

NCIMS HACCP SYSTEM PILOT AUDIT REPORT (12/99 R1)

DATE:

TYPE OF AUDIT: () STATE REGULATORY () STATE LISTING () FDA AUDIT OF LISTING

FIRM NAME: _____ **LICENSE/PERMIT #:** _____ **IMS PLANT #:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP CODE:** _____

IMS LISTED PRODUCT (S) MANUFACTURED & REVIEWED: (Detailed Product Description(s) & Flow Diagram(s) MUST be attached).

ITEMS MARKED INDICATE DEVIATIONS/DEFICIENCIES/NON-CONFORMITIES THAT DID NOT MEET THE NCIMS HACCP PILOT PROGRAM CRITERIA DESCRIBED BELOW (See attached Audit Discussion sheet [s] for details).

Section 1
OTHER NCIMS REQUIREMENTS

Raw milk supply from NCIMS listed source(s).

Labeling compliance as required.

Prevention of adulteration of milk products.

Drug residue control program implemented.

Drug residue control program records complete.

Other items as noted.

Section 4
HAZARD ANALYSIS

Hazard analyses conducted and written for each kind or group of milk or milk product processed.

Written hazard analysis identifies all potential food safety hazards and further determines those that are reasonably likely to occur (including hazards within and outside the processing plant environment).

Hazard analysis reassessed after changes in raw materials, formulations, processing methods/systems, distribution, intended use or consumers.

Personnel adequately trained to administer the firm's hazard analysis.

Written hazard analysis signed and dated as required.

Firm's hazard analysis issue date _____.

Section 2
HACCP SYSTEM PREREQUISITE PROGRAMS

Written prerequisite program prepared by firm as required or justified by the hazard analysis.

Prerequisite program adequately implemented by firm.

Prerequisite program audited/validated by firm.

Prerequisite program maintained by firm.

Written prerequisite program signed and dated as required.

Firm's prerequisite program(s) issue date(s) _____.

Section 5
HACCP PLAN

Written HACCP plan prepared for each kind or group of milk or milk products.

Written HACCP plan implemented.

Written HACCP plan identifies all food safety hazards that are reasonably likely to occur.

Personnel adequately trained to administer the firm's HACCP Plan.

HACCP plan signed and dated as required.

Firm's HACCP plan issue date _____.

Section 3
HACCP SYSTEM SANITATION STANDARD OPERATING PROCEDURES (SSOPs)

Written Sanitation Standard Operating Program (SSOPs) as required.

Sanitation conditions and practices monitored as required including:

- Safety of water used for food or food contact surfaces (including steam and ice).
- Food contact surface cleanliness (including gloves, outer garments, utensils, etc.).
- Cross contamination of products, packaging and contact surfaces by insanitary objects and or practices (e.g. pasteurizer pressure differential).
- Protection from contamination of food, packaging and contact surfaces from adulteration, including: lubricant, fuel, pesticides, cleaners, sanitizers, condensate and other foreign material.
- Control of employee health conditions that could result in the microbiological contamination of food, packaging or contact surfaces.
- Pest exclusion from plant.

Sanitation control records for the above elements of sanitation available.

Sanitation monitoring records adequately reflect sanitation conditions observed.

Sanitation monitoring performed at a frequency to ensure conformance with the written SSOPs.

Corrective action performed in a timely manner when sanitation monitoring records reflect sanitation deficiencies.

Employees trained in sanitation operations.

Section 6
CRITICAL CONTROL POINTS (CCP)

HACCP plan lists Critical Control Point(s) for each food safety hazard identified as reasonably likely to occur.

Critical Control Point(s) identified in the HACCP plan are adequate control measures for the food safety hazard(s) identified.

Control measures associated with critical control point(s) listed in the HACCP plan are appropriate at the processing step identified.

Section 7
CRITICAL LIMITS (CL)

HACCP plan lists critical limits for each critical control point(s).

Critical limits defined in the HACCP plan are adequate to control the hazard identified.

Critical limits defined in the HACCP plan are achievable with existing monitoring instruments or procedures.

Critical limits are met.

See attached "Audit Discussion Sheet" for explanation of deviations/deficiencies/non-conformities.

NCIMS HACCP PILOT PROGRAM CRITERIA (continued)

ITEMS MARKED INDICATE DEVIATIONS/DEFICIENCIES/NON-CONFORMITIES THAT DID NOT MEET THE NCIMS HACCP PILOT PROGRAM CRITERIA DESCRIBED BELOW (See attached Audit Discussion sheet [s] for details).

