



**INDEXPO CERTIFICATION LIMITED**

**INTEGRATED MANAGEMENT SYSTEMS  
CERTIFICATION SCHEME**

**STAGE II AUDIT REPORT**

**ISO 22000:2005**

***The Surf***





**INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME  
STAGE II AUDIT REPORT – ISO 22000:2005**

1. **NAME OF ORGANIZATION** : The Surf

2. **ADDRESS** : No. 100, Hotel Road, Bentota.

3. **ASSESSMENT SITE** : Same as 2

4. **CONTACT DETAILS**

4.1 **Name** : Mr. Nimal Sangakkara **Designation** : General Manager (Operations)

4.2 **Tel** : 0342275129 **Mobile** : **Fax** : 0342275486

4.3 **E-mail** : [nimal@ceylonhotels.net](mailto:nimal@ceylonhotels.net)

4.4 **NO. OF EMPLOYEES** : Forty (40)

5. **APPLICABLE STANDARD** : ISO 22000:2005

6. **FILE NO.** : IMSC-FSMS-07

7. **SCOPE OF CERTIFICATION**: Sourcing, storing, processing and serving food and beverages for guests and employees

9. **APPLICABLE SECTOR** : hotel industry

10. **DATE OF STAGE II AUDIT** : 2012-04-26

11. **AUDIT TEAM** : Mr. S L Ginige (Team Leader)  
Ms. F Weerawardena (Team Member)  
Mr. Sapumal Kapukotuwa (Trainee Auditor)

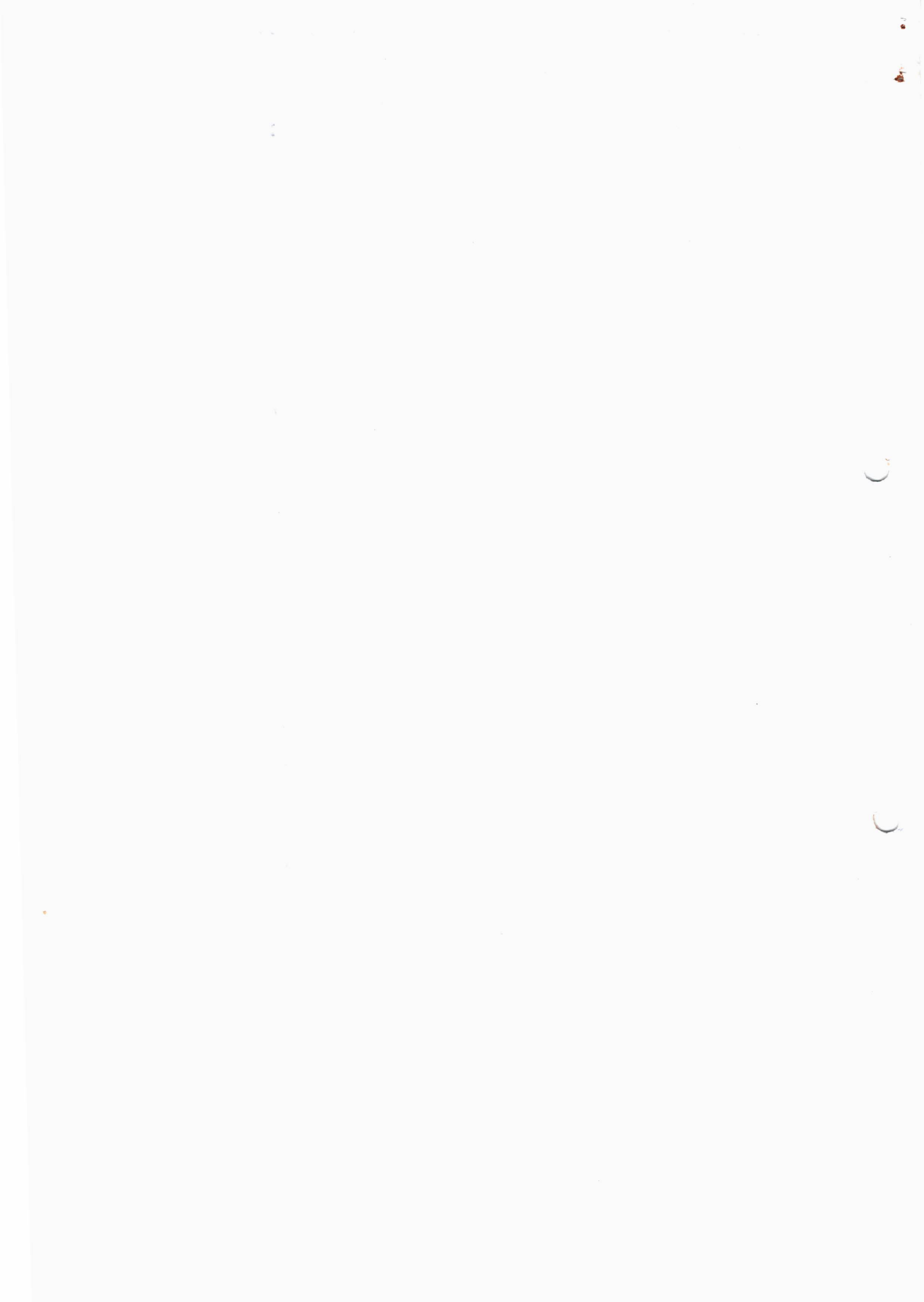
12. **GENERAL** :

