Packaging Materials

Part of the Cotecna Group

Audit Report

Global Standard Packaging Materials Issue 7: April 2025

1.Audit summary			
Company name	Worldchamp (HuiZhou) Plastics Products Co.,Ltd.	BRCGS site code	10020809
Site name	Worldchamp (HuiZhou) Plastics Products Co.,Ltd.		
Scope of audit	The production of PE glove/apron/sleeve/bag used for food contact by mixing, film blowing or cast extrusion, printing, cutting and packing.		
Scope exclusions	None		
Justification for exclusion	Non-applicable		
Audit Start date	8/27/2026	Audit finish date	8/28/2026
Re-audit due date	8/27/2027	Appendix 3 applicable	N/A

Head Office (only complete if approach 2 is applicable)		
Head Office Name	Head Office Address	Date of annual Head Office Audit (YYYY-MM-DD)

Additional modules included			
Modules	Result	Scope	Exclusions from Scope

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 1 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

2. Audit results

Audit result	Certificated	Audit grade	B	Audit Programme	Announced
Previous audit grade			Previous audit date		
Certificate issue date	10/8/2026		Certificate expiry date	10/8/2027	
Number of non-conformities			Fundamental	0	
			Critical	0	
			Major	1	
			Minor	9	

3. Company details

Certified Site Address	1st, 2nd, 5th and 6th floors of Building 4, Runhao Industrial Park, No.9 Sihuan South Road (Zhongkai Section), Zhongkai High tech Zone, Huizhou City, Guangdong Province, China		
Country	CHINA	Certified Site Telephone number	86-752-3167314
Commercial representative Name	Mr. Zeng Jun	Email	Sucy@hzworldch.com
Technical representative Name	Ms. Yang Cailan	Email	ycl@hzworldch.com

4.Company profile

Plant size (square metres)	<10K sq.m	No. of employees	1-50	No. HARA Plans	1-3
Shift Pattern	one shift (08:00–12:00, 13:30–17:30), six days a week.				

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 2 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

4.Company profile

Outsourced processes	No
Outsourced processes description	N/A
Other certificates held	ISO 9001:2015
Regions exported to	North America Europe
Major changes since last BRCGS Packaging Materials audit	None, this is an initial audit for BRCGS PM.

Company description

The company, established on 2008.12.23, is privately-owned and specialises in the production of PE glove/apron/sleeve/bag used for direct contact with food products and consumer products.

The facility occupies the 1st, 2nd, 5th and 6th floors of Building 4, Runhao Industrial Park, No.9 Sihuan South Road (Zhongkai Section), Zhongkai High-tech Zone, Huizhou City, Guangdong Province, China.

The 1st floor is utilised for material storage, compounding, film-blowing or cast extrusion. The 2nd floor is dedicated to forming and packaging operations. The 5th floor is used for raw-material and finished-goods storage. The 6th floor accommodates administrative offices and packaging-material storage.

The workshop covers an area of approximately 4,949 square metres, while the warehouse area is around 2,737 square metres. The total site area of the facility is 8,700 square metres.

There is no canteen or kitchen on-site.

In 2025, the company’s production output reached approximately 3,278 MT, generating revenue of around RMB 65.4 million. Currently, all products are exported to North America and Europe, with a client-base comprising both traders and manufacturers.

There are 50 employees in the company. Mainly processing activities are mixing, film blowing or cast extrusion, printing, cutting and packing, and key process is incoming materials inspection and mixing. All these employees work one shift (08:00–12:00, 13:30–17:30), six days a week.

Main processing equipment includes 14 mixing machines, 1 cast film extruder, 1 printing machine, 10 blow film machines, 33 automatic glove machines, etc.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

4.Company profile

The site has certified against ISO9001:2015(RN: 77067/A/0001/UK/ZH, valid to 2028-07-25).

No homeworkers or sub-contractors are used in the company. No BRCGS Logo was identified on-site.

The facility obtained its BRCGS Consumer Products certificate last year. This is the first application for the BRCGS Packaging Materials standard. This audit is an announced initial audit, scheduled from 2026.08.27 to 2026.08.28.

Consultant details

Consultant	Consultant not used

Consultant Name	Consultant Organization	Services Provided

5.Product and process characteristics

Manufacturing Categories	05 - Flexible plastics 07 - Print processes
Product Claims Made (e.g., FSC, recyclable etc.)	No
Product incidents in the last 12months	No
Products in production at the time of the audit	PE gloves

6. Audit duration details

Total audit duration	12	Duration of production facility inspection	6
Reasons for deviation from typical or expected duration	Non-applicable		

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 4 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

6. Audit duration details	
Combined audits	None
Next audit type selected	Announced

Present at audit
Note: the most senior operations manager on site should be listed first and be present at both opening & closing meetings (ref clause 1.1.9). Record all persons present including consultants

Name	Job Title	Opening Meeting	Site Inspection	Procedure Review	Closing Meeting
Ms. Yang Cailan	MR/Plant Manager	On site			On site
Ms. Chen Yan	Purchasing Manager	On site	On site	On site	On site
Mr. Peng Chao	Production Supervisor	On site	On site	On site	On site
Mr. Yan Fubo	Production Supervisor	On site	On site	On site	On site
Mr. Yang Caiping	Equipment Supervisor	On site			On site
Ms. Zhang Fenglin	QualitySupervisor	On site			On site
Ms. Zou Guiyan	Sales Manager	On site			On site
Mr. Deng Hengzhen	Warehouse Manager	On site			On site
Mr. Xu Haifeng	Production Supervisor	On site			On site
Ms. Pan Meiying	Administration Supervisor	On site			On site

GFSI Benchmarked audit history			
Date	Scheme/Standard	Announced/Unannounced	Pass/Fail
1/1/0001	First GFSI Audit		

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 5 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Document control				
CB Report number	261272			
Template Name	P703 Packaging Materials Audit Report Template v1.1			
Standard Issue	7	*Template issue date*	4/28/2025	
Directory allocation	PackMat	*Version*	1.1	

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

BRCGS Packaging Materials

Part of the Cotecna Group

Non-Conformity Summary Sheet

Major non-conformity against statement of intent of a fundamental requirement				
No.	Clause	Detail	Critical or Major	Re-audit date

Critical			
No.	Clause	Detail	Re-audit date

Major							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1	4.7.4	During the on-site workshop inspection, the auditor identified extensive use of temporary repairs. Neither temporary repair records	Require equipment maintenance personnel to develop a permanent repair plan and conduct permanent repair as scheduled.	1.Revise the procedure to include provisions for temporary repairs.2.Train equipment maintenance personnel on requirements specified in the Production Equipment Control Procedure and relevant BRCGS	1.The procedure does not specify requirements for temporary repairs.2.Maintenance personnel lack training on temporary repair controls.3.Periodic inspections for temporary	9/22/2026	Sunbeam Du

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 7 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Major							
		nor permanent repair plans were available.		standard.3.The Production Supervisor shall inspect the implementation of equipment maintenance and retain inspection records.	repairs were not implemented.		

Minor							
No.	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by
1	3.6.2	The facility failed to conduct initial approval assessment for PE rawmaterial suppliers, nor could relevant assessment records be provided.	The Purchasing Department lead conducts on-site assessments of PE raw material suppliers and keeps assessment records.	1.Provide training on relevant requirements of the Supplier Management Control Procedure to the Purchasing Supervisor and relevant BRCGS standard.2.The Purchasing Supervisor create an annual supplier assessment plan to prevent omissions.	1.The Purchasing Supervisor is not familiar with the requirements specified in the Supplier Management Control Procedure. 2.No assessment plan was available for all the supplier to prevent omissions.	9/22/2026	Sunbeam Du
2	4.2.1	During onsite inspection, damage	The Administration Department shall	1.Train maintenance personnel on relevant	Equipment maintenance staff are not familiar with	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

		and peeling were observed on the wall cladding panel at the production area. The surface covering material was torn and partially detached, creating potential risks of foreign body contamination and pest harborage.	arrange maintenance personnel to repair damaged and peeling wall cladding panels in the production area.	requirements specified in the Facility and Work Environment Control Procedure and relevant BRCGS standard.2.The Administration Supervisor shall perform daily supervision and inspection of infrastructure and environment within production areas and warehouses as required by documents. Any similar non-conformities identified shall be rectified immediately.	requirements defined in the Facility and Work Environment Control Procedure. Corresponding checks are missing.		
3	4.9.3.1	During onsite inspection, the auditor identified one bottle of lubricating oil stored underneath the filmblowing machine without proper identification. This poses a risk of chemical	Maintenance personnel of the Production Department shall immediately move this bottle of lubricating oil to the chemical storage area and affix a	1.Train workshop personnel on requirements specified in the Chemical Control Procedure and relevant BRCGS standard.2.The Production Supervisor shall conduct daily supervision and inspection of chemical management in accordance with document	1.The workshop staff lacks of awareness of chemical control.2.Corresponding checks are missing.	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

