

Supplier Assurance Audit - Distribution

Company Information	Audit Information
Facility: C0052656 - Keele Warehousing & Logistics Address: 90 Summerlea Road Brampton, Ontario Canada, L6T 4X3 Contact: James Appelbe Title: President Phone: 416-937-8006 Fax: Email: james@keelewarehousing.com	Audit# - Visit#: 4095003 - 3401929 Audit Type: SADCPR - Supplier Assurance Audit - Distribution Template Version: 1.4 Audit Category: REGULAR Auditor: Babajide Ogunjimi Audit Start Time: 01-MAY-2025 07:55:00 AM Audit End Time: 01-MAY-2025 04:55:00 PM Prior Audit Date: 29-APR-24

Explanation of Section Scorings (below)

Section scorings in the below table are provided as a reference and are calculated on the following formula:

Non-Conformance	Deduction of 5% per finding
Major Non-Conformance	Deduction of 25% per finding
Critical	0%

Summary By Section				
Section Name	Non-Conformance	Major Non-Conformance	Critical	Score
Section A - Administration and Regulatory Compliance	1	0	0	95.00%
Section B - HACCP/Food Safety Plan	1	0	0	95.00%
Section C - Facilities and Equipment	0	0	0	100.00%
Section D - Cleaning, Sanitation, Housekeeping, Hygiene	0	0	0	100.00%
Section E - Rodent and Pest Control Management	0	0	0	100.00%
Section F - Approved Suppliers, Receiving and Inventory Control	0	0	0	100.00%
Section G - Training Requirements	0	0	0	100.00%
Section H - Food/Product Defense	0	0	0	100.00%

Explanation of Overall Audit Result (below)

The overall score result is based on the total number and level of non-conformances. The audit is allocated 100% and deductions made as follows:

- Non-Conformance = 1% deduction per finding off the total score
- Major Non-conformance = 10% deduction per finding off the total score
- Critical Non-conformance = 25% deduction per finding off the total score

Scoring Guide	
Final Audit Rating	Based on Score
Meets Expectations	100-95%
Needs Improvement	94.99-85%
Significant Improvement Needed	84.99-76%
Fail	≤ 75.99%

Overall Audit Result	
Grade Rule Result	% Score
Meets Expectations	98.00%

Present at Audit					
Name	Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
James Appelbe	President	Yes	Yes	Yes	Yes
Dillon Appelbe	Floor Manager.	No	Yes	No	Yes
Maricel Ballore-Estrella	Office Manager	No	No	No	Yes

GENERAL INFORMATION	
No	Question/Notes
1.1	<p>Facility and Operations Description.</p> <p>Auditor's Notes: This privately owned is located in Brampton, ON. This is a Good Distribution Practices Audit (SA 26 – Food Storage and Distribution).</p> <p>The facility covers a warehouse of 100,000 square feet, a receiving/shipping dock area, support facilities, etc.</p> <p>The site operates one shift with a staff strength of 30 employees, five days a week.</p> <p>The facility documented one HACCP plan and no CCP.</p> <p>The facility engages in ambient storage and distribution of assorted food items.</p>
1.2	<p>Regulatory Inspection Type and Establishment #:</p> <p>The facility operation revolves around storage and distribution of assorted food items under ambient conditions. No regulatory inspections are carried out at this time</p>
1.3	<p>Products warehoused/produced at this facility.</p> <p>Wide range of shelf stable food products (canned fruits and vegetables, rice, flour, etc)</p>
1.4	<p>The following departments and individuals participated in the audit process:</p> <p>James Appelbe, President; Maricel Ballore-Estrella, Office Manager; Dillon Appelbe, Floor Manager.</p>
1.5	<p>Notes from Auditor</p> <p>The facility was observed to be well maintained.</p>

Non-Compliance Summary		
No	Question/Notes	Result
Section A/ A.3.3	<p>Traceability Exercises shall be conducted at a minimum of twice annually.</p> <p><i>RDuring the audit, records of mock recall exercises conducted for Item numbers VTOM—PA 230 and WW2150 on February 21, 2025, and July 8, 2024, respectively, were reviewed The exercises were conducted within the prescribed time frame.</i></p> <p><i>NC- The mock traceability exercises conducted for Item number VTOM – PA 230 and Item number WW2150 on February 21, 2025, and July 8, 2024, respectively, were both conducted during business hours. No trace of exercise was performed outside of regular business hours.</i></p>	Non-Conformance*
Section B/B1.1	<p>A HACCP/FOOD SAFETY team shall be assembled with individuals having the appropriate product, process, and sanitation specific knowledge and expertise necessary for the development of an effective HACCP plan.</p> <p><i>The facility has identified a multi-disciplinary HACCP team. The President is the designated HACCP Coordinator.</i></p> <p><i>NC- The HACCP team leader's HACCP certification record was not available for review during the audit.</i></p>	Non-Conformance*

