



AUDIT REQUIREMENTS
FSSC 22000 MANAGEMENT SYSTEM

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1. IMPORTANT INFORMATION

The Management Systems certificates are valid for a maximum of three years (unless there is a relevant instruction modifying the validity of the certificate for a particular Standard). The certification and the validity of the certificate for this period have as prerequisite the successful completion of the certification audit as well as the 2 annual surveillance audits (one per year), their timing set out below. If the Organization wishes to renew its certificate and for the next 3 years, then a re-certification audit must be conducted before of the ending of the certificate's validity period, and the Organization shall follow again the same planning of the annual surveillance audits as mentioned above.

The Board of Stakeholders (BoS) Decision list is an FSSC document which contains decisions applicable to FSSC 22000 Scheme. The decisions overrule or provide further clarification on existing Scheme rules and the present Certification Regulation and have to be implemented and applied within the defined transition period. The decision list is dynamic and can be adjusted by the BoS when deemed necessary.

All the Organizations certified according to the requirements of the Scheme will be charged with an annual fee from Q-CERT. Q-CERT will ensure that this fee is collected from the certified organization and will pay it to the Scheme.

The Administration of the Scheme decides on an annual basis on the amount of the fee to be paid by the certified Organization.

The maximum certificate validity period is 3 years from the date of initial certification decision, with subsequent 3-year cycles.

Where a certified organization moves to another location, at least a Stage II audit shall be conducted, resulting in the start of a new 3-year certification cycle.

2. INFORMATION ON THE AUDIT PROCEDURE & CERTIFICATE ISSUANCE

2.1 GENERAL REQUIREMENTS

- ⌋ There should be (for initial audit) record files of at least three months.
- ⌋ The management system designed and implemented by the Organization must cover:
 - ✓ The requirements of the standard ISO 22000:2018
 - ✓ The additional requirements of the FSSC 22000 Scheme as they are documented in paragraph 2.5 of Part 2: Requirements for Organizations to be Audited, AND
 - ✓ The relevant Technical Standard to the activity/ies under certification as defined on the table of Paragraph 3 of Part 1: Scheme Overview and stated on Table I of this document.
- ⌋ Where required by the standard there are must be documented procedures.
- ⌋ Have a full circle of internal audits performed for all the requirements of the standard.
- ⌋ There is a record proving the implementation of the main requirements of the MS.
- ⌋ Conduct and document at least one Management Review which includes an assessment of the continuing suitability, efficiency, effectiveness, and points of improvement of the MS.

- J There is objective evidence that the MS's objective goals are monitored and measured. There is evidence that the MS is constantly improving.
- J Where one or more test or measurement samples are required, the organization will use risk assessment techniques to define sampling for verification or validation purposes of the MS. Validation and / or verification records of the MS, where appropriate and feasible, will be required during the audit.
- J All audits conducted by Q-CERT take place:
 - ✓ over a continuous number of days (excluding weekends when it is not a working day and public holidays)
 - ✓ during normal working days/ hours of the Organization
 - ✓ while representative number of product lines and/or activities covered by the scope of certification are in operation.
- J Organization shall communicate to Q-CERT the following, in a timely manner, to facilitate appropriate audit scheduling:
 - ✓ any local holidays or shutdowns
 - ✓ seasonal activities where relevant

2.2 SCOPE OF CERTIFICATION

Certification according to FSSC 22000 Scheme is possible for the categories of food companies that are stated in Table I of this regulation.

Note: The Table I includes the overview of FSSC 22000 (sub)categories. Please contact Q-CERT for specific categories competency.

2.3 AUDIT PROCESS – ON SITE OPTION

2.3.1 Initial Evaluation (Certification Audit – the Organization does not have another valid FSMS certificate)

The audit of the initial evaluation is conducted in two Stages.

The objective of Stage I is to gather the necessary information in order to schedule Stage II. The perception and understanding of the MS and all programs, the policy of the objective goals and especially the level of preparedness for the audit.

The interval between Stage I and Stage II audits shall not be longer than 6 months. The Stage I shall be repeated if a longer interval is needed.

The initial certification audit (Stage I and Stage II) cannot be performed unannounced.

STAGE I

Stage I will be conducted on-site the organization's premises.

The results of the audit during Stage I will be documented and forwarded to the organization, including areas

needed attention and may be stated as Non-Conformities during Stage II. An audit report shall be communicated to the organization, containing the necessary data as specified in Annex-2-CB-Audit-report-requirements-FSSC-22000-Version-6

Parts of the MS audited during Stage I and considered as fully implemented, effective and in compliance with the requirements, may not be audited during Stage II. The audit report on Stage II shall include findings that prove the compliance during Stage I of the audit.

