TWIN CITY PRODUCE OF SPRINGDALE, LLC

FOOD SAFETY POLICY

FOR

GOOD STORAGE AND DISTRIBUTION PRACTICES

SQF EDITION 9.0 MODULE 2

FOR FSC 26: STORAGE AND DISTRIBUTION OF FOOD PRODUCTS (GFSI JI, AND JII)

VERIFIED AND VALIDATED BY PRACTITIONER

January 12, 2026

APPROVED FOR DISTRIBUTION BY SSM

February 16, 2026

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PREFACE:

Review of Edition 9 amendments found none were applicable to Storage and Distribution.

The primary focus remains on expanding our electronic Product identification/ product Tracking. For a traditionally and historically paper-based company, this has its' challenges. Because the business still processes more than 70% of its orders via phone, the pace does not lend much room for what is often considered "extra steps".

To accurately track our products, we furthered our efforts to digitally track credits/ returns/ exchanges of products, by expanding training for office employees, being trained by the SQF Practitioner to monitor QuickBooks for missing product identification before it becomes an NCR. The efforts continue to reduce negatives, increased product traceability, and overall enhanced our customer satisfaction with our products.

Monthly Meetings:
Our Monthly meetings are a summation of the previous month's activities. Though we attempted to use more automation, the Slack incorporation is tabled until staff are more comfortable with technology. We rely heavily on text messaging and group chats to maintain communication, project management, and follow up. We had zero incidents during this year's recalls. The learning curve for automating product identification/ traceability continues to result in several NCRs, however, no NCRs resulted in Corrective Actions.

On top of last year, we have had an additional 10% improvement in computer accuracy since last March. Halfway through the year we transitioned to digital records but have printed the summaries for the audit. Paper records of mandatory clauses are printed for both V&V[1] and contingency.

Our Food Safety Policy is structured: **What We Do -** Our Policy, **How We Do It -** Our Procedure Summary, and **Proof We Do It -** Verification and Validation (Actual Documentation). The Step-by-step Procedures referenced in the Policy are in separate binders.

Senior Site Manager Approval:
The Preface and contents within, fully represent Twin City Produce, Springdale's Food Safety Policy:

Travis S.
SQF Practitioner, 2026 Site Audit

Tiffany W.
SQF Practitioner Backup, 2026 Site Audit

Mike A.
Warehouse Safety, 2026 Site Audit

Validated, Verified, and Edited by:_____

Validated, Verified, and Approved by:_____

MODULE 2.0 (SYSTEM ELEMENTS)

SECTION 2.1 MANAGEMENT COMMITMENT

CLAUSE 2.1.1 MANAGEMENT RESPONSIBILITY (MANDATORY)

Element 2.1.1.1

Senior site management shall prepare and implement a policy statement that outlines at a minimum the commitment of all site management to:

i. Supply safe food,
ii. Establish and maintain a food safety culture within the site,
iii. Establish and continually improve the site's food safety management system, and
iv. Comply with customer and regulatory requirements to supply safe food.
v. Provide safe and healthy working conditions **(SMETA)**
vi. Clear procedures for ethical employment practices **(SMETA)**
vii. Comply with customer, regulatory, and ethical trade requirements **(SMETA)**

The policy statement shall be:

viii. Signed by the senior site manager and displayed in prominent positions; and
ix. Effectively communicated to all site personnel in language(s) understood by all site personnel.

What We Do:

All employees are responsible for and committed to food safety. The Company President is the senior site manager (SSM); the SQF Practitioner the preparation of our policy statement; our commitment to provide safe food through our safety methods comply with customer and regulatory requirements.

The policy statement, approved by the SSM, outlines our site's goals towards those objectives and our continual commitment to improving our performance (2.1.1.1 i-vi).

The site's vision and mission statement incorporate the food safety policy and is in the introduction of the manual. Both are available in English and Spanish, languages spoken by and for Twin City Produce employees and customers. The policy is explained as part of orientation for employees and temporary contractors; and in all refresher training and posted in prominent places on the site.

How We Do It:

The combined policy and mission statement is posted throughout the site and in the Policy Binder. The policy is reviewed by the SQF Practitioner for accuracy. Office employees are instructed to check postings for damage on a regular basis and report any discrepancies.

The SSM and the SQF team update the established and existing Food Safety Policy statement in accordance with current regulations, SQF Code, customer needs and technology changes, reflected by date of signature.

If any sign holders or their contents are damaged, notify the practitioner. The technician is to:

1. Update the Spanish versions of the postings and print the English and Spanish versions.
2. Have the Company President review and sign the final prints,
3. Make copies of the signed prints and replace the postings in each of the above locations.
4. Notify the practitioner upon completion.

Proof We Do It:
Postings in English and Spanish are visible throughout the site. A table with a detailed listing of physical location and instructions are included at the end of 2.1.1.2. Copies are posted in Reception/ Sales Office, Warehouse, and in the Policy Binder.

Element 2.1.1.2
Senior site management shall lead and support a food safety culture within the site that ensures at a minimum:

i. The establishment, documentation, and communication to all relevant staff of food safety objectives and performance measures,
ii. Adequate resources are available to meet food safety objectives,
iii. Food safety practices and all applicable requirements of the SQF System are adopted and maintained,
iv. Staff are informed and held accountable for their food safety and regulatory responsibilities,
v. Staff are positively encouraged and required to notify management of actual or potential food safety issues, and
vi. Staff are empowered to act to resolve food safety issues within their scope of work.

What We Do:
Senior site management leads and supports a food safety culture within the site that ensures at a minimum, elements i-vi.

How We Do It:
In addition to the above elements, the Senior Site Manager empowers staff to resolve food safety issues within the scope of their work.

Proof We Do It:
Warehouse employees can determine waste, near waste, and sell now produce as they fill orders, rotate stock, and clean or inspect. Office employees can issue refunds, credits, or exchanges without management approval with confirmation of any product not meeting the customer's specifications.

Element 2.1.1.3

The reporting structure shall identify and describe site personnel with specific responsibilities for tasks within the food safety management system and identify backup for absence of key personnel. Job descriptions for the key personnel shall be documented.
Site management shall ensure departments and operations are appropriately staffed and organizationally aligned to meet food safety objectives.

What We Do:

Our organization chart outlines reporting structure, departments, responsibilities, and includes the food safety team and duties.

If for any reason, any of the identified employees are not available or able to perform their safety and quality team duties, the next in line is to replace them. All alternates attend the quarterly review meetings and receive policy and procedure updates as they arise.

How We Do It:

The company's organization chart outlines responsibilities and includes the food safety team and duties. All employees receive on-the-job orientation, identifying all key personnel, including those with food safety responsibility.

All duties listed on the organization chart are added to the employee's personnel file. If any assigned employees leave the company, those seeking to replace the employee must possess not only a similar skillset for day-to-day operations, but also the aptitude and competency to carry out the SQF team duties.

During the candidate selection process, the alternate assumes the duties. Depending on success and consequential impact to other duties, the Company president may promote the alternate full-time to the team.

If an alternate is made permanent on the team, update their personnel file with the duties assumed. The team members by title, site title, and job description and duties are included. Review regularly and with every policy to change to ensure all regulations are covered.

Proof We Do It:

A copy is included at the end of this section and in the Standard Operating Procedures (SOP) Binder.

The Practitioner updates the team member's binders and forms as necessary to make the information concise, useful, and easy to both collect and extrapolate. Binders are stationed in each department and forms at each main workstation.

Element 2.1.1.4

Senior site management shall designate a primary and substitute SQF practitioner for each site with responsibility and authority to:

i. Oversee the development, implementation, review, and maintenance of the SQF System,
ii. Take appropriate action to ensure the integrity of the SQF System; and
iii. Communicate to relevant personnel all information essential to ensure the effective implementation and maintenance of the SQF System.

What We Do:

The SSM designated for the fourth year, (i) Tiffany Webb as the Primary SQF practitioner and served as the substitute SQF practitioner with two additional staff in training. They each accept the responsibility and authority to oversee the development, implementation, review, and maintenance of the SQF System, including the food safety fundamentals (good storage and distribution practices: 2.4.2) and the food safety plan (2.4.3), (ii) take appropriate action to ensure the integrity of the SQF System; and (iii) communicate to relevant personnel all information essential to ensure the effective implementation and maintenance of the Safe Food System.

How We Do It:

The SSM and Practitioner (i) work daily with employees and team members to ensure all aspects are honored during the day-to-day operations. The Practitioner (ii) randomly shadows employees within the warehouse to ensure their competency to complete their daily tasks safely and protect the quality of all products when receiving, storing, picking, shipping, and delivering to customers. If an employee is not following procedures, (iii) the Practitioner may notify the supervisor, but is empowered to correct the employee executing the task in the moment. Notifying Supervisors is also documenting the occurrence under their watch.

Proof We Do It:

The SSM, Primary SQF practitioner and the substitute SQF practitioner (i) attended training in 2022 to refresh previous certified knowledge and remain proficient given the version 9 changes. The Practitioner
(ii) performs assessments, and the SQF team performs quarterly audits, sharing results with all relevant staff and always the Warehouse Manager and SSM. The policy and procedure manuals, files, training, and oversight; and the (iii) records of these actions are on file.

Element 2.1.1.5
The primary and substitute SQF practitioner shall:

i. Be employed by the site,
ii. Hold a position of responsibility in relation to the management of the site's SQF System,
iii. Have completed a HACCP training course,
iv. Be competent to implement and maintain HACCP-based food safety plans; and
v. Have an understanding of the SQF Food Safety Code: Storage and Distribution and the requirements to implement and maintain an SQF System relevant to the site's scope of certification.

What We Do:
The SQF practitioner and the substitute are (i) employees, reporting directly to the SSM, (ii) hold key positions of responsibility, and (iii) are trained in the HACCP and SQF procedures. (iv) They are competent to implement and maintain the HACCP-based food safety plan/s; (v) and has SQF Food Safety Code for Storage and Distribution understanding and, the ability to implement and maintain the SQF system relevant to the site's certification.

How We Do It:
The Practitioner and substitute (i) are employed. The Practitioner holds a BA in Political Science and has many years of regulatory experience. (ii) This is her fourth year as our Practitioner. The substitute Practitioner has worked as Lead Driver and directly supports the Warehouse Manager and Senior Inventory Manager. (iii) HR ensures that all training expenses related to the Safe Quality Food Policy/Plan are noted as such in the Company's records. Both (iv) completed HACCP and SQF training to
(v) remain current on all related regulations, policies, and update Company procedures accordingly.

Proof We Do It:
Both (i) Practitioners have been with the Company for at least three years. The Practitioner (ii) is the primary employee reviewing site audits, corresponding with regulatory bodies, as well as the (iii-v) key contact for the Auditor, while the substitute oversees the Warehouse's daily compliance and enforces any CA actions, procedure changes, and notifies the Practitioner of any nonconformances.

Element 2.1.1.6
Senior site management shall ensure the training needs of the site are resourced, implemented, and meet the requirements outlined in system elements 2.9 and that site personnel meet the required competencies to carry out those functions affecting the legality and safety of food products.