		contamination to products.	chemical label to the chemical container.	requirements. Any similar non-conformities found shall be rectified immediately.			
4	4.11.5	During the onsite inspection, the auditor identified that no rodentproof barrier was fitted at the entrance of the mixing workshop, creating potential risks of rodent ingress and product contamination.	Maintenance personnel shall immediately install rodent barriers at the entrance of the mixing workshop and keep them in place at all times; removal is prohibited.	1.Train relevant responsible persons on requirements specified in the Pest Control Procedure and relevant BRCGS standard.2.The Administration Supervisor shall conduct daily supervision and inspection of pest control requirements in accordance with document provisions. Any similar non-conformities found shall be rectified immediately.	The person in charge of the Administration Department is not familiar with the requirements specified in the Pest Control Procedure. Corresponding checks are missing.	9/22/2026	Sunbeam Du
5	5.8.1	During the onsite warehouse inspection, the auditor observed that stored finished products were placed too close to the warehouse	Warehouse keepers shall immediately arrange porters to remove the products and require that the products be kept at	1.Train warehouse material handlers on relevant requirements specified in the Product Protection Control Procedure and relevant BRCGS standard.2.Conduct daily	Warehouse personnel have insufficient awareness of the requirements specified in the Warehouse & Logistics Management Procedure. Corresponding inspection	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

		walls. This limits air circulation and creates potential risks of moisture accumulation and pest infestation.	least 20 cm away from the walls.	supervision and inspection of product protection control requirements in accordance with document provisions. Any similar non-conformities found shall be rectified immediately.	mechanism has not been established.		
6	5.9.3	During onsite workshop inspection, three broken plastic pallets were identified onsite. The damaged pallets were not segregated or disposed of, which presents potential risks of plastic fragment foreignbody contamination to packaging materials.	Workshop management personnel shall immediately remove the three broken plastic pallets for disposal as scrap; they shall not be used in the production or storage areas.	1.Train workshop material handlers on requirements specified in the Foreign Contamination Management Specification and relevant BRCGS standard.2.Conduct daily inspections for plastic fragment foreign contamination in production workshops and warehouses in accordance with document requirements. Any similar non-conformities found shall be rectified immediately.	Workshop material handlers are not familiar with the requirements specified in the Foreign Contamination Management Regulation. Corresponding inspection mechanism has not been established.	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

7	6.3.4	The auditor found that liquid soap at the handwashing station in the forming workshop was exhausted. Operators could not perform proper hand washing, which may introduce hygiene contamination risks.	The person in charge of the Administration Department shall immediately replenish hand soap at the hand-washing station in the molding workshop.	1.Train Administration Department personnel responsible for refilling hand soap at hand-washing stations on relevant requirements specified in the Regulation for Hand Washing & Disinfection and Maintenance & Sanitation of Sanitary Facilities and relevant BRCGS standard.2.Conduct daily inspections on the usage status of hand soap at hand-washing stations in accordance with document requirements. Any similar non-conformism found shall be rectified immediately.	Workshop personnel have insufficient awareness of the requirements specified in the Regulation for Hand Washing & Disinfection and Maintenance & Sanitation of Sanitary Facilities. Corresponding inspection mechanism has not been established.	9/22/2026	Sunbeam Du
8	6.2.4	During the on-site workshop inspection, the auditor found that skin-toned wound plasters were available on site. Such plasters have	The person in charge of the Administration Department will immediately replace the wound plasters with ones of another colour, which shall	1.Train the person in charge of the Administration Department on relevant requirements specified in the First Aid Kit Management Regulation and relevant BRCGS	The person in charge of the Administration Department is not familiar with the requirements specified in the First Aid Kit Management	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

		low colour contrast against packaging materials, creating a high risk that lost plasters cannot be visually identified, which violates foreign body control requirements.	not match the product colour.	standard.2.Conduct daily inspections of first aid kits and medicines in accordance with document requirements.	Regulation. Corresponding checks are missing.		
9	6.5.2	During the on-site inspection, the auditor identified that work uniforms for both visitors and employees were fitted with buttons and external pockets on upper body garments.	Remove buttons and external pockets from employee work uniforms and replace them with hook-and-loop fasteners.	1.Train the person in charge of the Administration Department on relevant requirements specified in the Protective Clothing Management Specification and relevant BRCGS standard.2.All newly purchased protective clothing shall use hook-and-loop fasteners instead of buttons. All old protective clothing shall be replaced with new ones.3.Conduct daily inspections of protective clothing in	The procedure does not contain relevant provisions for protective clothing management, and corresponding verification checks have not been implemented.	9/22/2026	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

				accordance with document requirements.			

Comments on non-conformities

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Additional Modules/Head Office Non-Conformity Summary Sheet

Critical			
No	Clause	Detail	Re-audit date

Major							
No	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Minor							
No	Clause	Detail	Correction	Proposed preventive action plan	Root cause analysis	Date reviewed	Reviewed by

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 15 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Lead auditor		
Auditor number	**First name**	**Second name**
50117	Sunbeam Du	Du

Audit team				Attendance (YYYY/MM/DD, 24hr: MM)			Presence	
First name	Second name	Auditor number	Role	Audit Date	Start time	End time	Physical or Remote	Professional recognition
Sunbeam	Du	50117	LA	2026/08/27	08:30	17:00	physical	
Sunbeam	Du	50117	LA	2026/08/28	08:30	12:30	physical	
Leo	Liu	50254	TA	2026/08/27	08:30	17:00	physical	
Leo	Liu	50254	TA	2026/08/28	08:30	12:30	physical	

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

1.	Senior management commitment
1.1	Senior management commitment and continual improvement

The company has defined its quality policy and product safety policy within the management manual (SX-BRC-M-01, issued on 2025-12-26, version A/1), which is approved by the General Manager (GM). The quality and product safety policies state the site's commitment to fulfil its obligations to produce safe, legally compliant products meeting defined quality requirements, and confirm its accountability to customers. The policies have been communicated throughout the organisation; for example, the quality and safety policy is posted on the notice board in the workshop.

How to develop the product quality and safety culture is established in the product safety and quality culture plan which consists of the content of activity, frequency and timeframe. Detailed activities cover product safety communication, staff training arrangements, employee feedback collection, product safety behavioral requirements, performance monitoring of product-related activities, detailed action plans and schedules, and annual performance assessments, covering all site departments.

The related records were available for review. By communicating with Plant Manager, Quality supervisor and observation onsite, it was learnt that actually the company is constantly looking for ways to improve its quality and safety culture.

The product safety plan stipulates that a review shall be conducted each year. The latest review was held on 2026.06.05. Review records show that the product safety culture review was chaired by the General Manager, and the review conclusion is that the annual product safety culture plan has been basically implemented.

The company has established product safety, quality and legality objectives, including, but not limited:

--Final products inspection pass rate 100%

--Customer satisfaction rate: ≥95%

--Significant product illegality and safety incident: 0 per year

The achievement of objectives is measured monthly by the relevant department and are reported to GM. The measurement records from Sep.2025 to Jun.2026 were sampled to review, all the objectives were met from the record review. CAPA will be conducted when any objective is not met and the evidence will be kept based on management interview.

The company has established Confidentiality Reporting Procedure (SX-BRC-P-52), allowing employees to report issues related to product safety and quality compliance to the management level via forms such as email and suggestion boxes. Meanwhile, the company has formulated a plan for the management to handle and take action upon receiving information feedback from employees. On-site inspection shows that telephone number and email address of GM are posted on the company's public bulletin board and suggestion boxes were set up.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Legislation changes and updates are periodically collected by the Quality Department from various channels, including local official notifications, customer requirements, industry-association communications, website research and the latest legislative-related scientific literature, or as required for specific customer requirements relating to new-product development. All collected standards and regulations are logged on a list and kept up-to-date.

The latest legislation list was updated on 2026.01.05, confirming that all legislations and regulations contained within are current.

The company holds a hard-copy version of BRCGS Packaging Materials Issue 7. Production manager and heads of all functional departments including Sales, Quality, Administration, Purchasing, Production and Warehouse attended the opening and closing meetings. Company management and relevant responsible staff were available upon request throughout the audit. Senior management has allocated sufficient resources covering personnel, facilities and finance.

This is an initial audit of BRCGS Packaging Materials conducted from 2026.08.27 to 2026.08.28. No BRCGS logo was identified on-site.

1.2	Management review

The Management Review Control Procedure (SX-BRC-P-03) has been established and requires an annual review.

The last management review was held on 2026.08.06 by Mr Zeng, General Manager. Meeting records confirm that leaders from the Production, Administration, Quality, Sales, Purchasing and Engineering departments attended the management-review meeting.

All required elements were included and reviewed, including policy and objectives, HARA, complaints, incidents, corrective actions, internal audits and third-party audit results, product defence. The quality objectives were achieved and no revision is required. Following the management review, senior management concluded that the objectives remain suitable for the company's current situation. All outputs have been documented and records are retained for future review.

2 area for improvement was identified during the management review. This action is planned to be completed before the end of 2026.

By interviewing, it was learnt that the company encouraged the staff to report the issues directly to GM or quality and production manager when he/she has a concern on product safety, quality, legality, etc.

1.3	Organisational structure, responsibilities, and management authority

The organisational chart has been established and updated, which reflects the current management structure. There are six departments, which were included the departments of Production, Administration, Quality, Sales, Purchasing and Engineering.

Job responsibilities for all key positions are clearly documented in the job description manual, which specifies the duties and requirements of each role, including those impacting product safety, legality and quality. Ms.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Yang, Plant Manager, is formally appointed as the Management Representative, responsible for the implementation and overall management of BRCGS-PM compliance. Meanwhile, Ms. Yan, Quality Manager, is granted the responsibility and authority to halt production when necessary.

