in conjunction with the Organisation for Non Conformances

| Agreed Corrective Action: | Describe the long term corrective action(s) planned or taken to eliminate the root cause to prevent recurrence. |
|---------------------------|--|
| Verification Method: | Client to supply objective evidence in the form of revised procedures, records, etc. which shall be submitted within the |
| | timeframes outlined in the Definitions depending on the type of non conformance. |

Verification of Corrective Action by QAS Ltd

The QAS Auditor will review the supplied evidence to determine whether the corrective action taken has been effectively implemented. Upon completion of the review the QAS Auditor will either accept the corrective action taken and clear the Non Conformance or request that the Client provide an additional or revised response or objective evidence in order to clear the Non Conformance. Comments shall be added to the audit report. The QAS auditor will record the date, method used and documents reviewed to verify effectiveness.

Non Conformance Closure

Upon completion of all non conformances, the Corrective Action Completed section of the Audit Report to be signed off by the Auditor.

Definition of Terms

Definition

Acceptable Verification Outcome

- The verifier assigns an acceptable outcome to a verification visit when they are satisfied that the objective evidence gathered shows that the approved operator is meeting New Zealand regulatory requirements. The verifier can still assign an acceptable outcome if they are satisfied that:
- any non-compliances are not critical non-compliances
- the non-compliances do not meet the criteria for an unacceptable outcome.

Unacceptable Outcome

Unacceptable outcome, in relation to a verification, means the outcome assigned under regulation 105(4): The verification agency or verifier must assign an unacceptable outcome if satisfied that -

- (a) there is, or has been, non-compliance by the operator or registered importer with an applicable requirement of the Act that is likely to result in food being unsafe or unsuitable; or
- (b) if the case of a food business, -
- a. the risk-based measure is not applicable to the operations of the food business; or
- b. the risk-based measure is not effective; or
- (c) 1 or more of the following apply:
- a. In the case of a food business subject to a food control plan or a national programme, the operator verification process has failed repeatedly to identify deficiencies that affect the safety or suitability of food (for example, deficiencies in the food control plan or deficiencies in the operator's practices and processes):
- b. The operator or registered importer has failed to identify or effectively address a problem or deficiency that has the potential to cause a critical non-compliance:
- c. The verification agency or verifier has no confidence in the operations of the food business or registered importer because of the combined effect of several instances of non-compliance:
- d. The verification agency or verifier has no confidence in the operations of the food business or registered importer due to the extent to which records required under the applicably requirements of the Act are absent, incomplete, or altered.

Verification Topic Outcomes

Performing: Client Action Fully meeting applicable requirements of the Act Comprehensive knowledge of the applicable requirements of the Act and how to meet them; Systems and procedures are in place and documented where required; and Procedures followed; and full records available where required. Client Action This generally means there will be no actions required to be done

Conforming: (C)

Adequately meeting applicable requirements of the Act. Observations made of potential for a current activity to deteriorate into non conformance if allowed to persist

Systems and Procedures require slight updates or amendments: or Procedures followed in the majority of cases; or recording sheets/systems in place with minimal gaps in recording. May relate to a component of the system that is performing, but where an opportunity for improvement is evident. Alternatively, it may refer to an incidental or isolated system discrepancy.

Recommendations should be reviewed or actioned where practicable as they are often provided as areas of opportunity for improvement. Isolated or incidental deficiencies identified in observations may indicate that specific aspects of the system need to be reviewed to prevent problems occurring in the future. No specific action plan response is required however.

Non Conforming: (NC)

Applicable requirements of the Act are not fully met but the deficiency(s) are not likely to affect the safety or suitability of food Proposed corrective actions to address each non-conformance must be agreed with the QAS Auditor

Definite improvement needed in systems and procedures; or isolated or sporadic lapse in implementation of procedures; or practices observed/demonstrated are at variance with applicable requirements of the Act; or consistent failure to keep records, or absence of required recording sheets that do not directly relate to controlling food safety or suitability.

Proposed corrective actions to address each nonconformance must be agreed with the QAS Auditor. Corrective action is to be actioned and documentary evidence e.g. records, photos, copies of procedure submitted to the auditor within 30 days of the audit. Issues may be closed out either through evidence sighted or via a follow-up assessment.

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Non Complying: (NCP)

Applicable requirements of the Act are not met and findings can be referenced to an offence provision in part | Proposed corrective actions to address each non-4 of the Act. A significant deficiency or failure to manage risks or comply with an applicable requirement of the Act is evident to the extent that food safety and/or suitability could be threatened in the future if improvements aren't made.

Procedures and systems that directly impact safety and suitability of food are absent or insufficient to manage risks; or procedures and systems are not followed and this constitutes a risk to food safety and suitability directly; or records required that directly relate to controlling food safety or suitability are significantly absent, incomplete, or altered; or a number of non conformances against an applicable requirement of the Act or a pattern of non conformance of a single requirement over successive verifications are observed.

compliance must be agreed with the OAS Auditor. Corrective action is to be actioned and documentary evidence e.g. records, photos, copies of procedure submitted to the auditor within 30 days of the audit. Issues may be closed out either through evidence sighted or via a follow-up assessment.

Critical Non Compliance (CNC)

Applicable requirements of the Act are not met and findings can be referenced to an offence provision in part | Proposed corrective actions to address each critical non-4 of the Act. A significant deficiency or failure to manage risks or comply with an applicable requirement of the Act is evident to the extent that food safety and/or suitability is threatened immediately.

Procedures and systems that directly impact safety and suitability of food are absent or insufficient to manage risks; or procedures and systems are not followed and this constitutes a risk to food safety and suitability directly; or records required that directly relate to controlling food safety or suitability are significantly absent, incomplete, or altered; or a number of non conformances against an applicable requirement of the Act or a pattern of non conformance of a single requirement over successive verifications are observed.

compliance must be agreed with the QAS Auditor either during the audit or by submitting an action plan within 24 hours of the audit. Corrective action is to be actioned and documentary evidence, e.g. records, photos, copies of procedures submitted to the auditor within 7 days of the audit. Issues may be closed out either through evidence sighted or via a follow-up assessment. MPI will be notified verbally and via email within 24 hours of the audit.

Verification Frequency - Refer to MPI Guidance material on determining verification frequency based on outcomes. Stepped based on outcomes

Step / Time between different verifications

Step 8 - No verification

Step 7 - 3 years

Step 6 - 2 years

Step 5 - 18 months

Step 4 - 12 months

Step 3 -9 months

Step 2 - 6 months

Step 1 - 3 months

If a site receives an unacceptable outcome the verification frequency will be increased as follows: One Step if willing and able to comply, two Steps if unwilling and / or unable to comply, set to Step One if immediate risk to public health. (escalate to MPI compliance) If a site has an increase in audit frequency due to an unacceptable outcome, a decrease in step can only occur after 2 consecutive verifications with an acceptable outcome.

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