Procedure 11

Certification Management

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Certification Management

Purpose

To demonstrate the competency against of certification management related to Food Safety Management System and Quality Management System.

Scope

This applies to overall activities from Requirement tracking to audit and certification management; carried out within the organization.

Responsibility

Top Management, Head of Certification and Certification manager will be controlling the activities at all levels.

Reference:

ISO/IEC 17021	available from your national standards writing body
IAF MD 1	IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization
IAF MD 2	IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
IAF MD 3	Advanced Surveillance and Recertification Procedures (ASRP)
IAF MD 4	IAF Mandatory Document for The Use Of Information and Communication Technology (ICT) for Auditing/Assessment Purposes
IAF MD 5	Determination of Audit Time of Quality and Environmental Management Systems
IAF MD 11	IAF Mandatory Document for the Application of ISO/IEC 17021-1 for Audits of Integrated Management Systems
IAF MD 16	Application of ISO/IEC 17011 for the Accreditation of Food Safety Management Systems (FSMS) Certification Bodies

Note that IAF MD 1 to MD 4 are only mandatory if the CABs certification system provides for certification:

*of multi-sites by sampling, or
*using transfer of accredited certification, or
*applying Advanced Surveillance and Recertification Procedures (ASRP), or
*applying Computer Assisted Auditing Techniques (CAAT).
ISO 10011-1:1990, Guidelines for auditing quality systems — Part 1: Auditing
ISO 10011-2:1991, Guidelines for auditing quality systems — Part 2: ISO 19011 standard for auditing

Procedure

The Certification process

In all cases the certification process starts with a full audit of the client's management system against the requirements of the standard in question. In some cases, the client may wish to have a pre-assessment audit carried out to establish its state of readiness (this is counted as a special audit as per topic (23) of this procedure), but this is not part of the formal certification process. (See F22 Risk assessment)

The duration of the audit depends on the complexity of the client's activities, number of persons engaged in the client's activities, number of sites involved, Scope of management system covered under assessment. Typically, for a small to medium size client the audit takes less audit days. Larger clients usually require longer time, depending on the size and complexity of the operation.
(See PROC 22, 24, 25)

When the client has successfully undergone the audit and resolved any noncompliance found, UCS issues the certificate stating that the client's management system complies with the requirements of standard.

Thereafter UCS carries out surveillance audits, partly to look at particular aspects of the system in more depth, and partly to ensure that the system overall is being maintained after implementation in accordance with the client's own requirements.

The steps in the certification process

1. Enquiry

When UCS receives the enquiry UCS sends the client application form to complete, giving details of the client's operation and processes (F03 Application or Information for Quotation). This enable UCS to formulate an adequate proposal.

Note 1 : Applicants must not have had their certification withdrawn due to an issue affects consumer safety and the country's economy, unless it was more than three months ago.

Note 2 : If the certification was withdrawn for reasons that did not affects consumers or the country's economy, the applicant may reapply for certification as deemed appropriate.

2. Review of requirements

UCS then reviews the information in the application and other supported evidence as per section 3 of F03 and determines how best assessment can be offered to the client's requirements, carrying out contract review. The contract review contains man-days needed for Pre-assessment audit, Initial Certification audit (Stage 1 audit, stage 2 audit), Number of surveillance audits and audit man-days required in each surveillance audit covering the three years of auditing and the certification cycle. This calculation is done as **per UCS's** contract review procedure considering the requirement of PROC 24 as applicable.

Commercial and marketing proposal is offered having inputs of number audits, man-days, logistic expenses and other legal, regulatory expenses covering business growth. Refer: F06 Contract Review & Man-day determination Form

UCS uses PROC24 to define the relevant scope for the organization applying for certification.

UCS does not exclude activities, processes, products or services from the scope of certification when those activities, processes, products or services can have an influence on the food safety or critical criteria (in

case of quality management system) of the end products as defined in the scope of certification. UCS also follows process for choosing the audit day, time and season, so that the audit team has the opportunity of auditing the organization operating on a representative number of product lines, categories and subcategories covered by the scope of certification.

UCS follows mandatory guideline as given in PROC 24 for determination of minimum audit time for each client.

UCS determines the time needed to plan and accomplish a complete and effective audit of the client's all standard. The audit time determined by UCS, and the justification for the determination, are recorded in F06 contract review format.

In determining the audit time, the UCS considers PROC24 and the following aspects:

a) requirements of the relevant any standard;

b) size and complexity of the organization;

c) technological and regulatory context;

d) any outsourcing of any activities included in the scope of any standard

e) results of any prior audits;

f) number of sites and multi-site considerations.

UCS also uses Table A.1 of ISO 22003-1:2022 for the following purposes:

a) to define the scope within which it wishes to operate;

b) to identify whether any technical qualification of its auditors is necessary for that particular category;

c) to assess the auditor competence within a particular category;

d) to assess the audit team competence within a particular subcategory;

e) to define the audit duration in accordance with PROC24 of this Technical Specification;

f) to identify the appropriate part of the ISO/TS 22002 series, if applicable, for the assessment of compliance with ISO 22000:2018, 7.2;

g) to define the scope of certification document at subcategory level.

A multi-site organization is an organization having an identified central function (hereafter referred to as a central office – but not necessarily the headquarters of the organization) at which certain any standard activities are planned, controlled or managed, and a network of sites at which such activities are fully or partially carried out. Examples of possible multi-site organizations are:

- organizations operating with franchises;
- a manufacturing company with one or more production sites and a network of sales offices;
- service organizations with multiple sites offering a similar service;
- organizations with multiple branches.

UCS can certify a multi-site organization under one management system, providing that the following conditions apply:

all sites are operating under one centrally controlled and administered FSMS/QMS as defined in ISO 22000:2018, ISO 9001:2015 or equivalent for other FSMS;

an internal audit has been conducted on each site within one year prior to certification; audit findings of the individual sites shall be considered indicative of the entire system and correction shall be implemented accordingly.