Authorization Management System for Absence of Key Post Personnel has clearly documented who deputises in the absence of the responsible person. For example, Plant Manager deputises in the absence of GM, QA deputises in the absence of Quality Manager.

No external consultant was engaged during this audit.

1. Details of non-applicable clauses with justification	
Clause/Section Ref	Justification

2.	Hazard analysis and risk assessment
2.1	The hazard analysis and risk assessment team

The facility submitted its HARA Plan (SX-BRC-P-04). This plan has been developed by a multi-disciplinary HARA team comprising 7 members representing the Production, Administration, Quality, Sales, Purchasing and Engineering departments.

The HARA Team Leader is Ms. Yang (Plant Manager), who possesses over 10 years of working experience within the packaging industry. She attended the BRCGS Packaging Materials Issue 7 training delivered by BMCS from 2026.02.21 to 2026.02.23 and was issued the corresponding training certificate.

All team members hold relevant practical experience for their respective roles. As team members are primarily department heads, the team is kept updated on factory-level changes and evolving customer requirements as they arise.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

2.2	Prerequisite programmes

The facility has established the PRP Control Procedure (SX-BRC-P-54), covering supplier approval & purchasing, cleaning and housekeeping, pest management, new-product development, print control, personnel training and competence, as well as personal hygiene requirements. The applicability and effectiveness of prerequisite programmes are fully considered within the site's HARA system, with PRPs fully integrated into HARA development and review activities.

2.3	Describe the product

The HARA plan (SX-BRC-P-04) was in site. The scope of the HARA plan is clearly defined as packaging for direct food contact, including PE gloves/aprons/sleeves and bags. The legislative requirements, hazard associated with specific processes and raw materials, intended use of product, relevant code of practice or recognised guidelines, etc. have been considered into assessment.

Full descriptions of all products are developed, including raw materials and ingredient used, the property of chemical, physical, application methods, end use, shelf life, packing form, storage condition, etc.

2.4	Construct and verify process flow diagram

The process follow diagrams are in the HARA plans (SX-BRC-P-04) verified on site by HARA team annually at least and the latest was conducted by HARA team on 2026.04.16.

All products are manufactured on site. Primary production process: mixing, film blowing or cast extrusion, printing, cutting and packaging. Key process is incoming materials inspection and mixing. The flow charts were accurate and detailed, which could be reflected to the site process based on site observation. Verification is required to be conducted annually and when significant incident occurs or process changes.

2.5	List all potential hazards associated with each manufacturing step, conduct a hazard analysis and consider any measures to control identified hazards

The hazard analysis evaluated hazards including physical hazards (metal fragments, pest debris, etc.), chemical hazards (machine oil contamination, component migration, heavy metals, taint, etc.), microbiological hazards, foreign bodies and packaging defects across all stages of product realisation, against legal and customer requirements. It identifies hazards critical to consumer safety, potential for malicious adulteration and raw material fraud, amongst others.

Allergen risks have also been assessed; the site confirms no allergens are used in production. The Hazard Analysis and Risk Assessment (HARA) evaluates severity (four categories ranging from catastrophic to negligible) against likelihood of occurrence (four categories ranging from frequent to impossible).

2.6	Determine the critical control measures

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The site applied hazard analysis and risk assessment (HARA) together with a decision tree to review control measures for each identified hazard, whereby two critical control measures (CCMs) were determined.

The CCMs established are intended to prevent or reduce product safety hazards to an acceptable level: 1) Incoming material inspection; 2) Material mixing.

2.7	Establish validated critical limits for each critical control measure

Validated critical limits for the two CCMs have been defined by the HARA team, to clearly distinguish whether the manufacturing process is in or out of control.

CCM1: Incoming material inspection

CL: Each batch of PE raw material shall be accompanied by a valid COA. Any batch without a valid COA shall be rejected by QA. Annual third-party test certificates are required to demonstrate compliance with safety and legal requirements.

CCM2: Material mixing

CL: No visible metallic contaminants on the magnet bar. If metallic foreign bodies are detected, stop feeding, isolate the material batch, clean the magnet bar and carry out product safety assessment. The visual criterion is supported by reference photos for consistent judgement.

2.8	Establish a monitoring system for each critical control measure

Monitoring procedures have been established for both CCMs to verify compliance with critical limits. The monitoring system can identify any loss of control and enable timely corrective actions.

CCM1: Incoming material inspection

Monitoring: Check the validity of COA and annual third-party test certificate for each batch of incoming PE raw material (off-line check per batch). Quality Manager perform monthly verification. Monitoring records contain date, batch information, inspection results and signature of the inspector responsible.

CCM2: Material mixing

Monitoring: Visual inspection to check magnet bar cleanliness and metallic contaminants. Inspection shall be performed prior to feeding each batch, upon batch changeover and order switch. Monitoring records document the date, time, inspection results and signature of the responsible operator.

2.9	Establish a corrective action plan

Corrective action plans have been defined and documented by the HARA team for both CCMs. Actions to be implemented by nominated personnel are specified for situations where monitoring results show non-compliance with critical limits or an emerging trend of loss of control, covering evaluation of out-of-control product, restoration of process control and measures to minimise recurrence.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

CCM1: Incoming material inspection

If incoming PE raw material batch is received without valid COA, the batch shall be rejected and segregated. The QA team shall evaluate any affected stock, restore control by rejecting non-conforming material, and follow up with suppliers to prevent recurrence of missing or invalid COA.

CCM2: Material mixing

If metallic foreign bodies are found on the magnet bar during inspection, feeding shall be stopped immediately. The affected material batch shall be isolated and assessed. The magnet bar shall be fully cleaned to regain process control. Root cause investigation shall be performed and appropriate measures implemented to minimise repeat occurrence of metallic contamination.

2.10	Validate the hazard analysis and risk assessment plan and establish verification procedures

The HARA plan and PRPs shall be reviewed by the HARA team at least annually, or whenever significant changes occur relating to new products, new raw materials, new production technologies or production environment.

The HARA plan was validated on 2026-06-26. The most recent review of the HARA plan and CCM was performed by the HARA team on 2026-08-06; no amendments were made to the HARA plan.

PRPs were also reviewed by the HARA team on 2026-08-06. All PRP verification items were found compliant and no adjustments were required.

2.11	Hazard analysis and risk assessment documentation and record keeping

The HARA plan (SX-BRC-P-04, Rev A/1, updated on 2025.12.26) is documented with clear scope covering the manufacture of PE gloves, aprons, sleeves and bags for direct food contact and consumer products.

Sufficient documentation and records are retained to verify that the HARA and product safety controls, including controls managed under prerequisite programmes, are implemented and maintained on site. The site retains three years of production records ranging from incoming material acceptance through to finished product testing. These records demonstrate full implementation of the HARA plan and confirm that identified hazards are maintained at acceptable levels.

2. Details of non-applicable clauses with justification

Clause/Section Ref	Justification

Certification Body name and address	ESTS (Extensive Standard Technical Services Co., Ltd.)			
Page 22 of 47	Report No.:	261272	Auditor:	Sunbeam Du

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

3.	Product safety and quality management

3.1	Product safety and quality management system

The company has established and implemented a documented quality and product safety management system compliant with BRCGS Packaging Materials Issue 7, which is appropriate to the scale of its sales activities and product-related risks.

The site's documented policies, procedures and work instructions were sampled and available for review, including the Document Control Procedure (SX-BRC-P-05), Supplier Management Procedure (SX-BRC-P-09), Pest Control Procedure (SX-BRC-P-20), etc. All documents are written in Chinese to ensure correct application by relevant staff. Documents are readily accessible; they are issued to management across all departments, while selected documents such as production and inspection work instructions are maintained on-site for operator reference.

Documents are reviewed during internal audits and management reviews, with revisions implemented where necessary.

3.2	Document control

Document Control Procedure (SX-BRC-P-05) is maintained on site. A register of controlled documents lists the current document identifiers and titles. Controlled documents are managed in both hard copy and electronic formats.

The document control register includes document name, revision status and relevant responsible departments; all documents are subject to authorisation and controlled issue, and document revision records are retained. Examples include the Management Manual (SX-BRC-M-01, Rev A/1), Pest Control Procedure (SX-BRC-P-20, Rev A/1), Labelling and Identification Control Procedure (SX-BRC-P-12, Rev A/1) and Non-conformities Control Procedure (SX-BRC-P-28, Rev A/1).

The Quality Department owns document control responsibilities covering document amendment, revision and distribution.

Electronic copies are stored on the shared network drive under the control of the Quality Department, and secure backups are maintained.

3.3	Record-keeping

The Record Management Procedure (SX-BRC-P-06) has been established and approved by the General Manager. It authorises the Quality Department to administer records, covering creation, review and amendment. The procedure specifies that records shall be legible, appropriately authorised, preserved in good condition and readily retrievable. Any amendments made to records shall be accompanied by a documented reason, and only authorised personnel are permitted to amend records.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Records shall be retained for a minimum period of 3 years. No alternative record retention period is specified by customers. Product safety, legal compliance and quality-related records, including production process records, internal audit reports and training records, are properly maintained on site.