Section A. Administration and Regulatory Compliance		
No	Question/Notes	Result
A.1.1	There shall be a facility management organization chart indicating the reporting structure of the facility operating departments. <i>The organizational chart outlines the structure of staff having responsibility for food safety. The chart depicts reporting lines for employees responsible for implementation of quality and food safety. Employees are aware of the reporting relationship. employees. Job descriptions for Warehouse Supervisors and Operators were sampled and reviewed during the audit.</i>	Acceptable
A.1.2	There shall be implemented and documented policies and procedures that address relevant food safety, quality and security requirements for the receiving, handling, STORAGE and shipping of product. <i>The facility documented and implemented procedures covering the receiving, shipping, trailer inspection, pallet inspection, storage, and handling, etc, in the Quality System Management Manual and HACCP Plan. The procedures and other related documents are current and tailored to meet the operational requirements of the facility.</i>	Acceptable
A.1.3	There shall be management commitment and active support of the facility's food safety, quality and security systems.** <i>The site has a Quality Management System signed by the President. The Policy statement covers customer and regulatory requirements, the use of continuous improvement of the system and the review of food safety objectives. The Policy is communicated to employees by way of incorporation as one of the materials for discussion at annual refresher training sessions/new hire orientation and is in English, the language used in the site.</i>	Acceptable
A.2.1	A file of regulatory audit visits and reports shall be maintained.** <i>No regulatory inspection is done at this time.</i>	N/A
A.2.2	The facility shall have a documented process for the identification of regulations that are applicable to their specific ACTIVITIES. This process shall include identification of regulations for products in countries in which the facility's products are exported.** <i>The site keeps users updated about changes in relevant legislation, technical developments, and industry codes of practice in their specific industry through membership of International Warehouse/ Logistics Association, and by means of subscriptions to the web sites of NSF, and Health Canada.</i>	Acceptable
A.3.1	There shall be a documented, current and implemented facility specific Recall Plan.** <i>The site has a Recall Manual dated April 28, 2025, defining the methods and responsibilities for withdrawing and recalling product if necessary. Responsibilities are assigned to the management team. Contact information is reviewed and updated at minimum annually.</i>	Acceptable
A.3.2	Recall management responsibility shall be assigned. <i>A recall management team has been constituted. The President is the designated Recall Team Coordinator. All members of the team including alternates are assigned responsibilities and their 24/7 contact number and information is on file. External stakeholders' information is also listed.</i>	Acceptable
A.3.3	Traceability Exercises shall be conducted at a minimum of twice annually. <i>RDuring the audit, records of mock recall exercises conducted for Item numbers VTOM—PA 230 and WW2150 on February 21, 2025, and July 8, 2024, respectively, were reviewed The exercises were conducted within the prescribed time frame.</i> <i>NC- The mock traceability exercises conducted for Item number VTOM – PA 230 and Item number WW2150 on February 21, 2025, and July 8, 2024, respectively, were both conducted during business hours. No trace of exercise was performed outside of regular business hours.</i>	Non-Conformance*
A.3.4	A documented management assessment shall be completed after each traceability exercise to evaluate the exercise for needed improvements and any corrective actions taken. <i>Effectiveness of all mock recalls on file have been completed and no gap has been identified.</i>	Acceptable
A.3.5	Essential There shall be evidence of traceability for all FOOD, and food contact packaging materials. shipping records shall be available.** <i>Trace reports were completed on finished goods items only. No repacking is completed on site.</i>	Acceptable
A.3.6	The facility shall be able to successfully demonstrate the traceability system during the audit.** <i>A mock recall exercise was conducted during the audit for Wildroots Costal Berry 384/26 oz bag. The facility received 163 cases between January 5, 2025, and January 10, 2025. All the received product was traced to the facility's warehouse. The facility successfully achieved 100% trace of the product in 18 minutes.</i>	Acceptable
A.4.1	The facility shall have a record retention and storage policy. <i>The facility documented and implemented Control of Records. Records are retained for 6 years.</i>	Acceptable
A.4.2	Essential Records relevant to FOOD SAFETY controls or evaluation of food safety, food quality and food defense shall be properly completed.** <i>The facility documented and implemented Control of Documents. Records were found to be</i>	Acceptable