The use of multi-site sampling is only possible for categories A, B, E (limited preparation cooking), F (re-heating type facilities), and G (re-heating type facilities) (refer to Table A.1 in scheme requirements) for FSMS and for organizations with more than 20 sites operating similar processes within these categories. For QMS, the use of multi-site sampling will follow as processes mentioned in PROC 22. This applies to the initial certification, to surveillance and to recertification audits. The CAB shall justify its decision on sampling for multi-site certification. (See PROC 22)
Where multi-site sampling is permitted, following certification, the annual internal audit program shall include all sites of the organization.

Where UCS offers multi-site sampling categories A, B, E (limited preparation cooking), F (re-heating type facilities), and G (re-heating type facilities) (refer to Table A.1 in scheme requirements), UCS utilizes a sampling programme to ensure an effective audit of the QMS /FSMS where the following apply:
For FSMS:

- For organizations with 20 sites or less, all sites shall be audited. The sampling for more than 20 sites shall be at the ratio of 1 site per 5 sites. All sites shall be randomly selected and, after the audit, no sampled sites may be nonconforming (i.e. not meeting certification thresholds for ISO 22000).
- At least annually, an audit of the central office for the FSMS shall be performed by the UCS.
- At least annually, surveillance audits shall be performed by UCS on the required number of sampled sites.
- Audit findings of the sampled sites shall be considered indicative of the entire system and correction shall be implemented accordingly.

For QMS:

- Refer to PROC 22 (Multi-site client)

UCS provides a written report for each audit. The audit team may identify opportunities for improvement but shall not recommend specific solutions. Ownership of the audit report are maintained by UCS.

Minimum audit time (refer PROC24)

In determining the audit time needed for each site, as required in PROC24, UCS considers the minimum audit duration for initial certification given in PROC24.

For FSMS, a HACCP study corresponds to a hazard analysis for a family of products/services with similar hazards and similar production technology and, where relevant, similar storage technology.

The minimum time for on-site auditing of the product and/or service realization of the organization shall be 50 % of the total minimum audit time (applies to all type of audits).

The number of auditors per audit day shall take into consideration the effectiveness of the audit, the resources of the organization being audited as well as the resources of UCS.

Where additional meetings are necessary, e.g. review meetings, coordination, audit team briefing, an increase in audit time may be required.

The number of employees involved in any aspect of food safety/QMS shall be expressed as the number of fulltime equivalent employees (FTE). When an organization deploys workers in shifts (including seasonal workers, installation, construction site) plus office workers.

Other factors may necessitate increasing or reducing the minimum audit time (e.g. number of product types, number of product lines, product development, number of critical control points, number of operational prerequisites programmes, building area, infrastructure, in-house laboratory testing, need for a translator). (See F06 Contract review)

Calculation of minimum audit time (refer PROC24)
The minimum audit time for initial / surveillance / recertification audit calculation refers to PROC24

3.Quotation / Application / Contract
UCS then sends the client a quotation <F05 Quotation> covering the three years of auditing and the certification cycle. When the client accepts the quotation UCS then send a detailed contract, accompanied by the detailed legality and Regulations governing certification Contract <F09 Contract & Acceptance>.

4.Auditor(s) selection
UCS then selects an audit team or individual auditor in such a way that audit team comprising one more auditors with or without support of technical expert; or individual auditor with or without support of technical expert that the audit team or individual auditor qualify all the requirements of auditing in terms of Scope wise qualification, Working experience, Auditing experience so that the requirement of scope competency as per relevant standard and ISO 19011, UCS procedure are adequately met.

UCS select its audit time based on its competency criteria as defined in PROC 03 and F23 FSMS/QMS competency criteria of technical areas.

It also ensures that an audit team meets the following criteria before assigning any audit.

- Familiarity with the applicable legal regulations, certification procedures and certification requirements;
- Thorough knowledge of the relevant assessment method and assessment documents;
- Appropriate technical knowledge of the specific activities for which certification is sought and, where relevant, with associated procedures and their potential for failure (Technical experts who are not auditors may fulfil this function);
- Understanding sufficient to make a reliable assessment of the competence of the organization to provide products, processes or services in its certified scope;
- Ability to communicate effectively, both in writing and orally, in the required languages;
- Free from any interest that might cause team members to act in other than an impartial or

non-discriminatory manner, for example: providing of consulting services, training etc. to the organization; As per agreement with the audit team members it is mandatory to inform UCS, prior to the assessment, about any perceived conflict of interest.

In case of use of more than one auditor for a single audit Lead auditor will arrange physical, verbal or electronic meeting/ discussion among auditors about sharing of roles and responsibilities before starting the audit assignment. Records should be maintained to the extent possible. Refer: F06 Contract Review & Manday determination Form & Assignment Form.

UCS notifies its clients in advance about the audit team and the scheduled audit dates, giving them the opportunity to express any concerns about the assigned auditors or experts. After the notification has been sent, the client coordination team must keep a record of this communication in the client's folder each time.

Audit team are formally appointed through audit team assignment form and provided with the appropriate working documents.

The audit mandays are determined adequately requiring for the audit team to examine the structure, policies and procedures of the organization and confirm that these meet all the requirements relevant to the scope of certification, and that the procedures are implemented and are such as to give confidence in the organization's respective management system.

The same also further clearly informed to the audit team and the certification personnel through audit team assignment form.

Audit Plan is being informed to client prior to the audit.

The audit team at UCS

a) examines and verifies the structure, policies, processes, procedures, records and related documents of the client organization relevant to the management system,
b) determines that these meet all the requirements relevant to the intended scope of certification,
c) also determines that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client's management system, and
d) communicates to the client, for its action, any inconsistencies between the client's policy, objectives and targets (consistent with the expectations in the relevant management system standard or other normative document) and the results.

UCS provides the name of and, when requested, make available background information on each member of the audit team, with sufficient time for the client organization to object to the appointment of any particular auditor or technical expert and for UCS to reconstitute the team in response to any valid objection.

UCS communicates the dates of the audit as agreed upon, in advance, with the client organization.

UCS carries out on-site audits as per Procedure PROC 22 Multisite Client and in accordance with the relevant guidance provided in ISO 19011.

If there is more than one auditor carrying out a particular audit, the lead auditor shall take responsibility for planning the audit and liaising with others in the audit team. Use of support auditors or technical experts should be reviewed with UCS to check any restrictions of use that may apply to the audit team members.