STAGE II

The Stage II audit is performed on-site the organization's premises to evaluate the implementation and effectiveness of the organization's MS.

Each part of the MS that was fully audited during Stage I, can be excluded from Stage II audit. The audit report of Stage II shall include findings that support the compliance during Stage I.

The audit team will collect objective evidence that the MS complies with the standard and the certification requirements.

The audit team will audit adequate number of examples from the organization's activities relevant to the MS to make correct decision about the implementation and effectiveness of the MS.

The audit team will address a sufficient number of personnel, including operation staff and executives, to ensure that the system is implemented and understood throughout the organization.

During the audit, representative samples of the production processes will be inspected for all types of products included in the scope of certification.

The audit team will analyze the information from both audit stages, to determine the range of compliance with the certification requirements and will decide upon the proposition that will to be submitted to the responsible person for certification. The audit team may propose opportunities for improvement to the organization without making specific proposals.

2.3.2 Initial Evaluation [Certification Audit – the Organization has a certified FSMS (ISO 22000, BRC etc.)*]

When the certification audit is for the transition from another certified Management System recognized by the Scheme (FSSC 22000) like ISO 22000, DUTCH HACCP, or another GFSI recognized scheme (BRC, IFS etc.), there is no need to conduct a two-stage certification audit (Stage I and Stage II) as described above.

The audit will be conducted in one stage, during which all the Scheme's requirements will be inspected.

The audit time corresponds to two-thirds (2/3) of the certification time with a minimum of one day plus the extra time as specified in Part 3 Clauses 4.3.1, 5.2 and 5.8

***Note:** If the transition is also about transferring from another Certification Body, in case of ISO 22000 the additional requirements defined in IAF MD 2 Transfer_of_Certification_Pub2 apply.

2.3.3 Surveillance Audit

Surveillance audits are conducted according to the requirements of Stage I & Stage II in one audit and are documented on an audit program which is forwarded to the organization before the audit takes place.

When carried out, all the requirements of the Scheme are checked by sampling.

Surveillance audits should be carried out one each calendar year with the limitation that the first surveillance audit following initial certification shall not be more than twelve (12) months from the certification decision date.

2.3.3.1 Unannounced Audit

At least one of the two annual surveillance audits shall be unannounced.

The certified organization can voluntarily choose to replace all surveillance audits by unannounced annual surveillance audits.

The Organization can agree in advance with Q-CERT for specific dates within the year during which it may not accept an unannounced audit.

Refusal of the Organization to accept the announced audit results in immediate suspension of the certificate's validity. If the unannounced audit is not conducted within 6 months from the refusal, then Q-CERT shall withdraw the certificate.

Q-CERT sets the date of the unannounced audit typically between 8-12 months after the previous audit.

All Scheme requirements shall be assessed including production or service processes in operation. Where parts of the audit plan cannot be audited, an (announced) follow-up audit shall be scheduled within 4 weeks.

2.3.4 Re-Certification Audit

The re-certification audit is conducted according to the requirements of Stage I & Stage II and can be done in one stage. The re-certification audit will be conducted in two stages if there are large-scale changes in the Management System justifying that need.

If the audit reveals major deviations whose corrective actions will be completed after the Organization's certificate expires, then the certificate ceases to be valid. In this case and also in case where the re-certification audit does not take place within the required period of time (before expiration of the certificate) a period of six months is allowed within which the re-certification audit may be completed. Upon successful completion of the process, the certification body will issue the certificate with date of issue, the date of the certification decision and expiration date according to the previous certification cycle.

Note: Recertification audits may be conducted unannounced at the request of the certified organization.

2.3.5 Audit in case the Organization controls More than One Locations

In case the Organization controls more than one location, then additional to all that is mentioned in paragraphs 2.3.1 to 2.3.4 above, the following apply.

2.3.5.1 Head Office Functions

In all cases where functions pertinent to the certification are controlled by a Head Office* (such as procurement, product development, supplier approval, quality assurance etc.), the Scheme requires that those functions are audited and included in the certification of the site, including interviewing the personnel described in the food safety management system as having the (delegated) authority and responsibility for these functions.

