Audit Report

Global Standard for Food Safety Issue 7: July 2015

1.Audit Summary			
Company name	DURANLAR SÜT SANAYİ VE TİCARET ANONİM ŞİRKETİ	BRC Site Code	4444660
Site name	DURANLAR SÜT SANAYİ VE TİCARET ANONİM ŞİRKETİ		
Scope of audit	Production and packing of yogurt, ayran in PP bags, white cheese in PP bags, pet, tin and butter in vacuum bags		
Exclusions from scope	Yellow Cheese		
Justification for exclusion	The documentation is different, the infrastructure is not suitable for the other products and the area is different from the other production area.		
Audit Finish Date	2016-11-18		
Re-audit due date	2017-11-18		

Voluntary modules included		
Modules	Result	Details

2. Audit Results					
Audit result	Certificated	Audit grade	B	Audit type	Announced
Previous audit grade		Previous audit date			

Number of non-conformities	Fundamental	0
	Critical	0
	Major	0
	Minor	14

3.Company Details			
Address	Sanayi Mahallesi 2459 Sokak No: 26/A Bucak / Burdur		
Country	Türkiye	Site Telephone Number	+90 546 742 20 11
Commercial representative Name	Mehmet Dumlu	Email	mehmetdumlu1971@hotmail.com
Technical representative Name	Mehmet Dumlu	Email	mehmetdumlu1971@hotmail.com

4.Company Profile

Plant size (metres square)	10-25K sq.m	No. of employees	51-500	No. of HACCP plans	4-8

Subcontracted processes	No
Other certificates held	ISO 22000, ISO 9001
Regions exported to	Asia
Company registration number	TR-150027
Major changes since last BRC audit	It is first audit

Company Description

Duranlar Süt was established in 1996 as milk collection facility. The owners of the company are 2 brothers.
The milk factory was established in 2000. Firstly all scopes were processed in the same factory but the cream factory was separated in 2016 and a new facility was established.
They are processing almost for super markets like A101, Şok Supermarkets and also for catering companies.
They have an exporting, especially to Iraq and Dubai. Their exporting 30 % and domestic markets 70 %.
Their daily capacity is processing 90 tones and they are processing 60 tones is a day. (50 ton cheese, 5 ton yogurt, 5 ton ayran) (for milk factory)
Their daily cream capacity is processing 5 tones and they are processing 3 tonnes in a day.
Person responsible in case of recall: Mehmet Dumlu, phone number: (+90) 546 742 20 11
BRC logo use: First year, NA
Veterinary number: TR-150027
Production and storage area: 680 square meters.
Products processed during inspection: Ayran (200 cc), Cheese (650 gr.), yogurt (1500 gr.)

5.Product Characteristics					
Product categories	07 - Dairy, liquid egg				
Finished product safety rationale	Cold storage 4-6ºC, 12 months shelf life (Cheese), 6 for butter, pasteurisation at 85ºC / 5 min., pH min 4,70 for white cheese, pH 4,20 for yoghurt, pH min 4,75 for butter, pH min 6.0 for fresh white cheese				
High care	Yes	High risk	No	Ambient high care	No
Justification for area	Since they are processing white cheese, the packing of it is a high care area.				
Allergens handled on site	Milk				
Product claims made e.g. IP, organic	No such claims.				
Product recalls in last 12 Months	No				
Products in production at the time of the audit	Ayran (200 cc), Cheese (650 gr.), yoghurt (1500 gr.)				

6.Audit Duration Details			
On-site duration	16 man hours	Duration of production facility inspection	8 man hours
Reasons for deviation from typical or expected audit duration	Similar processes for products		
Next audit type selected	Announced		

Audit Duration per day			
Audit Days	Audit Dates	Audit Start Time	Audit Finish Time
1	2016-11-18	09:00	18:00

	Auditor (s) number(s)	Names and roles of others
Auditor Number	207105	Derya Çetişkol - Lead Auditor
Second Auditor Number	207190	Aşkın Acay - Auditor

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 1.1.9) Name / Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
Süleyman Duran / General Manager	X			X
Mehmet Dumlu / Production Manager	X	X	X	X
Türkan Dumlu / Quality Management Representative	X	X	X	X
İrfan Acat / Quality Control Responsible	X	X	X	X

Non-Conformity Summary Sheet

Critical or Major Non Conformities Against Fundamental Requirements				
No.	**Clause**	**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**

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**
1	2.10.1	The pasteurisation temperature / time is followed up automatically but although the temperature / time have to be recorded on the forms, the time was not recorded.	The form was revised and the new forms were started to use.	The form was revised and the training was given to relevant personnel about importance and using of the form.	Revised Forms (FR-81, FR-50), Training record and process records.	2016-12-16	D.Çetişkol A.Acay
2	3.2.1	Some of the documents have the same document number. Ex: Machine Failure Follow up Form and Machine Maintenance Follow up Form, both of them were defined as FR-22.	All documents were controlled and the new document number was given to the documents which have same number. The document list was revised.	The training was given to relevant personnel about importance and application of the documents control.	Training record, examples for revised documents and revised document list (FR-01).	2016-12-16	D.Çetişkol A.Acay
3	3.7.2	Root cause analyses were not made correctly for some of the corrective actions.	The CA Form (FR-13) was revised and added root cause part.	The training was given to the relevant personnel about the root cause analyses.	Revised CA Form (FR-13) and CA record, Training Record	2016-12-16	D.Çetişkol A.Acay

Minor							
4	3.11.3	The withdrawal test was not made effectively and necessary communication was not made with the customer effectively.	The withdrawal test was made again.	The training was given to the relevant personnel about the withdrawal and test was made again to include feedback from the customer.	Training record, withdrawal test	2016-12-16	D.Çetişkol A.Acay
5	4.5.1	Although the microbiological water analyses have to be done semi-annually on the external laboratory, it was made only one time in 2016.	The microbiological analyses was made for water.	The analyses plan (FR-23) was revised and training was given to the relevant personnel about the plan and analyses.	Revised analyse plan (FR-23), training record and microbiological water analyse report.	2016-12-16	D.Çetişkol A.Acay
6	4.7.4	Although the cleaning records were kept after maintenance, they were not kept after failures.	The failure form was revised and cleaning control was added.	The machine failure monitoring form was revised and the training was given to the relevant personnel about the maintenance rules and forms.	Revised form (FR-113) and maintenance record, training record.	2016-12-16	D.Çetişkol A.Acay
7	4.9.2.1	Although the knives, which were used for cutting cheese, were controlled daily, test was not recorded.	The form was revised and started to control.	The training was given to the relevant personnel about the metal contamination risk and the using of the form.	Revised form (FR-117) and record, training record	2016-12-16	D.Çetişkol A.Acay
8	4.10.2.2	Although the filters, which were used for ayran filling, were controlled daily, test was not recorded.	The form was revised and filter control was added to the form.	The training was given to the relevant personnel about the importance of the filter control and record.	Revised form (FR-101) and record, training record.	2016-12-16	D.Çetişkol A.Acay