The Audit teams are kept on provided with up-to-date assessment instructions and all relevant information on certification arrangements and procedures. Certification Manager periodically review the changes and keep on circulating the same among the auditors and technical experts.

5.Certification Assessment Stage 1

To ensure that the client achieves the optimum result from the certification process the certification assessment is carried out in two stages. The first stage is essentially a preliminary check of the management system and its documentation to establish that the client's readiness. At the end of the Stage 1 the client is notified of any aspects of the system that may not be in compliance with the requirements. Stage 1 audit findings including areas that could be classified as nonconformity during the stage 2 audit are documented in audit report R01 are communicated and handed over to the client upon completion.

The client is informed that the results of the stage 1 audit may lead to postponement or cancellation of the stage 2 audit during opening meeting.

Stage 1 audit may also include Documents review at site.
After satisfactory compliance of Stage 1 audit, Stage 2 audit i.e. detailed compliance audit can be planned.

It is important to understand that Stage 1 audit is not a consultancy audit, and the auditor is not permitted to provide any advice in relation to how any deficiencies could be resolved.

The purpose of stage 1

a) review the client's management system documented information;
b) evaluate the client's site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for stage 2;
c) review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system;
d) obtain necessary information regarding the scope of the management system, including:
— the client's site(s);
— processes and equipment used;
— levels of controls established (particularly in case of multisite clients);
— applicable statutory and regulatory requirements;
e) review the allocation of resources for stage 2 and agree the details of stage 2 with the client;
f) provide a focus for planning stage 2 by gaining a sufficient understanding of the client's management system and site operations in the context of the management system standard or other normative document;

g) evaluate if the internal audits and management reviews are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage 2.

In exceptional circumstances, part of stage 1 can take place document review or remote audit and shall be fully justified. The evidence demonstrating that stage 1 objectives are fully achieved shall be provided. Exceptional circumstances can include very remote location, short seasonal production, disease pandemic and products with low risk for food safety etc.

Examples business in stage 1 can take place document review or remote audit as below;

a) Fresh fruit and vegetable collection center.
b) Manufacture of packaging for foods.
c) Others as appropriate, The Head of Certification will reviewed taking auditing method and decision to ensure that the objectives of stage 1 is demonstrated.

6. Certification assessment Stage 2

Against successful preparation as confirmed by auditor(s) through completion of Stage 1 audit process including raising, acknowledging noncompliance and successful acceptance of correction and corrective actions against noncompliance of Stage 1 Audit, on a date agreed with the client Stage 2 of the assessment of the system is carried out. Generally, the minimum gap of Stage 1 and stage 2 audits should be 7 days, but in can be reduced with prior authorization from Head of certification or Managing Director or in their absence any other directors who have not participated in the audit process, provided the preparation found adequate, the clients provide commitment to take speedy action.

Evidence of such communication for audit team and subsequent authorization must be documented in the audit file.

The maximum interval between stage 1 and stage 2 audits is not accepted more than 6 months

Stage 2 audit is a detailed assessment of the individual processes (both main processes and support processes).

Against completion of Stage 2 audit process including raising, acknowledging noncompliance and submitted correction and corrective actions against noncompliance of Stage 2 Audit, The Lead auditor is only authorized to make a recommendation to UCS. The recommendation may be one of the following:

- Unreserved recommendation to grant certification
- Recommendation to grant certification when certain specific issues have been resolved. This may require a follow-up visit to verify the corrective action.
- Recommendation to refuse certification. This requires a full re-assessment. It is unusual for an organization that has completed Stage 1 to have this result at the end of Stage 2.

The purpose of stage 2 is to evaluate the implementation, including effectiveness, of the client' s management system. The stage 2 shall take place at the site(s) of the client. It shall include the auditing of at least the following:

a) information and evidence about conformity to all requirements of the applicable management system standard or other normative documents;

b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);
c) the client's management system ability and its performance regarding meeting of applicable
d) statutory, regulatory and contractual requirements;
e) operational control of the client's processes;
f) internal auditing and management review;
g) management responsibility for the client's policies.

Note 2 : For the initial audits according to the TAS standards, such as TAS 9047, TAS 9046, TAS 9070, TAS 1004, etc. Customer must provide a sample to demonstrate the virtual production process for the auditor to review (in the case of an out-of-season assessment).

7. Certification Grant and Surveillance audits

UCS's Certification Manager against receipt of recommendation received from lead auditor supported with audit pack including audit reports, send the same to the Head of Certification or Technical review Committee for reviewing audit process to ascertain that audit has been conducted as per Man-days, audit resources and audit has been conducted as per requirement of UCS procedures and requirement of relevant standard.

UCS will grants Certificate against satisfactory compliance report from the Head of Certification or Technical review Committee supported with comments from auditors about compliance. The Head of Certification or reviewer (s) alone or in combination of personnel are appointed to review the audit documents finally before submitting the granted certification to final approval from the Managing director.

The Head of Certification or Technical review Committee (s) who will be taking certification decision are also appointed to ensure appropriate competence is demonstrated.

UCS ensures that the Person who take the decision for certification or recertification shall be independent and not participated on the audit program.

Surveillance audits are conducted at planned interval as mentioned in contract review document F06.

For the surveillance audits TAS standard systems, such as TAS 9047, TAS 9046, TAS 9070, TAS 1004, etc., established that:

1. For first surveillance audits, the customer must be audit when the production season arrives without waiting for the planned inspection round.
2. For second surveillance audits, the customer must be audit when the next production season after the 1st Surveillance audits.

Note 3: Established must be at least one unannounced audit of the customer per certification cycle. The audit type may be Onsite audit or Remote audit.

UCS always conducts surveillance and recertification audit as per planned schedule however in certain circumstances like earthquake, flood, insurgencies, terrorist, movement, extraordinary events (such as;

COVID-19) etc. if such schedule gets effected, special permission from the MD shall be taken in advance to maintain the continuation of the certificate with sufficient documentary support like photographs, new paper information etc. In such cases pending audit shall be schedule as soon as possible after restoration of conditions at the audit location.

Audit team tracks and monitor any changes to its certified client and its management system in surveillance audit if it is informed in advance before the audit or otherwise during audit, and accordingly includes those functional areas in audit plan during surveillance audit. Auditor records those findings in audit report (R01) under surveillance audit activities.