The Head Office audit:

- Is documented
- Is carried out separately for all functions that are not part of a site being assessed
- Is carried out prior to the site audit(s)
- Is announced unless the Head Office is part of the audited site. Then the rules of unannounced audits apply (see 2.3.3.1 above)
- Is carried out at every audit type (initial, surveillance, recertification)

Every site belonging to the group shall have:

- A separate audit
- A separate audit report and certificate where the audited functions at the Head Office will be mentioned
- An audit within 12 months after the Head Office audit, but typically as close to the Head Office audit as possible

The Head Office:

- Does not receive a separate certificate
- Is mentioned on the site certificate by use of appropriate wording according to the standard (part 3, requirements for the certification process, § 5.2.1)

It might be necessary to follow up on certain topics with the Head office during the site audit, in which case the Head office shall make the information available.

Nonconformities identified at the Head office are dealt with according to paragraph 2.5 of this Regulation.

*The Head Office can be part of the same legal entity or part of the same larger organization

2.3.5.2 Off-site Activities

Where one manufacturing, processing or service process is split across more than one physical address, all locations may be covered in one audit provided that the different addresses are part of the same legal entity, under the same FSMS. This applies to Organizations with:

- Two sites (main site and satellite site)
- Or
- A campus style set-up (multiple facilities at one location that is part of the same organization).

These sites are required to be in the same country and the audit must be delivered in a continuous manner that is in

accordance with the audit duration calculated.

Storage facilities at another location shall also be included in the same audit provided they are:

-) part of the same legal entity
-) under the same FSMS.
-) limited to those only used for, and directly linked to the storage of the site's products.

Where activities or services are provided for other customers (including sister companies), separate certification will be required for these off-site storage facilities.

The certificate shall include the audited locations with activities per location (on the certificate or as an Annex to the certificate).

The audit report:

-) clearly reflects what was audited at each location included in the certification,
-) includes a sufficient level of detail (objective evidence) in the summary sections, and
-) allows audit findings to be identified as site specific.

The off-site activities are audited and in case of an unannounced audit.

2.4 AUDIT PROCESS – ICT AUDIT APPROACH OPTION

The ICT audit approach consists of 2 main steps:

- 1) Remote audit consisting of a document review and interviews with key personnel using ICT.
- 2) On-site audit focusing on the implementation and verification of the FSMS (including HACCP), PRPs, the physical inspection of the production process and any remaining requirements not covered during the remote audit.

It is preferred to conduct the remote audit component first, but it is possible to reverse the sequence and start with the onsite audit. In this case:

- The auditor may be required to (re)verify a product/process activity onsite, based on the outcome of the remote audit, which could result in the auditor needing to return to the site to verify this activity.
- Q-CERT and the organization shall accept this risk in writing prior to the delivery of the ICT Audit Approach Audit in this order.
- If the auditor needs to return onsite for the verification activity, this is still considered to be part of the regular audit and must be completed within the overall 30-day timeframe.

The remote and the on-site audit take place as close together as possible, but in all cases the maximum timeline for completion of the audit (remote + on-site) shall not exceed 30 calendar days.

As an exception and only in the case of serious events, the timeline for completion of the audit may be extended to a

maximum of 90 calendar days, based on a clear and documented concession process and risk assessment by Q-CERT.

The ICT audit approach may be applied in the case of:

-)] Surveillance and recertification audits as part of the routine certification process and is additional to Part 3 of the Scheme. The full audit (remote +on-site) shall be completed within the calendar year.
 - ✓ Where the ICT audit approach is applied to the first surveillance audit following an initial certification, the process shall be planned to ensure that the full audit (remote + on-site) takes place before or not later than 12 months after the date of certification decision for the initial audit. Where the timelines as referenced above are exceeded, the full surveillance audit shall be conducted on-site and in line with the audit program or the certificate shall be suspended.
-)] Initial certification audits only the full Stage I audit maybe conducted off-site (with the use of ICT) in exceptional circumstances or events and shall be fully justified. The Stage II audit shall be conducted as a full on-site audit within 6 months of the Stage I or the Stage I shall be repeated. It is not permitted to use the ICT audit approach for the Stage II audit.

Management of nonconformities

-)] Where the audit (remote + on-site) is completed within 30 calendar days, one nonconformity report is completed and the timeline for nonconformity closure starts at the end of the on -site audit. Any nonconformities identified during the audit shall be communicated to the organization in a timely manner. Q-CERT may opt to provide a provisional NC report to the organization at the end of the first audit part delivered.
-)] In the case of a serious event and where the 30 calendar days for audit completion is exceeded, any nonconformities identified as part of the remote audit shall be recorded and a copy of the nonconformity report left with the certified organization at the end of the remote audit. The timeline for closure of these nonconformities start sat the end of the remote audit. The NC report produced following the on-site audit shall contain an overview of all the nonconformities raised, including the nonconformities raised at the remote audit to provide a consolidated record.
-)] The timeline for closure of NCs identified at the on-site audit starts at the end of the on-site audit.
-)] Where a critical nonconformity is identified at any time during the audit (remote or on-site), the certificate shall be suspended, and a full new on-site audit will be required to lift the suspension within 6 months.