What We Do:
The SSM ensures the site's training needs are fully resourced, implemented and meet the requirements outlined in SE 2.9 and that employees meet the required competencies to carry out those functions within their job duties affecting the legality and safety of food products. Those responsible for performing key steps and meeting customer requirements, and corporate safety requirements, have the required competencies to carry out those functions.

How We Do It:
All employees receive "On-the-Job" training upon hiring from the area Supervisor and annual training which includes:

1. Overview of the Safe Food Policy and implementation
2. Employee Hygiene and Safety practices
3. Site Security and Crisis Response, and
4. Safety for Employment Specific Tasks

Training is annually and OTJ within 90 days of hiring; notices of mid-year policy changes are posted throughout the site; and employees whose duties are impacted by any such changes receive immediate training. Materials are reviewed and updated when policy change impacts Storage and Distribution.

Proof We Do It:
The SQF Practitioner keeps a training matrix at the end of this binder. The practitioner signs off each employee upon receipt of proof of completing training. It is possible that the Practitioner may require a written test for competence. If so, a copy of the written exam is attached to the signed record. Training Matrix is stored in Safety File, Section 2.9 (CSES 2.1.2.6)

Element 2.1.1.7
Senior site management shall ensure the integrity and continued operation of the food safety system in the event of organizational or personnel changes within the company or associated facilities.

What We Do:
The SSM coordinates with the site's HR to ensure that Food Safety duties and responsibilities are integrated into the related job descriptions so that any staffing changes trigger immediate notice for the next in the Food Safety chain of command until such time the position is filled.

How We Do It:
The Practitioner maintains a current organizational chart of all employees with food safety specific duties. This chart is shared with HR.

1. Each employee with Food Safety-specific duties, have those duties listed on the Personnel file.
2. If a critical employee is out sick, vacation, or separates from the company, those duties are immediately re-assigned to the backup until the position is filled.

Proof We Do It:
Any personnel changes with SQF related responsibilities are reflected on the Organization Chart with the date of change and list of employee name/s itemized. A copy of the Organizational Chart resides in the file with the Job Descriptions and at the back of this binder.

Element 2.1.1.8
Senior site management shall designate defined blackout periods that prevent unannounced re-certification audits from occurring out of season or when the site is not operating for legitimate business reasons. The list of blackout dates and their justification shall be submitted to the certification body a minimum of one (1) month before the sixty (60) day re-certification window for the agreed upon unannounced audit.

What We Do:
The site does not have any "Out of Season/Closed" dates for this year. If the Company were to have any such dates, these blackout dates and their justification would be submitted to the certification body, no less than one (1) month before the sixty (60) day re-certification window for the agreed upon unannounced audit.

How We Do It:
If the company wishes to declare any "out of season/closed" dates:

1. The SSM will notify the Practitioner of the dates the site will close.
2. The Practitioner will prepare an email notification, followed by a phone call to confirm receipt, to the certification body, no less than 30 days BEFORE the 60-day re-certification scheduling window.

Proof We Do It:
We do not have any "Out of Season/Closed" dates for this year.

CLAUSE 2.1.2 MANAGEMENT REVIEW (MANDATORY)

Element 2.1.2.1

The SQF system shall be reviewed by senior site management at least annually and include:

i. Changes to food safety management system documentation (policies, procedures, specifications, food safety plan).
ii. Food safety culture performance.
iii. Food safety objectives and performance measures.
iv. Corrective and preventative actions, and trends in findings from internal and external audits, customer complaints, and verification and validation activities.
v. Hazard and risk management system; and
vi. Follow-up action items from previous management

review. Records of all management reviews and updates shall be

maintained.

Element 2.1.2.2

The SQF practitioner(s) shall update senior site management on at least a monthly basis on matters impacting the implementation and maintenance of the SQF System. The updates and management responses shall be documented.

What We Do:

2.1.2.1 – 2.1.2.2 The SQFP personally reviews the system manual annually, reporting monthly on (i); internal and external audit findings (ii); investigations/resolutions of corrective actions (iii) customer complaints (iv); the site's hazard and risk management (v); and coordinates with the SSM on the status and progress of previous meeting action items (vi).

How We Do It:

The SQF Team works directly on a daily basis. As a small distribution company, we wear many hats and make immediate decisions. The SSM is also the owner, and lead salesperson. He works 5 to 7 days a week and his immediate second is always on hand if he is not available. The SQF Practitioner interacts with employees and management, and issues are resolved as they occur, not scheduled for resolution based on a set meeting schedule.

However, to keep track of events, the SQFP compiles facts pertaining to (i) - (iv) monthly. The Management Review Checklist serves as a template for the monthly compilation cover page to ensure that key items are reviewed. All the checklist items are covered at least annually unless another schedule is listed.

Proof We Do It:

The SQF Practitioner maintains monthly **digital** reports, including supplemental reports, communications, purchases, **records for Food Safety Review** or HR records as related to Food Safety (**Management Review 2.1.2**). The reports are maintained **in the cloud with summaries printed during Audit Review, kept** in the Safety file cabinet under the same name and section.

CLAUSE 2.1.3 COMPLAINT MANAGEMENT (MANDATORY)

Element 2.1.3.1

The methods and responsibility for handling, investigating, and resolving food safety complaints from commercial customers, consumers, and authorities, arising from products stored or handled on-site shall be documented and implemented.

What We Do:

As received, the supervisor ensures that individuals handling complaints (because of products stored and distributed by the site) conduct themselves professionally and cordially; and the complaints process is verified through QuickBooks and our website.

How We Do It:

(Excerpt from Procedures Manual):

When a customer complains REMAIN PATIENT AND PROFESSIONAL. Often quality complaints have nothing to do with the safety of the food, and everything has to do with the needs of our customers' customers.

If any one customer repeatedly complains about the condition of a product, establish a customer requirement, and note to their account to ensure they receive the desired product in the desired state.

Proof We Do It:

QuickBooks has notes of customer's quality preference, e.g., green bananas, yellow bananas, etc.

QuickBooks tracks customer complaints (NCR reports), and customer complaints are used to ensure we are providing the best product in the most professional way. Documentation from QuickBooks is compiled in the Monthly Management Review.

Element 2.1.3.2

Adverse trends in customer complaint data (returns) shall be investigated and analyzed, and the root cause established by personnel knowledgeable about the incidents.

What We Do:

At least annually, the Practitioner digitally reviews complaints to ensure customers are properly classified, produce dumping is **occurring** before expiry, and **any unresolved complaints are handled with Management, Sales Rep and/or Driver, and customer directly and documented.**

How We Do It:

The Practitioner runs QuickBooks reports to track customer complaints via returns and exchanges.

Proof We Do It:

Complaint Reports are **digitally recorded on the Customer's Account if needed (increased frequency); reviewed annually for Audit Review.**

Element 2.1.3.3

Corrective and preventative action shall be implemented based on the seriousness of the incident and the root cause analysis as outlined in 2.5.3. Records of customer complaints, their investigation, and resolution shall be maintained.

What We Do:

Corrective and preventative actions are implemented based on the seriousness of the incident and the root cause analysis as outlined in 2.5.3.

How We Do It:

The Practitioner monitors CPAs and maintains **digital (per 2.1.3.2)** records of customer complaints, their investigation, and the resolution.

Proof We Do It:

Records of customer complaints, their investigation, and the resolution/s are logged in the Safety file.

SECTION 2.1 MANAGEMENT COMMITMENT APPENDIX

2.1.1 Organizational Chart
2.1.2 Management Monthly Review Coversheet

SECTION 2.2 DOCUMENT CONTROL AND RECORDS

CLAUSE 2.2.1 FOOD SAFETY MANAGEMENT SYSTEM (MANDATORY)

Element 2.2.1.1

The methods and procedures the site uses to meet the requirements of the SQF Food Safety Code: Storage and Distribution shall be maintained in electronic and/or hard copy documentation. It will be made available to relevant staff and include:

i. A summary of the organization's food safety policies and the methods it will apply to meet the requirements of this standard;
ii. The food safety policy statement and organization chart;
iii. The processes and products included in the scope of certification;
iv. Food safety regulations that apply to the site and to the country of sale (if known);
v. Raw material, ingredient, packaging, and finished product specifications;
vi. Food safety procedures, pre-requisite programs, food safety plans;
vii. Process controls that impact product safety; and
viii. Other documentation necessary to support the development and the implementation, maintenance, and control of the SQF System.

What We Do:

This SQF manual (now also digital) serves as Twin City Produce's Food Safety Manual. All procedures are followed as written. The Practitioner oversees that the manual remains up to date. Our manual outlines our compliance methods for SQF Food Safety Code for Storage and Distribution requirements and is readily available to relevant staff. The manual includes A summary of our Company's food safety policies and methods that fulfill or exceed standards; Our food safety policy statement and organization chart; Scope of certification; A Certified Product List (per scope of certification); Food safety procedures and plans, pre-requisite programs; and additional documents necessary to support the SQF System.

How We Do It:

Our operation is small and every employee is empowered to speak with the Food Safety Practitioner directly. Any Personnel interested in requesting a document control change will use this procedure when the requirement arises. **The SQFP** ensures that it was performed in accordance with the requirements. Records such as document change notice forms etc. are **verified and approved by** the SSM. At each internal audit the auditor signs or initials the audit section off verifying that there were no NCR's issued against personnel out of compliance with this procedure indicating the procedure was completed and acceptable.

Proof We Do It:

The Practitioner maintains a file of all Document Change requests and internal audits.

Element 2.2.1.2

Food safety plans, Good Storage and Distribution Practices and all relevant aspects of the SQF System shall be reviewed, updated, and communicated as needed when any changes implemented have an impact on the site's ability to deliver safe food.

All changes to food safety plans, Good Storage and Distribution Practices, and other aspects of the SQF System shall be validated or justified prior to their implementation. The reasons for the changes shall be documented.

What We Do:

All changes to food safety plans, Good Manufacturing Practices, and other aspects of the SQF System are first reviewed by the SQF Team and existence is evidenced by the change in accordance with current SQF regulations. The scope of certification and list of certified products can be found on the most current SQF certificate.

How We Do It:

The Practitioner verifies any changes against the current regulations for accuracy against the SQF regulation. All changes have referenced the related module and its implementation justified.

Proof We Do It:

The Practitioner maintains a record of changes and justifications. Records are in the Safety file under same section and name **Document Change Notification 2.2.1.2.**

CLAUSE 2.2.2 DOCUMENT CONTROL (MANDATORY)

Element 2.2.2.1

The methods and responsibility for maintaining document control and ensuring staff have access to current requirements and instructions shall be documented and implemented.
Current SQF System documents and amendments to documents shall be maintained.

What We Do:

The Company has established food safety management system procedures for the control of documents. We have identified and publicly stored the current SQF manuals for employee review and compliance. The manual, forms, checklists, and all related documents required for optimum food safety are available in hard copies**, the Company's intranet, and Food Safety SOP accessible by QR code throughout the site**. Internal audits ensure that the necessary records are generated, utilized, and retained and that procedures are properly implemented. The previous year **policy was** archived, and prior versions of forms and policies distributed to employees are replaced, collected, and destroyed to avoid confusion in current guidelines and regulations.

