Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 30 **Net Weight Control** **CCP- 2** Net Weight Control	**Microbiological:** Thermal process may be inadequate if product net weight does not meet critical limit.	A net weight critical limit is established for all products. Refer to the *Product Process Schedule and CCP Index* for these limits.	**Procedure**: All products are monitored for net weight compliance through use of a calibrated electronic scale **Frequency**: At least one sampling shall be evaluated for net wt. at a point to occur within each 15-minute segment of run time. **Responsibility**: QC Technician with QA Dir. and Shift Supt. oversight	**Corrective Actions:** If it is determined that net weight does not fall within CCP specification: 1) The cause of the deviation will be identified and eliminated, 2) the CCP will be brought under control and measures applied to prevent recurrence and 3) distribution of product affected by the deviation shall be prevented by reclaiming affected product or holding for review by a Processing Authority. **Responsibility**: QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** Written record: *Net Wt. / Residual Air* form or *Net Wt.* form. E-record: RedZone Net Wt. Testing data **Verification***:* *CCP Monitoring Procedure Verification Report* **Responsibility:** QC Technician with QA Director oversight	Scales used for net weight monitoring are checked for proper calibration once daily by a qualified individual. Direct observations of CCP-2 monitoring activities are performed once per week of randomly selected employees by a qualified individual with documentation and corrective actions where necessary captured as part of 1) the *CCP Monitoring Procedure Verification Report* and 2) some observations may occur electronically via RedZone electronic record software. Reviews of all CCP monitoring records followed by a Pre-Shipment record review are performed during the next working day following date of production by qualified individuals.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 23 **Weigh Filling**, Step 24 **Hand Filling** **CCP- 3** Fill Weight Control (Applies to some but not all products)	**Microbiological:** Thermal process may be inadequate if fill weight of a product component (where applicable) does not meet critical requirement.	A component fill weight applies to certain products as specified by the *Product Process Schedule and CCP Index*	**Procedure:** Specific component fill weight for products identified in the *Process Schedule and CCP Index* is monitored by use of a verified electronic scale. **Frequency**: Frequencies are product specific. At least one sampling shall be evaluated for component fill wt. compliance at a point to occur within each segment of run time defined by the *Process Schedule and CCP Index*. **Responsibility**: Q QC Technician with QA Dir. and Shift Supt. oversight	**Corrective Actions:** If it is determined that fill weight does not fall within CCP specification: 1) The cause of the deviation will be identified and eliminated, 2) the CCP will be brought under control and measures applied to prevent recurrence and 3) distribution of product affected by the deviation shall be prevented by reclaiming affected product or holding for review by a Processing Authority. **Responsibility**: QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** Written record: *Fill Weight Control* form E-record: RedZone Fill Wt. Testing data **Verification:** *CCP Monitoring Procedure Verification Report* **Responsibility:** QC Technician with QA Director oversight	Scales used for fill weight monitoring are checked for proper calibration once per day and by a qualified individual. Direct observations of CCP-3 monitoring activities are performed once per week of randomly selected employees by a qualified individual with documentation and corrective actions where necessary captured as part of 1) the *CCP Monitoring Procedure Verification Report* and 2) some observations may occur electronically via RedZone electronic record software. Reviews of all CCP monitoring records followed by a Pre-Shipment record review are performed during the next working day following date of production by qualified individuals.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 28 **Container Sealing** **CCP- 4** Residual Air (Applies to most but not all products)	**Microbiological:** Thermal process may be inadequate if residual air (package headspace) does not meet critical limit.	Critical limits to residual air are product specific. Refer to the *Product Process Schedule* and *CCP Index* for residual air critical limits.	