The audit plan of surveillance should include at least the following:

a) a review of actions taken on nonconformities identified during the previous audit,
b) treatment of complaints,
c) effectiveness of the management system with regard to achieving the certified client's objectives, and the intended results of the respective management system {s);
d) progress of planned activities aimed at continual improvement
e) continuing operational control,
f) review of any changes, and
g) use of marks and/or any other reference to certification.

For surveillance audit, the customer service team of UCS must notify to the client at least 2 months in advance to appointment an audit date and request for changed documents from the client (if any)

Which is further reviewed by the HOC or Technical Review Committee for taking certification continuation decision.

Definition of a certificate

A certificate is the document issued by UCS to a client once the client has demonstrated compliance to a set of certification criteria. A certificate is generally identified by a unique number.

How to report number of certificates

UCS indicates the total number of certificates issued as per above definition. Valid certificates are issued according to the following rules:

- If a client holds a valid certificate which covers one site, this has to be counted as one certificate (single-site certificate).
- If a client holds one certificate which covers more than one auditable site, it is still counted as one certificate in as much as only one certificate was issued (multiple-site certificate). If, however, the multiple auditable sites are certified individually, then each granted certificate has to be counted (single-site certificate). For multisite address the required information in terms addresses, scopes are mentioned separately in an additional schedule.
- In case of integrated management system audits, if a client is certified to difference, and UCS will issue separate certificate for each management system.

Along with certificate the Contract condition for certification maintenance is issued to client. Surveillance plan of next surveillance is also issued to client along with audit report by Lead auditor, as to inform which processes/sites will be audited as per sample, however System management and critical processes will be covered in every surveillance.

As one of the input of Contact and continuation of Certification, the Client is supposed to comply with

planned Surveillance audits.

Surveillance audits are conducted as per audit plan based on Surveillance plans.

For Stage 1 and Stage 2 and Surveillance Audits, same are carried out as per Audit plan already submitted by UCS. The audit starts with an opening meeting and when the assessment is completed the client is informed of the outcome of the audit in the closing meeting. For audits conducted at multi-locations location wise auditor(s) may have their own audit plan, opening meeting and closing meeting, however as per close liaison with audit team leader.

Location wise if there are more than one auditor, then the team leader of the audit team selects the location wise audit leader.

For audits having more than one day duration, end of day briefing of audits with Client's Management is preferred by UCS, but audit team leader may use his discretion depending upon audit site condition.

The location wise audit leader will submit audit report to each site regarding that site only and he/she will forward the same to audit project Team leader. Audit project team leader will compile all such reports and will finally submit the comprehensive audit report with audit decision for the entire project.

Conclusion of Document for each audit type

Documents	FDA				GHP/HACCP/ TAS.9023/TAS.9024				Other TAS Standard				ISO9001				ISO22000			
	St.1	St.2	Sur	Recer	St.1	St.2	Sur	Recer	St.1	St.2	Sur	Recer	St.1	St.2	Sur	Recer	St.1	St.2	Sur	Recer
F28 Audit Plan	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
F78 Stage 1 Checklist for all standards	✓				✓				✓				✓				✓			
F29 Audit Checklist						✓		✓		✓	✓	✓		✓		✓		✓		✓
F32 Audit Summary					✓	✓	✓	✓					✓	✓	✓	✓	✓	✓	✓	✓
F58 Attendance sheet		✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓	✓
R01 Audit Report					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
R02 Non-conformity form	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
F67 Certification Information		✓		✓		✓		✓		✓		✓		✓		✓		✓		✓
F79 Change information			✓	✓			✓	✓			✓	✓			✓	✓			✓	✓
F64 Audit Programme	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ตส. บันทึกการตรวจสถานที่ผลิตอาหาร		✓	✓	✓																

8. Audit planning

Once any onsite audit at client's site is decided it is confirmed through an audit plan. The audit plan is prepared highlighting what functions will be audited by which auditor at what time for how long duration, also indicating the times for opening meeting, lunch break, reporting time and closing meeting. The audit plan is generally prepared by Lead auditor in a format for audit plan F28. The time spent by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors-in-training) is not counted in the above established audit time as mentioned in the audit plan. However, the use of translators, interpreters may necessitate additional audit time.

Audit Plan in form no. F28 is being informed to client prior to the audit. The audit plan should be sent to all the auditors.

The audit plan should include at least the following:

a) a review of actions taken on nonconformities identified during the previous audit,
b) treatment of complaints,
c) effectiveness of the management system with regard to achieving the certified client's objectives, and the intended results of the respective management system {s);
d) progress of planned activities aimed at continual improvement
e) continuing operational control,
f) review of any changes, and
g) use of marks and/or any other reference to certification.

9. Audit report

On completion of each audit (Stage 1, Stage 2, Surveillance, follow up audit, Re certification, other special audit) the auditor complete a detailed report on the audit including Compliances and non-Compliances both and submits it to the certification Manager. The client also receives a copy of the report (if client request). The ownership of the report is maintained by UCS. Refer format R01. Apart from audit report for any detected nonconformities the same is resolved with client's representatives, non-conformity is graded as major, minor separate non conformity reports as issued and acknowledged from client.

Auditor may also raise observation (potential non conformity)
Audit report contains the references of non-conformity reports, observations issued.

Non conformity: Non fulfillment against the requirements of standard, documents as required against the standard, legal and regulatory requirements under the scope in question against the requirement of standard.

Grading of Nonconformity:

Major Nonconformity: The absence of, or the failure to implement and maintain, one or more requirements of the relevant standard under auditing, or a situation, which would, on the basis of available objective evidence raise significant doubt as to the conformity of the product sent by the company, bearing high risk severity. (Major NC = 30 Day)

Note: A major nonconformity may be an individual nonconformity or a number of minor but related nonconformities, which when considered in total are judged to constitute a major nonconformity. In case of Major Nonconformity follow up audit can be planned depending upon the severity of the Nonconformity.

Minor Nonconformity: A minor nonconformity shall be allocated to a single isolated failure in the area concerned to comply with the requirement of relevant standard under auditing or with the specified requirements the organization is subscribed to as per the scope of the standard having moderate risk, without constituting an overall system failure. (Minor NC = 60 Day)

For non-conformities as per requirement of certification and auditing, corrections (immediate disposition) and corrective actions (Appropriate actions against cause of detected nonconformities) are required to be taken.