How We Do It:

Our operation is small and every employee is empowered to speak with the Food Safety Practitioner directly. Any Personnel interested in requesting a document control change will use this procedure when the requirement arises. **The SQFP** ensures that it was performed in accordance with the requirements. Records such as document change notice forms etc. are **verified and approved by** the SSM. At each internal audit the auditor signs or initials the audit section off verifying that there were no NCR's issued against personnel out of compliance with this procedure indicating the procedure was completed and acceptable.

Proof We Do It:

The Practitioner maintains a **digital** record of changes and justifications. Records are in the Safety file under the same section and name **Document Control**.

CLAUSE 2.2.3 RECORDS (MANDATORY)

Element 2.2.3.1

The methods, frequency, and responsibility for verifying, maintaining, and retaining records shall be documented and implemented.

What We Do:

The Company has established food safety management system procedures for the control of records, which identifies the records to be maintained and authorized.

How We Do It:

See Below

Proof We Do It:

Internal audits serve to ensure that the necessary records are being generated, utilized, and retained and that procedures are properly implemented. The Practitioner maintains **digital safety files** in the cabinet in the Practitioner's office. Invoices, bills, and receiving are maintained in the accounting files, available for review at any time.

Element 2.2.3.2

All records shall be legible and confirmed by those undertaking monitoring activities that demonstrate inspections, analyses, and other essential activities have been completed.

What We Do:

The identification, collection, indexing, accessing, filing; storage, protection, maintenance, distribution of all food safety records is consolidated under the Practitioner.

How We Do It:

At the end of each active month, week, or day, depending on the procedures for the activity (delivering, receiving, orders, etc.) and submits to the office for proper review and filing. Any actions out of compliance are forwarded to the Practitioner.

Proof We Do It:

Internal audits serve to ensure that the necessary records are being generated, utilized, and retained and that procedures are properly implemented. The Practitioner maintains all safety files in the cabinet in the Practitioner's office. Invoices, bills, and receiving are maintained in the accounting files, available for review at any time.

Element 2.2.3.3

Records shall be readily accessible, retrievable, and securely stored to prevent unauthorized access, loss, damage, and deterioration. Retention periods shall be in accordance with customer, legal, and regulatory requirements, at minimum the product shelf life, or established by the site if no shelf life exists.

What We Do:

For the active month of reporting, retention of forms and documents is the prime responsibility of those maintaining them. At the end of the reporting term, records are submitted for review and filing to the Practitioner. Records are retrievable for: a) System, Inspection, and test records are retained a minimum of three (3) years or the duration of certification.

How We Do It:

The Policy and Procedure are maintained in binders and electronically on the site's Google Drive. All verification records are to remain in the file until the replacing verification is complete and submitted. Upon removal from the file, the verification record is scanned and uploaded to the Google Drive.

Proof We Do It:

Internal audits serve to ensure that the necessary records are being generated, utilized, and retained and that procedures are properly implemented. The Practitioner maintains all safety files in the cabinet in the Practitioner's office. Invoices, bills, and receiving are maintained in the accounting files, available for review at any time.

SECTION 2.2 DOCUMENT CONTROL AND RECORDS APPENDIX

2.1 GSDP and System Review
2.2C Document Control
2.2R Document Registry

SECTION 2.3 SPECIFICATIONS AND SUPPLIER APPROVAL

CLAUSE 2.3.1 PRODUCT FOR STORAGE AND DISTRIBUTION

Element 2.3.1.1

Product handling and storage requirements for all products received, stored, and intended for distribution, shall be documented, current, approved by the site and their customer (if applicable), accessible to relevant staff, and include temperature requirements, storage conditions, packaging requirements, and handling and transportation conditions.

What We Do:

Product handling and storage requirements for all products received, stored, and intended for distribution, are current and up to date, documented, and approved by the Warehouse Manager and our customer (if applicable). Any policies requiring customer approval are documented in the customer profile section of our Company's database.

How We Do It:

The Product Description List requires quarterly review. It is important to ensure that all products actively being sold are included in the list. During Internal Audits, randomly select items from each category and ensure they are properly stored and labelled.

Proof We Do It:

Product handling and storage requirements are accessible to relevant staff and include temperature requirements, storage conditions, as well as handling and transportation conditions. See Product Description **(2.3.1.1)**. Detailed instructions are in the Warehouse and Training Binders. A routinely updated list maintained by the Practitioner is available in the Warehouse Binder, the Practitioner's files, and the common drive safety folder.

CLAUSE 2.3.2 SUPPLIER APPROVAL AND INCOMING SUPPLIES

Element 2.3.2.1

The methods and responsibility for developing and approving product descriptions shall be documented. Product descriptions for all incoming supplies used by the site but not intended for distribution, including, but not limited to hazardous chemicals, ice, food packaging materials, or janitorial supplies that are used on-site and impact on product safety shall be documented and kept current.

What We Do:

All products not intended for distribution, including but not limited to hazardous chemicals, and/or used in the daily operation of the warehouse, are purchased from an authorized list of products approved safe for food distribution, logged, and audited by the Warehouse Manager.

How We Do It:

The Practitioner maintains a Manufacturer's Safety Data Sheets (MSDS) of the products used in the execution of our daily tasks but not for resale.

Proof We Do It:

Office staff receive only office supplies. Supplies are received in the front office and do not enter the warehouse until received. Office supplies for the warehouse are distributed after office receiving. Supplies for the warehouse are delivered and distributed to the warehouse. Records are maintained in QuickBooks.

Element 2.3.2.2

All incoming supplies shall comply with the relevant legislation.

What We Do:

The Warehouse Manager reviews prior to purchasing that all incoming materials and ingredients comply with the relevant legislation.

How We Do It:

Incoming Supplies are handled by the Department and in accordance to their department's instructions. Detailed instructions are in the Office and Warehouse Binders.

Proof We Do It:

Supplies are ordered from an approved list of supplies in the MSDS binder or known safe for food use. A copy of the MSDS list is in the Warehouse Binder, the Practitioner's office, and the common drive.

Element 2.3.2.3

Incoming supplies shall be verified to ensure product safety is not compromised and the material is fit for its intended purpose. Verification of incoming materials shall include a review of the product description to determine conformance.

What We Do:

Incoming supplies are compared against the list of approved products for food safety. The Practitioner reviews each company's website for its safety compliance and assurance, downloads its' MSDS for the relevant supply and stores it in the MSDS binder.

All incoming products are properly labeled and secured separately and apart from all products intended for distribution.

How We Do It:

The Warehouse Manager attends regular SQF meetings to review the effectiveness of selected not-for- distribution items and their description, makes, and implements recommendations for continual use, replacement, or deletion from the warehouse in compliance with SQF regulations and customer needs, and documents such findings.

As items are previously approved for food safety, labels are randomly reviewed during internal audits; however, packaging is checked at each delivery for damage or compromise.

Proof We Do It:

The MSDS Binder is maintained by the Practitioner and packing slips and/or invoices of incoming supplies are reviewed. The MSDS Binder is in the Warehouse and Practitioner's Office. An approved incoming supplies list is in the Warehouse supply cabinet.

Element 2.3.2.4
Incoming goods that may have an impact on product safety shall be supplied by an approved supplier. The responsibility for selecting, evaluating, approving, and monitoring an approved supplier shall be documented and implemented.

What We Do:
All incoming goods that may impact product safety are supplied by an approved supplier and follow our Receiving procedures. Suppliers are assessed on our Supplier's Evaluation Form based on food safety standards. Approved suppliers comply with our Food Safety Requirements. SSM oversees the routine review of supplier performance, including risk level of the materials, packaging materials, and services supplied (2.4.4.1). Any incoming goods received from non-approved suppliers are done so in an emergency and only after thorough inspection and analysis (2.4.4.2).

How We Do It:
The Practitioner reviews supplier performances to ensure compliance. If a product is needed and all approved suppliers are out of stock, a not yet approved supplier may be selected. All products must meet our established food safety requirements before finalizing receipt. Responsibility for evaluating suppliers is in the SSM's and Practitioner's job descriptions. Receiving and Inspection are in the Warehouse Manager's job description (Job Descriptions 2.1.2.8).

A supplier can become approved by completing the 2.4.4 Supplier Self Evaluation Form. surveillance is required until confidence is attained.

Proof We Do It:
Supplier Evaluation Forms (2.4.4) are in the Practitioner's file. Daily Receiving logs () document all products received at our site, including the supplier.

Element 2.3.2.5
Incoming goods received in emergency situations shall be acceptable provided they are inspected or analyzed before use and the supplier has been evaluated.

What We Do:
Incoming goods received in emergency situations shall be acceptable provided they are inspected or analyzed before use and the supplier has been evaluated.

How We Do It:
Any incoming goods with food safety impact received from non-approved suppliers are done so in an emergency and only after thorough inspection and analysis (2.4.4.2). We did not have any products with product safety impact or received from any non-approved suppliers. :/tnw/2/1/21.

Proof We Do It:
Any supplier not on the approved list receives purchase order paperwork and inspection instructions. However, we did not receive any such goods this year.

Element 2.3.2.6
Incoming goods and packaging received from other sites under the same corporate ownership shall be subject to the same product requirements and approved supplier requirements as all other material providers.

What We Do:
We do not have other sites.

How We Do It:
See above

Proof We Do It:
See above

Element 2.3.2.7
Specifications, product requirements, and incoming supplies shall be reviewed annually or as changes occur.

What We Do:
All Specifications, product requirements, and incoming supplies are reviewed during internal audits.

How We Do It:
The Practitioner reviews performances to ensure compliance.

Proof We Do It:
Supplier Evaluation Forms (2.3) are in the Practitioner's file. Daily Receiving logs () document all products received at our site, including the supplier. Any supplier not on the approved list receive purchase order paperwork and inspection instructions. However, we did not receive any such goods this year.

CLAUSE 2.3.3 CONTRACT SERVICE PROVIDERS

Element 2.3.3.1

Description of services for contract service providers that have an impact on product safety shall be documented, current, and include a full description of the service to be provided, and the relevant food safety training requirements of all contract personnel prior to conducting work.

What We Do:

As we have moved into our own facility, it is important each year to review the service providers against this checklist. This list covers all potential service providers that may enter the facility and come into contact with our produce:

On-Site Service Providers:

- Pest control company
- Sanitation/cleaning contractors
- Equipment maintenance and repair
- Calibration services
- HVAC/refrigeration technicians
- Construction or building contractors

Product-Related Services:

- Laboratory/testing services
- Transport and logistics (if contracted out)
- Packaging suppliers who service equipment on-site

Facility Support:

- Waste management/disposal
- Security services
- Uniform/laundry services
- Temporary staffing agencies
- Landscaping (if they have any facility access)

How We Do It:

Proof We Do It:

See 2.3.3.3

Element 2.3.3.2

Contracted services that have an impact on product safety shall be reviewed against the description. The methods and responsibilities for contracted services review shall be documented and validated as needed or at a minimum of annually.

What We Do:

How We Do It:

Proof We Do It:

See 2.3.3.3

Element 2.3.3.3

A record of all contract service descriptions that have an impact on product safety shall be maintained.