Section A. Administration and Regulatory Compliance		
No	Question/Notes	Result
	<i>legibly and clearly recorded and in inks. Records are appropriately verified and kept.</i>	
A.5.1	Crisis management policies and procedures shall be developed to address any critical situations that may occur (e.g., product recalls and business continuity interruptions, such as natural disasters, catastrophic events and other emergency situations including, but not limited to, power outage, tampering) <i>The site's documented and implemented Continuity of Operation and Crisis Response Program. The procedures have been implemented and addresses serious disaster threats to the extended interruption of the business, isolating and identifying affected product and a current crisis alert list. The Crisis Management Plan includes internal/external communications and sources of legal and expert advice. A Crisis Management Team has been identified and training documented.</i>	Acceptable
A.5.2	Management responsible for crisis management shall conduct mock crisis exercises at minimum annually. <i>Mock exercise was conducted on April 2, 2025. The scenario was outbreak of fire and smoke in the facility. This necessitated evacuation of employees and completed stoppage of production before normalcy was restored after some day.</i>	Acceptable
A.6.1	The facility shall manage customer AND/or consumer complaints.** <i>A documented complaint program is in place. Complaints are documented, investigated with root cause analysis and corrective and preventative actions are taken. The HACCP Coordinator is responsible for complaints investigation, Records of customer complaints on file were reviewed during the audit.</i>	Acceptable

Section B. HACCP/Food Safety Plan		
No	Question/Notes	Result
B1.1	A HACCP/FOOD SAFETY team shall be assembled with individuals having the appropriate product, process, and sanitation specific knowledge and expertise necessary for the development of an effective HACCP plan. <i>The facility has identified a multi-disciplinary HACCP team. The President is the designated HACCP Coordinator.</i> <i>NC- The HACCP team leader's HACCP certification record was not available for review during the audit.</i>	Non-Conformance*
B.1.2	There shall be a written HACCP/FOOD SAFETY plan. The HACCP/FOOD SAFETY team shall participate in HACCP/FOOD SAFETY plan development and maintenance. <i>A Food Safety Plan has been developed, implemented, and maintained by the site. The Food Safety Plan has been prepared in accordance with the 12 steps identified in the Codex Alimentarius Commission HACCP guidelines. The plan includes a list of all products in the scope of the certification, product requirements, intended product use and flow diagrams for each process including all input and output steps in the process. The last reviewed was conducted on April 28, 2025.</i>	Acceptable
B.1.3	The HACCP Team shall construct a clear and easy to understand process flow diagram for each HACCP plan. <i>The flow diagram was updated on April 28, 2025.</i>	Acceptable
B.1.4	The Process Flow shall include PREVENTIVE CONTROLS AND CCPs IF APPROPRIATE, shall be current and shall be verified. <i>There are no CCPs on the HACCP Plan.</i>	N/A
B.2.1	The HACCP team shall prepare a list of all of the hazards (chemical, physical, biological, radiological or other) for each type of product or product line that may be reasonably expected to occur at each step, from RECEIPT, storage, HANDLING and distribution until the point of consumption. Evaluation shall include all foods, food contact packaging materials, equipment and handling steps.** <i>The risk assessment of all processes handled are completed with severity and likelihood and in include associated chemical, biological, and physical hazards. The risk assessment includes the prerequisite procedures, monitoring, and associated records.</i>	Acceptable
B.3.1	The HACCP team shall determine the Critical Control Points.** <i>There are no CCPs on the HACCP Plan.</i>	N/A
B.4.1	Critical limits shall be specified and validated for each CCP.** <i>There are no CCPs on the HACCP Plan.</i>	N/A
B.5.1	CCPs shall be monitored. <i>There are no CCPs on the HACCP Plan.</i>	N/A
B.5.2	CCP monitoring records shall be maintained. <i>There are no CCPs on the HACCP Plan.</i>	N/A
B.6.1	Essential Specific corrective actions to deal with deviations from established Critical Limits shall be in place for each CCP.**	Acceptable