**12.1 Control of documents** : Documented procedure covering the relevant requirements of ISO 22000 :2005 was available and implemented. However the external documents used in the FSMS have not been listed in the Master list of documents. (NCR 1)

**12.2 Control of records** : Documented procedure covering the relevant requirements of ISO 22000 :2005 was available and implemented.

**12.3 Top management commitment** : Top management commitment is evident. Responsibilities and authorities defined and communicated to relevant personnel. Work instructions available and followed. Executive Chef functions as the Food Safety Team Leader.

**12.4 Communication** : Food safety team is responsible for external communication. Food safety team leader is responsible for internal communication and is through discussions, meetings.





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**12.5 Emergency preparedness :** Fire, tsunami, food poisoning and freezer/chiller breakdowns have been identified as potential emergencies. Training has been conducted and records available.

**12.6 Management review :** A documented procedure is available and a management review meeting has been conducted and minutes were available. Based on the decisions taken improvements have been made. Frequency has been defined as biannual.

**12.7 Resource management :** Infrastructure and work environment and other resources necessary to implement and maintain the FSMS have been provided.

**12.8 Planning and realization of safe food :** PRPs required by ISO 22000:2005 have been documented in the FSMS manual and implemented. However the door & the door frame at the maintenance to the kitchen section had gaps which could allow pest infestation or entry. **(NCR 02).**

Characteristics of raw materials, and end products have been described. Physical, chemical and biological food hazards documented.

One light bulb in the dry stores was not covered. **(NCR 03).**

Supplier evaluations need to be strictly adhered to. **(Observation 03).**

**12.9 HACCP plan :** CCPs have been identified in the HACCP plan and OPRPs.

CCP 1 –The monitoring system documented indicated in the CCP plan is not in line with the floor operation (actual monitoring method) on the evidence obtained from Section Chief. **(NCR 04)**

**12.10 Verification planning :** Verification plan documented. PRPs, hazard analysis and OPRPs are verified. Responsibilities for verification activities of PRPs identified in the verification schedule of the FSMS manual.

Internal audits have been conducted as per the frequency defined in the procedure and all the NCRs have been closed after verification.

**13. MAJOR NON-CONFORMITIES :** None

**14. MINOR NON-CONFORMITIES :** Four (04)

**14.1** Some of the external documents used in the FSMS have not been listed in the Master list of documents. **(NCR 01).**



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**14.2** The door & the door frame at the entrance to the kitchen section had gaps which could allow pest infestation or entry. (NCR 02).

**14.3** One light bulb in the dry stores was not covered. (NCR 03).

**14.4** CCP 1 –The monitoring system documented is not in line with the floor operation (actual monitoring method) on the evidence obtained from Section Chief.  
(NCR 04)

**15. CORRECTIVE ACTION REQUESTS (CAR)** :Corrective action requests have been submitted with proposed corrective actions agreed upon.

**16. OBSERVATIONS :**

**16.1** All relevant food regulations should be available on sight for reference.

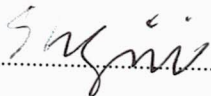
**16.2** Verification of PRPs for cleaning etc. could have been more effectively done.