**Procedure**: Package residual air is monitored through use of a RA water displacement testing apparatus. **Frequency**: Frequency is product specific. At least one sampling shall be evaluated for residual air compliance at a point to occur within each segment of run time as defined by the *Process Schedule and CCP Index*. **Responsibility**: QC Technician with QA Dir and Shift Supt. oversight	**Corrective Actions:** If RA does not fall within CCP specification: 1) the cause of the deviation will be identified and eliminated, 2) the CCP will be brought under control and measures applied to prevent recurrence, and 3) distribution of product affected by the deviation shall be prevented by reclaiming affected product or holding for review by a Processing Authority. **Responsibility**: QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** Written record: *Residual Air Log* E-record: RedZone Residual Air Testing data **Verification:** *CCP Monitoring Procedure Verification Report* **Responsibility:** QC Technician with QA Director oversight	Direct observations of CCP-4 monitoring activities are performed once per week of randomly selected employees by a qualified individual with documentation and corrective actions where necessary captured as part of 1) the *CCP Monitoring Procedure Verification Report* and 2) some observations may occur electronically via RedZone electronic record software. Reviews of all CCP monitoring records followed by a Pre-Shipment record review are performed during the next working day following date of production by qualified individuals.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 31 **Retorting** **CCP- 5** Thermal Processing	**Microbiological:** An inadequate thermal process may render the product unsafe for human consumption.	Critical monitoring points (not all points apply to all products): • Initial Temp. (IT) • Come-up time • Process time • Retort temperature • Basket rotation • Staging time Refer to *Product Process Schedule and CCP Index* for specific limits.	**Procedure:** Each of the six thermal process points, as they apply, are monitored for conformance to critical limit specifications through observance of IT and retort thermometers, and retort controller display panels. **Frequency:** Each monitoring point is verified for compliance to scheduled process at a frequency of at least once per retort batch. **Responsibility:** QC Technician with QA Dir. and Shift Supt. oversight	**Corrective Actions:** When a critical limit deviation occurs: 1) the cause of the deviation will be identified and eliminated, 2) the CCP will be brought under control and measures applied to prevent recurrence, and 3) distribution of product affected by the deviation shall be prevented by holding affected product for review by a Processing Authority. **Responsibility:** QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** *Daily Report and Production Record (DRPR).* **Verification:** *Thermometer Verification forms* *TID Calibration Log* *CCP Monitoring Procedure Verification Report* **Responsibility:** QC Technician with QA Dir. oversight **Note**: Supplementary computer-generated data may be used as back-up documentation to confirm the adequacy of the thermal process in the event primary documentation is not complete.	Retort temperature indicating devices (TIDs) are verified yearly and documented on the *Retort TID Calibration Log.* IT thermometers are verified daily and documented on the *Thermometer Verification – Special Products* form. Retort chart and TID agreement is verified once/retort batch and documented on the *DRPR*. Basket rotation speed tachometer displays are verified for accuracy at least once daily and documented on the *DRPR*. Direct observations of CCP-5 monitoring activities are performed at a frequency of once per week of randomly selected employees designated to measure the CCP. These observations are documented on the *CCP Monitoring Procedure Verification Report*. Reviews of CCP monitoring records followed by a Pre-Shipment record review are performed the next working day following date of production.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 33 **X-Ray Inspection** **CCP- 6** X-Ray Detector Functionality Verification	**Physical:** Foreign material	All finished product must pass through a functioning x-ray detector that is able to detect a 2.0 mm metal or smaller* test piece. ***Note**: Metal may be stainless, non-stainless, or ferrous in composition.	**Monitoring Procedure:** A prescribed test piece is to be affixed onto a primary or secondary food package which is in turn placed onto the product conveyer system and allowed to be carried through the x-ray system. The primary package with the test piece must be rejected by the x-ray rejection device. **Frequency:** Once per each hour of cartoning and casing operations. **Responsibility:** QC Technician with QA Dir. and Shift Supt. oversight	If the package containing the test piece is not rejected upon its pass through the x-ray machine: 1) the cause of the deviation will be identified and eliminated, 2) the CCP will be brought under control and measures applied to prevent recurrence, and 3) distribution of product affected by the deviation shall be prevented by holding affected product for review and further disposition. **Responsibility:** QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** *X-Ray Functionality Verification Log* **Verification:** *CCP Monitoring Procedure Verification Report.* **Responsibility:** QC Technician with QA Director oversight	Direct observations of CCP-6 monitoring activities are performed once per week of randomly selected employees by a qualified individual with documentation and corrective actions where necessary captured as part of the *CCP Monitoring Procedure Verification Report.