What We Do:

Contract service companies that may come into contact with produce directly, including pest control, provide specifications outlining their service to ensure compliance with our food safety program.
Those companies that may come into indirect contact with produce, are listed and at any visit, sign in confirming their knowledge of our Food Safety Policy for visitors.
Purchasing maintains copies of the service by vendor.

How We Do It:

Each contract service company adheres to our safety policy and procedures. The documents are maintained in individual binders with all contracts and agreements within and updated annually. The practitioner maintains a list of applicable contractors, and upon confirmation of compliance, is responsible for establishing the supplier “Vendor Account” for payments.

Proof We Do It:

The Contract Services provide service binders. The assigned consultant walks the warehouse with the Practitioner and/or the SSM on the first visit to ensure comprehension of the agreed safety policy and procedure. The Contract Services binders and the current list of contract Service Providers is in the Appendix and are stored in the Practitioner’s Office.

CLAUSE 2.3.4 CONTRACT THIRD-PARTY STORAGE OR DISTRIBUTOR

Element 2.3.4.1

The methods and responsibility for ensuring all agreements relating to food safety and customer product requirements and its realization and delivery are specified and agreed shall be documented and implemented.

What We Do:

How We Do It:

Proof We Do It:

See 2.3.4.3

Element 2.3.4.2

The site shall:

i. Ensure changes to contractual agreements are approved by both parties and communicated to relevant personnel,
ii. Verify compliance with the SQF Code and that all customer requirements are being met at all times.

What We Do:

How We Do It:

Proof We Do It:

See 2.3.4.3

Element 2.3.4.3

Records of all contract reviews and changes to contractual agreements and their approvals shall be maintained.

What We Do:

We do not utilize third party storage or distribution.

How We Do It:

N/A

Proof We Do It:

See contract binder.

SECTION 2.3 SPECIFICATIONS AND SUPPLIER APPROVAL APPENDIX

2.3.1 Product Description
2.3.2 Supplier Approval, Incoming Supplies
2.3.3 Contract Service Providers,
2.3 Supplier Evaluation Forms

SECTION 2.4 FOOD SAFETY SYSTEM

CLAUSE 2.4.1 FOOD LEGISLATION (MANDATORY)

Element 2.4.1.1

The site shall ensure that food stored and delivered to customers is handled in a manner that complies with the relevant legislation in the country of its production and destination.

What We Do:

Our company, in its commitment to food safety, ensures that all food delivered to customers is handled in a manner complying with (based on both country of origin and destination) relevant legislation as outlined by the International Organization for Standardization, FDA, and local authorities. Registered on multiple regulatory and related websites, we review notices as received based on relevance to our sector and products and customers. The Practitioner remains versed in SQF code to ensure our on-going efforts meet or exceed regulations.

Legislative requirements, including chemical residue, recycling materials permission and labelling are included in our product handling (2.3.1) and descriptions (2.3.2), wherever applicable to the products in stock.

How We Do It:

The Practitioner ensures compliance and current registration with all food regulatory bodies. Copies of the registration and standing are maintained in the Practitioner's file and in the appendix of this section.

Product packaging is regularly inspected upon receiving and during each internal audit, at random, products are inspected for compliance- Untampered labels, sealed packages, proper label matching product within, no evidence of leaking or resealed packages, origin on packaging matches that of product within, etc.

The Practitioner also reviews and updates all company policies, forms, and employee comprehension when there is a relative change in practice with any of the regulatory bodies overseeing food safety in Arkansas.

Proof We Do It:

All policies and forms are dated for revision. The Practitioner maintains a file of all audits, receiving, and NCRs and CAs if necessary.

Element 2.4.1.2
The methods and responsibility for ensuring the site is kept informed of changes to relevant legislation, scientific and technical developments, emerging food safety issues, and relevant industry codes of practice shall be documented and implemented.

What We Do:
See 2.4.1.3

How We Do It:
See 2.4.1.3

Proof We Do It:
See 2.4.1.3

Element 2.4.1.3
SQFI and the certification body shall be notified in writing within twenty-four (24) hours as a result of a regulatory warning or event. Notification to SQFI shall be by **email to foodsafetycrisis@sqfi.com**.

What We Do:
2.4.1.2 – 2.4.1.3: The SQF team lead subscribes to multiple food safety sites (legislation, scientific, and technical), receiving daily and as needed emails regarding any changes to the SQF regulation. These updates and notices are reviewed for relevance to Food Sector 26 and implemented as needed.

The company notifies the SQFI at **email to foodsafetycrisis@sqfi.com** and our certification body of food safety events, ASI at: **recalls@asifood.com** within 24 hours via email.

How We Do It:
The Practitioner review emails daily, distributing changes/notices to the SQF team for manual revision, employee notices, retraining, or other matters as specifically outlined in the notice. If we had any such emails, they would be archived in the company email program and printed and saved in the Safety file.

Proof We Do It:
The Practitioner updates all company policies, forms, and employee comprehension with revision notations. We had no such notices in the last year. Instructions are in the Procedures manual. Any changes are printed out and filed with amendments of forms, documents, policy, and procedure, as justification for the change. We had no such notices in the last year.

CLAUSE 2.4.2 GOOD STORAGE AND DISTRIBUTION PRACTICES (MANDATORY)

Element 2.4.2.1

The site shall ensure the Good Storage and Distribution Practices described in Module 12 of this Food Safety Code are applied or exempted according to a written risk analysis outlining the justification for exemption or evidence of the effectiveness of alternative control measures to ensure that food safety is not compromised.

What We Do:

See 2.4.2.2

How We Do It:

See 2.4.2.2

Proof We Do It:

See 2.4.2.2

Element 2.4.2.2

The Good Storage and Distribution Practices applicable to the scope of certification that outline how food safety is controlled and assured shall be documented and implemented.

What We Do:

The SSM and Warehouse Manager ensure the Good Storage and Distribution Practices of Module 12 of this Code are applied in our daily operations. Those operations deemed exempt are done so through a risk analysis outlining the justification for exclusion. There is no evidence of the effectiveness of alternative control measures because of the type of exclusion is **"low risk" based on** the conclusion of our risk analysis, and our existing control measures are verified and validated as effective to ensure food safety is not compromised.

How We Do It:

Good Storage and Distribution Practices applicable to the scope of certification outlining food safety control and assurance are routinely reviewed for any updates to continue compliance with relevant legislation and developments. Practices are documented and implemented throughout the company.

Proof We Do It:

The Practitioner reviews all paperwork, documentation, and the Warehouse manager reviews the physical areas throughout the site**,** to verify that each applicable pre-requisite program is achieving its purpose and goal. The Good Storage and Distribution Practices (Module 12) are fully documented in the binder, with the actual files documenting compliance and verifying that compliance**,** ~~is~~ maintained in the Practitioner's file.

CLAUSE 2.4.3 FOOD SAFETY PLAN (MANDATORY)

Element 2.4.3.1

A hazard and risk management system shall be developed and take into consideration relevant legislation in all countries of operation. The system shall be risk based, systematic and comprehensive, and based on HACCP or preventive controls. The food safety plan shall be effectively implemented, maintained, and outline the means by which the site controls and assures food safety of the products or product groups included in the scope of the SQF certification and their associated processes. More than one food safety plan may be required to cover all products included in the scope of certification.

What We Do:

Our food safety plan is prepared in accordance with the twelve CODEX/HACCP steps. Our developed food safety plan is effectively implemented and maintained using methodology developed by Codex **Alimentarius.**

How We Do It:

Our SQF Food safety team uses the steps and decision tree process, recognized by our approved third- party audit organization. Numbering corresponds with established steps of the Codex Alimentarius. The CODEX steps are as follows:

1. The HACCP Food Safety Team
2. Describe the Product
3. Identify INTENDED Use
4. Construct a Process Flow Diagram
5. Verify Flow Diagram
6. List All Potential Hazards Associated with Each Process Step
7. Determine the Critical Control Points (CCP) (Principle 2)
8. Establish Critical Limits for each Critical Control Point (Principle 3)
9. Establish a Monitoring System for each Critical Control Point (Principle 4)
10. Establish a Corrective Action Plan (Principle 5)
11. Establish Verification Procedures (Principle 6)
12. HACCP Plan Review, Documentation, and Record Keeping (Principle 7)

Proof We Do It:

Our Food Safety Plan is documented in the SE Module 2 Procedures and incorporated and documented within the company's Standard Operating Procedures (SOPs) and Work Instructions (WI) applicable to our scope of certification.

Element 2.4.3.2

The food safety plan or plans shall be developed and maintained by a multidisciplinary team that includes the SQF practitioner and those site personnel with technical, storage and distribution, and facility /maintenance knowledge of the relevant products and associated processes. Where the relevant expertise is not available on-site, advice may be obtained from other sources to assist the food safety team.

What We Do:

Our food safety plan is effectively implemented and maintained and outlines our site's controls and assures food safety of the products or product groups included in the scope of the SQF certification.

The SQF team, with representation from each aspect of operation, further review the plan, after verification and validation in accordance with procedure, at each scheduled management review meeting to ensure that it is current, implemented, maintained.

How We Do It:

Routine audits of our food safety plan, including the HACCP, verify our goal attainment. Daily, weekly, monthly, quarterly, and annual forms are used as checks and balances to ensure we remain committed to delivering safe food. Any areas found below or near below compliance receive and NCR and tracking to confirm correction, and review to guarantee the correction becomes the norm.

Proof We Do It:

Our Food Safety Plan is documented in the SE Module 2 Procedures and incorporated and documented within the company's Standard Operating Procedures (SOPs) and Work Instructions (WI) applicable to our scope of certification. Food Safety is integrated in the executive summary and is developed, implemented, and found in various modules of this manual and readily available for employees in both hard copy and digital format.

Element 2.4.3.3

The scope of each food safety plan shall be developed and documented including the start and endpoint of the processes under consideration and all relevant inputs and outputs.

What We Do:

We developed the scope of our food safety plan, which documents the start and endpoint of the processes under consideration with all relevant inputs and outputs.

How We Do It:

The scope of our plan includes the process to monitor critical food safety control points determined by the review. It also covers necessary steps in the event a deviation requires corrective action.

Proof We Do It:

The verification records are part of the HACCP, confirmed by date and signature block on the verification document itself. Records are in the Practitioner's office and this binder.

Element 2.4.3.4

Product requirements shall be developed and documented for all products (or groups of products) included in the scope of the food safety plans. This shall reference the product descriptions (refer to 2.3.2.1) plus any additional information relevant to product safety, such as temperature for storage, how the product is packaged, allergen requirements, raw or cooked, etc.

What We Do:

Our developed and documented product requirements are for all products/product groups included in the food safety plan's scope and references product descriptions (2.3.2.1) and additional relevant product safety information, such as storage temperature, product packaging, allergen requirements, whether raw or cooked, etc.

How We Do It:

Products for distribution are grouped in accordance with their food safety compliance measures. We maintain an active and current list of products along with relevant product safety information, such as proper temperature storage, packaging requirements, and allergen alerts, etc.