Minor							
9	4.14.8	Although pest control company visit 2 times in a month, the records relating to September were not available to be seen.	The records of the visiting were found and placed to the pest control file.	The training was given to the relevant personnel about the controlling of the records.	Pest control visiting records and training record.	2016-12-16	D.Çetişkol A.Acay
10	4.15.2	Some of the packaging materials were not stored properly.	The storage room was ordered.	The training was given to the relevant personnel about the storage rules and activity was observed	Training record, and photos.	2016-12-16	D.Çetişkol A.Acay
11	5.2.3	Although the nutritional level is written on the product packages, the verification analyses were not made.	The verification analyses (nutritional values) were made.	The analyses plan was revised (FR-23) and the training was given to the relevant personnel about the analyses.	Revised analyse plan (FR-23) and training record. Analyse reports.	2016-12-16	D.Çetişkol A.Acay
12	5.4.2	The fraud risk was determined for raw milk and necessary precautions were made but these precautions were not recorded on the risk analyses.	The Risk analyses table was revised.	The training was given to the relevant personnel about risk analyses of the raw materials.	Training record, revised Raw Material risk evaluation (DD-07)	2016-12-16	D.Çetişkol A.Acay
13	5.6.1.3	Ongoing shelf life tests were not made for butter, yogurt and ayran.	The shelf life tests were made.	The analyses plan was revised and the training was given to the relevant personnel about the shelf life tests.	Revised analyse plan (FR-23) and training record. Analyse reports.	2016-12-16	D.Çetişkol A.Acay
14	6.3.1	The frequency of quantity checking was meeting the requirements of appropriate legislation but it was not recorded properly.	The weight control form issued.	The weight control instruction (TL-77) and Weight control form (FR-118) was issued and the training was given to the relevant personnel about the weight control.	Training record, Weight control instruction (TL-77), Weight control form (FR-118) and records.	2016-12-16	D.Çetişkol A.Acay

Comments on non-conformities

Detailed Audit Report

1. Senior management commitment

1.1 Senior management commitment and continual improvement

There is the documented Quality and Food Safety policy dated 01.09.2013 (DD-01). It was signed by General Manager and is displayed both at the site entrances and trainings are given to the staff. Policy training was given on 10.05.2016 by Team Leader.

Quality objectives were seen. (FR-07) Some of clear targets of 2016;

- Min 10 hour training for a person
- Max. 2 order that cannot be delivered on time
- Min 85% customer satisfaction
- Max. 3 customer complaints about food safety

The evaluation of the objectives are made four times in a year. The last evaluation of the objectives were seen on 10.10.2016.

Management review meeting conducted annually. Meetings are conducted to review quality, food safety, and matters relating to the Global Standard for Food Safety. Minutes of the last meeting dated 25.10.2016 were reviewed. The Management Review includes evaluation of all elements that should be discussed during the meeting.

Monthly basis last meeting programme dated 19.09.2016 and 10.10.2016**,** which prepare to attention of senior management.

The senior management team is detailed in an organization chart. There are sufficient resources to maintain and continually improve the FS and QMS. Adequate supervisory support is provided across all shifts.

All information necessary to develop the HACCP study was available and contained in the legislation archive. External Document List (FR-61; dated 19.09.2016) was seen. It is followed and updated online with web. The company had a copy of the BRC Standard.

Initial BRC audit

1.2 Organisational structure, responsibilities and management authority

The senior management team is detailed in an organization chart (DD-02; Rev. No/ Date: 00/ 01.09.2013) There are sufficient resources to maintain and continually improve the FS and QMS. Adequate supervisory support is provided across all shifts. Deputies are clearly documented for all departments responsible in Deputies List (GT-03; 00/06.02.2016)

Management Responsible; Türkan Dumlu, deputy; İrfan Acat (Quality Control Responsible)

The job descriptions were seen for;

- Production Manager (GT-07; Rev. No/ Date: 00 / 01.09.2016) Deputy is Production Manager Asistant.
- Purchasing Manager (GT-06; Rev. No/ Date: 00 / 01.09.2016) Deputy is Sales and Marketing Responsible.
- Food Safety Team Leader (GT-18; Rev. No/ Date: 01/ 01.09.2016) Deputy is Quality Control Responsible.

Details of non-applicable clauses with justification

Clause reference	Justification
1.1.8	This year is the first BRC audit
1.1.10	This year is the first BRC audit

2 The Food Safety Plan – HACCP

The members of the HACCP team are: Production Manager Assistant, QC Responsible, Pasteurisation Responsible, Strained Yogurt Responsible, Homogenized Yogurt Responsible, Ayran Responsible, Butter Responsible, Cheese Responsible, Maintenance Responsible, Raw Milk Purchasing Responsible. The team has been appointed on 11.02.2016. Relative records were available.

HACCP Team Leader is Quality Management Representative. She is Food Engineer and she has 3 years experience in the sector. Last HACCP system training received by HACCP team was on 14.06.2016 internally.

Prerequisite Program (DD.06) was seen. These included: environment cleaning, pest control, personnel hygiene, housekeeping, allergen control, processes to prevent cross-contamination, water quality and GMP.

All pre-requisite programs are controlled by relative procedures.

Products and processes involved in the scope of evaluation are clearly defined in the HACCP study.

Product specifications were available and detailed. These included information on composition, origin of ingredients, physical and chemical properties, processes involved, packing information, storage and distribution conditions, shelf life and indented use with consideration given to potential misuse.

Ex: White Cheese Product Description

Salmonella, 0 / 25 gr., L. Monocytogenes 0 / 25 gr., smell, taste, total dried matter 45 %, pH: min 4,70, storage: 4-6ºC, allergen, shelf life: in plastic bag 6 months, in tin 12 months.

Intended use of products is described in their specifications. Consideration has been given to possible misuse and vulnerable groups of population.

Process flow diagrams are available for all processes and products involved in the operations.

Generic flow diagrams cover raw material intake, ingredient storage and distribution.

There were 7 flow diagrams:

Homogenized Yogurt (AS.10, issued date: 01.09.2013), Strained Yogurt (AS.04, issued date: 01.09.2013), Ayran (AS.01, issued date: 01.09.2013), Butter (AS.05, issued date: 01.09.2013), White Cheese (AS.02, issued date: 01.09.2013), Fresh White Cheese (AS.08, issued date: 01.09.2013), Light Fresh White Cheese (AS.02, issued date: 01.09.2013)

The flow diagram of Fresh White Cheese and Ayran was verified. The flow diagrams are verified annually by the HACCP Team. The flow diagrams are verified on 19.09.2016. The record was seen.

The scope of the HACCP plan has been verified. All reasonably expected hazards (physical, chemical, biological) that are not likely to be controlled by existing pre-requisite programs have been identified and presented in the hazard analysis. Hazards identification took into account those present in raw materials, those expected to be introduced during process or surviving the process steps and the preceding and following steps in the process chain.

Chemical, microbiological and physical hazards are listed for each process step. Records of severity / likelihood assessment are documented in the hazard analysis documents. Hazards evaluated via using of Hazard Analyses for each product (DD-07) was reviewed. The analyses were made over 25 points (5x5) and if the risk is over 4, the decision tree is used if the step is CCP or not.

Suitable control measures for each hazard are documented. Suitable control measures are part of the prerequisite requirements programs. Examples of control measures included: receiving of raw materials (temperature, antibiotic, pH), quality control of raw materials and end products, temperature controls and evaluation of suppliers. Pre-requisite programs are in place and found to be properly implemented. These included: cleaning and sanitising, pest control, maintenance programmes for equipment and buildings, personal hygiene requirements, staff training purchasing, transportation arrangements, processes to prevent cross-contamination, allergen controls.

Critical control points have been determined by taking into account the provisions of Codex Alimentarius and the ISO22000:2005 standard approach, i.e. combination of the evaluation of hazards and the evaluation of the established control measures.