* Reviews of all CCP monitoring records followed by a Pre-Shipment record review are performed during the next working day following date of production by qualified individuals.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 13 **Blanching** **CCP- 8** Hydration Control (Applies to some but not all products)	**Microbiological**: Product formulations consisting of a high percentage dry ingredients (primarily beans, rice, and pastas) may become under processed at moisture levels that are below a critical minimum level.	This CCP does not apply to all products. Refer to *Product Process Schedule and CCP Index* for products and specific limits.	**Monitoring Procedure:** Where required by the Process Schedule, each batch of dry ingredients blanched is tested for moisture content using a moisture analyzer that is programmed to dry the blanched ingredient to a set endpoint. Moisture percent must be above a specified critical minimum. **Responsibility:** QC Technician with QA Dir. and Shift Supt. oversight	If a critical moisture level is determined to fall below minimum specification: 1) For critical blanch ingredients, the blanch batch in question may be re-tested to verify results and the batch may be adjusted by further blanching *or* the batch must be held for further review by a processing authority *or* discarded. 2) The cause of the deviation shall be determined, and adjustments made to prevent recurrence. **Responsibility:** QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** Written record (where required): *Solids Hydration Log*. **Verification**: Moisture analyzer verification testing is recorded on the *Solids Hydration Log* while running products where solids hydration is deemed critical. Moisture test procedure compliance observations are documented on the *CCP Monitoring Procedure Verification Report*. **Responsibility:** QC Technician with QA Director oversight	Direct observations of CCP-8 monitoring activities are performed at a frequency of once per week of randomly selected employees designated to measure the CCP. These observations shall be made by a qualified individual and documented on the *CCP Monitoring Procedure Verification Report*. Moisture analyzer accuracy verification occurs daily whenever the analyzer is used to test ingredients for moisture deemed critical to the thermal process. Reviews of all CCP monitoring records, followed by the creation of a Pre-Shipment record review document is performed during the next working day following date of production by qualified individuals.

Process Step / CCP	Hazard Description	Critical Limits	Monitoring Procedures, Frequency, Person Responsible	Corrective Action, Person Responsible	HACCP Records	Verification Procedures, Persons Responsible
Step 35 **Labeling, Cartoning, Casing** **CCP- 9** Product Labeling Verification	**Chemical:** Allergen mislabeling. This is a precautionary CCP that adds additional emphasis and control to the allergen labeling accuracy verification process.	Correct labels must be applied to packaging. • Trays • Printed pouches • Plastic bowls • Tray Cartons • Cases Labels are to be compared with standard reference labels controlled by SharePoint label files or as otherwise arranged and communicated by facility Tech. Services management.	**Monitoring Procedure:** Verify labeling present on package is correct with respect to: 1) Product Name 2) Ingredient Statement (if applicable) by comparing the applied label with a standard reference label. **Frequency**: One label at the start of the labeling / casing operation and no more than 15 minutes past each two (2) hours of labeling / casing operations thereafter. **Responsibility:** Retort Operators with QA Dir. and Shift Supt. oversight	If upon review, a label does not match the standard reference label the following shall take place: 1) Labeling operations must stop and the discrepancy shall be investigated. Labels having incorrect name and/or allergen ingredient declaration shall be identified, 2) the CCP shall be brought under control and measures applied to prevent recurrence, and 3) distribution of product affected by deviation shall be prevented by holding product isolated for further disposition. **Responsibility:** QC Technician with QA Director and Shift Supt. oversight	**CCP Monitoring:** Written record: *C/C Label and Packaging Inspection Log.* **Verification:** Procedure compliance is documented on the *CCP Monitoring Procedure Verification Report.* **Responsibility:** QC Technician with QA Director oversight	Direct observations of CCP-9 monitoring activities are performed at a frequency of once per week of randomly selected employees designated to measure the CCP. These observations shall be made by a qualified individual and documented on the *CCP Monitoring Procedure Verification Report*. Reviews of all CCP monitoring records, followed by the creation of a Pre-Shipment record review document is performed during the next working day following date of production by qualified individuals.