Proof We Do It:

Product Requirements and Use document (2.4.3.5-6) confirms development and documentation. Records are in the Practitioner's office and this binder.

Element 2.4.3.5

The food safety team shall develop and document a flow diagram covering the scope of each food safety plan. The flow diagram shall include every step in the process, all raw material, packaging, service inputs (e.g., water, steam, gases as appropriate), scheduled process delays, and all process outputs including waste, rework, and recoup. Each flow diagram shall be confirmed by the food safety team during all stages and hours of operation.

What We Do:

A flow diagram covering our food safety plan is developed and documented by the Practitioner.

How We Do It:

The SQF team maintains food safety assurance diagrams outlining every step for handling all products and packaging material, service inputs, delays, outputs, and all rework/recoup.

Proof We Do It:

Food Process Flow Diagram document (2.4.3.7) confirms development and documentation. Flow diagram is posted throughout the site and included in the Appendix.

Element 2.4.3.6
The food safety team shall identify and document all food safety hazards that can reasonably be expected to occur at each step in the processes, including food products received and stored.

What We Do:
Our food safety team identifies and documents all food safety hazards that can reasonably be expected to occur at each step in the processes, including food products received and stored.

How We Do It:
As a result of a Hazards Analysis, critical limits are established for food safety requirements. They are outlined in both our HACCP and food safety plan. There are currently no critical limits for the products we distribute. If identified going forward, the limits would be reviewed on a random basis, daily, by inventory control personnel; and verification would be conducted by supervisory personnel for compliance.

Proof We Do It:
The Identified food safety hazards and risk analysis (2.4.3.8) document confirms analysis and documentation. Records are in the Practitioner's office and this binder.

Element 2.4.3.7
The food safety team shall conduct a hazard analysis for every identified hazard, to identify which hazards are significant. The methodology for determining hazard significance shall be documented and used consistently to assess all potential hazards.

What We Do:
The food safety team documents the consistent methodology for and conducts a hazard analysis for every identified hazard for significance.

How We Do It:
Using the product descriptions, each product's hazard is identified in accordance with the twelve steps identified in the Codex Alimentarius Commission HACCP guidelines.

Proof We Do It:
The Identified food safety hazards and risk analysis (2.4.3.8) document confirms analysis and documentation. Records are in the Practitioner's office and this binder.

Element 2.4.3.8

The food safety team shall determine and document the control measures that must be applied to all significant hazards. More than one control measure may be required to control an identified hazard, and more than one significant hazard may be controlled by a specific control measure.

What We Do:

The food safety team annually reviews our HACCP to determine and document the control measures that must be applied to all significant hazards. Our site does not have any significant hazards; therefore, there are no control measures in place or need for CCP.

How We Do It:

Using the results of the product hazard and risk analysis, of which we have none, we completed the annual review to confirm no product hazards or risks existed in accordance with the Codex Alimentarius Commission HACCP guidelines.

Proof We Do It:

The Control Measures (2.4.3.10), Critical Control Points (2.4.3.11), Critical Limits (2.4.3.12), Monitoring Critical Control Points (2.4.3.13), Deviation Procedures (2.4.3.14) documents confirm analysis and documentation that there are no significant risks or hazards and therefore no control measures, critical control points or related monitoring, or deviation procedures are required.

Records are in the Practitioner's office and this binder.

Element 2.4.3.9

Based on the results of the hazard analysis (refer to 2.4.3.7), the food safety team shall identify the steps in the process where control must be applied to eliminate a significant hazard or reduce it to an acceptable level (e.g., a preventive control {PC} or critical control point {CCP}).

In instances where a significant hazard has been identified at a step in the process, but no control measure exists, the food safety team shall modify the process to include an appropriate control measure.

What, How and Proof We Do It:

See 2.4.3.8

Element 2.4.3.10

For each identified step requiring control (e.g., PC or CCP) the food safety team shall document the limits that separate safe from unsafe product. The food safety team shall validate the critical limits to ensure the designated level of control of the identified food safety hazard(s) and that all critical limits and control measures individually or in combination effectively provide the level of control required (refer to 2.5.1.1).

What, How and Proof We Do It:

See 2.4.3.8

Element 2.4.3.11

The food safety team shall develop and document procedures to monitor identified steps requiring control (e.g., PC or CCP) to ensure they remain within the established limits (refer to 2.4.3.12). Monitoring procedures shall identify the personnel assigned to conduct testing, the sampling and test methods, and the testing frequency.

What, How and Proof We Do It:

See 2.4.3.8

Element 2.4.3.12

The food safety team shall develop and document deviation procedures that identify the disposition of affected product when monitoring indicates a loss of control at an identified step requiring control (e.g., PC or CCP). The procedures shall also prescribe actions to correct the process step to prevent recurrence of the safety failure.

What, How and Proof We Do It:

See 2.4.3.8

Element 2.4.3.13

The documented and approved food safety plan(s) shall be implemented in full. The effective implementation shall be monitored by the food safety team, and a full review of the documented and implemented plans shall be conducted at least annually, or when changes to the process, equipment, inputs, or other changes affecting product safety occur.

What We Do:

Our documented and approved food safety plan is fully implemented; monitored by the food safety team for effectiveness; and reviewed annually, when there is a process, equipment, input, or any other change affecting product safety occurs. The food plans implementation is verified via the SQF system (2.5). Codex remains our primary regulatory requirement. All other country compliances are met in addition to and not in lieu of Codex and food regulatory requirements.

How We Do It:

The Practitioner ensures company compliance, that the food plan is fully implemented through routine audits, site walks, and routine review of all paperwork for compliance. Those out of compliance receive an NCR and CA tracking if necessary.

The approved Food Safety Plan is fully enforced throughout all aspects of business interacting directly or indirectly with food products stored and distributed to our customers. The safety team routinely meets to confirm compliance by all staff, address any food safety issues, and amend and disseminate any changes to the Food Safety Plan to all employees, providing training if need arises in accordance with SQF system verification process. We further comply with the Codex HACCP guidelines. Should any product require compliance with another legislative body, it shall be in addition to the Codex.

Proof We Do It:

Food Safety Plan Approval, Implementation, and Documentation (2.4.3.15), Food Safety Plan Verification (2.4.3.16), and Chosen Methodology (2.4.3.17) documents confirm. Records are in the Practitioner's office and this binder.

CLAUSE 2.4.4 NON-CONFORMING PRODUCT AND EQUIPMENT

Element 2.4.4.1

The responsibility and methods outlining how non-conforming product, raw materials, ingredients, work-in-progress, packaging, or equipment detected during receipt, storage, handling, or delivery and including food found to be damaged and/or returned from customers is handled shall be documented and implemented. The methods applied shall ensure:

i. Non-conforming product is quarantined, identified, handled, and / or disposed of in a manner that minimizes the risk of inadvertent use, improper use or delivery, or risk to the integrity of the product,
ii. Non-conforming equipment is effectively identified, repaired, or disposed of in a manner that minimizes the risk of inadvertent use, improper use, or risk to the integrity of finished product; and
iii. All relevant staff are aware of the organization's quarantine and release requirements applicable to equipment or product placed under quarantine status.

Element 2.4.4.2

Quarantine records and records of the handling, corrective action, or disposal of non-conforming product or equipment are digitally recorded.

What We Do:

2.4.4.1-.2 The methods for determining a nonconforming product or equipment, detecting, and reporting nonconformance at any stage of daily activity are documented in our Food Safety Procedures. These SOPs are communicated in On-the-Job training, writing, and postings. All employees have been trained to identify any product, work-in-progress, packaging, or equipment detected during receipt, storage, processing, handling or delivery that does not conform to the standards developed by our site and to whom to report their findings.

How We Do It:

Employees are trained to recognize damaged and/or near spoiled products, malfunctioning equipment, questionable deliveries, and report those to management or the Practitioner. Sales staff log customer complaints and returns electronically, and the Practitioner routinely reviews for patterns that may result in a nonconforming product.

This training is part of their indoctrination program and is on-going so that any employee may initiate a non-conformance or advise his/her supervisor of the condition. All non-conformances are documented in our digital log. Any non-conforming product or equipment is quarantined, following our Non-conformance Procedure (2.4.5). Any non-conforming equipment is effectively repaired or disposed of in a manner that minimizes risk.

Proof We Do It:

The practitioner maintains access to digital records of NCRs, quarantines, handling, corrective actions, and disposals.

CLAUSE 2.4.5 PRODUCT RECOUP

Element 2.4.5.1

The responsibility and methods outlining how product is recouped shall be documented and implemented. The methods applied shall ensure:

i. Recouping operations are conducted by trained personnel; and
ii. Recouped product is traceable.

What We Do:

We do not recoup products. The extent of our handling is quality sorting.

How We Do It:

Employees are trained that upon receiving a Pull List to:

1. Identify the storage location for the product
2. Confirm product, count and size, if applicable.
3. Visually inspect the product and its container for any damage prior to adding to the order.
    a. If visual inspection identifies any damage, the product is pulled from inventory and delivered to ea/lb.
    b. The order is fulfilled with the container absent damage.
4. The lot number is documented on the pull list and the employee proceeds to the next item or finalizes the order and stages for delivery.

The Warehouse Manager or SSM will inspect the product and its container. If it is superficial damage (the container is damaged but no damage to the product, the product is moved to ea/lb and weighed out for our specialty customers.

If the damage is not superficial and the product is unsaleable, it is listed on the Transitional Log. If it is a farm-eligible product, it will be donated to the local farm for animal feed. If it is not a farm-eligible product, the vendor is contacted for a replacement and the product is logged and dumped.

Proof We Do It:

Records of ea/lb sales and Transitional Logs.

CLAUSE 2.4.6 PRODUCT RELEASE (MANDATORY)

Element 2.4.6.1

The responsibility and methods for releasing products shall be documented and implemented. The methods applied shall ensure the product is released by authorized personnel.

Element 2.4.6.2

Records of all product release shall be maintained.

What We Do:

2.4.6.1-.2 Product Release, "pulling" orders is conducted by trained employees. Release procedures are an informal part of our normal processes. Incoming products are inspected by receiving to verify that they are acceptable for distribution to our customers based on paperwork and visual inspection. Work in processes such as products staged after pulling are not subject to a specific release step, the operator performing the next step of their operation is responsible for inspecting the product before shipping.

How We Do It:

Random checks on products ensure that they meet customer specifications. All products that do not conform in any way have a non-conformance initiated against them following procedure 2.4.5. In the event of a Recall, impacted products are isolated and release for disposal or sale is documented.

Proof We Do It:

Product Release is documented on invoices by customer signature. Product Release after voluntary hold, recall, or withdrawal is documented as part of the Recall Packet. Records are maintained in the Practitioner's Office.