Opportunities for improvement (OFI) : While a particular process may be effective, it might not be as efficient as it could be. It might be the case that the auditor has specialist knowledge or has explored best practice with the auditee. However, third party auditors should exercise caution as identifying OFI could be construed as giving advice/consultancy.

10. Planning, preparation and conducting the audit.

In case of use of more than one auditor for a single audit Lead auditor will arrange physical, verbal or electronic meeting/discussion among auditors about sharing of roles and responsibilities including the facilities of logistics, before starting the audit assignment. Records should be maintained to the extent possible.

For sole auditor, the auditor is to do the necessary audit related planning as mentioned above.
A typical onsite audit might be:

- Opening meeting
- Visit of facilities and tour
- Conducting audit as per audit plan
- Discussions of auditors on audit findings and coming to common understanding
- Feedback findings to management team and acknowledging the nonconformities
- Audit reporting
- Closing meeting

UCS communicates the dates of the audit as agreed upon, in advance, with the client organization. UCS to check any restrictions of use that may apply to the audit team members.

Auditors to take with them

☐ Map/directions to site
☐ Manual /documents supplied by Client
☐ Any documentation /authorization supplied by UCS
☐ Standard audit pack
☐ Audit plan

11. The Opening meeting

The Audit activities at site shall start with opening meeting. This meeting shall normally last no more than 15minutes. The lead auditor shall retain control of the meeting at all times. This includes sitting in a key position and if necessary, standing up to become the natural focal point. If any member of the audit team wishes to contribute it should always be under the direction of the lead auditor who is acting as Chairperson.

The people who would normally attend the Opening meeting are:-

- The lead auditor and audit team.
- The organization's management representative (if any)/HACCP /food safety team leader or coordinator.
- The guides for the auditors.
- Client's Top management representatives.
- Any appropriate members of the company who wish to be presented.

The opening meeting shall be attended by the most senior people in the company (Top Management) to assist in the demonstration of commitment.
The meeting must be run to an agenda.
If Guides are used their role must be explained.

12. Audit

The audit should be conducted as per audit plan. The Audit plan can only be modified to adjust local inconvenience as asked by the client.

13. The Closing meeting

This meeting conducts before the closing out any audit and shall normally last no more than 30 minutes. The Closing meeting is potentially the most confrontational part of the audit and the lead auditor should make every effort to ensure that the meeting goes well - even if it is not good news for the company. It is important that the lead auditor should remain in control of the meeting, the principles of the Opening meeting should be applied - i.e. lead auditor at the front of room, and auditors contribute under direction of lead auditor.

Preparing audit conclusions

Prior to the closing meeting, the audit team reviews the audit findings, and any other appropriate information collected during the audit, against the audit objectives and agrees upon the audit conclusions, taking into account the uncertainty inherent in the audit process and also identifies any necessary follow-up actions required. It also confirms the appropriateness of the audit programme or identify any modification required (e.g. scope, audit time or dates, surveillance frequency, competence etc.). The attendance is normally as for the Opening meeting.
A reasonable level of discussion in relation to the findings of the audit shall be permitted to ensure the client has a good understanding of the audit findings - particularly nonconformities. The key to a successful Closing meeting is to ensure that there are no surprises. This is best accomplished by keeping the client informed as the audit proceeds. All signatures on nonconformities should be obtained before the Closing meeting starts if possible.

14. Opening Meeting Agenda

<Refer F58 attendance sheet>

15. Closing Meeting Agenda

<Refer F58 attendance sheet>
The format <F58> mentioned above is used for referring agenda of opening meeting and closing meeting. The format is also having the provision of recording signatures of attendee in both the meeting.

16. Auditor's Notes

All evidence obtained during an audit should be recorded on Auditor's Note.
It acts an aid to verify the content and trend of auditing process for the technical reviewer.
It helps in preparation of audit for auditors in next/future audits.

17. Factors affecting recommendations

In deciding on the recommendation, the Lead Auditor shall consider:

a) the adequacy of the client 's management system
b) the range of facilities, competencies on the part of the client, relevant to the proposed scope of certification
c) the number and seriousness of the individual nonconformities found during the Audit,
d) the effectiveness of the system in meeting the requirements of the auditing standard, and
e) the reliance that can be placed on depth and coverage of management system.

Where requirements of the auditing standard are established, and nonconformities are settled with appropriate corrective actions, the Lead Auditor will normally recommend the client for certification and submit audit reports to UCS for further process of certification.

18. Review of the audit process (Granting Certificate, Maintaining Certificate)

The Certificate Manager shall prepare information for the certification decision included, as a minimum:

- F03 Information for application for quotation
- F06 Contract review
- F66 Audit and auditor approval for other location
- F05 Quotation
- F09 Contract & Acceptance
- F64 Audit Programme
- Audit Report Pack
- NCR & OFI
- F60 Certificate (Draft Cert)
- Others (if any) such as
    - test analysis report; Cadmium, Basic Yellow 2 of fresh durian
    - test analysis report; pathogenic microorganisms of frozen durian

After preparing document for certification decision, HOC or Technical Review Committee will review and decision for grant certificate/maintaining certificate and then send F61 Technical Review Report to managing director for approved

Note.4 In the case where a certified client wishes to amend the registered production site address (e.g., by adding a building number or specific lock number), UCS will consider and decide on the certification based on the following guidelines: If the latest audit was conducted less than 3 months, the client must submit relevant supporting evidence for UCS's consideration, including:

1. Photographs of the designated block area as per the requested certification number
2. Photographs clearly showing separated facilities for each lock, such as toilets, handwashing stations, lighting, chemical storage areas (if chemicals are used), and chemical disposal pits (if

applicable)

3. Documents and records, such as production process diagrams and sanitation records (e.g., cleaning activities, pest control)
4. Analysis results for the 4 pesticide groups / BY2 & Cadmium in durian products (if applicable)
5. Any other relevant evidence, as necessary

Note 5. In cases where a client has been certified under the UCS, changes the name of their business and company registration number, but the business location, address and company's manager director remains the same, UCS will send the client specifying details of the client's information confirmation and change (F79 Current Information Confirmation and Change Notification Form). The Certificate Manager shall prepare information for the certification decision included, as a minimum:

- F79 Current Information Confirmation and Change Notification Form
- F60 Certificate (Draft Cert) (if any)
- F61 Technical Review Report
- Others (if any) such as
    - Legal Entity Registration
    - Food production license (if any)

19. Certification and registration

After approval for granting of certificate, the certificate is prepared as per form (template) F60 and signed by managing director and presented to the Client who is also added to the register of certified clients.