Preventive Controls (PC) / BNA Reference Docs.	Purpose of Control / Hazards Addressed	Control Limits and Evaluation Criteria	Monitoring Procedure and Frequency	Responsibility	Corrective Actions	Associated Records
PC-1 Supplier Approval, Assessment and Verification Document Reference: BNA FSQM doc. 4-2	To assure suppliers: • Adhere to industry food safety standards, • Provide the correct product and quantity • Provide products that are legal and not subject to fraud	Ingredients and primary packaging materials may only be purchased from suppliers included in a list of approved suppliers. To be included on the approved supplier list, suppliers of ingredients and materials must meet initial and ongoing documentation requirements and performance expectations. All receipts of ingredients, primary packaging and finished product labels are verified at receipt for compliance. Certificates of Analysis (COA) or Certificates of Compliance (COC) are required unless specifically arranged.	Document review is required at approval and a minimum of every three (3) years thereafter unless a more frequent review is required. At each receipt, the quantity and shipping documents are compared to POs. Ingredient labels are verified. Packaging integrity and sanitation is evaluated. Carrier temperature (refrigerated or frozen ingredients), security and sanitation is reviewed. COA or COC is reviewed. Once approved, BNA-generated inventory ID and Lot numbers are associated with received item.	The Receiving Supervisor is responsible for the process of receiving ingredients and materials including carrier security and sanitation inspections and BNA ID and Lot assignment. The QA Manager - Ingredients and Materials is responsible for verification of receipts.	Suppliers subject to removal from the list of approved suppliers and ingredients or materials are subject to rejection or returned to supplier if requirements or expectations are met. Rejected items are held isolated as described in BNA FSQM doc. 4-6.	Incoming Ingredient Receiving form Purchase Orders Bills of Lading
PC-2 Good Manufacturing Practices (cGMPs) Document Reference: BNA FSQM doc. 2-6	GMPs are basic rules of conduct that are to be followed while product is produced and while ingredients and materials are in storage. GMPs help mitigate allergen, foreign material, chemical and filth contamination	Rules of practice shall be maintained per written program. Concerns arising from various evaluations and reviews will promote corrective action that is dependent upon noted conditions.	GMP rules apply at all times on the production floor while products are being manufactured. GMPs compliance on the production floor is verified daily targeting twice per shift (once minimum) while food is being processed. Facility internal auditing of facility processing and storage areas is conducted monthly.	QC Technicians are responsible for monitoring employee GMP compliance during production shifts. The Regional Tech. Services Director is responsible for assuring regular facility inspections occur and noted issues are addressed.	If an evaluation method indicates or procedure review indicates an unacceptable condition, it shall be investigated and associated ingredients, or finished products shall be subject to isolation and discard. Rejected items are held isolated as described in BNA FSQM doc. 4-6.	Operational Sanitation Inspection records Monthly Internal Audit reports

Preventive Controls (PC) / BNA Reference Docs.	Purpose of Control / Hazards Addressed	Control Limits and Evaluation Criteria	Monitoring Procedure and Frequency	Responsibility	Corrective Actions	Associated Records
PC-3 Sanitation Standard Operating Procedures (SSOP) Document Reference: BNA FSQM doc. 2-12	To eliminate food material from food contact surfaces as a bacteria and allergen contamination control.	Food contact surfaces shall be free of residual food and other foreign materials.	Inspections of food contact surfaces are performed after preoperational (day end) cleaning and prior to line start and after cleaning that follows a product formula change over.	The Sanitation Manager is responsible for implementation of this program. Shift Superintendents are responsible for assuring that changeover sanitation and inspection occurs as prescribed.	If food material is noted during a preoperational or change over inspection, the surface in question must be re-cleaned, re-inspected with a passing result prior to line start.	Preoperational Sanitation Inspection report Changeover Sanitation Inspection report