SECTION 2.4 FOOD SAFETY SYSTEM APPENDIX

2.4 Food Legislation Registration
2.4.1.3 Regulatory Warning Notices
2.4.2 Good Storage and Distribution Practices
2.4.3 HACCP Plan
2.4.4 Non-conforming Product and Equipment (NCR)
2.4.5 Product Recoup
2.4.6 Product Release

SECTION 2.5 SQF SYSTEM VERIFICATION

CLAUSE 2.5.1 VALIDATION AND EFFECTIVENESS (MANDATORY)

Element 2.5.1.1

The methods, responsibility, and criteria for ensuring the effectiveness of all applicable elements of the SQF Program shall be documented, implemented, and effective. The methods applied shall ensure that:

i. Good Storage and Distribution Practices are confirmed to ensure they achieve the required result;
ii. Critical food safety limits are reviewed annually and re-validated or justified by regulatory standards when changes occur; and
iii. Changes to the processes or procedures are assessed to ensure controls are still

effective. Records of all validation activities shall be maintained.

What We Do:

Our GSDPs are routinely confirmed to ensure achievement of required result. Our GSDP and Critical food safety limits are currently validated and are re-validated through audit and survey review at least annually to ensure any changes to our procedures are still effective in maintaining our food safety limits. The Practitioner oversees the validation of all procedures.

How We Do It:

Validation takes place by observation of the individual assigned to complete the questionnaire conducting the activity. The result of these findings is found in the internal audit report(s), including any changes to the processes or procedures made as a result are assessed to ensure controls are still effective. Critical food safety limits developed by SQF Team are validated in the same methodology as above to ensure that the limits set, if any, have been achieved. The determination of whether these limits are effective, and a review of other processes and regulatory requirements is conducted during the scheduled management reviews. After the management review meeting, results are attached to the minutes of the meeting as exhibits. The results of all the above are maintained by the SQF Practitioner.

Proof We Do It:

Records of all validation activities are stored in this binder.

CLAUSE 2.5.2 VERIFICATION ACTIVITIES (MANDATORY)

Element 2.5.2.1

The methods, responsibility, and criteria for verifying monitoring of Good Storage and Distribution Practices, critical control points, and other food safety controls shall be documented and implemented. The methods applied shall ensure that personnel with responsibility for verifying monitoring activities authorize each verified record.

What We Do:

Verification of our program and operations is conducted by assigned, trained personnel. Each verification activity has a record outlined in the policy or procedure. Those responsible for the verification report initials in the space provided that the required inspection, observation, or review has been completed.

Our supervisory activity is a continual unwritten verification process and includes food safety of products, personnel safety, safety of equipment employed in addition to product output. In the case of our warehouse and distribution activity our pre-operations procedures outline verification activity, what data is collected and/or reviewed and because of the verification, initialing that the activity was conducted in a satisfactory method or that the results were within the acceptable range.

How We Do It:

The pre-operations form, now an online app, associated with the specific procedure is the record of the verifications. Other areas have records and/or logs associated with their respective procedures e.g., receiving, maintenance, inventory control, shipping, customer complaints etc. Should the result of a verification of an activity not meet the requirements of the procedure or have food safety ramifications, an NCR is initiated by the individual finding the non-conformity following our non-conforming product or equipment procedure and/or initiates corrective action should the issue be serious enough following our corrective and preventive action procedure.

The results of these records are reviewed as part of our management review meetings in the form of a report(s) from the respective manager/supervisor as outlined in this manual, additionally specific results are collected for analysis as part of food safety as well as for our continual improvement commitment.

Proof We Do It:

The completed records are maintained at the end of this binder.

Element 2.5.2.2

A verification schedule outlining the verification activities, their frequency of completion, and the person responsible for each activity shall be prepared and implemented.
Records of verification of activities shall be maintained.

What We Do:

Our GSDPs are routinely confirmed to ensure achievement of required result. Our GSDP and Critical food safety limits are currently validated and are re-validated through audit and survey review at least annually to ensure any changes to our procedures are still effective in maintaining our food safety limits. The Practitioner oversees the validation of all procedures.

How We Do It:

Verification takes place by observation of the individual assigned to complete the questionnaire conducting the activity. The result of these findings is found in the internal audit report(s), including any changes to the processes or procedures made as a result are assessed to ensure controls are still effective.

Critical food safety limits developed by SQF Team are validated in the same methodology as above to ensure that the limits set, if any, have been achieved.

The determination of whether these limits are effective, and a review of other processes and regulatory requirements is conducted during the scheduled management reviews.

After the management review meeting, results are attached to the minutes of the meeting as exhibits. The results of all the above are maintained by the SQF Practitioner.

Proof We Do It:

Records of all verification activities are stored in the Practitioner's office.

CLAUSE 2.5.3 CORRECTIVE AND PREVENTATIVE ACTION (MANDATORY)

Element 2.5.3.1

The responsibility and methods outlining how corrective and preventative actions are determined, implemented, and verified, including identification of the root cause and resolution of non-compliance of critical food safety limits and deviations from food safety requirements, shall be documented and implemented.

Deviations from food safety requirements may include customer complaints, non-conformances raised at internal or external audits and inspections, non-conforming product and equipment, or withdrawals and recalls, as appropriate.

What, How and Proof We Do It:

See 2.5.3.2

Element 2.5.3.2

Records of all investigation, root cause analyses and resolution of non-conformities, their corrections, and implementation of preventative actions shall be maintained.

What We Do:

We have developed and implemented a Corrective Action Process using our procedure 2.5.3 Corrective Action and associated forms to handle corrective actions when they are required because of an issue or as the result of repeated non-conformities to products via customer complaints, inspection activities and or processes and action of personnel during verification procedures. These corrective actions cover both safety and deviations from food safety requirements (although not part of the scope of this manual) and are implanted to determine the root cause of the problem and prevent reoccurrence.

How We Do It:

All corrective actions are reviewed during our scheduled management review meetings. Our Preventive Action Procedure 2.5.3 and associated forms is a pre-activity program developed and implemented to prevent safety issues before they become “non-conforming” or require corrective action.

Review of trends developing from non-conformities or continual improvement discussions would result in Preventive Action being taken.

Proof We Do It:

Records of all investigations and their resolutions including corrections and corrective actions are maintained in the Practitioner’s Office.

CLAUSE 2.5.4 INTERNAL AUDITS AND INSPECTIONS (MANDATORY)

Element 2.5.4.1

The methods and responsibility for scheduling and conducting internal audits to verify the effectiveness of the SQF System shall be documented and implemented. Internal audits shall be conducted in full and at least annually. The methods applied shall ensure:

i. All applicable requirements of the SQF Food Safety Code: Storage and Distribution are audited as per the SQF audit checklist or similar tool;
ii. Objective evidence is recorded to verify compliance and/or non-compliance;
iii. Corrective and preventative actions of deficiencies identified during the internal audits are undertaken; and
iv. Audit results are communicated to relevant management personnel and staff responsible for implementing and verifying corrective and preventative actions.

What, How and Proof We Do It:

See below.

Element 2.5.4.2

Staff conducting internal audits shall be trained and competent in internal audit procedures. Where practical, staff conducting internal audits shall be independent of the function being audited.

What We Do:

Site inspections will include at a minimum the staff amenities, product and process controls, warehouse sanitation, the detection of potential foreign body hazards and personal hygiene practices. Additionally, any areas which have resulted in non-conformity or deficiencies identified during the internal audits are corrected and continually monitored. Our SQF Practitioner and SQF Team members have been trained to conduct internal audits to audit areas of our operations to verify the effectiveness of our SQF CODE system including site and equipment inspections, our prerequisite program, food safety plans and legislative requirements.

How We Do It:

Using the attached form, an internal audit is been performed. Issues are conveyed to the respective manager who is responsible for implementing any of the findings. On notification by the respective manager of completion of any requirements to correct issues, the SQF internal auditor will revisit the area and conduct an audit of the corrections to ensure that they are properly dispositioned. This audit is not part of the regular schedule. Each respective manager receives a copy of the audit report of all findings.

Proof We Do It:

Records of all internal audits are maintained at the end of this binder.

Element 2.5.4.3

Regular inspections of the site and equipment shall be planned and carried out to verify Good Storage and Distribution Practices and facilities and equipment maintenance are compliant with the SQF Food Safety Code: Storage and Distribution. The site shall:

i. Take corrections or corrective and preventative action; and
ii. Maintain records of inspections and any corrective action taken.

What, How and Proof We Do It:

See below

Element 2.5.4.4

Records of internal audits and inspections and any corrective and preventative actions taken as a result of internal audits shall be recorded as per 2.5.3.
Changes implemented from internal audits that have an impact on the site's ability to deliver safe food shall require a review of applicable aspects of the SQF System.

What We Do:

Regular inspections of the site and equipment are planned and carried out to verify that our Good Storage and Distribution Practices and building/equipment maintenance are compliant to the SQF Food Safety Code for Storage and Distribution. We take corrections or corrective and preventative action; and maintain records of inspections and any corrective action taken. If there was ever a case where the SQF Practitioner/Employee is in conflict, internal auditing will be conducted by a trained alternate in the internal audit procedure.

How We Do It:

The process of internal audits follows our Internal audit Procedure 2.5.5. The schedule of internal audits is prepared by the SQF Practitioner and reviewed at our scheduled management review meetings based on the entire SQF CODE system being reviewed in total on an annual basis. Emphasis is placed on the critical nature of the activity to be audited and any areas where corrective or preventive actions are required and ensure that they have been implemented.

Proof We Do It:

Records of all internal audits and corrective actions or deficiencies identified during the internal audits that were undertaken or preventive action audits is maintained by the SQF Practitioner and is reported to the management review meeting and a report of the findings attached to the minutes of the meeting.

SECTION 2.6 PRODUCT TRACEABILITY RECALL AND CRISIS MANAGEMENT

CLAUSE 2.6.1 PRODUCT IDENTIFICATION (MANDATORY)

Element 2.6.1.1

The methods and responsibility for identifying products during all stages of storage shall be documented and implemented. The product identification system shall be implemented to ensure:

i. Proper stock rotation; and
ii. Accurate location of product.

What We Do:

The methods and responsibility for identifying products during all stages of storage is documented and implemented. The product identification system is implemented to ensure proper stock rotation and accurate location of the product.

How We Do It:

Our Warehouse and Inventory personnel trace our products through each phase of our internal processing from receiving to customer delivery, allowing us to track product back to the supplier by date of receipt, as well as its distribution by product order and receiving customer.

The Warehouse supervisor trains personnel to recognize product label identification to maintain first in first put principles.

We follow the “First In, First Out” (FIFO) principle, which ensures the product used is the earliest one received or in the case of packaged goods, the earliest expiry date known as “First Expired, First Out” (FEFO).

FIFO Exceptions: Only customer’s specifications may override, i.e., product specifically brought in for a customer or other reason, such as quality (ripeness, color, texture, size). Our process follows our Product Identification and Traceability Procedure 2.6.2, which includes how to read and use our lot numeric coding.

Proof We Do It:

Product receiving is manually recorded and electronically stored along with sales on the customer invoice in QuickBooks, plus the contingency of hard copy pull tickets and invoices.

Element 2.6.1.2
Records of product receipt and use and product dispatch and destination shall be maintained.

What We Do:
Records of product receipt and use and product dispatch and destination shall be maintained.

How We Do It:
All products received for sale are inspected and recorded into the Receiving binder. All orders are completed in QuickBooks, with the customer and product purchased by date. All sales are stored in the QuickBooks database and hard copy.