3.4	Specifications

The site has established and maintained detailed, controlled specifications for all raw materials, intermediate products and finished goods, which are fully documented within the HARA plan. All specifications cover complete product composition, intended applications, functional requirements, packaging, storage conditions and applicable legal compliance criteria, with clear testing standards defined for product quality and safety control.

Product specifications are formally confirmed and agreed with customers upon completion of design and specification development activities, ensuring full alignment with customer demands and regulatory requirements.

Sampled specifications of key raw materials, including PE raw materials, colour masterbatch, printing ink and corrugated boxes, were verified on-site. The documented specifications comprehensively define product appearance, dimensional parameters, functional performance, intended use scenarios and statutory compliance requirements for food contact packaging products.

Suppliers provide valid declarations of compliance corresponding to raw material specifications, detailing relevant legislative requirements to guarantee the safety and compliance of incoming materials. Meanwhile, the site has issued unified product compliance statements for all finished products, covering mandatory standard requirements such as materials used, compliance with legal requirement, not use any post-consumer recycled materials, issue date and expiry date, limitation of use of products (such as suitable temperature, humidity), and shelf-life.

A systematic specification review and update mechanism is implemented in accordance with internal procedures. Timely review and revision of specifications will be initiated once relevant national laws, regulations or customer requirements are updated. All specification revisions and review activities are fully documented and retained for traceability. The latest comprehensive specification review was completed on 2026.08.10.

All specifications are controlled in electronic form in compliance with the documented procedure. Only authorised quality personnel are permitted to update and revise specification documents to ensure the accuracy and validity of controlled documents. In addition, the site holds valid authorisation certificates from trademark holders, and the complete authorisation documents are properly filed and available for audit review.

3.5	Internal audits

The site has established the Internal Audit Management Procedure (SX-BRC-P-07) to regulate internal audit activities in line with BRCGS PM Issue 7 requirements. The frequency of internal audits for all quality and product safety activities is determined based on risk assessment, taking into account the inherent risk of each

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

process activity and the implementation performance of previous audits, ensuring high-risk processes are audited with higher priority.

According to risk assessment results, all the activities are required to be audited 2 times a year. Besides, before the annual external audit, full internal audit is required to be arranged. The internal audit plan was available. The audit team has four internal auditors, and Mr. Zeng was the team leader. They are independent from their own functions during the audit. All internal auditors attended BRCGS PM Issue 7 training provided by external institutions 2026.02.21 to 2026.02.23.

The first internal audit was conducted on 2026.03.10, which covered all the department and sections of standard. 1 minor was raised for the Production Department of clause 4.10.3, corresponding root cause analysis and CAPAs were provided and verified on 2026.03.15. During the on-site audit, the auditor confirmed closure of this internal audit non-conformity.

The second internal audit for full-sections (including all requirements of BRCGS PM Issue 7) was conducted on 2026.07.29. 1 minor non-conformities were identified during the full-section internal audit. They were corrected and verified as closed by the internal audit team on 2026.08.03. And during the audit time, the auditor found that the NCs of internal audit had been closed accordingly.

Routine internal hygiene and fabric condition inspections are performed, including inspections of processing equipment and environmental hygiene. Workshop and warehouse hygiene is checked daily by workshop and warehouse personnel. Equipment condition is inspected weekly, while windows, walls and ceilings are inspected weekly by administrative staff. Inspection frequencies are defined based on risk assessment. Relevant inspection records were sampled and available for review.

3.6	Supplier approval and performance monitoring

The site has formulated and implemented the Supplier Management Procedure (SX-BRC-P-09) to standardize supplier approval, evaluation and ongoing performance monitoring.

Supplier assessment and auditing activities are conducted based on graded risk assessment and defined performance evaluation criteria. For critical suppliers providing key process materials, compliance verification is strictly implemented through GFSI-recognised certifications, including BRCGS and ISO 9001 certification. On-site supplier audits are adopted as an alternative verification method where valid certification is not available, ensuring raw material and service compliance with product safety requirements.

Sampled on-site supplier audit records were reviewed, including those of the PE raw material supplier GZKS, colour masterbatch supplier SZJBY and PE bag supplier DGZHX. All audit results for these suppliers were satisfactory.

For suppliers assessed via off-site evaluation, the procedure defines requirements to verify the suppliers' traceability system at initial approval and at three-yearly intervals thereafter.

Supplier delivery performance is monitored and scored monthly, with a full annual performance review conducted. Supplier performance assessment records for March and June 2026 were sampled; no non-conformities were raised against any suppliers.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The approved supplier list has been established and updated on 2026-06-15. During the audit, it was identified that the PE raw material supplier was missing from the list, and one minor non-conformity was raised against this finding. All raw materials shall be sourced exclusively from approved suppliers, and the system prevents purchasing activities from unapproved suppliers.

Review of the approved supplier list and management interview confirmed that no raw materials are currently purchased via agents, brokers or wholesalers. Management demonstrated awareness of the assessment and approval requirements should agents, brokers or wholesalers be utilised in future.

Minor NC 3.6.2: The facility failed to conduct initial approval assessment for PE raw material suppliers, nor could relevant assessment records be provided.

3.7	Product vulnerability, claims and chain of custody

The company has established the Product Fraud Control Procedure (SX-BRC-P-10) to identify product fraud risks within the supply chain. To mitigate the risk of raw material substitution across the supply chain, the site obtains information on historical and emerging supply chain threats primarily via local authorities, industry associations and other relevant sources.

Vulnerability assessments have been carried out for all raw materials with clear assessment criteria defined. The seven elements specified in the Standard were considered for risk determination. Fraud risks are classified into two levels: high risk and low risk.

The latest vulnerability assessment was completed on 2026.06.05. All raw materials were identified as low fraud risk. No additional special control actions are required; ongoing monitoring of threat information changes shall be maintained. Raw materials are sourced from approved suppliers with whom the site has maintained long-term business cooperation.

3.8	Management of outsourced processes

No outsourced process.

3.9	Management of suppliers of services

The site has formulated the Service Supplier Management Procedure (SX-BRC-P-11) to standardise the qualification verification, evaluation and ongoing monitoring of all external service suppliers. All service suppliers are required to provide valid legal and qualification certificates for verification. Their market reputation and service capability are also assessed prior to approval.

The company engages qualified external service suppliers covering hazardous waste disposal, third-party product testing, measuring instrument calibration, solid waste treatment and pest control services, all of which are managed in accordance with the approved supplier control system.

The pest control service contract with supplier HZYX (valid from 2026.07.27 to 2027.07.26) was sampled and reviewed. The contract clearly defines service specifications and risk control requirements to eliminate potential product safety and hygiene risks introduced by external services. In addition, all service suppliers

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

are subject to annual performance monitoring and evaluation, with complete assessment records retained for traceability.

3.10	Traceability

The Labelling & Traceability Control Procedure (SX-BRC-P-12) is established, with clear requirements specified for coding and labelling. Raw materials, semi-finished products and finished products on site are clearly labelled with batch-related information.

Traceability trials are conducted annually. The latest backward traceability exercise was completed on 2026.07.10 for HDPE gloves (Batch No.: Canada511PO326426; production period: 2026.04.21–04.30; finished quantity: 1,900 cartons / 19,000,000 pcs; delivery date: 2026.05.30; delivered quantity: 1,900 cartons / 19,000,000 pcs). The traceability exercise was performed from finished product back to raw materials.

Raw material inputs included PE resin, labels, inner packaging and outer packaging. Taking PE resin as the trace sample: this batch of material was received on 2026.04.16 with a quantity of 990 bags / 24,750 kg, sourced from approved supplier BLSH. The full quantity of this PE resin batch was consumed to manufacture the finished product batch. Traceability for inner and outer packaging materials was also verified.

Supporting documents including production plan, first-article inspection record, finished product inspection record, incoming raw material inspection record, and stock inbound/outbound records are available for review. The auditor verified the authenticity and integrity of these records.

During the audit, the auditor performed forward traceability verification on PE material (Batch No.: 251202C1-41). Relevant details: receiving date: 2026.05.21, quantity: 5,000 kg, approved supplier: DGDF. This batch of PE material was fully consumed for the manufacture of plastic bags (Production Batch No.: CR2026-06-0036). The production period was 2026.05.22 to 2026.06.16, with finished output of 200 cartons / 2,000,000 pcs. All finished goods were delivered to customer MEISEI on 2026.06.26, total delivered quantity: 200 cartons / 2,000,000 pcs.

Supporting records including purchase order, material receipt documents, material consumption records, production worksheets, warehouse logs, finished goods delivery records, IQC, PQC and FQC records were available for review within 2 hours (14:00 to 16:00). These records comply with the procedure for incoming, in-process and finished product inspection control. Mass balance was confirmed.

No reworked materials were utilised in this batch. Re-selection activities, if performed, are traceable.

3.11	Control of non-conforming materials

The Non-Conforming Products Control Procedure (SX-BRC-P-28) has been established by the facility, which clearly defines the handling process for non-conforming incoming materials, in-process products, finished products, returned goods, etc.

A separate quarantine area is designated within the incoming materials warehouse. Rework or alternative use is not permitted for non-conforming items. The Quality Department is responsible for making disposition

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

decisions and supervising the implementation of corrective actions. During the audit, non-conforming in-house products were segregated and labelled within designated boxes.