Section B. HACCP/Food Safety Plan		
No	Question/Notes	Result
	<i>Deviation procedure is documented in the HACCP plan and employees are trained.</i>	
B.7.1	There shall be written verification activities that confirm that the plan is being implemented as intended. <i>Verification procedure is documented and completed by the team. Annual reviews were completed on April 28, 2025.</i>	Acceptable
B.7.2	There shall be documented validation of the effectiveness of the HACCP program. <i>The HACCP plan has been developed and reviewed by the team dated April 28, 2025.</i>	Acceptable
B.8.1	There shall be documentation and record keeping that is appropriate to the nature and size of the operation. <i>The HACCP plan has been completed and appropriate documentation and records have been developed which is suitable for the operation.</i>	Acceptable

Section C. Facilities and Equipment		
No	Question/Notes	Result
C.1.1	Essential The facility shall demonstrate that the water, ice and steam supply is potable and that potability is maintained at all times. Potability criteria for microbiological, chemical and physical parameters shall be used.** <i>Potable water is supplied to the facility from the Region of Peel. The record of the Water Quality Report Peel Region dated March 25, 2025, was reviewed during the audit.</i>	Acceptable
C2.1	The exterior of the Facility is constructed and maintained to facilitate the HOLDING of wholesome product and that it at minimum meets the customer and regulatory food safety and quality requirements** <i>Building grounds, lawns and walkways are well maintained. All were observed to be in good condition. Truck yard and parking areas are adequately maintained. The exterior of the facility was adequately maintained. No concern was noted.</i>	Acceptable
C.2.2	Essential Facility construction and layout shall be such that product is adequately STORED, separated and protected from any operations that could cause contamination.** <i>Process flow was observed to be logical, with a continuous flow and designed to prevent cross contamination. It was observed during audit tours that the flow of employees is such that any cross contamination is minimal.</i>	Acceptable
C.3.1	Facilities shall be designed and maintained in a suitable condition so as not to impede the ability to thoroughly clean all surfaces, provide pest harborage, or present opportunities for foreign material contamination.** <i>The construction of the facility and equipment installation are designed to allow for appropriate cleaning and sanitation as well as pest control.</i>	Acceptable
C.4.1	Employee facilities shall be adequate in size, readily accessible, separate from food holding areas, and properly maintained. <i>Washrooms were observed to be properly supplied and maintained in clean condition. Hand wash signs are posted as required. Lunchroom was observed to be properly separated from the storage area, well lit, properly ventilated and was appropriately sized for the number of facility employees.</i>	Acceptable
C.5.1	Hand wash requirement signs, in appropriate languages and/or graphics, shall be clearly posted at required locations and contain instructions as provided below. <i>Hand washing signs were observed to be posted at strategic locations in the facility.</i>	Acceptable
C.5.2	Hand washing stations shall be adequate in location, suitably designed, operational and properly stocked.** <i>Hand washing stations are located in all the washrooms. Hand wash sinks are made of non-corrosive materials and supplied with tempered potable water. Soap in a fixed dispenser, paper towels and waste containers are available. The facility is a third-party Storage and no further hand wash requirements, and Distribution concerns were noted.</i>	Acceptable
C.6.1	Essential ALL equipment shall meet sanitary design requirements and be maintained in such a manner as to permit proper operation and access for cleaning and inspection.** <i>The facility has forklifts were observed to be in a state of good repair during the audit. No other equipment/utensils are used at the site. A maintenance program is documented, and records are maintained.</i>	Acceptable
C.7.1	Utensils, tools and containers are clearly identified and maintained in suitable condition. <i>No repacking of produce or any product is conducted.</i>	Acceptable
C.8.1	FACILITY lighting shall be suitable. <i>Lighting was of the appropriate intensity for employees to carry out their tasks efficiently. All lighting is shatter-proof.</i>	Acceptable
C.9.1	Maintenance program and standards shall be in place. <i>Keele Maintenance and Development: Equipment Check and Preventative Program is documented and covers the building and equipment repairs. The site has contracted out the repairs for all refrigeration equipment, dock doors, trucks, building etc. Records are on file and was reviewed for</i>	Acceptable

Section C. Facilities and Equipment		
No	Question/Notes	Result
	<i>the maintenance of forklifts completed on April 28, 2025, and November 11, 2024.</i>	
C.9.2	Essential Equipment or control devices that impact on food safety and/or product compliance to quality and regulatory requirements are effectively calibrated.** <i>This is an ambient storage and distribution facility. No equipment requires calibration. NA</i>	N/A
C.10.1	Wood, where used, shall be controlled and inspected. <i>Wood pallets were clean and in good condition during the audit assessment. Records of monthly inspection on file were reviewed.</i>	Acceptable
C.11.1	There shall be a program to manage glass and brittle plastic. <i>The facility documented Hazards Control and Incidents Management Programs. Record of inspection dated April 23, 2025, was reviewed during the audit.</i>	Acceptable