Proof We Do It:
QuickBooks is our electronic database of product dispatch and destination. Hard copies are stored in the manager's office.

CLAUSE 2.6.2 PRODUCT TRACE (MANDATORY)

Element 2.6.2.1

The responsibility and methods used to trace product shall be documented and implemented to ensure:

i. Traceability of food products to the customer (one step forward);
ii. Traceability of product to the supplier or manufacturing supplier with date of receipt (one step back);
iii. Traceability is maintained where product is recouped; and
iv. The effectiveness of the product trace system is reviewed at least annually as part of the product recall and withdrawal review (refer to 2.6.3.2)

What We Do:

The responsibility and methods used to trace product is documented and implemented to ensure finished product is traceable to the customer (one up) and provides traceability through the process to the manufacturing supplier and date of receipt of raw materials, food contact packaging and materials and other inputs (one back). Traceability is maintained where a product is recouped, and the effectiveness of the product trace system is reviewed at least annually as part of the product recall and withdrawal review. All products received are finished, “ready-to-sale”, yet all products remain traceable from vendor, storage, to customer through date receipt of receiving and duration of storage and final sale and delivery.

How We Do It:

All products received are finished, yet remain traceable from vendor, storage, to customer through date receipt of receiving and duration of storage and final sale and delivery. In the event re-work (recoup/salvage) occurs, the trace records are updated indicating which reworked product or specific lot code is altered. We review our trace system via a mock recall, record these mock recalls, and review annually to verify its effectiveness.

Proof We Do It:

QuickBooks Receiving Records, Sales Invoices, and Inventory Adjustment records. These findings are maintained by the SQF Practitioner. **See Product Trace Procedures.**

CLAUSE 2.6.3 PRODUCT WITHDRAWAL AND RECALL (MANDATORY)

Element 2.6.3.1

The responsibility and methods used to withdraw or recall products shall be documented and implemented. The procedure shall:

i. Identify those responsible for initiating, managing, and investigating a product withdrawal or recall;
ii. Describe the management procedures to be implemented including sources of legal, regulatory, and expert advice, and essential traceability information;
iii. Outline a communication plan to inform employees, customers, consumers, authorities, and other essential bodies in a timely manner appropriate about the nature of the incident;
iv. Ensure that SQFI, the certification body, and the appropriate regulatory authority are listed as essential organizations and notified in instances of a food safety incident of a public nature or product recall for any reason.

What We Do:

The responsibility and methods used to withdraw or recall products include sub-elements i-iv and are documented and implemented.

How We Do It:

If impacted by the Recall, the SSM or Practitioner first notifies SQFI and the certification body at **foodsafetycrisis@sqfi.com** and **recalls@asifood.com**.

Then the SSM or Practitioner reviews the list to determine the extent of the withdrawal. The customers that have received the product will be notified and provided the lot/code numbers of the product to be withdrawn and requested to hold the product from further shipment.

Proof We Do It:

The full procedure is in the Procedure binder, listed under the same section number and name. All records of Withdrawals and Recalls are maintained in the Safety file under the same section name and number.

Element 2.6.3.2

The product withdrawal and recall system shall be reviewed, tested, and verified as effective at least annually. Testing shall include incoming materials (one back), in-house identification and isolation/quarantine, and where the product is shipped to (one forward).

What We Do:

See 2.6.3.4

How We Do It:

See 2.6.3.4

Proof We Do It:

See 2.6.3.4

Element 2.6.3.3
Records shall be maintained of withdrawal and recall tests, root cause investigations into actual withdrawals and recalls, and applied corrective and preventative actions.

What We Do:
See 2.6.3.4

How We Do It:
See 2.6.3.4

Proof We Do It:
See 2.6.3.4

Element 2.6.3.4
SQFI and the certification body shall be notified in writing within twenty-four (24) hours upon identification of a food safety event that has been initiated by the site requires public notification. SQFI shall be notified at **foodsafetycrisis@sqfi.com**.

What We Do:
Once the extent of the recall has been established and specific actions taken, a further investigation of the root cause of the recall is conducted and all activity of the investigation is documented and if further action is required, it is implemented.

As part of our Food Safety Recall procedure, we notify SQFI and the certification body in writing (via email at foodsafetycrisis@sqfi.com) within 24 hours of any food safety event that requires public notification.

How We Do It:
The staff completing the recall process, notifies SQFI and the certification body at foodsafetycrisis@sqfi.com and recalls@asifood.com. The Practitioner or SSM reviews the incident to determine if it is a single event or pattern. If a pattern is identified, a solution is developed to rectify and presented to management for approval and implementation.

Our recall process is reviewed, tested, and verified and validated for its effectiveness through mock recalls.

Proof We Do It:
All product withdrawals, recalls, and mock recall records are maintained in the SQF Practitioner's office and filing system.

CLAUSE 2.6.4 CRISIS MANAGEMENT PLANNING

Element 2.6.4.1

A crisis management plan based on the understanding of known potential dangers (e.g., flood, drought, fire, tsunami, or other severe weather event, warfare or civil unrest, computer outage, pandemic, loss of electricity or refrigeration, ammonia leak, labor strike) that can impact the site's ability to deliver safe food, shall be documented by senior management outlining the methods and responsibility the site shall implement to cope with such a business crisis. The crisis management plan shall include at a minimum:

i. A senior manager responsible for decision making, oversight, and initiating actions arising from a crisis management incident;
ii. The nomination and training of a crisis management team;
iii. The controls implemented to ensure a response does not compromise product safety;
iv. The measures to isolate and identify product affected by a response to a crisis;
v. The measures taken to verify the acceptability of food product prior to release;
vi. The preparation and maintenance of a current crisis alert contact list, including supply chain customers;
vii. Sources of legal and expert advice; and
viii. The responsibility for internal communications and communicating with authorities, external organizations, and media.

CRISIS MANAGEMENT FOR SMETA COMPLIANCE

Element 2.6.4.1.1

In addition, the site shall maintain an integrated crisis and emergency response plan that includes:

i. Food safety emergencies and product recalls
ii. Workplace accidents and medical emergencies
iii. Natural disasters and business interruption
iv. Fire safety and evacuation procedures
v. Chemical spills and environmental incidents
vi. Clear responsibilities and communication protocols
vii. Regular testing and updating of emergency procedures

What, How and Proof We Do It:

See below.

Element 2.6.4.2

The crisis management plan shall be reviewed, tested, and verified at least annually with gaps and appropriate corrective actions documented. Records of reviews of the crisis management plan shall be maintained.

What We Do:

The site has a Crisis Management plan in place to respond to any incident that impedes our ability to provide safe food to our customers. It outlines our efforts to continue to

supply products to regulatory and customer standards and includes steps to notify our customers if this ability is interrupted by natural or unforeseen disasters or activities.

How We Do It:

In the event a crisis compromises our ability to store safe products, the SSM, will activate the Crisis Management plan. It is routinely updated to keep the printed database current.

Proof We Do It:

The Original Crisis Management Plan Binder resides in the Practitioner's office. Copies of the Plan are also assigned to the SSM and Warehouse Manager.

SECTION 2.7 FOOD DEFENSE AND FOOD FRAUD

CLAUSE 2.7.1 FOOD DEFENSE PLAN (MANDATORY)

Element 2.7.1.1

A food defense threat assessment shall be conducted to identify potential threats that can be caused by a deliberate act of sabotage or terrorist-like incident.

What We Do:

The site conducts a food defense threat assessment to identify potential threats that can be caused by a deliberate act of sabotage or terrorist-like incident.

Our Food Defense Plan, which is prepared by the SQF Practitioner, identifies all sensitive operational points, methods to control access to our site and products (received, stored, and in order fulfillment, or transition), including the materials and chemicals that may come into contact with our products for sale. The actions required to provide successful food defense are incorporated into the daily operations by department, including all SOPs. Our plan (Bioterrorism Act of 2002-compliant) is reviewed annually and at any time an incident triggers an NCR.

How We Do It:

We have a detailed checklist that we conduct annually in efforts to identify potential threats from sabotage or terrorist-like incident as part of our food defense.

We conduct an annual Vulnerability Assessment using the checklist found in our Food Defense procedure. The team consists of our SSM, SQF Practitioner, Accounts R/P and Warehouse Manager. The SSM, responsible for food Defense, assigns the task to a team member, who performs the check to determine if the Defense program is effective. The review is to assure that:

1. No unauthorized individuals have access to our S&D secure designated access points.
2. That we securely store products, packaging, equipment, and hazardous chemicals.
3. That our products are under secure storage and transportation conditions; and
4. Our visitor access policy is maintained, and only authorized employees access the site.

An unsatisfactory check initiates an NCR, and action is undertaken to rectify the situation to bring the condition to compliance. The Key individual and contact number are **Travis Sharum at (479) 756-6338.** The Regulatory agencies requiring response (on demand) are the FDA & USDA.

Proof We Do It:

See the food defense assessment. The process provides All receiving and shipping documentation is maintained in-house, electronically, and hard copy file to confirm efforts to prevent food adulteration. Our continual registration with the FDA permits us to ship food product into the United States. Records are in the Practitioner's office and this binder. All receiving and shipping documentation is maintained in-house, electronically, and hard copy file to confirm efforts to prevent food adulteration.

Element 2.7.1.2

A food defense plan shall be documented, implemented, and maintained based on the threat assessment (refer to 2.7.1.1). The food defense plan shall meet legislative requirements as applicable and shall include at a minimum:
i. The methods, responsibility, and criteria for preventing food adulteration caused by a deliberate act of sabotage or terrorist-like incident; ii. The name of the senior site management person responsible for the food defense plan; iii. The methods implemented to ensure only authorized personnel have access to equipment and vehicles and storage areas through designated access points; iv. The methods implemented to protect sensitive operational points from intentional adulteration; v. The measures taken to ensure the secure receipt and storage of products, packaging, equipment, and hazardous chemicals to protect them from deliberate act of sabotage or terrorist-like incidents; vi. The measures implemented to ensure products, packaging (including labels), work-in progress, and process inputs are held under secure storage and transportation conditions; and vii. The methods implemented to record and control access to the premises by employees, contractors, and visitors.

What We Do:

All employees receiving and handling products is trained (Food Defense Procedures) to inspect products to ensure the site actively prevents the possibility of food adulteration due to a deliberate act of sabotage or terrorist-like incident.

How We Do It:

Our Food Defense Plan identifies all sensitive operational points, methods to control access to our site and products, including the materials and chemicals that may come into contact with our products for sale. The actions required to provide successful food defense are incorporated into the daily operations by department, including all SOPs. Our plan (Bioterrorism Act of 2002-compliant) is reviewed annually and at any time an incident triggers an NCR.

Proof We Do It:

See Food Defense Plan and Assessments

Element 2.7.1.3

Instruction shall be provided to all relevant staff on the effective implementation of the food defense plan (refer to 2.9.2.1).

What We Do:

Instruction shall be provided to all relevant staff on the effective implementation of the food defense plan (refer to 2.9.2.1).

How We Do It:

Instructions are incorporated into the SOP for Warehouse receiving, storing, and distribution.

Proof We Do It:

See Receiving, storing, and distribution procedures.