20. Certificate signing authorization:

Against successful compliance of auditing and certification process, the authorized person who can only signed for approval for the certificate is: **Akekawut Satayaprasert (Managing Director)**

21. Control on Certificates:

UCS highlights the date of approval, validity, Revision no. and revision date in its certificate to maintain traceability with the initial certificate number.

Replacement against revisions of the certificates at any period within the certification cycle time are controlled through its current revision no. and date of revision. However, there will not be any change in its certificate number whereas there may be changes in other variable fields in the certificate like name, address, scope, validity date

In case of recertification, certificates are identified with the same initial certificate number along with current approval date, revised validity with provision of revision number and revision date.

22. Re-Certification

When the period prescribed as per validity of Certificate is elapsed, the new Certification cycle begins again. The purpose of Recertification audit is to verify overall continuing effectiveness of the client's management system in its entirety. This is conducted every three years, to allow the reissue of the certificate. The Recertification should review past performance of the system over the previous three years. This is an on-site audit, which may be included during the last surveillance audit of the period. The Head of Certification will review any known issues affecting certification prior to confirmation and re-issue of the certificate and appendix for a further three-year period

All the processes of stage 2 and surveillance audits are applicable in recertification audit. Recertification audits are planned and conducted to evaluate the continued fulfillment of all the requirements of the relevant management system standard or other normative document.

The purpose of the recertification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of certification.

The recertification audit considers the performance of the management system over the period of certification, and also includes the review of previous surveillance audit reports.

Cases where significant changes are reported or informed to the management system, the client, or the context in which the management system is operating (e.g., changes to legislation), expansion, addition of units, manpower a fresh contract review is done and if required stage 1 audits are also considered under recertification audit. For multiple sites or certification to multiple standards, recertification audit is planned to ensure adequate on- site audit coverage.

Related changes are accordingly conveyed to the client along with a fresh contract document in this regard.

For Re-certification, the customer service team of UCS must notify to client at least 4 months in advance to appointment an audit date and request for changed documents (if any).

Note 6: For Re-certification of TAS standard systems, such as TAS 9047, TAS 9046, TAS 9070, TAS 1004, etc., the customer must be audited when the next production season after the second surveillance audits.

23. Special Audits and short notice audit:

UCS also conducts special audits against the following

Request for pre-assessment audit carried out to establish its state of readiness, modification (extension/reducing) of scope of a certification which has already granted.

This audit undertakes a review of the application and determines any audit activities necessary to decide whether or not the extension may be granted. Such review is performed in separate contract review form (F06) and support of application information are kept in the audit file. Onsite visit is also undertake depending upon the type and extent of extension/modification of scope or client's sites and F29 Audit Checklist must be used to verify for the compliances of extension/ modification of scope or client's sites of a certification which has already granted. Competency of the Audit team are also determined and required auditors /technical experts are appointed as applicable.

This may be conducted in conjunction with a surveillance audit, in that case UCS Determines the audit time taking into consideration the importance of the processes and areas to be audited relevant to the extension/ modification of scope.

- If there is a noticeable change in management systems of the client i.e. merging/ de-merging etc.
- The special audit needs to be conducted in this case with prior consent.

- Complaints received on the activities of certified client

The audit may be conducted with prior intimation or UCS may conduct surprise audit also. UCS may also conduct audits of certified clients at short notice to investigate complaints or in response to changes, or as follow up on suspended clients.

In such cases

a) UCS informs in advance to the certified clients the conditions under which these short notice visits are to be conducted, and

b) UCS also exercises additional care in the assignment of the audit team because of the lack of opportunity for the client to object to audit team members.

c) In the case where a certified client wishes to amend the registered production site address (e.g., by adding a building number or specific lock number), and the latest audit was conducted more than 3 months ago, UCS will consider conducting an additional Special Audit. The audit duration (Manday) must be at least equal to or greater than that of a Surveillance audit.

24. Transfer audit of Existing certified by other CB

Eligibility of a Certification for Transfer

1.Only certification which is covered by an accreditation of an IAF or Regional MLA signatory at Level 3 and where applicable level 4 and 5 shall be eligible for transfer. Organizations holding certification that is not covered by such accreditations shall be treated as new clients.

2.Only valid accredited certification shall be transferred. Certification which is known to be suspended shall not be accepted for transfer.

3.In cases where certification has been granted by a certification body which has ceased trading or whose accreditation has expired, been suspended or withdrawn, the transfer shall be completed within 6 months or on expiration of the certification whichever is sooner. In such cases, the accepting certification body shall inform the accreditation body, under whose accreditation it intends to issue the certification, prior to the transfer.

UCS generally refrains from conducting any Transfer audit of Existing certified by other CB. However, if Transfer audit of Existing certified by other CB becomes essential, it should have special permission from Head of certification. The information also needs to be shared with the Existing Certification body. UCS advises the existing Certification body on date for completion of transfer which is not more than one calendar month ahead of the request and on all information required to complete transfer including, last certification audit report and any outstanding non- conformities etc. (See F73 Transfer review form)

If the issuing CAB is not cooperative, UCS follows its own procedure for the same.

In case of conducting the transfer audit, the same is conducted strictly as per followings:

- Ensuring that existing certification is being maintained satisfactorily and without discontinuation.
- Ensuring that there are no major issues pending with current CB from the client's side.
- Ensuring that no conflict of interest is developed
- Adhering to relevant IAF MD for planning and conducting transfer audit

- Adhering to UCS procedures for auditing and certification management
- Entire process of auditing and certification needs to be completed within validity of existing certificate complying IAF MD, ISO 17021, ISO 22003 requirements.