Section D. Cleaning, Sanitation, Housekeeping, Hygiene		
No	Question/Notes	Result
D.1.1	There shall be a master cleaning and/or sanitation schedule and monitoring and recording of cleaning.** <i>The facility documented Cleaning and Sanitation Program. The facility implements daily, weekly, monthly, semi-annual and annual schedule. Records of completed sanitation tasks from December 2024 to April 2025, were reviewed during the audit.</i>	Acceptable
D.1.2	There shall be standardized cleaning procedures (e.g., Standard Sanitation Operating Procedures or SSOPs).** <i>Basic cleaning is completed and documented for the main floor office areas, washrooms, Lunchroom, Change-rooms etc.</i>	Acceptable
D.1.3	There shall be a documented pre-operational inspection. <i>No processing / manufacturing /repackaging is done at the facility. There is a daily check on forklifts.</i>	Acceptable
D.1.4	Operational Housekeeping shall be effective. <i>All areas of the facility were observed to be clean and well maintained.</i>	Acceptable
D.2.1	The facility has a documented program for GDP and Personal Hygiene practices to which compliance is monitored and recorded. <i>The facility documented and implemented Good Distribution Practices Procedure in the document titled Keele Maintenance and Development Employe Facilities. Monitoring records are available on file.</i>	Acceptable
D.3.1	GDP Self Inspections shall be completed. <i>Good Distribution Inspection is conducted monthly. Records of inspection conducted on April 23, 2025, was sampled, and reviewed during the audit.</i>	Acceptable
D.4.1	ALL chemicals (including, but not limited to, those used for sanitation, maintenance, and pest control) shall be approved for use, securely stored, clearly identified and used only by trained persons. <i>Chemicals are appropriately controlled by securing in a room accessed by the cleaning contractor. No deviation was noted during the audit.</i>	Acceptable

Section E. Rodent and Pest Control Management		
No	Question/Notes	Result
E.1.1	There shall be a documented and specific pest control program. <i>A Pest Contractor, Abell Pest Control, has been contracted for pest prevention and an updated scope of service that defines the methods of pest prevention, the frequency of interior and exterior inspections and targeted pests. The frequency of inspection is weekly. Current site map dated January 1, 2025, shows accurate locations of 20 external, 37 internal, 8 ILT and 12 Pheromone devices. A pesticide application log gives details and dates of all chemical usage. The PCO license with expiry date December 31, 2025, from local authorities are current and indicate employees are trained and competent. Furthermore, the PCO insurance will expire on July 1, 2025. A list of chemicals used by the Pest Contractor is available in electronic format and can also be found in pest control binder and includes SDS information. Inspection activity reports are signed by a management representative after visits, were reviewed and found to be completed as scheduled. Any observations or issues noted by the Pest Contractor are addressed and documented by the site.</i>	Acceptable
E.1.2	Outside Premises Management shall minimize opportunity for pests. <i>No pest activity was noted at the exterior location. There are no storage of items that may harbor pest. The surrounding of the building appears appropriately managed.</i>	Acceptable
E.1.3	Essential There shall be no evidence of infestation.** <i>No evidence of pest activity was noted during the audit.</i>	Acceptable
E.1.4	Pest Control Devices shall be properly managed.	Acceptable

Section E. Rodent and Pest Control Management		
No	Question/Notes	Result
	<i>All the devices were observed to be properly places and managed.</i>	
E.1.5	Doors and windows shall be tight fitting and closed with openings sealed to prevent pest entry into the building. <i>All he doors and windows leading the exterior of the facility were observed to be sealed.</i>	Acceptable
E.1.6	Pest control reports shall be maintained. <i>Records of pest control inspections conducted on January 7, 2025, March 19, 2025, and April 1, 2025, were sampled, reviewed during the audit.</i>	Acceptable