Important Note:

Please note that Q-CERT for the whole auditing process with the use of ICT approach, follows the requirements of the Scheme as described in ANNEX 5: CB Requirements for the use of Information and Communication Technology (ICT).

2.5 TRANSFER OF CERTIFICATION

The transfer of certification is defined as the recognition of an existing and valid management system certification, granted by one accredited certification body, (the “issuing certification body”), by another accredited certification body, (the “accepting certification body”) for the purpose of issuing its own certification. The requirements for the transfer of accredited certification as per IAF MD2 shall be followed.

The accepting/new CB needs to determine the eligibility of certification for transfer.

Only existing, valid, and accredited FSSC 22000 certificates may be transferred. It is not possible to transfer expired or suspended certificates.

The issuing certification body shall not suspend or withdraw the organization’s certification following the notification that the organization is transferring to the accepting certification body if the client continues to satisfy the requirements of certification.

The accepting CB shall conduct a pre-transfer review to determine if the certificate may be transferred. This review shall be conducted by means of a documentation review, and where identified as needed, a pre-transfer visit may be conducted to confirm the validity of the certification.

The pre-transfer visit is not an audit.

The pre-transfer review shall be uploaded to the Assurance Platform as part of the transfer.

If there is missing information or the review is unsuccessful, then the client is treated as a new client, requiring a Stage I + Stage II audit. The justification for this action shall be explained to the transferring client and shall be documented by the accepting certification body and the records maintained.

The transfer process, including the issuance of the certificate, shall be completed before the expiry of the current certificate.

The certification cycle shall be based on the previous certification cycle and the accepting certification body shall establish the audit program for the remainder of the certification cycle. This includes determining the next audit duration for either the surveillance audit or the recertification audit using the FSSC calculation.

Dates on Issued Certificate after Transfer

The accepting certification body can quote the organization’s initial certification date on the certification documents with the indication that the organization was certified by a different certification body before a certain date.

However, FSSC requires the initial certification decision date on the certificate to be that of the accepting CB, so linked to the date of certification decision of the pre-transfer review. Likewise, the date of certification decision and issue date will be that of the accepting CB.

The valid until date will remain the same as on the certificate of the other CB as it links to the certification cycle.

2.6 CATEGORIZATION OF FINDINGS

2.6.1 Minor Nonconformity

A minor nonconformity shall be issued when the finding does not affect the capability of the Management System to achieve the intended results. **Special attention must be given to the timeframes described below.**

1. When a minor nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and the proposed corrective action plan (CAP).
2. Corrective action(s) (CA) shall be implemented by the Organization within the timeframe agreed with the auditor during the closing meeting.
3. Q-CERT shall review the corrective action plan and the evidence of correction and approve it when acceptable. Q-CERT's approval shall be completed within 28 calendar days after the last day of the audit. Exceeding this timeframe shall result in a suspension of the certificate or in the case of an initial audit, the Stage II audit shall be repeated within maximum 6 months of the last day of the previous Stage II audit.
4. Effectiveness of implementation of the corrective action plan shall be reviewed, at the latest, at the next scheduled audit. Q-CERT shall review the corrective action plan and determine its effectiveness of implementation through recording auditor name and date of review on the CAP.
5. In the event of non-completion of the approved action plan at the next scheduled on-site audit, the auditor will raise a major nonconformity (on management responsibility and resource allocation).

2.6.2 Major Nonconformity

A major nonconformity shall be issued when the finding affects the capability of the Management System to achieve the intended results, or a legislative noncompliance linked to quality. **Special attention must be given to the timeframes described below.**

1. When a major nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and evidence of effective implementation.
2. Corrective action shall be implemented by the Organization and shall submit objective evidence of implementation to Q-CERT within the timeframe agreed with the auditor during the closing meeting.
3. Q-CERT shall review the corrective action plan and related objective evidence of implementation, challenge it if necessary and determine its effectiveness and approve the CAP and CA through recording his/her name and date of review on the CAP within **28 calendar days from the last day of the audit.**
4. Q-CERT shall conduct a follow-up audit to verify the implementation of the CA to close the major nonconformity. In cases where documentary evidence is sufficient to close out the major nonconformity, Q-CERT may decide to perform a desk review.
5. The completion of corrective actions might take more time depending on the potential severity of the major nonconformity and the amount of work necessary to eliminate the causative factors. In such cases the CAP

shall include any temporary measures or controls necessary to mitigate the risk until the permanent corrective action is implemented. Supporting evidence of the temporary measures or controls shall be submitted to Q-CERT for review and acceptance within 28 calendar days from the last day of the audit. A follow-up audit shall be conducted to verify the permanent corrective action and to close the major nonconformity.