**16.3** Verification results should be analysed by the FSTL.

**16.4** Supplier evaluations need to be strictly adhered to.

**16.5** Attention may be given to the review of the following aspects during updating of the FSMS.

- Existing procedures & communication systems
- Output of the hazard analysis, OPRPs and HACCP plan
- Effectiveness of training

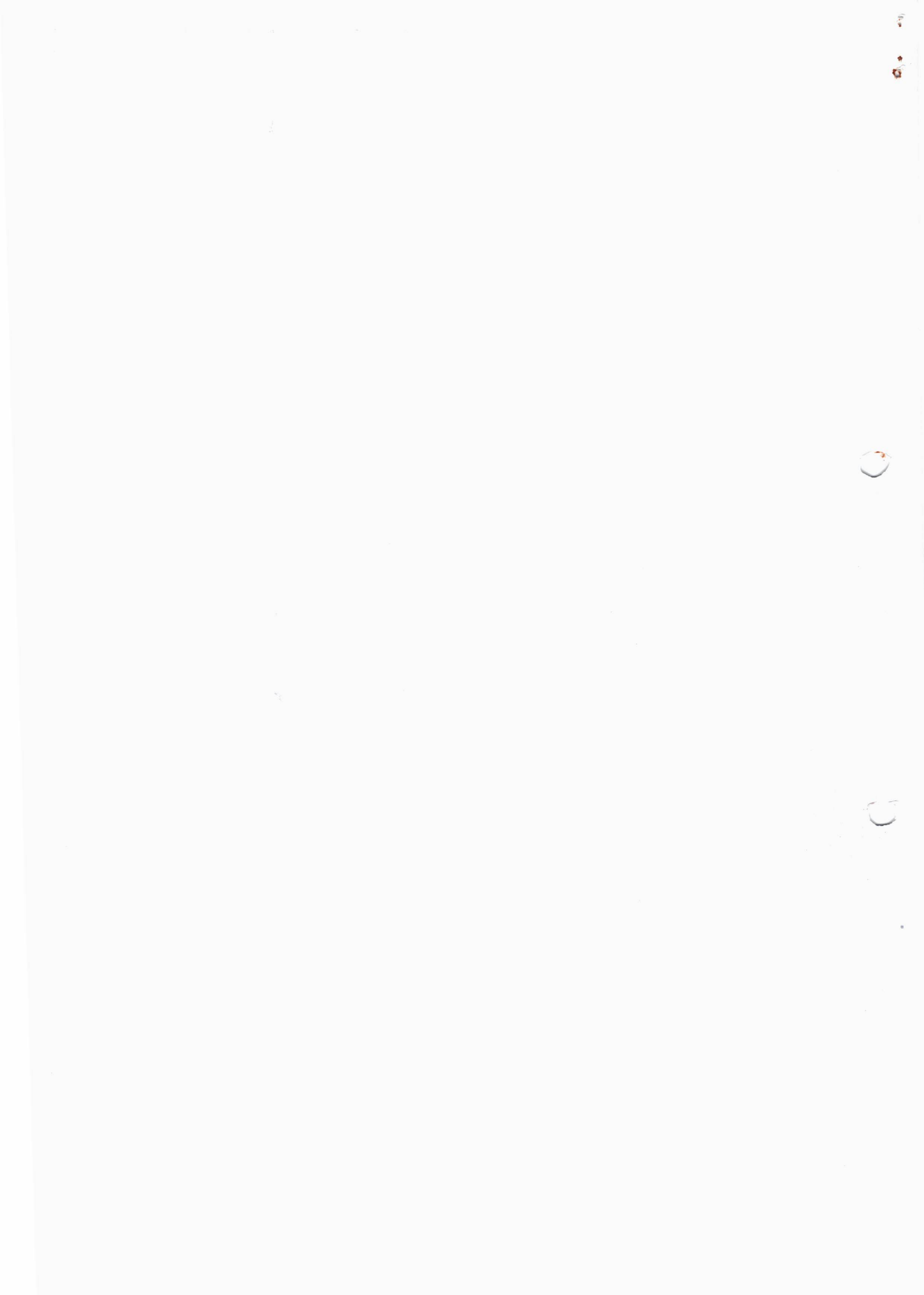


SIGNATURE OF TEAM LEADER

2012-04-26

DATE

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17. RECOMMENDATION BY TEAM LEADER:

RECOMMENDED FOR CERTIFICATION Subject to the completion of the corrective actions for the NCRs raised and submission of ~~some~~ evidence of completion of corrective actions

[Signature]  
Signature of Team Leader

2012-04-26  
Date

18. RECOMMENDATION BY CERTIFICATION MANAGER :

NCR's are closed. Do recommend for the submission to the certification committee.

[Signature]  
Signature of Certification Manager

2012-05-04  
Date

19. APPROVAL FOR SUBMISSION TO THE CERTIFICATION COMMITTEE:

Pl. submit this to certification committee.

[Signature]  
Signature of Director

2012-05-04  
Date

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