Critical limits for every CCP have been determined and are documented in the HACCP plan (. Critical limits conform to legislative requirements, e.g.

CCP 1. Receipt (antibiotic) – parameter is not to be found
CCP 2. Receipt (soda) – parameter is not to be found
CCP 3. Receipt (raw material temperature) – 4-10°C
CCP 4. Pasteurisation of raw material (temperature / time) (87 C / 5 min.)
CCP 5. Brine (salt volume) (10-15 % during process, 7-10 % last product brine)
CCP 6. Pasteurisation of brine (temperature / time) (85 C / 5 min.)
CCP7. Final Product Storage and Transportation (final product temperature) – 4-10ºC

Critical limits have been determined and agreed by the HACCP team. Critical limits are based on published data, legislative requirements, and customer requirements. Last validation was made on 19.09.2016.

Monitoring systems are able to detect loss of control of CCPs in time for corrective action to be taken. Trained key members of staff are responsible for the monitoring of CCP's. Records used for monitoring CCP's were available and reviewed.

CCP 1. Receipt (antibiotic) – not found
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 2. Receipt (soda) – not found
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 3. Receipt (raw material temperature) – between 4-10ºC
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 4. Pasteurisation of raw material (temperature / time) (87ºC / 5 min.)
White Cheese Process and Packaging Control Form (FR-50) Records dated 10.11.2016 and were seen.

CCP 5. Brine (salt volume) (10-15 % during process, 7-10 % last product brine)
Brine Pasteurisation Form (FR-81) Records 10.11.2016, 25.06.2016 and 27.09.2016 were seen.

CCP 6. Pasteurisation of brine (temperature / time) (85ºC / 5 min.)
Brine Pasteurisation Form (FR-81) Records 10.11.2016, 25.06.2016 and 27.09.2016 were seen.

CCP7. Final Product Storage and Transportation (final product temperature) – between 4-10ºC
Vehicle Temperature Measure Form (FR-45). Records between 25.02 – 19.03.2016 was seen.
Storage Temperature Control Form (FR-44) Records between 13-16.11.2016 was seen.

All records used for monitoring CCP's were found to be signed by those responsible for their monitoring and properly stored.

Critical Control Points are monitored by trained key members of staff. Records were filled by the operators and controlled by the Production Manager. CCP Training for the operators and responsible were given by Production Manager on 14.06.2016. Records were investigated.

The HACCP Plan is reviewed, minimum, on an annual basis. During the HACCP Team meetings, all things are reviewed. Last review was made on 19.09.2016.

A review of CCP records concerning the product involved in the traceability challenge test was completed as part of the traceability.

The company operates a formal sign off process for all new products, significant changes and new equipment, which includes sign off by the HACCP Team to verify that the consequences of any changes have been assessed and addressed. It has been reviewed by HACCP team on 19.09.2016.

NC 2.10.1

Details of non-applicable clauses with justification

Clause reference	Justification

3. Food safety and quality management system

3.1 Food safety and quality manual

BRC Manual (DD-05; İssue date: 19.09.2016) was seen. The Food Safety Quality Manual covers the scope of the Global Standard for Food Safety Standard and contains the appropriate policies, procedures and work instructions.

The Quality and Food Safety Manual is available as a hard copy in the QA Office. Procedures, recording forms and work instructions are effectively controlled.

Documents in use were found to be the correct version – cross checks were made of master copies and documents in circulation during the traceability test. Documents reviewed during the visit were found to be clearly legible.

3.2 Documentation control

Document and Records Control Procedure (PR-01; Rev. No/Date: 00-01.09.2013) was seen. The Document Control List (FR-01; 01.11.2016) was seen. This list also include the departments which the documents are distributed.

FR-04 Document Distribution Form is used for the record and it is signed to the responsible for every documents separately. Documents in use were found to be the correct version

NC 3.2.1

3.3 Record completion and maintenance

Document and Records Control Procedure (PR-01; Rev. No/Date: 00-01.09.2013) was seen. Effective collation, storage and retrieval were effectively.

The back up to the external hard disk is made twice in a year. Dated 09.04.2016 record (FR-06; Back Up Monitoring Form) was seen.

Retained records are appropriately authorised and stored in good condition. The records were found to be legible and genuine. Record retention period vary according to product type and takes into account the shelf life of the product. The max shelf life of the product is 6 months for butter and cheese, 12 months in tin for white cheese. Records are kept 5 years which was defined in the Quality Records List (FR-05; Rev. No/Date: 00 / 01.09.2016) The responsible from archive is Food Safety Team Leader (Türkan Dumlu)

3.4 Internal audit

Internal Audit Procedure (PR-03; Rev. No/Date: 00/01.09.2013) was seen.

The BRC documentation was started in August. Therefore term was determined as 5 months for BRC for 2016.

Internal Audit Plan for 2016 (FR-10) was seen. The internal audits are planned at least twice in a year according to the BRC requirements and a risk assessment. The audits were conducted in February according to the ISO 22000. There were no nonconformities. And the first period of the BRC internal audits were conducted in September and October.

Top management; on 14.09.2016, 0 nonconformity
Purchasing; on 25.09.2016, 1 nonconformity
Quality Control; on 17.10.2016, 2 nonconformities
Quality Management; on 06.10.2016, 3 nonconformities
Production; on 25.10.2016, 2 nonconformities

And also second period audits were planned for December.

Auditors are; İrfan Acat, Türkan Dumlu, Mehmet Dumlu and Serdar Duran. Dated 05.01.2016 the internal auditor training records were seen. BRC V.7 training was taken on 5-6 09.2016.

Internal audit reports were comprehensive containing sufficient information on conformities and identified non conformities.

Audit reports identified non conformities as well as conformities against standard requirements. Audit reports were available and those reviewed included:

Quality Management audit date is 06.10.2016, audited by: Mehmet Dumlu. Record is FR-11

There was a programme of documented inspections to ensure that the factory environment and processing equipment is maintained in a suitable condition for food production. This inspection in made monthly via using of Hygiene List (FR-34;00/01.09.2013) and Factory Question List (FR-35, 00/11.09.2016). Inspection records reviewed.

Hygiene audits were conducted on 12.10.2016 and 07.11.2016. The factory audits were conducted on 28.10.2016 and 07.11.2016.

The auditors are Quality Management Representative Production Manager and Quality Control Responsible who have received training.

3.5 Supplier and raw material approval and performance monitoring

3.5.1 Management of suppliers of raw materials and packaging

Purchasing and Supplier evaluation Instruction was seen. (TL-33; 00/01.09.2013) Raw Material Risk Analyses was seen. (DD-07; 00/19.09.2016) All raw materials were determined as low risk.

Suppliers are risk assessed and have to complete a self-audit questionnaire, supply a third party audit certificate and report. Supplier performance is reviewed at management review meeting. An approved supplier list was available. The suppliers are evaluated twice in a year.

Approved Suppler List was seen. (FR-26;07.10.2016)

FR-74 is used for evaluation of the raw milk suppliers. Some of the supplier evaluations are: Karapınar / 70 points ; Yelten / 70 points ; Gündoğdu / 70 points

FR-25 is used for the evaluation of the other suppliers. Some of the supplier evaluations are: Ertuz / salt / 95 point ; Beşel / calcium / 93 points; Türker / culture / 91 points ; Çağrı ambalaj / Plastic box / 87 points; Bereket Plastik / nylon / 88 points; AGP Plastik / Plastic box / 96 points; Ankara Lider / Plastic box / 93 points

The expectation and acceptance criteria were defined in the Purchasing and Supplier evaluation Instruction was seen and provisions concerning the handling of exceptions.