On successful compliance of auditing requirements as per standard(s) in question, UCS issues fresh certificate, the validity of which remains same as per the current validity of existing certificate.

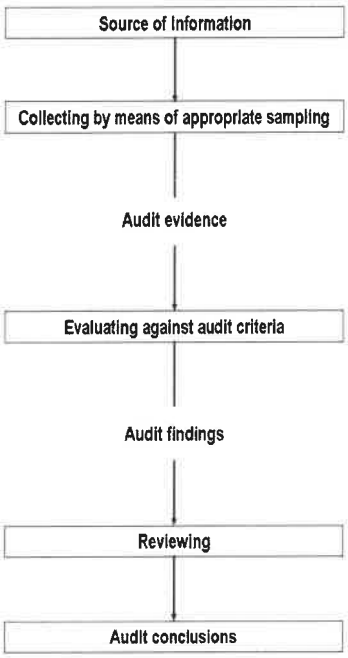
25. Collection and verification of information

During the audit, information relevant to the audit objectives, audit scope and audit criteria, including information relating to interfaces between functions, activities and processes, are collected by means of appropriate sampling and should be verified.

Only information that is verifiable are accepted as audit evidence. Audit evidence relevant to the audit findings are recorded in the Auditors Note.

If during collection of evidence, the audit team becomes aware of any new or changed risk, they are addressed accordingly.

The following Figure provides an overview of the process, from collecting information to reaching audit conclusions.



Audits are performed using a range of audit methods. An explanation of commonly used audit methods can be found below. The audit methods chosen for an audit depend on the defined audit objectives, scope and criteria, as well as duration and location (sites). Available auditor competence and any uncertainty arising from the application of audit methods are also considered. Applying a variety and combination of different audit methods optimize the efficiency and effectiveness of the audit process and its outcome.

Performance of an audit involves an interaction among individuals with the management system(s) being audited and the technology used to conduct the audit. If an audit involves the use of an audit team with multiple members, both on-site and remote methods may be used simultaneously.

26. Possible Evaluation Methods

Extent of involvement between the auditor and the auditee	Location of the auditor	
	On-Site	**Remote**
Human Interaction.	-Conducting interviews. -Filling checklists and questionnaires with auditee participation. -Document review with auditee participation.	- Via communication means: - Conducting interviews. - Filling checklists and questionnaires. - Document review with auditee participation.
No Human Interaction	-Observation of work performed. -Site visit. - Filling checklists. - Sampling (e.g. products). - Document review (e.g. records).	-Document review. -Observation of work performed via surveillance means.
On-site audit activities are performed at the location of the auditee. Remote audit activities are performed at any place other than the location of the auditee, independent of the distance. Interactive audit activities involve interaction between the auditee's personnel and the audit team. Non-interactive audit activities involve no human interaction with persons being audited but do involve interaction with equipment, facilities and documentation.		

27. Lists for additional items that can be considered when preparing or revising the audit plan.

a) the scope and complexity of the client's management system;

b) products and processes (including services);

c) size of the client organization

d) sites to be audited;

e) language of the client organization and languages spoken and written;

f) the requirements of sector or regulatory schemes;

g) client and their customers' requirements and expectations;

h) the number and timing of shifts;

i) audit duration required for each audit activity;

j) competence of each member of the audit team;

k) the need to audit temporary sites;

l) results of the stage 1 audit or of any other previous audits;

m) results of other surveillance activities;

n) demonstrated level of management system effectiveness;

o) eligibility for sampling;

p) customer complaints;

q) complaints received by the certification body about the client;

r) combined, integrated or joint audits;

s) changes to the client's organization, products, processes or its management system;

t) changes to the certification requirements

u) changes to legal requirements; and

v) changes to accreditation requirements.

w) use of marks and/or any other reference to certification.

28. Determining Audit objectives scope and criteria

UCS determines the audit objectives prior to plan any audit refer F28. After discussion with the client the audit scope and criteria, including any changes if informed are determined.

Audit objectives describes what is to be accomplished by the audit and include the following:

- determination of the conformity of the client's management system, or parts of it, with audit criteria
- evaluation of the ability of the management system to ensure the client organization meets applicable statutory, regulatory, and contractual requirements.
- evaluation of the effectiveness of the management system to ensure the client organization is continually meeting its specified objectives.
- as applicable, identification of areas for potential improvement of the management system.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organizational units, activities, and processes to be audited etc.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit not cover the full certification scope, is the totality of audits consistent with the scope in the certification document.

All the points as given in lists for additional items are considered when preparing or revising the audit scope.

The audit criteria used as a reference against which conformity need to determine, includes:

- the requirements of a defined normative document on management systems.
- the defined processes and documentation of the management system developed by the client.

29. Preparing the audit plan

The audit plan is prepared such a way that it suits the objectives and the scope of the audit.
The audit plan includes the following:

- audit objectives,
- audit criteria,
- audit scope,
- identification of the organizational and functional units or processes to be audited,
- dates and sites where the on-site audit activities are to be conducted, including visits to temporary sites and remote auditing activities, where appropriate;
- visits to temporary sites, as appropriate,
- the expected time and duration of on-site audit activities;
- use of marks and/or any other reference to certification.

Once the audit is conformed, the roles and responsibilities of the audit team members and accompanying persons are informed to the client though Audit intimation Letter which is sent to the client along with the audit plan. All the points as given under sl.no.26 are considered when preparing or revising the audit plan

30. Audit team selection and assignments

UCS follows processes for selecting and appointing the audit team, including the audit team leader, taking into account the competence needed to achieve the objectives of the audit.
If there is only one auditor, the auditor should have the sector specific competence to perform the duties of an audit team leader applicable for that audit.
In deciding the size and composition of the audit team, UCS considers the followings factors:

- audit objectives, scope, criteria and estimated time of the audit;
- whether the audit is a combined, integrated or joint audit;
- the overall competence of the audit team needed to achieve the objectives of the audit;
- certification requirements (including any applicable statutory, regulatory or contractual requirements);
- language and culture;
- whether the members of the audit team have previously audited the client's management system.
- Any other issues including chances of Conflict of interest.