<p align="center">Section 8 MONITORING</p> <p><input type="checkbox"/> HACCP plan defines monitoring procedures for each critical control point.</p> <p><input type="checkbox"/> HACCP plan defines what will be monitored at each critical control point.</p> <p><input type="checkbox"/> HACCP plan defines how monitoring procedures will be performed at each critical control point.</p> <p><input type="checkbox"/> HACCP plan defines the frequency at which monitoring will be performed at each critical control point.</p> <p><input type="checkbox"/> HACCP plan defines by whom the monitoring will be performed at each critical control point.</p> <p><input type="checkbox"/> Monitoring procedures as defined in the HACCP plan followed.</p> <p><input type="checkbox"/> Monitoring procedures as defined in the HACCP plan adequately measure critical limits at each critical control point.</p> <p><input type="checkbox"/> Monitoring record data consistent with the actual value (s) observed during the audit.</p> <p><input type="checkbox"/> Employees trained in monitoring operations.</p>	<p align="center">Section 10 VERIFICATION & VALIDATION (CONTINUED)</p> <p><input type="checkbox"/> Verification records review performed by trained individual.</p> <p><input type="checkbox"/> Calibration of process monitoring instruments performed as required.</p> <p><input type="checkbox"/> Calibration of process monitoring instruments performed at the frequency defined in the HACCP plan.</p> <p><input type="checkbox"/> Critical control point monitoring records reviewed to verify and document that values are within critical limits.</p> <p><input type="checkbox"/> Monitoring record review performed as required.</p> <p><input type="checkbox"/> Corrective action record reviewed as required.</p> <p><input type="checkbox"/> Records of calibration of process control instruments and end product or in-process testing results listed as verification activities in the HACCP plan reviewed.</p> <p><input type="checkbox"/> Verification records or documents are present that validate the effectiveness of the control measure and established critical limit in controlling the identified hazard.</p>
<p align="center">Section 9 CORRECTIVE ACTION</p> <p><input type="checkbox"/> Predetermined corrective actions defined in the HACCP plan ensure product which may be injurious to health or otherwise adulterated as a result of a deviation do not enter commerce.</p> <p><input type="checkbox"/> Predetermined corrective actions defined in the HACCP plan ensure the cause of the deviation is corrected.</p> <p><input type="checkbox"/> Appropriate corrective action taken for products produced during a deviation from critical limits defined in the HACCP plan.</p> <p><input type="checkbox"/> Corrective actions defined in the HACCP plan were observed followed when deviations occurred.</p> <p><input type="checkbox"/> Affected product produced during the deviation segregated and held, AND</p> <p style="padding-left: 20px;"><input type="checkbox"/> A review to determine product acceptability performed, AND</p> <p style="padding-left: 20px;"><input type="checkbox"/> Corrective action taken to ensure that no adulterated and/or product that is injurious to health enters commerce.</p> <p><input type="checkbox"/> Cause of deviation was corrected.</p> <p><input type="checkbox"/> Reassessment of HACCP Plan performed and modified accordingly.</p> <p><input type="checkbox"/> Corrective actions documented.</p>	<p align="center">Section 11 RECORDS</p> <p><input type="checkbox"/> Required information included in the record - e.g. name/location of processor and/or date/time of activity and/or signature/initials of person performing operation and/or identity of product/product code.</p> <p><input type="checkbox"/> Processing/other information entered on record at time observed.</p> <p><input type="checkbox"/> Records retained as required - e.g. one year for refrigerated products/ two years for preserved, shelf-stable or frozen products.</p> <p><input type="checkbox"/> Records relating to adequacy of equipment or processes retained for 2 years.</p> <p><input type="checkbox"/> HACCP records available for official review and/or copying.</p> <p><input type="checkbox"/> Personnel adequately trained to administer the firm's HACCP System.</p>
<p align="center">Section 10 VERIFICATION & VALIDATION</p> <p><input type="checkbox"/> HACCP plan defines verification procedures.</p> <p><input type="checkbox"/> HACCP plan defines the frequency of verification.</p> <p><input type="checkbox"/> Reassessment of HACCP plan conducted annually, OR</p> <p style="padding-left: 20px;"><input type="checkbox"/> After changes that could affect the hazard analysis, OR</p> <p style="padding-left: 20px;"><input type="checkbox"/> After significant changes in the operation including raw materials and/or source, product formulation, processing methods/systems, distribution intended use or intended consumer.</p> <p><input type="checkbox"/> HACCP plan reassessment performed by trained individual as required.</p> <p><input type="checkbox"/> Program in place to review consumer complaints.</p> <p><input type="checkbox"/> Verification records reviewed as required – including date and signature.</p>	<p align="center">Section 12 AUDIT FOLLOW-UP ACTION</p> <p><input type="checkbox"/> Previous audit findings corrected.</p> <p><input type="checkbox"/> Previous audit findings remain corrected at time of this audit.</p> <p><input type="checkbox"/> State Enforcement Audit Reports issued and follow- up conducted as required (HACCP Listing Audits & FDA Audits only).</p> <p><input type="checkbox"/> Other items as noted.</p>
<p align="center">Section 10 VERIFICATION & VALIDATION</p> <p><input type="checkbox"/> HACCP plan defines verification procedures.</p> <p><input type="checkbox"/> HACCP plan defines the frequency of verification.</p> <p><input type="checkbox"/> Reassessment of HACCP plan conducted annually, OR</p> <p style="padding-left: 20px;"><input type="checkbox"/> After changes that could affect the hazard analysis, OR</p> <p style="padding-left: 20px;"><input type="checkbox"/> After significant changes in the operation including raw materials and/or source, product formulation, processing methods/systems, distribution intended use or intended consumer.</p> <p><input type="checkbox"/> HACCP plan reassessment performed by trained individual as required.</p> <p><input type="checkbox"/> Program in place to review consumer complaints.</p> <p><input type="checkbox"/> Verification records reviewed as required – including date and signature.</p>	<p>NAME OF AUDITOR (S) (Please Print)</p> <p>_____</p> <p>_____</p> <p>SIGNATURE(S):</p> <p>_____</p> <p>_____</p> <p>DATE: _____</p>

NCIMS HACCP SYSTEM AUDIT REPORT DISCUSSION SHEET

FIRM NAME: _____ DATE of AUDIT: _____

EXPLANATION OF DEVIATIONS/DEFICIENCIES/NON-CONFORMITIES THAT DID NOT MEET THE NCIMS HACCP PILOT PROGRAM CRITERIA.

(Use additional sheets as necessary.)

NOTE:

When State Regulatory Audits are conducted;
Corrective action timelines for all identified deviations, deficiencies and non-conformities must be established.

Auditor Name(s) and Signature(s):

Date: _____

NCIMS HACCP SYSTEM AUDIT REPORT DISCUSSION SHEET (continued)

Auditor Name(s) and Signature(s):

Date: _____