3.5.2 Raw material and packaging acceptance and monitoring procedures

Raw materials and packing materials are checked according to their specifications on receipt. Certificate of analysis and incoming controls are checked during traceability exercise.

FR-28 is used for the other raw material control. Some of the control records are: Salt; on 20.09.2016 from Ertuz; Calcium; on 01.09.2016 from Besel; Culture; on 24.09.2016 from Türker

Packaging materials control records were seen. (FR-71) Some of the control records are:

Çağrı packaging company/ plastic box for cheese / on 05.11.16/ 27000 box/ migration analyse was seen on 27.05.2016

AGP packaging company / plastic box for yoghurt / on 21.09.16/ 5760 box/ migration analyse was seen on 05.04.2012

Raw milk control records were seen (FR-48) Dated 25.10.2016 and 01.11.2016 records were investigated.

3.5.3 Management of suppliers of services

An approved supplier list was available. The sample of approved suppliers during the audit consisted of:

- Laboratory: Gözlem Lab, Proanaliz,
- Pest Control: Orkin
- Transportation: Netlog
- Calibration services: Antlab
- Maintenance: Gemak/ Pasteuriser, Akmak/ generator:
- Waste: Doğu Kağıt
- Medical Screening: Lider iş sağlığı

3.5.4 Management of outsourced processing and packing

There is no outsourced processing.

3.6 Specifications

Product specifications were available for the finished product. These were crosschecked with the legislative requirements and compliance was verified. Butter, cheese and yoghurt specifications were seen.
Raw material and packing materials' specs were available and have been reviewed.
Examples:

Milk powder, salt, calcium, raw milk, CRVOC bag (for butter) and PP Box (for cheese) specs were seen.

All specifications were reviewed during management review meeting.

The company verifies that customer demands are met through end product control. This was tested during the traceability test (end product testing cross checked with agreed specifications between the company and client) and results were found to be satisfactory, as agreed specifications were taken into account during end product quality control.

3.7 Corrective and preventive actions

(PR-05; 00/01.09.2013) Corrective and Preventive Action Procedure was seen. Everybody could open the Corrective and preventive action. Corrective actions are documented on the corrective action form (FR-14) which includes reference to the person responsible for the corrective action and the target date for completion.

The corrective actions are signed off when completed and verified by senior management staff. The corrective action file was reviewed in detail. 25 corrective actions were opened in 2016. 23 of them were closed, 2 of them is not closed yet. They had recorded to CA Form. (FR-14). E.g.

CA No: 66
Opening Date: 11.04.2016
The nonconformity: the using of pin in head cover
CA: Training

NC 3.7.2

3.8 Control of non-conforming product

A documented procedure (PR-04; 00/01.09.2013) exists for the control of non-conforming materials. The procedure includes isolation, labelling and quarantining products in a designated area.

Product release procedure (PR-15;00/14.07.2014) was investigated. The Production Manager is responsible for the disposition or release of products.

Non-conforming products are handled and disposed according to the nature of the problem and the specific requirements of the customer. A quarantine area is available and any non-conforming products are additionally properly labelled.

Non-conforming product Form (FR-12) Dated 26.05.2016 record was seen. The breaks were seen in the ayran box after filling and the boxes had been returned to the supplier.

3.9 Traceability

During the audit a traceability test was made:

Product: White Cheese

Lot Number: 170
Production date: 19.06.2016
Production volume: 251 unit
Loading date: 23.06.2016
Customer: Ahmet Melo OMAR
Packaging material: PP box
Packaging material input date / supplier: 12.02.2016 / Gürlek Plastik
The exercise included a satisfactory mass balance check. Test was completed within 4 hours.

The below records were investigated.

The company has a system that enables the traceability of raw materials and packaging from source through processes and distribution. Documents were able to demonstrate satisfactory traceability from raw material to finished product, and that records are retrievable and legible.

Among others, documents of; raw materials entry, raw material quality control, production forms, end product quality control, CCP monitoring records, cleaning records, glass control records were reviewed during the traceability test.

Company has a traceability process for all raw material batch.

Company conducted the test from final product to raw material and from raw material to final product.

From final product to raw material – 15.10.2016

From raw material to final product – 11.10.2016

Mass balance was seen.

All suppliers were defined low risk and raw milk is purchased from cooperative and all suppliers can be defined on their system.

3.10 Complaint handling

Customer Complaints and Feedback Instruction (TL-39; Rev. No/Date: 00/01.09.2013) was seen. The system for capture, recording and management of product complaints is detailed in the procedure. The sales department take the complaints. And also the customer could send the complaints to the website.

Ex.

Complaint Date: 11.09.2016

Complaint: bombage at the cheese.

The customer was contacted on 19.09.2016 and product information was requested. The shelf life of the product has passed, and the store has been instructed and warned of risks involving the shelf life being passed. Customer was informed and satisfied.

Complaints are evaluated at HACCP meetings monthly.

Complaint data are analysed in such way so as to identify the source of the problem and avoid recurrence. Data is reviewed at the regular management meetings and at the annual Management Review meetings where opportunities for corrective or preventative action are identified to initiate ongoing improvements.

3.11 Management of incidents, product withdrawal and product recall

Emergency Situations Procedure (PR-09; 00/01.09.2013) and Emergency Plan (FR-36; 00/ 23.01.2016) were seen.

The Company has an effective incident management and product recall procedure in place. Potential emergency situations and incidents that impact food safety, legality or quality are managed by procedure. Emergency situations defined by the company: Power cut, Flood, Water supply cut, Earthquake, Fire, Sabotage, traffic accidents, infectious disease, food poisoning, pest infestation.

Recall Procedure (PR-07; 00/01.09.2013) was seen. The site has an effective documented product recall procedure in place. This procedure is appropriate and formal and can be operated at any time. The procedure covers stock requisition, logistics, recovery, storage and disposal. The procedure is regularly reviewed, and if necessary, revised.

Written guidance is provided to key staff in the product recall and withdrawal procedure. Incidents are recorded and reported as detailed in the product recall/withdrawal procedure.

A list of key contacts (fr-09) is available, is updated annually. The key contacts include: Key site personnel, Key Company personnel, Customers, Suppliers, Distribution / Logistics, Regulatory authorities, Certification Body, Laboratory, Legal, Medical, Emergency services.

Any withdrawal and recall vacation was not occurred in 2016.

Recall Test: (periodically; annually) Dated 23.02.2016 test record for semi-skimmed white cheese (650 gr) was seen. Production date: 11.02.2016 Lot: 042 Amount: 5508 box

It was made as a backward direction exercise from customer and resulted in 1,5 hour total duration.

The procedure contains provisions that require both certification body and authorities are to be notified in an event of a product recall.

NC 3.11.3

3.12 Customer focus and communication

A documented procedure exists for handling customer complaints and measures their satisfaction. End product control is adjusted to customer requirements. Agreed specs are available between the company and the customers. The specs contained key quality, safety and process parameters. Changes of existing contractual agreements were documented via e-mail. Also these changes were informed to production and quality department by e-mail. All production controls are under responsible of production and quality department.