PC-4 Allergen Control Document Reference: BNA FSQM doc. 2-3	To prevent allergen cross contamination among ingredients in production environments and storage. To assure labeling information on finished product accurately reflects allergen content.	This program is designed to prevent the inclusion of an allergen ingredient in a product that does not list the allergen in its ingredient statement. This includes several controls and practices that assure: • Cleaning practices are effective at removing allergens from food contact surfaces, • Allergen-containing ingredients are identified and • Accurate labeling is applied to finished product.	*Cleaning Practices*. Food contact surfaces (FCS) are to be cleaned of allergens after each product run. A documented visual inspection is to occur following each line cleaning. Environmental swab sampling for ATP and allergen proteins are obtained from FCS on a routine basis *Allergen Ingredient Identification, Handling & Storage*. All allergen-containing ingredients are to be labeled by allergen type. Allergens are to be differentiated from non-like ingredients while in storage and during handling. Practices are reviewed monthly during monthly facility inspections. *Ingredient and Finished Product Label Reviews*. Labels of incoming ingredients are reviewed at receipt and finished product labels are verified at time of casing. Finished product label verification is considered a CCP.	The Sanitation Manager is responsible for the process of cleaning and verifying the effectiveness of cleaning. The Receiving Supervisor is responsible for applying BNA ID labels to ingredients and for segregating unlike allergen-containing ingredients in storage locations. QC Technicians (ingredients and materials) are responsible for incoming ingredient label verification. *Production floor QC Techs* carry out finished product labeling verification tasks.	If an evaluation method indicates or procedure review indicates an unacceptable condition, it shall be investigated and associated ingredients, or finished products shall be subject to isolation and discard. Rejected items are held isolated as described in BNA FSQM doc. 4-6.	Incoming Ingredient and Material Receiving form Pre-Operational Inspection form Changeover Inspection form Allergen Testing Results forms

Preventive Controls (PC) / BNA Reference Docs.	Purpose of Control / Hazards Addressed	Control Limits and Evaluation Criteria	Monitoring Procedure and Frequency	Responsibility	Corrective Actions	Associated Records
PC-5 Product Hold Procedures Document Reference BNA FSQM doc. 4-6	Procedures to identify and segregate ingredients or finished products from available inventory to assure substandard items are not utilized.	This program aims to capture any and all product identified as being substandard with respect to food safety, quality or legality. The accuracy and effectiveness of this procedure to isolate product is reviewed during the daily record review process and the process of dispositioning held items.	This procedure is utilized to remove affected (unacceptable or questionable) items (ingredients, materials or finished product) from usable or salable inventory. Monitoring occurs by QA administrative staff. Accuracy is verified during routine record reviews and procedure compliance is reviewed during routine facility inspections.	The QA Technical Assistant is responsible for confirming finished product isolation associated related to CCP and quality deviations. The QA Director is responsible for program management related to finished product holds and dispositions. The QA Manager – Ingredients & Materials is responsible for all ingredient hold situations and dispositions.	Corrective actions to be taken are depend on reason for item isolation. Corrective actions are captured on Hold Notification Forms.	Hold Notification Form – Ingredients & Materials Hold Notification Form – Finished Products Process Authority Corrective Action letters.
PC-6 Recall and Traceability Document Reference: BNA FSQM doc. 4-5	To be able to quickly and accurately track ingredients, primary packaging and finished products in the event a need arises that requires the isolation of one or more of these components.	Traceability accuracy shall be tested on a regular basis and shall be accurate at > 95% (excluding ingredient yield losses) and shall occur within a 4 hr. time.	All ingredients and materials are assigned a BNA-generated lot number which allows traceability from receipt to finished product system via a software accounting system. Traceability accuracy is to be tested a minimum of twice per year.	The Information Services team is responsible for maintaining the inventory software tracking system. The QA Mgr. for Ingredients and Materials is responsible for performing routine traceability exercises.	If a traceability exercise indicates a result of < 95%, a follow-up shall be conducted to determine the cause of the inaccuracy.	Mock Recall Results form Traceability Summary reports
PC-7 Seal Integrity Monitoring Document Reference: BNA FSQM Doc. 5-9	To provided assurances that the hermetic seal of primary packaging is effective and consistent.	Specifications are provided on QC forms. Seal integrity testing includes: • Visual Seal Examination • Package Burst Testing • Package Peel Examination • Primary packaging material shall not exceed its shelf life unless specifically approved by quality management.	Seal parameters are observed and measured including but not limited to double seam measurements, pouch and tray burst pressures and seal width measurements.	The Quality Assurance Director is responsible for assuring seal integrity testing is carried out and for directing follow-up to out-of-specification packaging.	If a seal parameter is noted to be outside established tolerances, adjustments are to be made and effected product may be placed on hold for further testing. Multiple parameters are considered when a decision of acceptability is made. Rejected items are held isolated as described in BNA FSQM doc. 4-6.	Various seal evaluation forms specific to container