Several non-conforming product reports were sampled for review. For instance, one non-conformity record showed that QA found 3 broken gloves out of 100 gloves from Lot No.26 on 2026.05.11. Corrective Action: All products from Lot No.26 (3 cartons) were reinspected; no additional broken gloves were identified. Root cause analysis was completed (out-of-control machine temperature), and CAPA was implemented (machine can only be operated under qualified temperature settings; the first 500 gloves of each production run shall be inspected).

Non-conforming product data is analysed monthly by the Quality Department, with associated CAPA implemented to improve product quality.

3.12	Complaint-handling

The Customer Complaint Management Procedure (SX-BRC-P-38) is fully implemented on site. All customer complaints are required to be recorded by the sales team and promptly forwarded to the Quality Department for root cause investigation and corresponding corrective action implementation.

No customer complaints received in past 12 months.

Quality Department performs annual customer complaint data analysis and trend review. The 2025 complaint trend records were verified during the audit. There is no any significant trend in complaints at present since no same defect occurred in the customer complaints in past 12 months.

3.13	Corrective and preventive action

The Corrective and Preventive Action Management Procedure (SX-BRC-P-08) is established and implemented to systematically control non-conformities and prevent recurrence. Root cause analysis is mandatory for all non-conformities arising from internal audits, second-party and third-party audits, in-house product non-conformances, customer complaints, non-compliant raw materials, quality incidents, out-of-calibration testing equipment, and monthly quality trend analysis.

Correction Action Reports were available for review. One sampled report dated 2026.04.11 concerned incorrect printing codes. Corresponding CAPA was raised, including customer notification and code reprinting. This CAPA was closed on 2026.04.15.

Additionally, the facility conducts annual review and trend analysis of customer complaint data. The 2025 complaint trend records were verified during the audit. Relevant root cause investigations, corrective actions and preventive actions have been developed and implemented to continuously improve product quality and eliminate recurring quality issues.

3.14	Management of incidents

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The facility has established the Emergency Incidents Control Procedure (SX-BRC-P-14) for incident management. This procedure includes contingency plans covering fire, natural disaster, power outage and chemical spill incidents.

An annual power outage drill was conducted on 2026-06-11, with relevant records retained.

Product withdrawal and recall control requirements are documented in the Product Withdrawal/Recall Control Procedure (SX-BRC-P-13). A withdrawal team has been set up, with the General Manager appointed as team leader. The procedure defines the handling process for returned products, transportation and storage. It specifies trigger conditions for initiating withdrawal or recall, contact information and responsibilities of key on-site personnel, contact details of external customers and regulatory authorities, as well as product categories subject to withdrawal (e.g. products failing to meet legal requirements or unsafe products with potential risks to consumers). The system can be activated at any time, as customers maintain contact details of relevant sales personnel.

Mock withdrawal exercises are performed annually. The latest mock withdrawal was carried out on 2026-04-24 for a batch of PE gloves (Batch No.: TB718018; production period: 2026.01.23–2026.02.13; delivery date: 2026.02.15; delivered quantity: 1,620,000 pieces).

No product safety incidents, withdrawals or recalls have occurred historically, as confirmed via review of management review reports and management interviews.

3. Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
3.8	No outsourced process.

4.	Site Standards
4.1	External standards

The facility occupies the 1st, 2nd, 5th and 6th floors of Building 4 within an industrial park on the outskirts of Huizhou City. Local activities and site environment have been assessed; no hazards that may adversely affect the safety, legality or quality of finished products or raw materials have been identified. Appropriate measures are implemented to prevent contamination, and these protective controls are reviewed regularly to sustain effectiveness.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

External ground surfaces are cemented and maintained in good order. Grassed areas adjacent to production and warehouse buildings are regularly tended. All on-site controlled external traffic routes have suitable surfacing to prevent product contamination.

The building fabric is maintained to minimise risks of product contamination, pest ingress, water penetration and other contaminants. No external silos or pipework for raw materials or finished products are present. A clean, unobstructed perimeter is retained along the external walls of manufacturing and storage buildings.

Suitable external drainage systems are installed. Drains are properly protected to prevent pest entry.

The site is well designed and maintained, with regular investment planned to support maintenance activities, prevent contamination and ensure the manufacture of safe, legal and quality products. No off-site external storage is utilised.

Site security controls are implemented to prevent unauthorised access to the industrial park, including 24-hour manned guarding and CCTV surveillance. Only visitors escorted by company staff are permitted to take the elevator and enter the premises. All contractors and visitors are required to sign in and sign out and must be accompanied by facility personnel. Employees are inspected by designated staff prior to workshop entry.

4.2	Building fabric and interiors: raw materials handling, preparation, manufacturing, packing and storage areas

The fabric of the site, buildings and facilities are suitable for the intended purpose. The production and warehouse areas were cement and metal concrete. The floors (emery floor), drainage in hand washing station only (full closed plastic pipes), doors (e.g. metal door) and overhead structures (white cement walls or decorative board) are clean and acceptable.

But during onsite inspection, damage and peeling were observed on the wall cladding panel at the production area. The surface covering material was torn and partially detached, creating potential risks of foreign body contamination and pest harborage., resulting in 1 minor NC being raised in 4.2.2.

There are designated walkways in production and storage areas. LED lights with outer plastic housings are protected against breakage. Lighting is adequate for cleaning, operation, and inspection. Windows glass in the workshop is of thick and secure type, and keep adequate distance from machines/products, do not pose a risk of contamination. Suitable and sufficient ventilation (air conditioning system and fans) are provided. Windows without screen are closed to prevent pest entry, and all door for logistics were self-closed. No elevated walkway is used in the facility.

Minor 4.2.1: During onsite inspection, damage and peeling were observed on the wall cladding panel at the production area. The surface covering material was torn and partially detached, creating potential risks of foreign body contamination and pest harborage.

4.3	Utilities

Water is supplied from the municipal water supply system, and not use in production, just for cleaning. No steam and ice were used. Based on risk assessment, chemical quality of compressed air is regularly

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

monitored. The monthly monitoring records were kept for review. The compressor is maintained at defined frequencies including routine inspection, belt inspection/ cleaning /filter change regularly, check the records available. The filters are equipped to prevent the lubricant oil or water in compressed air used. No abnormal was found.

4.4	Site security and product defence

The facility has established the Product Protection Procedure (SX-BRC-P-15), appointing GM Mr. Zeng as the lead of the Product Protection Team. The procedure requires the team to carry out risk assessments.

The company has completed the latest documented risk assessment for the security system on 2026.03.22. Based on the assessment outcomes, the facility implements controls over potential risks associated with premises, personnel, visitors, vehicles, water supply, goods receipt and dispatch, supply chain, storage, waste management, information security and other relevant aspects.

On-site security is managed by dedicated security personnel. Access for vehicles, visitors and contractors is strictly controlled at site entrances. All access control records are maintained electronically and retained appropriately.

Internal and external CCTV systems are fully functional, covering key sensitive areas including entrances, production areas, warehouses and loading/unloading zones. All vehicles are inspected by warehouse staff prior to loading.

The product safety and defence plan undergoes annual review. The most recent review was completed on 2026.05.10, with documented results verifying the effectiveness of existing product defence controls.

No external storage tanks, silos or exposed external intake pipes are present on site.

The site delivers regular product defence and safety training to all employees, including new starters. Two employees interviewed during the audit showed clear understanding of product protection and security requirements.

4.5	Layout, product flow and segregation

The current site plan has been submitted for review. Warehouses and production areas are clearly separated and labelled. This site plan addresses the six requirements specified in the standard, including all personnel access points, personnel circulation routes, raw material and product flow, staff amenities, production and process workflows, and storage zones.

The process flow from raw material intake to finished product dispatch is logical, with sufficient working space allocated for all operations.

All product sorting activities are carried out within designated zones. Outer packaging is removed in dedicated areas segregated from production zones. Walkways within the production area provide adequate segregation between material and personnel movements.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The facility workshop is partitioned into multiple functional sections: production processing zones, inspection area, chemical storage warehouse, raw material storage, semi-finished and finished product storage areas, staff amenities and common areas.

4.6	Equipment

The production equipment list was made available for review. The site maintains a production equipment management ledger, which was updated in 2026. Key equipment comprises: 14 mixing machines, 1 cast film extruder, 1 printing machine, 10 blow film machines, 33 automatic glove machines.

The company has established the Equipment Management Control Procedure (SX-BRC-P-51), which clearly specifies the intended use, construction materials and design requirements for all production equipment. A dedicated, risk-based commissioning procedure applies to all new or new-to-site equipment. Upon delivery to site, all new equipment is verified and commissioned by qualified personnel from the Engineering/Equipment Department to confirm full compliance with design specifications and mitigate potential product safety hazards. All equipment specifications are assessed and reviewed by the HARA team, with formal sign-off by the HARA Team Lead prior to equipment onboarding.

Site verification confirmed that all equipment is constructed from food-contact compliant materials and features hygienic design to facilitate effective cleaning. No new equipment has been installed on-site since the previous audit. For all future equipment modifications or new equipment additions, a dedicated machinery hazard analysis and risk management plan shall be completed, with all relevant records retained and updated accordingly.

Interviews with production supervisors and machine operators confirmed no lubrication points are situated close to product contact surfaces. Site inspection verified no contamination risks arising from the layout of equipment lubrication points or lubricant application practices. All safety signs and identification labels affixed to equipment are clean, intact and securely mounted.