The sector specific competency criteria, including the knowledge and skills as required for the audit is not matching with the competency of the selected auditors in such circumstances the knowledge and skills of the audit team leader and auditors are supplemented by the technical experts, translators, and interpreters. However, they operate under the direction of an auditor or audit team leader.

Translators or interpreters are selected such that they do not unduly influence the audit. UCS also

takes care all the issues related to conflict of interest for such audit team member.

The role of technical experts during an audit activity shall be agreed to by the CAB and client prior to the conduct of the audit. A technical expert shall not act as an auditor in the audit team. The technical experts shall be accompanied by an auditor.

The criteria for the selection of technical experts are determined on a case-by-case basis by the needs of the audit team and the scope of the audit.

Auditors-in-training sometime are included in the audit team as participants, provided a competent auditor is appointed as an evaluator to take over the duties and have final responsibility for the activities and findings of the auditor-in-training.

The audit team leader, in consultation with the audit team, assigns to each team member responsibility for auditing specific processes, functions, sites, areas or activities.

These assignments take into account the need for competence, and the effective and efficient use of the audit team, as well as different roles and responsibilities of auditors, auditors-in-training and technical experts.

Changes to the work assignments may be made as the audit progresses to ensure achievement of the audit objectives however the same shall be under the direction and approval of the audit team leader.

31. Communication during the audit

During the audit, UCS's audit team periodically assesses audit progress and exchange information.

The audit team leader reassigns work as needed between the audit team members and periodically and communicates the progress of the audit and any concerns to the client.

Where the available audit evidence indicates that the audit objectives are unattainable or suggests the presence of an immediate and significant risk (e.g. safety), the audit team leader reports the same to the client and, if possible, to UCS Management to determine appropriate action.

Such action includes reconfirmation or modification of the audit plan, changes to the audit objectives or audit scope, or termination of the audit.
The audit team leader also reports the outcome of the action taken to UCS.
The audit team leader also reviews with the client any need for changes to the audit scope which becomes apparent as on-site auditing activities progress and reports the same to UCS.

32. Observers and guides

Observers

Observers can be members of the client's organization, consultants, witnessing accreditation body personnel, regulators, or other justified persons.

The presence and justification of observers during an audit activity are agreed to by UCS and client prior to the conduct of the audit.

The audit team ensures that observers do not influence or interfere in the audit process or outcome of the audit.

Guides

The responsibility of a guide includes:

- establishing contacts and timing for interviews.
- arranging visits to specific parts of the site or organization.
- ensuring that rules concerning site safety and security procedures are known and respected by the audit team members.
- witnessing the audit on behalf of the client.
- providing clarification or information as requested by an auditor.

UCS requires each auditor need to be accompanied by a guide, unless otherwise agreed to by the audit team leader and the client.

Guide(s) are assigned to the audit team to facilitate the audit by the client organization. However the audit team ensures that guides do not influence or interfere in the audit process or outcome of the audit.

33. Identifying and recording audit findings

UCS auditors write their audit findings, summarized with conformity and detailing nonconformity and also supporting with audit evidence recorded and reported to enable an informed certification decision to be made or the certification to be maintain.

Opportunities for improvement are also need to be identified and recorded, unless prohibited by the requirements of a management system certification scheme, in Audit report R01.

However, audit findings which are nonconformities in nature cannot be recorded as opportunities for improvement.

Nonconformities can be classified as major and minor. Detail has been described under section 9 of this procedure; however, nonconformities need to be recorded against a specific requirement of the audit criteria, and the same shall contain a clear statement of the nonconformity and identify in detail the objective evidence on which the nonconformity is based.

Auditors need to discuss the Nonconformities with the client to ensure that the evidence is accurate and that the nonconformities are understood by the Auditee. Auditors cannot suggest the cause of nonconformities or their solution.

The audit team leader shall attempt to resolve any diverging opinions between the audit team and the client concerning audit evidence or findings, and unresolved points are also need to be recorded accordingly.

Note 7: Audit findings for TAS 9047 must be that evidence of Basic Yellow 2 and Cadmium analysis results no more than 1 year old, including for TAS 9046 must be that evidence of pathogenic microorganisms analysis results no more than 1 year old. There are must be included as part of the certification decision for fresh fruit collection and packing plants that also have durian products.

REFERENCE RECORDS:

Record Ref.	Name of Record	Retention
ISO/IEC 17021	Available from your national standards writing body	until there is a change
ISO 22003-1	Food safety — Part 1: Requirements for bodies providing audit and certification of food safety	until there is a change
IAF MD 1	IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization	until there is a change
IAF MD 2	IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems	until there is a change
IAF MD 3	Advanced Surveillance and Recertification Procedures (ASRP)	until there is a change
IAF MD 4	IAF Mandatory Document for The Use of Information and Communication Technology (ICT) for Auditing/Assessment Purposes	until there is a change
IAF MD 5	Determination of Audit Time of Quality and Environmental Management Systems	until there is a change
IAF MD 11	IAF Mandatory Document for the Application of ISO/IEC 17021-1 for Audits of Integrated Management Systems	until there is a change
PROC 22	Multisite Clients	6 years
PROC 24	Enquiry Handling, contract review	6 years
R01	Audit Report	6 years
R02	R02 Nonconformity Report	6 Years
F03	Information for application for quotation	6 Years
F05	Quotation	6 Years
F06	Contract review	6 Years
F09	Contract & Acceptance	6 Years
F23 XX	Competence Analysis of Technical Areas	6 Years
F28	Audit Plan	6 Years
F29 XX	Audit Checklist	6 Years
F32 XX	Audit Summary	6 Years
F45	Data of Certified Clients	6 Years
F53	Client File Log	6 years

Record Ref.	Name of Record	Retention
F58	Attendance sheet	6 Years
F60	Template Certificate	6 Years
F61	Technical Review Report	6 Years
F64	Audit Programme	6 Years
F67	Certificate information	6 Years
F73	Transfer Review Form	6 Years
F78	Stage 1 Checklist for all standards	6 Years
F79	แบบฟอร์มยืนยันข้อมูลปัจจุบันและแจ้งการเปลี่ยนแปลงข้อมูล	6 Years
ตส.	บันทึกการตรวจสถานที่ผลิตอาหาร	6 Years

End of Procedure