Purchasing and Supplier evaluation Instruction was seen. (TL-33; 00/01.09.2013) Effective processes are in place for communicating customer-specific requirements to the suppliers of raw materials and services as applicable.

Customer surveys are held once a year. Some of them are; Pınar Restorant- 90 points; Cihan Food-90 points and İnallar Catering-85 points

Details of non-applicable clauses with justification

Clause reference	Justification
3.5.1.3	The company doesn't use any agent or brokers.
3.5.4	There is no outsourced processing.
3.9.4	There is no rework.

4. Site standards

4.1 External standards

The site is of suitable size, location and construction to permit maintenance and to allow the production of safe and legal products. There are no local activities that could potentially adversely affect the products by introducing contamination to the products.

The perimeter of the site is in good order. Condition of the site is checked as part of the internal audit schedule. The building fabric was noted to be in a good condition and the factory was well proofed.

4.2 Security

The factory is maintained at a level that promotes product safety. The buildings are maintained in a good state of repair. There are no local activities that pose a risk of product contamination.

There are measures in place to maintain site security and prevent entry to production areas. These are reviewed annually. Site boundaries are clearly defined and the site is protected by locked gates.

Procedures exist that include provisions and state that members of staff, visitors and constructors follow specific routes. All visitors and constructors have to report their visit, be medical screened, read and sign the organisations policy on hygiene rules and be escorted by authorised personnel. Visitors Control Form (FR-39) was signed before enter the site. Staff have received training.

Also there is a camera system for both internal and external areas. There is a security person for night and he is controlling storage areas at night. All silos were closed and secured.

4.3 Layout, product flow and segregation

The areas of the factory have been characterised as “enclosed products”, “low risk” and “high-care area” for white cheese ripening and packaging site. The areas were defined on the layout plan.

The site plan was taken into account when the prerequisite programmes for every area were determined.

A site plan is in place showing the access points of personnel, travel routes, staff facilities, production process flow, routes for waste.

Contractors and visitors are all required to complete a medical screening questionnaire prior to entering production areas as well as reading and signing to comply with the site’s GMP and personal hygiene rules. Visitor Control Form (FR-39) was seen.

The movement of personnel, raw materials, packaging, rework and/or waste was not compromising the safety of products.

The ripening and packaging of white cheese area was defined as high care area. The protective clothing of the personnel is different for this area and there is a dressing room before entering this area. The personnel are changing their protective clothes and gloves before entering this area. Sufficient working space is provided for all operations.

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

Walls are suitably designed, constructed and finished and were found to be in good condition. Walls are maintained to prevent the accumulation of dirt, to reduce condensation and mould growth and to facilitate cleaning. Floors are suitable. Suitable drainage was noted in all factory areas. The drains of the high care area is suitable.

Ceilings and overheads are suitably designed, constructed, finished and maintained to prevent the accumulation of dirt, to reduce condensation and mould growth and to facilitate cleaning.

Windows are suitably designed and screened to prevent pest ingress. Glass windows are protected against breakage (sites)

External doors are suitably proofed to prevent pest ingress, door discipline was observed to be satisfactory during the assessment.

Lighting levels within the factory are adequate. Bulbs and strip lights are suitably protected. There is a glass management procedure.

Adequate ventilation was observed in all primary and secondary areas. The air is positive air in processing area. Filters are changed 2 times in a year. Last changing date was 10.06.2016 for production area.

4.5 Utilities – water, ice, air and other gases

Water supplied by the local city water agency. The microbiological analyses were to be made 2 times in a year and chemical, heavy metal annually.

The last microbiological test was made on 07.01.2016. Laboratory was Antalya City Lab.

Also the company perform water analyses on their own laboratory weekly. The criteria were: E. coli, Coliform, yeast and mould. It was recorded to FR-59. Records dated 20.06.2016 was investigated.

The water distribution system is available.

Air was tested regularly against to yeast and mound. Records dated 17.06.2016, 19.06.2016 and 06.11.2016 were seen.

NC 4.5.1

4.6 Equipment

Equipment is suitably designed for the intended purpose and all of them is SS. All equipment is suitable for direct contact with products produced.

4.7 Maintenance

Planned maintenance is documented in the maintenance plan (FR-23) and described in the preventive maintenance procedure. Maintenance Responsible is responsible for the preventive maintenance and repairs. The system generates maintenance activities at planned intervals which are undertaken by maintenance staff or contractors. Records are maintained of work carried out. A preventive maintenance programme is available, developed with the co-operation of key staff and equipment suppliers.

Periodic preventive maintenance record is FR-22.

The pasteurisation machine dated 04.05.2016 and 14.11.2016; the ayran filling machine dated 26.10.2016, 25.09.2016 and 20.08.2016 records were seen.

Also the failures were recorded to FR-22. Ayran Packaging Machine was a failure on 01.03.2016, the machine was fixed 10.03.2016. Records were seen.

Filters (raw material acceptance and brine) are reviewed daily and recorded to Filter Cleaning Follow up Form (FR-101). Records dated 28.10 – 11.11.2016 were reviewed.

There is no risk of product contamination from equipment failure. There is no temporary repair in the factory.

Maintenance clearance procedures are detailed in the preventive maintenance procedure to ensure that on completion of any maintenance work machinery is inspected to verify that it is clean, and there are no tools, machine parts or other potential foreign bodies.

There is a cleaning control record on FR-22. Records for ayran filling machine and pasteurisation machine were seen.

There is only packaging tables on the high care area and all maintenance activities were segregated.

All lubricants used on site are food grade, with specifications being held that show that they are allergen free. Controls are in place in the engineering workshop.

NC 4.7.4

4.8 Staff facilities

Changing facilities are provided for staff and visitors. The changing facilities allow direct access to the production areas. Lockers were of a suitable size to accommodate all personal items.

There was no crossover of outdoor clothing and factory work wear noted during the visit. Each employee has one locker. Personnel changed their clothes every day and the clean clothes are given every day.

The protective clothing of the personnel is different for the high care area and there is a dressing room before entering this area. The personnel is changing their protective clothes and gloves before entering this area. The hand washing and disinfectant facility was obtained. The foot-wear SWAB analyses were made 3 times in a week and recorded to FR-59. The record dated 19.06.2016 was seen. The criteria were E. coli, Coliform, yeast and mould.

There are hand-washing facilities at the entrance of production areas and these are supplied with water, liquid soap and disposable towels. There is provision for hand washing and sanitising as required within production areas.

Toilets do not open directly into production, packing or storage areas. Toilet hand wash facilities are supplied with hot water, liquid soap and disposable towels.

Smoking allowed in a designated area. There is a canteen and food is eaten only in this canteen. The lunch is prepared in the factory.

4.9 Chemical and physical product contamination control

Raw material handling, preparation, processing, packing and storage areas

Procedures are in place to control the risk for foreign body contamination. These include, maintenance procedures, application of cleaning programs, on line visual inspections - based on the result of the hazard analysis.

4.9.1 Chemical control

The organisation has identified and implemented measures for controlling and managing all potential risks from chemical, physical and taint contamination on the instructions.

The chemical control procedure contains details for the following requirements:

Approved Purchase
MSDS sheets
Specifications
Suitable for food use
Non scented
Identification procedures
Segregated and secure storage
Cleaning chemicals are properly stored and can only be accessed by authorised members of staff.

4.9.2 Metal control

Controls are in place to manage non-production blades. Maintenance engineers have been trained not to leave tools and machine parts, inspection and hygiene procedures following maintenance interventions ensure these have been removed, pre-production and start up checks are in place.