4.7	Maintenance

A paper-based equipment maintenance programme is defined within the Equipment Management Control Procedure (SX-BRC-P-51) and covers all processing machinery.

The site provided its equipment maintenance plan, which stipulates that all production-related equipment undergoes daily and weekly maintenance covering items including lubrication systems, motors and electrical wiring. Production personnel are assigned to perform maintenance and repair activities. Relevant records show that cleaning verification is completed after maintenance and repair work. Maintenance records from March, June and July 2026 were sampled during the audit.

Toolboxes are stored in designated areas. Equipment and site premises are generally well maintained, with no major breakdowns reported in the past 12 months.

The company has implemented controls to restrict such activities. The engineering workshop is located outside the production workshop, preventing engineering debris from being introduced into production or storage zones.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Contractors performing maintenance or repair works must obtain approval from the administration department. On-site contractors are adequately supervised by maintenance staff or supervisors, who hold accountability for contractors' on-site activities.

For off-line test equipment, adjustments and recalibration dates following any intervention shall be duly documented.

Major NC 4.7.4: During the on-site workshop inspection, the auditor identified extensive use of temporary repairs. Neither temporary repair records nor permanent repair plans were available.

4.8	Housekeeping and cleaning

Housekeeping and cleaning requirement is defined on GMP Procedure (SX-BRC-P-44) which are required that appropriate standards of hygiene are maintained and that risk of contamination to the product is minimised. According to the risk assessment, the site is not required to perform disinfection; cleaning is sufficient.

A formal cleaning schedule has been established, which clearly defines the cleaning scope, areas, equipment, cleaning frequency, cleaning methods, cleaning materials, inspection procedures, and corrective actions for any non-compliance or deviation.

All areas shall be cleaned daily. Deep cleaning shall be performed monthly to eliminate hard-to-reach sanitary dead corners. Cleaning records dated 2026.04.28, 2026.06.03 and 2026.08.11 for machinery, workshop and warehouse were sampled and available for review; these records complied with the cleaning and disinfection policy.

Based on site observation, the hygiene and housekeeping of whole facility was clean and acceptable.

A good standard of housekeeping is maintained including the policy of 5S. Hand washing liquid is used for cleaning and located at hand cleaning station. The clean chemical was suitably labelled, secured in chemicals warehouse with MSDS, No use of scented chemicals. The clean tools are placed on designated areas.

The company did not establish an environmental microbiological monitoring program. The documented risk

assessment is available. They conducted the assessment based on the historical data, customer

requirements (no microbial requirements for the audited products), legality requirement (no microbial requirements for the audited products), complaints (no complaint about microbe), etc., and believe that there is no need to establish environmental microbiological monitoring program. The assessment result is reasonable.

4.9	Product contamination control
4.9.1	Glass and brittle materials control

The foreign-body control requirements are defined within the Brittle-Article Management Control Procedure (SX-BRC-P-49). This procedure specifies potential contamination risks originating from glass, brittle

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

plastics, ceramics and similar materials, together with corresponding control measures applicable to different processes.

It stipulates that in case brittle items (e.g. glass, ceramics, brittle plastics and similar materials) break within workshops, staff in the affected area shall stop operations, segregate relevant products or materials to avoid cross-contamination, and carry out cleaning activities with relevant records maintained.

No unnecessary non-production-related ceramics were identified on site. Light fittings within production and storage areas are either LED or equipped with shatter-proof protective covers. The site maintains a brittle material register; glass and brittle material components are inspected weekly by the production and warehouse teams. Inspection records covering December 2025 to July 2026 were sampled for review, and no breakage incidents were recorded in the sampled documentation.

4.9.2	Sharps and metal control

The metal sharp tool control policy was defined in Sharps Management Control Procedure (SX-BRC-P-41), which is defined that the metal sharp tools should be registered and controlled with record, and the snap-off blade knife shall not be used at the facility.

Based on document review and onsite observation, the sharp tools used in the workshop include scissors and knives. Sharp tools are controlled by the production supervisor for issuance, with regular integrity daily checks maintained via records. The Sharp Tools Issue & Return Register dated 2026.02.28, 2026.05.12 and 2026.08.03 were sampled for review and found acceptable. No damaged cases were identified within these records. Per the key management interview, any damaged tool will be investigated to prevent product contamination.

No snap-off blade knife, staples, metal clip and drawing pins were found used in the workshop and warehouses during the audit.

4.9.3	Chemical control

The Chemicals Control Procedure (SX-BRC-P-19) has been established in the facility.

A list of approved non-production chemicals has been established and approved by senior management, and the approved chemicals are suitable for their purpose. Approved chemicals include lubricating oils, hand washing liquid, alcohol, 84disinfectant and mould cleaner, corresponding MSDS sheets are kept in files.

During the on-site inspection, the auditor observed that most chemicals are stored in a dedicated storage area with corresponding labels. Access to this area is restricted to authorised personnel such as production supervisors and managers. These personnel also receive periodic chemical safety training. However, the auditor identified one bottle of lubricating oil stored underneath the film-blowing machine without proper identification, resulting in one minor non-conformity against clause 4.9.3.1.

No strongly scented chemicals were identified during the audit.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Minor NC 4.9.3.1: During onsite inspection, the auditor identified one bottle of lubricating oil stored underneath the filmblowing machine without proper identification. This poses a risk of chemical contamination to products.

4.9.4	Allergen management

The company have assessed chemical risks using the HARA system & controls have been designed to prevent contamination where appropriate. The hazards analysis and risk analysis considered the allergen risk. No allergen materials are used for the audited products.

4.9.5	Other physical contaminants

Labels on equipment were easy to clean and securely affixed, without posing a risk to product safety, legality and quality.

In the materials warehouse, wooden pallets are used by the factory to support cartons and plastic film-wrapped materials. On-site inspection confirmed that these wooden pallets are maintained clean and in good condition, with no protruding nails or breakage. No paper clips, staples or thumbtacks were observed within the open product area. Staples and similar items are not adopted as packaging materials or for sealing purposes.

The site allowed employees to bring portable devices into the production and storage site, but only by those approved personnel, mainly managers of each area. These portable devices were mainly mobile phones or communication equipment and related test tools. These devices or tools were disinfected when brought into the workshop.

Other types of foreign objects that may cause contamination, such as soft rubber Gravures on equipment, damaged conveyor belts, were replaced in time to prevent foreign body contamination.

4.10	Waste and waste disposal

Waste Management Control Procedure (SX-BRC-P-43) is established and implemented on-site.

Hazardous waste disposal is outsourced to a licensed contractor (HZKLN) under a valid contract covering 2026.01.22 to 2027.01.21. General solid waste is handled by another licensed firm (GDRZ), with its contract effective from 2026.03.09 to 2027.03.08. Waste disposal records were available for inspection. Process waste is properly managed and poses no contamination risk to finished products or the environment. Wastes are classified by disposal pathway, segregated and stored in appropriate labelled designated waste containers. Waste containers are emptied on a timely basis; no waste accumulation was identified during the site visit. Non-conforming trademark materials are shredded and disposed of as recyclable waste within the general waste treatment room. Document review and management interviews verified that non-conforming trademark materials are not transferred to third parties for destruction or disposal.

Refuse is stored in a dedicated waste room equipped with pest control arrangements and subject to regular cleaning to mitigate pest harborage risks.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

4.11	Pest management

The Pest Control Procedure (SX-BRC-P-20) was established in the facility to manage pest activity and pest contamination risk. Pest control devices are mainly mousetrap and electric fly-killing devices. Pesticide application would be conducted by external pest service company according to risk assessment result.

The pest control device layout map is current, last updated on 2026.01.11, documenting 20 rodent bait stations, 8 mechanical mouse traps and 12 fly killers. At the time of audit, the engaged pest control supplier (HZYX) holds valid pest control qualification certificates. The service contract is effective from 2026.07.27 to 2027.07.26.

The service articles were defined the mutual obligations and responsibilities, pests covered scope (such as mouse, roach, fly and mosquito), service frequency (such as at least once per month in normal season), if event of infestation, the corrective action would be taken immediately, and etc. The internal pest control operators and operators from pest service company were trained with PCO certificates. The MSDS sheet and technical instruction of the pesticide used and application records could be provided for review.

During the audit, windows within production areas and warehouses were kept closed. The auditor identified that rodent-proof barriers were not fitted at the entrances of the mixing workshop, which resulted in one minor non-conformity. Self-closing doors were installed for both logistics and personnel access doors for pest prevention. No obvious signs of pest infestation were observed on-site. Apart from the missing rodent-proof barriers, all pest control facilities were maintained in good condition.

The pest control training was provided to employees regularly. The interviewed staffs were aware that they need to report signs of pest activity.

Pest control records from December 2025 and March 2026 were sampled and reviewed. Verified by the dedicated pest control officer, no pest infestation had occurred on-site since Dec.2025. Annual pest trend analysis is routinely performed by the pest control team, and the corresponding analysis report was available for verification.

NC 4.11.5: During the onsite inspection, the auditor identified that no rodentproof barrier was fitted at the entrance of the mixing workshop, creating potential risks of rodent ingress and product contamination.

4. Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
4.2.9	No elevated walkway is used.
4.4.3	No external storage tanks, silos or any intake pipes with an external opening exists

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

4.9.4	No allergen materials are used for the audited products
4.10.5	No substandard trademarked materials are transferred to a third party for destruction or disposal.

5.	Product and process control
5.1	Product development

The company has established the Product Development Control Procedure (SX-BRC-P-21), which defines how customer specifications and requirements are incorporated into the facility's product requirements and management system.

The facility mainly produces OEM products. The Sales Department receives product information and customer requirements; documented, agreed customer-specific requirements are maintained in files.

Product design is finalised via communication between customers and the company's Engineering, Production, Quality and Sales departments. Customer requirements covering product design, development, specifications, manufacturing and distribution are communicated and confirmed with documented evidence including emails and electronic or hardcopy artwork files. Technical specification sheets are generated for all products. Production trials (initial runs for new products) are undertaken for every new product. Product realisation is performed by the Engineering and Production departments based on customer inputs.

Samples for new structures are produced on-site and shall obtain customer approval prior to full manufacture. Client-signed or approved reference samples are retained; these samples may be superseded when updated versions are confirmed by the customer. Recycled materials are prohibited from use in production. All manufactured products meet safety and legal obligations, with samples retained in line with customer requirements.

5.2	Graphic design and artwork control

Artwork and sample control requirements are specified in the Artwork and Printed Materials Control Procedure (SX-BRC-P-59). The Sales Department is responsible for communicating with customers and trading companies to collect final product concepts and relevant artwork documents. Plant Manager undertakes the development and technical production of artworks and samples in strict accordance with customer requirements.

Gravure printing plates are custom-made by qualified third-party suppliers, with verification, acceptance and unified custody undertaken by the Production Department. All first-off samples are inspected by the Quality Department prior to submission to customers for final approval, and relevant approval records and evidence are properly filed and retained.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Pilot production samples are submitted to customers for formal confirmation. The Plant Manager is responsible for verifying and counting the quantity of Gravure printing plates. Customer-approved reference samples and standard materials are centrally retained by the Quality Department and Sales Department. As the factory mainly conducts customized OEM production rather than standard product manufacturing, artwork modification rights are reserved exclusively by customers.

For electronic artwork files, the Sales Department performs regular backup management to prevent file loss and unauthorized tampering. The latest electronic artwork backup was completed in July 2026.

5.3	Print control

Printing Control Procedure (SX-BRC-P-23) and gravure printing work instructions have been established and implemented. The first piece of gravure printing products for each order is inspected against customer-approved reference samples or artwork.

Mass production of gravure printing can only commence once the first piece is deemed acceptable. Colour variation and printing contamination are controlled by reference to first-off samples approved by the Quality Department or the customer where required. Gravure printing plates are assigned unique identification numbers and stored on racks within the printing workshop and designated storage zones. Printing plates are verified by the Plant Manager prior to production.

Gravure printing products undergo 100% inspection by IPQC, with inspection records maintained. Non-conforming products are segregated in labelled plastic containers. Composite printing is not applied. Unused gravure printing products are identified and stored in the semi-finished goods warehouse. A standard light box (Brand: TILO, Model: T 60-4; light sources: PHILIPS TL-D 36W/965, D65, TL8.4, UV) is used for inspection of gravure printing products; its specification is agreed with customers or complies with applicable industry standards.

5.4	Manufacturing process control

The company has formulated and implemented the Production Process Control Procedure (SX-BRC-P-24) to stabilise manufacturing quality throughout all production stages. Process reviews are regularly conducted in combination with the HARA system. Incoming materials inspection and mixing are classified as key process. The hazard and risk management team has assessed potential product risks, covering typical non-conformities such as deformation, dimensional deviation and functional leakage issues, and has established targeted process control measures accordingly.

Critical machine parameters including temperature, running speed and pressure are clearly specified in process documents and monitored every 2 hours. Formal production orders are issued with full disclosure of key process control points and material lists. Standardised documented process checks are enforced at production start-up, after each equipment adjustment, and at two-hour intervals during continuous production. In-process inspection is carried out in strict accordance with internal specifications, covering product dimension, weight, leakage performance, appearance and key process parameters. All machine parameter adjustments are restricted to trained, competent and authorised operators only.

A full set of work instructions and pre-production control programmes are implemented to ensure products are manufactured safely, legally and in line with customer specifications. A complete first-off inspection

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

regime is in place: approved first-off samples serve as the production benchmark, followed by routine in-process inspections performed by operational staff at predefined frequencies, with all inspection results recorded on dedicated quality check sheets. The QC team is responsible for final verification and sign-off of relevant inspection records.

The Clearance Standard Operation Control Procedure (SX-BRC-P-25) is established to cover all nine mandatory requirements specified in the packaging standard. The procedure clearly defines line clearance personnel responsibilities, high-risk residue retention areas, clearance validation criteria and production resumption sign-off requirements. In routine production arrangements, each production line is scheduled for a single product per day, and product changeover is only conducted after the completion of the current order.

During the on-site workshop inspection, no residual packaging materials were observed. Relevant clearance records were available on file to verify full compliance with site hygiene requirements.

No product safety and quality risks were identified in other on-site manufacturing and storage areas, which complies with standard requirements.

5.5	Calibration and control of measuring and monitoring devices

The Measuring and Monitoring Devices Management Control Procedure (SX-BRC-P-26) is in place. It stipulates that key measuring and testing equipment shall be calibrated regularly in accordance with industrial guidelines, with a general annual calibration frequency based on the expiry date of calibration certificates. Any equipment failing calibration shall be either repaired to meet industrial requirements or scrapped. Products previously tested by unqualified equipment shall be re-tested using fully calibrated and compliant devices.

The company has formulated a complete list of monitoring and measuring equipment and a corresponding calibration plan, with the Quality Department responsible for the overall management and implementation of related processes. All measuring equipment is regularly calibrated by accredited external calibration agencies and marked with valid calibration labels. Complete calibration records and official certificates for all monitoring and measuring equipment are maintained and available for verification. During the audit, the auditor randomly sampled three devices.

Electric scale (Model: HZT-A600, No: 20064, RN: 126BA000011437) was calibrated on 2026.07.25;

Tensile testing machine (Model: 509, No: 20998, RN: 126BA000011431) was calibrated on 2026.07.25;

Hygrothermograph (Model: 1965794, No: 1965794, RN: 126BA000011425) was calibrated on 2026.07.25;

And the current calibration certificates could be provided. Calibration bodies are recognized lab. Based on site observation, all measuring and test equipment were marked with calibration labels.

5.6	Product inspection, testing and measuring

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The inspection and testing specifications for in-process and finished products are defined within the Production Inspection Control Procedure (SX-BRC-P-27). Product inspection and testing standards are established in accordance with national standards and customer requirements.

Quality checks (such as appearance, colour, size, function, and etc.) are undertaken at start up and each process step has inspection as per process inspection regulation (such as each 2 hours to check the size, appearance, contaminant, etc.) to ensure products are consistently produced to the agreed quality specification. And the frequency of checks was set up according to risk assessment result by HARA team. All finished goods are inspected for every batch before shipment.

The products were manufacturing in workshop during the audit date, and the products specification was compliance with client requirement based on sampling check.

The products quality and safety of certified products were inspected by operators and IPQC inspectors.

The external recognized labs are selected for product safety and legality analysis. The external lab operates in accordance with the requirements and principles of ISO 17025, just as below:

1. Disposable PE aprons, RN: S260728075004-1, issue date: 2026.08.05, test items: PAHs content, test standard: REACH (EC) No 1907/2006.

2. Disposable PE gloves, RN: S260728075001-1, issue date: 2026.08.05, test items including Pb, Cd and phthalate content, test standard: California Proposition 65.

All test results on the sampled reports are compliance with the requirement of local legal regulation

5.7	Incoming goods

The company has established raw material inspection system to regulate the acceptance inspection and testing of all incoming raw materials. The procedure clearly defines controlled materials, acceptance criteria, inspection and test items, applicable inspection methods and equipment, inspection frequencies and sampling protocols, forming a standardized incoming quality control system.

All incoming materials undergo preliminary verification by warehouse staff, followed by full appearance and packaging integrity inspection by the IQC team on a per-batch basis. Purchase orders and delivery notes are retained on-site to support material traceability. Receipt documents, stock cards and order records are managed to ensure raw materials are issued in strict accordance with the FIFO (First In, First Out) principle. Only materials that have passed IQC inspection are approved for use in production.

For key raw materials including PE materials and chemical additives, the QC department regularly reviews valid compliance test reports provided by suppliers. Where required by national regulations or special customer specifications, incoming material samples are submitted to accredited third-party laboratories for compliance testing. During the audit, IQC inspection records for colour masterbatch were randomly sampled, confirming full compliance with incoming inspection regulations. Representative sampled third-party test reports are listed as follows:

1) PE material, testing items including overall migration, specific migration limit, food simulant, and primary aromatic amines, testing standard: REGULATION (EU) No10/2011;

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

2) PE material, issue date:2025.09.03, testing items including overall migration, specific migration limit, testing standard: REGULATION (EU) No10/2011;

3) Water-based ink, RN: CANEC26014110102, issue date: 2026.06.04, test items: VOCs, testing standard: GB 38507-2020.