Section F. Approved Suppliers, Receiving and Inventory Control		
No	Question/Notes	Result
F.1.1	There shall be a documented approved supplier program. The program shall be based on risk assessment of the suppliers.** <i>No supplies are bought other than hand soap for hand wash stations with SDS in place.</i>	N/A
F.1.2	Suppliers shall be required to provide relevant documentation to support their status as an approved supplier.** <i>No supplies are bought other than hand soap for hand wash stations with SDS in place.</i>	N/A
F.2.1	There shall be a written procedure for the inspection of delivery vehicles. This shall apply to receiving and shipping. Procedures shall define when carriers are to be rejected.** <i>Procedure for receiving is documented and implemented. Incoming and outbound records of vehicle inspection are documented and were reviewed during the audit.</i>	Acceptable
F.2.2	There shall be a written procedure for the inspection and receipt of incoming materials.** <i>The receiving procedures stipulates that all products are to be inspected upon arrival. Any damage/ nonconforming products are documented, identified and stored separately. Records on file were reviewed during the audit.</i>	Acceptable
F.3.1	Products shall be secure and protected in storage.** <i>All is products were observed to be properly stored.</i>	Acceptable
F.3.2	Storage temperatures shall be controlled and monitored.** <i>Products are stored under ambient conditions.</i>	N/A
F.3.3	Inventory control shall be in place. <i>The utilizes an electronic software, ExCalibur, an inventory management system to manage its inventory.</i>	Acceptable
F.4.1	Essential All restricted or sensitive ingredients and potentially toxic chemicals shall be maintained under strict control and stored separately from food and food contact packaging to minimize the potential for accidental product contamination.** <i>Sensitive ingredients are stored separately and maintained appropriately.</i>	Acceptable
F.5.1	There shall be policies and practices for the control of Retained and Returned Products. <i>Return procedures is appropriately documented. Returned products are documented, stored, shipped or disposed of as per customer written request.</i>	Acceptable

Section G. Training Requirements		
No	Question/Notes	Result
G.1.1	New employee and temporary employees shall be trained in appropriate policies and procedures.** <i>The facility documented Training and Human Resource Development. Training is provided for employees at hire and at yearly refresher or when deviation is found. Food safety, allergens and other training are required to be provided for all employees. Training records dated April 2, 2025, and April 29, 2025, were sampled and reviewed during the audit.</i>	Acceptable
G.1.2	Training shall be conducted in the appropriate language(s). <i>Training materials is written, and the training is conducted in English.</i>	Acceptable
G.1.3	Refresher Training shall be conducted. <i>Training records dated April 2, 2025, and April 2 9, 2025, were sampled and reviewed during the audit.</i>	Acceptable
G.1.4	There shall be a method of assessment to determine proof of learning following training. <i>Extend of learning transfer is measured through administration of end of training quizzes, coaching and observation of work procedures.</i>	Acceptable
G.1.5	Training Records shall be maintained. <i>Records of training administered to employees were reviewed during the audit.</i>	Acceptable

Section H. Food/Product Defense		
No	Question/Notes	Result
H.1.1	<p>There shall be a written program which describes assigned responsibility for food/PRODUCT security and how it is maintained.</p> <p><i>The facility documented and implemented in HACCP and Food Defense Manual dated April 28, 2025, and Food Defense Program. The procedure outlines the systems in place to protect the integrity of the facility and products.</i></p>	Acceptable
H.1.2	<p>Each facility shall conduct and document a food/PRODUCT defense risk evaluation to eliminate or significantly reduce the risk of external and internal intentional adulteration of food/PRODUCT (including food fraud).</p> <p><i>Food defense plan is on file with consideration for all physical activities in the interior and exterior of the building. The management has installed closed circuit cameras in the interior and exterior and all exterior doors are appropriately controlled.</i></p>	Acceptable
H.1.3	<p>A comprehensive food/product defense plan shall be implemented to manage the risks identified in the evaluation.</p> <p><i>Procedure to prevent access to documents and software information associated with ingredients or finished products are documented and implemented Finished and raw product have tamper evident packaging. Closed circuit cameras are installed in strategic places.</i></p>	Acceptable
H.1.4	<p>Employees shall be screened, trained in food/PRODUCT defense awareness and access to the facility shall be controlled.</p> <p><i>Reference check procedures are completed within the Employment Standards Act in Canada and in respect of the Canadian Labor Code where criminal background checks are not allowed. Procedures are part of the Food Defense Program. All employees have up to date food security training.</i></p>	Acceptable
H.1.5	<p>Incoming and outgoing materials shall be protected and inspected.</p> <p><i>Products are received with inspection for tampering and products are shipped with inspections completed to ensure no damaged or tampered products are shipped to customer.</i></p>	Acceptable
H.1.6	<p>Facilitys shall be registered with the appropriate regulatory authority.</p> <p><i>Registration with regulatory authority is not required for the operations.</i></p>	N/A

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