The knives are used for cutting cheese and controlled daily by Cheese Responsible.

Staples are not permitted within the production area.

NC 4.9.2.1

4.9.3 Glass, brittle plastic, ceramics and similar materials

All glass present within production and storage areas is protected against breakage. There is a documented and detailed Glass, Hard Plastic Material Instruction (TL36). The staff have been trained

The site has produced a register of all glass, brittle and similar materials. Register includes:

Details of location, number and type of fitting. Glass and hard plastic audits are conducted on a frequency determined by the risk assessment (monthly). Records (FR-41) dated 12.10.2015 – 18.10.2016 were seen.

4.9.4 Products packed into glass or other brittle containers

There are no products packed into glass or other brittle containers.

4.9.5 Wood

Wood does not exist in any stage of the process except final product storage.

4.10 Foreign-body detection and removal equipment

4.10.1 Foreign-body detection and removal equipment

There are 3 filters (ayran filling, brine preparation, raw milk acceptance) to remove the foreign-body contamination. The location and sensitive of filters are suitable. Filters (raw material acceptance and brine) are reviewed daily and recorded to Filter Cleaning Follow up Form (FR-101). Records dated 28.10 – 11.11.2016 were reviewed.

4.10.2 Filters and sieves

There were 4 filters: raw material acceptance, brine preparation, ayran filling and HEPA filters for air.

Filters (raw material acceptance and brine) are reviewed daily and recorded to Filter Cleaning Follow up Form (FR-101). Records dated 28.10 – 11.11.2016 were reviewed.

NC 4.10.2.2

4.10.3 Metal detectors and X-ray equipment

Hazard analysis has identified there is no need of a metal detector installation. The organization applies visual checks or filtration for the control of foreign bodies.

4.10.4 Magnets
There is no magnet.
4.10.5 Optical sorting equipment
There is no optical sorting equipment.
4.10.6 Container cleanliness – glass jars, cans and other rigid containers
There are no products packed into containers need cleanliness
4.11 Housekeeping and hygiene
The premises and equipment was maintained in a clean and hygienic condition. Documented cleaning plans are available in the factory (FR-32). All chemicals have been purchased from Johnson Diversey. The cleaning methods include responsibility, areas to be cleaned, cleaning frequency, cleaning methods, materials to be used, records and verification system. The controls were recorded to FR34. Records for yogurt part and ayran part for October and September were seen. Also MSDS of H500, Easyfoam and Titan Solides were seen. Records of all cleaning activities are retained by the site. SWAB test / FR59 equipment and tools (equipment surfaces), environment hygiene (floor and walls), personnel hygiene (gloves, hands, cloths, shoes) control records dated 26.09.2016-10.10.2016 and 17.06.2016 – 21.06.2016 were reviewed. Training records existed for key members of staff involved. Procedures are in place to ensure that equipment are checked and there are no tools, machine parts or other potential foreign bodies before is released back into full production. There was a cleaning room and big tools are washed in this room.
4.11.7 Cleaning in place (CIP)
CIP Plan (FR-96) was seen. The process steps (washing with caustic, rinsing, acidic washing, rinsing, pipe rinsing) were defined. Caustic – 65ºC; Acid – 55ºC The CIP Layout Plan was seen. It was hung up at entrance of the production area. The residue was controlled via measuring of pH and recorded to FR95. Records dated 15.10 – 19.10.2016 were seen.

4.12 Waste / waste disposal

Waste disposal was found to meet legislative requirements. General waste is removed by local authorities.

Procedures are in place for the handling of trademarked materials to prevent them finding their way on to the market.

Waste is segregated into: General waste, paper, plastics (packaging materials). General waste is removed by local authorities.

The company follows a recycling policy for paper, plastic and working with company Doğu Kağıt. There is one waste collection container clearly identified and well maintained. The company took 7500 kg carton, 550 kg packaging material and 70 kg pet on 15.11.2016. Records were seen.

The company used trademarked packaging but the contract was made for 3 months with the customer so there is not any trademarked packaging material remaining. If there is a trademarked packaging material waste, it was destroyed by the recycling company.

4.13 Management of surplus food and products for animal feed

There are no surplus products.

Any customer-branded product was not sold to the staff.

There is not any animal feed.

4.14 Pest Control

Pest control on site is managed by a nominated third party contractor (Orkin, Pest Control Contractor-. According to the signed contract there are twice in a month routine visits to be conducted (contract date is 01.03.2016 and valid for 1 year).

A service contract is held at the front of the pest control manual detailing the frequency of visits, call outs and other details of the pest control program. The system is established under the risk assessment.

A site/bait plan is in place with indication of all bait stations, traps and fly killing devises. Pest control devices are identified by labels on each unit and on the wall above the location. Health and Safety information is available for all materials used. Safety data sheets were examined for the chemicals used during last inspection.

All bait points were robust and found to be of a tamper resistant construction and were suitably secured.

The pest control contractor is contracted to conduct follow up visits in the event of an infestation until the problem is eradicated. Potentially affected product is identified, evaluated and released by the QA Manager.

Last inspections were conducted on 09.11.2016 and 06.10.2016. The report includes; the activities at all monitors, UV records, cockroach monitors.

All documented recommendations have been auctioned by the site and the pest control contractor.

The name of the chemicals;AGITA 10 WG, AVERKILL ALFA SC, CHRYSA-FIBRON GEL. The Biodical Product licences and Msds were seen. Operators certificates were seen.

Results from inspections are assessed and analysed for trends ONCE a year.

NC 4.14.8

4.15 Storage facilities

A procedure is in place to maintain product safety and quality during storage. The procedure contains provisions for the cleaning, avoidance of cross contamination, storing materials of floor and away of walls, maintaining product security and preventing damage.

The packaging materials were stored away from other raw materials and finished product. Temperature control is required on site.

All materials are stored under specified conditions. Procedures are in place to maintain product safety and quality during storage is TL09.

Storage Temperature Control Form (FR-44) Records between 13-16.11.2016 was seen.

The packaging materials were stored on the outside storage which is 200 m. far away from the factory.

Stock rotation is managed by a FIFO system. Incoming raw materials are labelled with the expiry date and/or the receiving date. Materials inspected during the site inspection were all within their Best Before dates.

NC 4.15.2

4.16 **Dispatch and transport**

Procedures are in place to maintain product safety and quality during loading and transportation Storage, Transportation, Packaging and Stack Instruction TL40 was seen.

The procedure contains provisions for the cleaning of transport means, avoidance of cross contamination, storing materials off the floor and away from walls, vehicle pre-loading and unloading inspection, vehicle loading or unloading in covered bays, maintaining product security and preventing damage.

All products are transported 0-4ºC. Also they are using data-logger during transportation. If there is a problem, the customer notified the company.

Documented cleaning procedures are maintained for all vehicles used for loading.

Vehicle Temperature Measure Form (FR-45) is used and records between 25.02 – 19.03.2016 were seen. Vehicle Cleaning Form FR-84 is used and records dated 08.11.2016 were seen.

Finished product transport is under 4 C and is subcontracted to Netlog. A full contract is in place and available since 24.12.2014. Records for verification of the process have been reviewed.

Contracts covering all provisions of the standard were available for all transport service providers.