Element 2.7.1.4

The food defense threat assessment and prevention plan shall be reviewed and tested at least annually or when the threat level, as defined in the threat assessment, changes. Records of reviews and tests of the food defense plan shall be maintained.

What We Do:

The Practitioner annually reviews the Food Defense, selecting employees at random to assess the retention of disseminated Food Defense procedures. Aspects of food defense are incorporated into many PRPs and SOPs.

How We Do It:

Validation of the effectiveness of our Food Defense program and overall Site Security is conducted during our Internal Audits and subsequently by our Third-Party Audit Company.

The Food Team reviews the monthly food safety committee reports as well as incidents related to the review issues. A final report is submitted to the scheduled management review meeting coinciding with this annual requirement. The minutes of the meeting, the attached report along with NCRs and corrective actions, and records are maintained by the SQF Practitioner.

Proof We Do It:

Copies of Internal Audits and the Food Defense plan and its testing are retained in the SQF Practitioner's file under the same heading as this section.

CLAUSE 2.7.2 FOOD FRAUD (MANDATORY)

Element 2.7.2.1

The methods, responsibility, and criteria for identifying the site's vulnerability to food fraud including susceptibility to product substitution, mislabeling, dilution, or counterfeiting shall be documented, implemented, and maintained.

Element 2.7.2.2

A food fraud mitigation plan shall be developed and implemented that specifies the methods by which the identified food fraud vulnerabilities shall be controlled.

Element 2.7.2.3

The food fraud vulnerability assessment and mitigation plan shall be reviewed and verified at least annually with gaps and corrective actions documented. Records of reviews shall be maintained.

Element 2.7.2.4

Records of reviews of the food fraud vulnerability assessment and mitigation plan shall be maintained.

What We Do:

2.7.2.1 -2.7.2.4 The methods, responsibility, and criteria for identifying the site's vulnerability to food fraud are documented, implemented, and maintained in our Food Fraud Mitigation Plan. The food fraud and vulnerability assessment includes the site's susceptibility to product substitution, mislabeling, dilution, counterfeiting or stolen goods which may adversely impact food safety. Our food fraud mitigation plan specifies the methods by which the vulnerabilities would be controlled should our site carry such products. The food fraud vulnerability assessment and mitigation plan are reviewed and verified annually.

How We Do It:

We conduct our Food Vulnerability Testing procedure annually. The Safety team collectively assesses the site's vulnerability. Food fraud prevention is incorporated into the Warehouse SOPs. The SSM is responsible for Food Fraud and checks to determine effectiveness of the Fraud Mitigation Program. The review is to measure and address the site's susceptibility to food fraud instances which may adversely impact food safety. The person(s) assigned a mitigation task are trained by one of Safety Team members.

In the case of an unsatisfactory check an NCR is initiated, and Corrective Action is undertaken to rectify the situation to bring the condition to compliance. A final report is submitted along with this annual requirement. The minutes are maintained by the SQF Practitioner.

Proof We Do It:

Records of reviews of the food fraud vulnerability assessment and mitigation plan are maintained in the SQF Practitioner's Food Safety File. The Fraud Mitigation plan is maintained in receiving records. Reports of breaches are maintained by the Practitioner. Records are in the Practitioner's office. All records are stored electronically to confirm efforts to prevent food fraud.

SECTION 2.8 ALLERGEN MANAGEMENT

CLAUSE 2.8.1 ALLERGEN MANAGEMENT (MANDATORY)

Element 2.8.1.1

The responsibility and methods used to control allergens and to prevent sources of allergens from contaminating product shall be documented and implemented. The allergen management controls shall be based on a risk assessment and include the identification, labeling, and handling of allergen- containing product, including product recoup, to prevent inadvertent cross contact.

What We Do:

Although we do not handle any raw materials on the allergens list, we store and distribute products on the known allergens list- bulk bagged coconuts and bulk pre-bagged peanuts in the shell. Coconuts are whole with shell completely intact. They are sold individually and by the case. Peanut bags are sold as received.

How We Do It:

All known products containing allergens are isolated and stored separately from other exposed products, such as fresh produce.

For maximum food safety, we developed a listing by location of all allergens found in the facility. They are clearly marked and labelled for the allergen and proper handling and processing procedures from our Allergens Management Procedures.

We also review allergens in ingredients and processing aids, including food grade lubricants from our suppliers through an Allergen letter response. They are identified and assessed for their risk as part of our Hazards Analysis.

In the event of spillage an NCR and subsequent action is recorded, maintained, and reviewed through correction. We did not have any allergen incidents at our site in the year covered by this audit.

Proof We Do It:

See Allergen Procedures. Signage is throughout the warehouse. Any NCRs or allergen-related incidents would be documented and recorded in the Monthly Minutes.

Element 2.8.1.2
Recouped product containing food allergens (refer to 2.4.5) shall be repackaged under conditions that ensure product safety and integrity is maintained. Recouped product containing allergens shall be clearly identified and traceable.

What We Do:
If we were to recoup products containing food allergens, they would be repackaged to ensure product safety and integrity is maintained. Including clearly labelling any recouped product containing allergens.

How We Do It:
We carry roasted peanuts and coconuts in the shell. If recouping is required, it occurs in the allergen designated area.

Proof We Do It:
See Allergen Procedures.

Element 2.8.1.3
Sites that do not handle allergenic materials or store allergenic products shall document, implement, and maintain an allergen management program that addresses, at a minimum, the mitigation of introduced or unintended allergens from suppliers, contract manufacturers, site personnel, and/or visitor activities.

What We Do:
We carry allergen products and handling allergens is part of the Receiving, Storing, and Distribution procedures.

How We Do It:
We carry allergen products and handling allergens is part of the Receiving, Storing, and Distribution procedures.

Proof We Do It:
See Allergen Procedures

SECTION 2.9 TRAINING

CLAUSE 2.9.1 TRAINING REQUIREMENTS

Element 2.9.1.1

The responsibility for establishing and implementing the training needs of the organization's personnel to ensure they have the required competencies to carry out those functions affecting product legality and safety shall be defined and documented (refer to 2.1.1.6).

Element 2.9.1.2

Appropriate training shall be provided for personnel carrying out the tasks essential to the effective implementation of the SQF System and the maintenance of food safety and regulatory requirements.

What We Do:

2.9.1.1 – 2.9.1.2: The responsibility for establishing and implementing the training needs of company's personnel to ensure they have the required competencies to carry out those functions affecting products, legality, and safety is defined and documented.

Appropriate training is provided for personnel carrying out the tasks essential to the effective implementation of the SQF System and the maintenance of food safety and regulatory requirements.

How We Do It:

The practitioner developed and implemented the site training, including overall training for all employees on Personnel Hygiene and GSDP, as well as specific training by job title and description of duties. Employees are routinely observed to ensure they display the competency to carry out those functions affecting products, legality, and safety, including effectively implementing our SQF CODE Level 2 system, Module 12, and the maintenance of food safety.

In compliance with SQF Manual, we developed and maintained an appropriate food safety training program. Site-wide food safety training covers all operations and critical tasks, effectively implementing our SQF CODE Level 2 system, including Module 12, and the maintenance of food safety.

Proof We Do It:

Our training is now online. We maintain a company intranet and a matrix of OTJ and additional certified training. Copy of our Training Matrix, along with Job Description with related safe food duties and expectations, which is used to determine the Training program for each employee, is at the end of this section.

CLAUSE 2.9.2 TRAINING PROGRAM (MANDATORY)

Element 2.9.2.1

A training program shall be documented and implemented that, at a minimum, outlines the necessary competencies for specific duties and the training methods to be applied for personnel carrying out tasks associated with:

i. Developing and maintaining food safety plans to meet regulatory requirements and the SQF Code;
ii. Monitoring and corrective action procedures for all staff engaged in monitoring critical control points (CCPs); iii. Personal hygiene for all staff involved in handling of food products and food contact surfaces;
iv. Good Storage and Distribution Practices and work instructions for all staff engaged in food handling, food storage and transport, and associated equipment; v. Allergen management, food defense, and food fraud for all relevant staff; and vi. Tasks identified as critical to meeting effective implementation and maintenance of the SQF Code.

The training program shall include provision for identifying and implementing the refresher training needs of the organization.

What We Do:

Our online Training Program (Procedure 2.9.1) is implemented, and continual adherence is mandatory. The procedure and other documents and the training required are included in the various procedures for our processes for those staff carrying out the tasks associated with sub-elements i-vi.

Instructions are available explaining how all tasks critical to meeting regulatory compliance, the maintenance of food safety, and process efficiency are to be performed.

HACCP training is provided for staff involved in developing and maintaining food safety plans. The training program includes provision for identifying and implementing the refresher training needs of the organization/site personnel.

How We Do It:

Supervisors of new employees oversee the training. The SSM randomly selects employees for shadowing to evaluate compliance with safe food guidelines.

The online program translates into the language of the browser, creating a universal program. Certified programs are purchased in English and Spanish.

The SQF Practitioner has completed the necessary HACCP training and all staff working on the HACCP team have completed training or received training from the Practitioner. The Practitioner provides employees with HACCP training in the development, preparation, implementation, and maintenance of our Food Safety Plan/s.

Additionally, warehouse employees receive formal, on-the-job training from supervisors for their specific area of service. Our Training program provides refresher training as needed, including regulatory training periods and changes to regulation. Further, should any discrepancies arise from

internal audit or use of the NCR program, the involved employee will receive refresher training, regardless of fault.

Proof We Do It:
Copies of the training are available in the Practitioner's file. Work Instructions are available for all employees to review as needed in the Practitioner's office and throughout the warehouse. Training certificates and Records are on file. Any Refresher Training is documented in the Practitioner's file under the same name as this element.

Element 2.9.2.2
Training materials, the delivery of training, and procedures on all tasks critical to meeting regulatory compliance and the maintenance of food safety shall be provided in languages understood by staff.

What We Do:
Training materials and the delivery of training is provided in language understood by staff.

How We Do It:
The master training log is in English. Online training and signage are in both English and Spanish, the two primary languages spoken by employees and customers. For materials requiring translation to another language, HR will facilitate translating the necessary training materials as the demand arises. Otherwise, the translation would be conducted using a translator so that those affected by it fully understand the instructions and training.

Proof We Do It:
Postings are visible throughout the site and training results are filed at the end of this binder.

Element 2.9.2.3

Training records shall be maintained and include:

i. Participant name;
ii. Skills description;
iii. Description of the training provided;
iv. Date training completed;
v. Trainer or training provider; and
vi. Verification that the trainee is competent to complete the required tasks.

What We Do:

A training skill register describing who is trained in relevant skills is maintained.

How We Do It:

Our training program includes a participant log with name, skill, and training description, along with date completed. The training materials include:

1) The procedure or policy materials, 2) Specific instructions for online training and data access, 3) Written recipes formula etc. and 4) Sample forms that require completion by the employee in the job function.

Job descriptions include skills requirements, including but not limited to physical requirements, education (where applicable), licenses, etc.

Routine supervisory observation provides verification of employee competency and as part of our Continuous Improvement Program.

Proof We Do It:

A copy of the Training Skills Register is maintained in this binder.