All sampled third-party test results comply with internal quality specifications, statutory requirements and applicable customer standards. A non-conforming material control mechanism is in place for defective incoming raw materials. If any raw material defects are identified during incoming inspection, the supplier is required to conduct root cause analysis, implement targeted corrective actions and submit investigation records to the factory for review and filing. No non-conforming raw materials were identified during the on-site IQC inspection, and document review and interviews with the QC manager confirmed no historical incoming material quality non-conformities.

All incoming materials are affixed with clear identification labels indicating material name, supplier name, receiving date, quantity and inspection status, ensuring full material traceability throughout the warehouse and production process.

5.8	Storage of all materials, work in progress and finished products

The company has established and implemented the Warehouse and Transport Management Procedure (SX-BRC-P-30) to standardise on-site storage, material protection and stock control. Complete incoming and outgoing records are maintained for raw materials, packaging materials and finished products. Raw materials, packaging materials and finished goods are stored separately to avoid mixing and cross-contamination, and no special environmental storage conditions are required for onsite materials.

Most materials and products are stored on pallets, kept off the floor and away from walls to achieve effective protection. However, a deficiency related to warehouse storage management was identified and recorded as Minor NC 5.8.1 during the audit.

Raw materials, semi-finished products and finished products are effectively protected against contamination and marked with clear identification status. Finished products are only dispatched after formal positive release. Packaging materials used for finished product storage and delivery are properly protected and inspected prior to application.

No hazardous chemicals are handled on-site, and no off-site storage is adopted. Production off-cuts and product waste are crushed on-site and sold to an authorised recycling company. Crushed waste materials are centrally stored in a designated and protected warehouse area. The factory does not adopt recycled materials for formal production.

Minor NC 5.8.1: During the onsite inspection of the warehouse building, the auditor found that stored materials were placed too close to the warehouse wall, which reduces air circulation and raises potential risks of moisture and pest infestation.

5.9	Dispatch and transport

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

The dispatch and transport control requirement are defined in Warehouse and Transport Management Procedure (SX-BRC-P-30). Products and materials are required to be clearly identified and protected from contamination during despatch and transport.

The plastic pallets used in production and warehouse areas were observed in clean condition, but the auditor found 3 broken pallets in workshop, resulting in 1 Minor NC raised.

The company employs the third-party transport company for product transportation. The contract items were covered the requirements of standard. The carriers are inspected for contamination before loading and locked by seal when finished loading, and the company would also monitor the transport route and arrived time with transportation companies. The drivers of transportation company can only stay inside and beside carriers, not allowed to enter the workshops and warehouses. The hygiene inspection including security check is required when loading the vehicle. The agreement of the shipment service contractor and contract were sampled for review and compliant to the requirements. The vehicles or containers inspection records on 2026.04 were sampled to review, they were acceptable.

MINOR NC 5.9.3: During onsite workshop inspection, three broken plastic pallets were identified onsite. The damaged pallets were not segregated or disposed of, which presents potential risks of plastic fragment foreignbody contamination to packaging materials.

5. Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
5.6.4	Based on risk analysis, it is not necessary to use in-line product testing equipment. Noautomated inspection equipment.

6.	Personnel
6.1	Training and competence: raw materials handling, preparation, manufacturing, packing and storage areas

The Training Control Procedure (SX-BRC-P-31) has been established by the company. All personnel receive training prior to taking up their duties and are supervised by their line managers during work. Induction training covers company introduction, internal regulations, production safety, hygiene requirements and security awareness.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

An annual training plan is formulated. Training courses scheduled for 2026 include, but are not limited to, BRCGS Packaging Materials Issue 7 awareness, system procedures and management documents, relevant regulations, inspection and testing, and HARA. All associated training records are maintained and traceable.

2026.02.21-23—Training course of BRCGS PM Issue 7;

2026.06.08-- Training course of internal auditor;

2026.05.15-- Training course of BRCGS manual and procedure;

2026.02.10-- Training course of HARA team members, HARA plan;

2026.07.02-- Film blowing and forming skills training course;

Where new or revised procedures, working methods and practices relating to product safety and quality are released, relevant personnel shall be briefed by the responsible department and personnel. Staff competence in product safety, quality and legality is assessed mainly through on-the-job evaluation by line managers, with targeted training and coaching provided as necessary. Interviews with one QC member and one printing operator confirmed that they have sufficient awareness of product safety, quality and legality and are competent for their roles.

Based on management interview and on-site observation, no temporary workers are employed at the site.

6.2	Personal hygiene: raw materials handling, preparation, manufacturing, packing and storage areas

The Personnel Hygiene Control Procedure (SX-BRC-P-47) defines standardized good hygiene practices for all on-site personnel. The procedure covers jewellery control rules, handwashing requirements, restrictions on watches and mobile phones, personal belongings management, personal medicine regulations and fingernail specifications.

Relevant hygiene training is regularly delivered to all employees.

No jewellery is permitted within production and storage areas, with the sole exception of a plain wedding band. Handwashing instructions are visibly posted on-site. All personnel are required to wash and sanitize their hands using hand sanitizer prior to entering production zones. False nails are prohibited, and natural fingernails must be maintained short and clean. The use of perfume is not allowed in production areas.

Watches, mobile phones and personal belongings are restricted from production areas unless specifically approved by the production supervisor. Personal medicines are prohibited in production and storage areas and must be securely stored in personal lockers. No unauthorized personal belongings were observed in production or warehouse areas during the on-site audit. Skin-toned plasters are available and used for covering staff cuts and grazes, resulting in 1 Minor NC raised.

Minor NC 6.2.4: During the on-site workshop inspection, the auditor found that skin-toned wound plasters were available on site. Such plasters have low colour contrast against packaging materials, creating a high risk that lost plasters cannot be visually identified, which violates foreign body control requirements.

6.3	Personnel facilities

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Hand washing facilities available at the entrance of workshop with provision of water, liquid soap, air dryer and advisory sign. But the auditor found that liquid soap at the handwashing station in the forming workshop was exhausted, resulting in 1 minor NC against clause 6.3.5.

Toilet is outside of production area with sufficient provision. Lockers are suitable and sufficient with separate lockers for workwear and personal clothing.

Eating is not permitted in production or storage areas. During the audit, no food was found taken into storage, processing, or production areas. No purpose-made dispenser or disposable cups is provided in workshop, and drinking is in designated areas which is far away from machinery. Staff must use the designated smoking areas outside the workshops and warehouses to avoid tainting product. Facilities for visitors and contractors are compliance with the site's hygiene policy. During the audit the observed condition of the area is accepted.

Minor 6.3.4: The auditor found that liquid soap at the handwashing station in the forming workshop was exhausted. Operators could not perform proper hand washing, which may introduce hygiene contamination risks.

6.4	Medical screening

The medical screening requirement was defined on personnel health rules in Medical Inspection Procedure (SX-BRC-P-32). Staff are trained in what symptoms would prevent them from working. If any staff member is feeling unwell, they must report immediately to their supervisor. Based on risk assessment, the medical examination for employments were not required.

Health questionnaire is designed for visitors, contractors and auditors and require filling on electronic visitors control system at facility entrance.

6.5	Protective clothing

The rules regarding the wearing of protective clothing and laundering requirement are defined in Protective Clothing Control Procedures (SX-BRC-P-33). After conducting hazard and risk assessment by HARA team, the facility has provided clean uniform, hair covers, shoes cover or indoor shoes to all employees worked in workshops.

The protective uniform, hair covers, shoes cover or indoor shoes were correctly worn by employees except NC6.5.2 based on site observation. The facility issued two sets of clean uniform for staffs that are suitable and required to wear in production areas. The protective clothing, hair covers and shoes cover are provided to visitor and contractors at change room.

The workwear was laundered by workers at least twice per week, and the protective clothing for visitors is laundered by facility after used by the visitors. The clean and dirty clothing is segregated suitably in changing room. The process is monitored by the department supervisor for compliance.

No disposable protective clothings are required to wear in the factory based on management interview and onsite observation.

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Minor NC 6.5.2: During the on-site inspection, the auditor identified that work uniforms for both visitors and employees were fitted with buttons and external pockets on upper body garments.

6. Details of non-applicable clauses with justification	
Clause/Section Ref	Justification
6.5.3	No disposable protective clothing was used.

Requirements for traded products	
7.1	Hazard analysis and risk assessment of traded products
Not applicable	
7.2	Approval and performance monitoring of manufacturers/packers of traded products
Not applicable	
7.3	Specifications
Not applicable	
7.4	Product inspection and testing
Not applicable	
7.5	Product legality
Not applicable	
7.6	Traceability
Not applicable	

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

Additional Module 10: Plastic Pellet Loss Prevention	
10.1	Senior management commitment and control improvement
10.2	Hazard analysis and risk assessment
10.3	Internal audits
10.4	Corrective and preventive action
10.5	Management of incidents
10.6	Building fabric and interiors: raw materials handling, preparation, manufacturing, packing and storage areas
10.7	Site security and product defence
10.8	Layout, product flow and segregation
10.9	Housekeeping and cleaning

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com

10.10	Waste and waste disposal
10.11	Incoming goods
10.12	Training and competence: raw materials handling, preparation, manufacturing, packing and storage areas

This report shall not be reproduced in part without the permission
If you would like to feedback comments on the BRCGS Standard or the audit process directly to BRCGS, please contact tell.brcgs.com