Details of non-applicable clauses with justification	
Clause reference	**Justification**
4.3.5	There are no high risk areas.
4.3.7	There are no ambient high care areas.
4.3.9	There were no temporary structures on site.
4.4.6	False ceilings do not exist.
4.4.13	There is no high risk area.
4.5.3	Potable water only
4.8.4	Operations do not involve high-risk area.
4.9.1.2	No strongly scented or taint-forming materials are used.
4.9.2.2	Staples are not permitted within the production area.
4.9.4	There are no products packed into glass or other brittle containers
4.10.3.2-4.10.3.5	There are no metal detectors or X-ray equipment
4.10.4	There is no magnet.
4.10.5	There is no optical sorting equipment.
4.10.6	There are no products packed into containers need cleanliness
4.13.1	There is no surplus products.
4.13.2	Any customer-branded product was not sold to the staff.
4.13.3	There is no animal feed.
4.14.3	Pest control on site is managed by a nominated third party contractor.
4.15.4	Controlled atmosphere storage is not required

5. Product control

5.1 Product design/development

A product design and development procedure is documented in PR16. Also Design Review Report FR-111 was seen. There were no new process, packaging, storage or distribution developments have been made.

Necessary procedure is on site to do trials and tests conduct to confirm product formulation and manufacturing processes in order to produce safe and legal products.

5.2 Product labelling

Labelling Control Instruction TL77 was seen. Food Safety Team Leader is the responsible for the label control.

All information was printed on the packaging material and the printed packs were purchased. When the packaging come, the information was controlled via using of Label Control Form FR112. The form dated 01.11.2016 was seen. 180 cc ayran box was seen and approved by Food Safety Team Leader. Any claims are to be justified. Labels comply with legislation.

NC 5.2.3

5.3 Management of allergens

Allergen Control Instruction TL35 was seen. The company has an allergen (milk product) and it is in all products.

The allergen list that was used on the factory, was defined in an allergen list FR46.

5.4 Product authenticity, claims and chain of custody

The company had a meeting and defined some risk of adulteration or substitution on the raw milk according to historical evidence and sector experiences. The Input Risk Evaluation DD-07 was seen.

There is some risk on the raw material: adding water to raw milk, adding acid regulator to raw milk, adding vegetable oil to butter, removing fat from raw milk. These have all been considered.

The test was made during input control of raw milk and recorded to Raw Milk Control Form (FR-48). Records dated 22.10.2016, 02.11.2016 and 11.11.2016 were seen. No claims

NC 5.4.2

5.5 Product packaging

Labelling Control Instruction TL77 was seen. Food Safety Team Leader is the responsible for the label control.

All information was printed on the packaging material and the printed packs were purchased. When the packaging arives, the information was controlled via using of Label Control Form FR112. The form dated 01.11.2016 was seen.

The last control of the labels and packaging were performed via using of Process and Packaging Control Form. Records dated 17.11.2016 and 19.10.2016 were seen.

The controls of the packaging and labelling were defined on Labelling Control Instruction TL77. Product packaging suppliers are aware of the products used in the packaging supplied and the materials have been tested / approved for their use. . Packaging materials are stored away from finished product and raw materials. Effective procedures are implemented for partially used packing materials.

5.6 Product inspection and laboratory testing

5.6.1 Product inspection and testing

Testing and inspection schedules, including frequency of testing are established to ensure that specified product requirements are met. Annually Analyses Plan FR23 was seen.

Analysis reports are documented and followed by the QA department in order to identify possible trends and take measures where necessary.

Shelf life tests are performed and the results of the tests are documented. The company maintains a sample bank for every product lot until it reaches its final destination. Quality checks are performed by the quality department regarding the pH, dried matter, salt content on dried matter, yeast, mould and coliform. FR89 is the Shelf Life Test Form.

White cheese – the shelf life test was made between 11.02.16-11.05.2016

NC 5.6.1.3

5.6.2 Laboratory testing

The laboratory facility is fully segregated from the manufacturing site and staff have operating procedures to prevent any risk of product contamination.

Pathogen testing is made externally by Gözlem Lab.

Finished product and raw materials are tested according to an approved testing schedule (FR-23)

Testing and inspection records are reviewed by Quality Responsible.

Example for raw material: temperature, SH, soda, pH, fat %, dried matter, protein, density, water, antibiotic. It was recorded to FR-48. The analyses dated 22.10.2016, 02.11.2016 and 01.11.2016 were seen.

Example for final product: temperature, SH, pH, fat %, dried matter, dried matter without fat %, salt %, texture. It was recorded to FR-57. Records dated 10.11 – 12.11.2016 was seen.

Also Microbiological Analyses Follow up Form was seen. Criteria are E. coli, Coliform, yeast and mould. Records dated 10.11 – 12.11.2016 were seen.

Organoleptic assessments are conducted on a daily basis against specification with pre-determined attributes.

Example for the external analyses:

White Cheese: 07.03.2016, Microbiological analyses (S.Aureus, L.Monocytogenes, Salmonella), salt and moisture

Yogurt: 22.12.2015, Microbiological analyses (S.Aureus, L.Monocytogenes, Salmonella, yeast, mould), milk fat value, heavy metals, aflatoxin ant etc.

The company works with the laboratories which have 17025 accreditation. Ex: Antalya City Lab. and Gözlem Lab.

The analyses are made internally, the verification of the tests is made annually with an external laboratory.

The last analyses were made on 07.03.2016 by Gözlem Lab.

Parameters: Coliform, E. coli, pH, fat, dried matter, salt. The results are satisfactory

5.7 Product release
Products are released by the Production Manager only after quality records and analysis results reveal compliance with specifications.

Details of non-applicable clauses with justification

Clause reference	Justification
5.3.5, 5.3.6, 5.3.8	The company has an allergen (milk product) and there is no different product.
5.3.7	No claims
5.4.4	There is no claim.
5.4.5	There is no claim.
5.4.6	There is no claim.

6. Process control

6.1 Control of operations

The Company has procedures that verify that the processes and equipment are capable of producing consistently safe and legal product with the desired quality characteristics.

Specifications include recipes, time, equipment settings, temperatures, labelling instructions, shelf life marking.

Process monitoring ensures that the product is produced within the required specification. The following process monitoring checks ensure that the product is produced within the required specification.

Monitoring system:

CCP 1. Receipt (antibiotic) – not found
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 2. Receipt (soda) – not found
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 3. Receipt (raw material temperature) – between 4-10ºC
Raw Milk Control Form (FR-48) Records dated 01.11.2016, 18.10.2016 and 29.09.2016 were seen.

CCP 4. Pasteurisation of raw material (temperature / time) (87ºC / 5 min.)
White Cheese Process and Packaging Control Form (FR-50) Records dated 10.11.2016 and were seen.

CCP 5. Brine (salt volume) (10-15 % during process, 7-10 % last product brine)
Brine Pasteurisation Form (FR-81) Records 10.11.2016, 25.06.2016 and 27.09.2016 were seen.

CCP 6. Pasteurisation of brine (temperature / time) (85ºC / 5 min.)
Brine Pasteurisation Form (FR-81) Records 10.11.2016, 25.06.2016 and 27.09.2016 were seen.

CCP7. Final Product Storage and Transportation (final product temperature) – between 4-10ºC
Vehicle Temperature Measure Form (FR-45). Records between 25.02 – 19.03.2016 was seen.
Storage Temperature Control Form (FR-44) Records between 13-16.11.2016 was seen.

Critical microbiological, physical and chemical controls are monitored and recorded through the process. The control results were reviewed during the traceability test.

Temperature control is in pasteurisation line is monitoring electronically. Relative records were available and have been reviewed. There are alarm system each equipment.

Systems to re-evaluate process controls in the event of process changes are included in the HACCP procedure.

Corrective action and non-conforming product procedures are in place in the event of process failure.

6.2 Labelling and pack control

Labelling Control Instruction TL77 was seen. Food Safety Team Leader is the responsible from the label control.

All information was printed on the packaging material and the printed packs were purchased. When the packaging come, the information was controlled via using of Label Control Form FR112. The form dated 01.11.2016 was seen. 180 cc ayran box was approved by Food Safety Team Leader.

The last control of the labels and packaging were performed via using of Process and Packaging Control Form Records dated 17.11.2016 and 19.10.2016 were seen.

The controls of the packaging and labelling were defined on Labelling Control Instruction TL77. Procedures are in place to ensure that products are packed in the correct packaging and have the correct labels. Old packaging is removed from the area.

6.3 Quantity, weight, volume and number control

Weight control reviewed during the site inspection and the traceability test. The company operates a quantity control system which takes into account customer requirements, industry codes of practice and legal requirements.

The weight control was recorded to FR118 Records dated 04.11.2016 was investigated.

The frequency of quantity checking did not meet the requirements of appropriate legislation but it was not recorded properly.

NC 6.3.1

6.4 Calibration and control of measuring and monitoring devices

Control of measuring equipment and methods, Procedure (PR-13; 01.09.2013) was seen. The company has identified measuring equipment used to monitor critical control points, product safety and legality. The identified measuring equipment is calibrated to a recognised national standard internally. Türkan Dumlu is responsible from calibration.

A plan of measuring equipment was available for 2016.(FR-24) Calibration company is Ant Lab.

Measuring equipment includes; thermometers, cold stores, scales, incubators and ethalons.

- Yoghurt cooling storing room No:4 (Cantek), Certificate No: AN5877, Calibration Date: 22.10.2016.
- Cheese cooling storing room (Temaş), Certificate No: AN5878, Calibration Date: 22.10.2016
- Incubator (Nüve), Certificate No: AN5862, Calibration Date: 22.10.2016
- Scale (SELES), Certificate No: AN5858, Calibration Date: 22.10.2016
- Pasteurisation thermometer (Gemak), Certificate No: AN5765, Calibration Date: 18.03.2016

Calibrations are followed in the reference list of materials accordingly.

Scale Verification Instruction was seen. (TR-50) Scale verifications are made daily and recorded to Scale Verification form (FR-66). July records were seen for cheese department.

Cooling room verifications are made daily also and recorded to Store Temperature Control Form (FR-44). Dated 05.11.2016 and 12.11.2016 records were seen.

Details of non-applicable clauses with justification

Clause reference	Justification
6.2.4	There is no on-line vision equipment.
6.3.2	The quantity of the product is governed by legislative requirements.

7. Personnel

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

Training Plan for 2016 was seen. (FR-19) New personnel oriented at the beginning. The orientation records (FR-69) were seen for; dated 25.07.2016 for Osman Yılmaz, dated 15.06.2016 for Resul Kurul, dated 04.03.2016 for Kerim Kabakçı.

All personnel are trained prior to commencing work and are supervised throughout the working period. Records were available, signed by participants for refreshing training programs of Basic Food Hygiene.

All members of staff involved in CCP monitoring were found to be trained accordingly. Relative records were available and have been inspected for all persons.

Personnel hygiene and Chemicals Training was given on 10.01.2016 by Mehmet Dumlu to 47 staff
Pest Kontrol training was given by Orkin on 18.04.2016 to 50 staff
Policy, organizational chart and documentation training was given on 10.05.2016 to 50 staff by Türkan Dumlu
CCP training was given by Mehmet Dumlu on 14.06.2016 to 26 staff
Allergen training was given by Türkan Dumlu on 12.07.2016 to 51 staff
BRC training was given by Türkan Dumlu and Mehmet Dumlu on 20.09.2016 to 51 staff.
Food Defence training was given by Mehmet Dumlu on 29.09.2016 to 51 staff
Chemical and physical hazard contamination training was given by Mehmet Dumlu on 18.10.2016 to 48 staff

Training participation form (FR-20) and Training Plan for 2016 (FR-19) were seen.

Training plan in place covering the training needs of relevant personnel. The documented programmes took into account all standard provisions. The training program was approved by the General Manager.

Records of participants with signatures from attendees and trainer were available. End of the training, the examination is taken place.

E.g.;

Personnel hygiene and Chemicals Training was given on 10.01.2016 by Mehmet Dumlu to;

Yasin Öner-100 points ; Dursun Karaca, 100 points ; Deniz Şamlı 100 points

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

Personnel Hygiene Instruction. (TL-22; Rev. No/Date: 01/19.09.2016) was seen. There are documented standards for personal hygiene for employees, visitors and contractors.

The site personal hygiene rules are communicated to staff by means of training and displayed work instructions. Disease, wounds, hair, hair, shoes, jewellery, hand washing, nail polish, chewing gum, food, cigarettes, apron applications were written in Instruction. Hands are cleaned at an appropriate frequency. There is a wash basin in the entrance available for the employees

The swab records (FR-59) were seen for; Ayşe Kabakçı on 15.11.2016, Ayşe Ceylan on 11.11.2016 and Aykut Biçer on 04.11.2016.

Cuts and grazes on exposed skin are covered by blue strip plasters or blue strip and blue gloves related to type of cuts and grazes. No metal detection on site.

A procedure for the control of personal medicines is included in the company personal hygiene rules. (TL-22)

7.3 Medical screening

The system is in place according to mandatory legislations. Porter, lung, nose and throat culture analyses are taken from all staff annually. The medical screening company name is Lider İş Sağlığı.

Some of the examples are; Osman Yılmaz on 25.07.2016, Resul Kurul on 02.06.2016 and Kerim Kabakçı on 19.02.2016.

There is the food safety system to prevent any unacceptable entrance and working in the factory areas. Visitor Instruction (TL-31; Rev. No/Date: 00/.01.09.2013) was seen. Visitors are informed about the rules of factory and diseases. Visitor Form had signed.(FR-39)

There are documented standards for personal hygiene for employees, visitors and contractors. The procedure includes provisions for notification by employees and contractors of any relevant infectious disease or conditions with which may have been in contact or be suffering from. Records were available for the medical screening applied by the company to all members of staff.

7.4 Protective clothing: employees or visitors to production areas

Protective clothing provided for staff includes: mobcap, hairnet, beard snood, coat, top, trousers, shoes, boots, and gloves.

Visitors / contractors are provided disposable coats and hat .Safety shoes also provided. Protective clothing is laundered in factory. It is changed every day regularly.

Personnel Clothes Washing Instruction (TL-108; Rev. No/Date: 00/19.09.2016) was seen. The clothes washing records (FR-107) were seen for September.

The swab controls are made weekly for clothes. The records (FR-59) on 08.11.2016 and 16.11.2016 were seen.

The procedure for monitoring the effectiveness of the laundering processes is to randomly swab clean overalls after cleaning. Results were seen to be satisfactory.

Work wear was seen to be of suitable design to prevent contamination of the product. Overalls do not have external pockets.

Gloves are blue and replaced regularly.

Details of non-applicable clauses with justification

Clause reference	Justification
7.2.4	Metal detection equipment is not used.