6. In the event of non-completion of the approved corrective action shall result in a suspension of the certificate.
7. If a major non-conformity is raised at the Stage II audit, the nonconformity shall be closed by Q-CERT within 28 calendar days from the last day of the audit. Where completion of corrective actions might take more time, the Corrective Action Plan (CAP) shall include the temporary measures or controls necessary to mitigate the risk until the permanent corrective action is implemented. Evidence of these temporary measures shall be submitted and accepted by Q-CERT within 28 calendar days from the last day of the audit. Based on this information, a certification decision shall be taken. In addition, where temporary measures are accepted, Q-CERT shall agree a suitable timeframe with the organization, to verify the effective implementation of the permanent corrective action, but not later than 6 months after the last day of the audit. In any event, where the 28 calendar days after the last day of the audit is exceeded e.g., not closing the major nonconformity or non-acceptance of the evidence of the temporary measures, the full Stage II audit shall be repeated.

2.6.3 Critical Nonconformity

A critical nonconformity is issued when there is a significant failure in the management system, a situation with direct adverse food safety impact and no appropriate action is being observed or when food safety legality and/or certification integrity is at stake. **Special attention must be given to the timeframes described below.**

1. When a critical nonconformity is issued at a certified organization the certificate shall immediately suspended within 3 working days of being issued, for a maximum period of six (6) months.
2. When a critical nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and the proposed CAP. This shall be provided to Q-CERT within 14 calendar days after the audit.
3. A follow-up audit shall be conducted by Q-CERT between six (6) weeks to six (6) months after the regular audit to verify the effective implementation of the corrective actions. This audit:
 - a. shall be a full on-site audit
 - b. shall have a minimum on-site duration of one day
 - c. if successful, then the certificate and the current audit cycle will be restored and the next audit shall take place as originally planned
 - d. shall be documented and the report shall be uploaded on FSSC Assurance Platform as part of the audit documentation linked to the audit where the critical NC was raised.

4. Q-CERT shall withdraw the certificate when the critical nonconformity is not effectively solved within the six (6) month timeframe.
5. When a critical NC is raised at an initial certification audit, the audit is failed, and the full certification audit shall be repeated.

IMPORTANT NOTE: The Scheme does not allow “Opportunities for Improvement”

2.7 SCHEME APPLICATION UP-DATE (FSSC 22000 ASSURANCE PLATFORM)

Q-CERT, for all audit types, shall enter and keep up to date in the FSSC Assurance Platform the required data and documentation, at the latest 28 calendar days after the certification decision with a maximum of 4 months after the last day of the audit, including all audit details (audit records):

-) The audit report (F-3031 Audit Report FSSC Food, in English).
-) The Audit Duration Calculation form (F-?)
-) The Audit Program (F-3116)
-) The Audit Plan (F-3115).
-) The non-conformity report (F-3002)
-) The attendance register that confirms the actual presence of the auditor(s) and organization representatives during the audit. (M-5001)
-) A signed integrity declaration by the senior representative of the organization and the auditor(s) (Annex to M-5001)

2.8 CERTIFICATION DECISION & CERTIFICATE ISSUANCE

Q-CERT:

1. Will take the certification decision and issue the certificate:
 - a. within 28 calendar days from the last day of the audit if no nonconformities were issued
 - or
 - b. within 28 calendar days from the closure of the issued nonconformities
2. Within 28 calendar days from the date of certification decision and until 2 months from the last day of the audit will upload the certificate on the Scheme’s database (FSSC PORTAL) from where the FSSC Register of Certified Organizations is informed and update its own list of certified Organizations.

Features of FSSC 22000 Certificate

FSSC COID Code: Each (certified) organization is allocated a unique code in the Assurance Platform that is linked to the organization, namely the Certified Organization Identification Code (COID). The COID stays with the organization to ensure traceability, also in the event of a transfer. Q-CERT shall communicate the COID to the organization once generated in the Assurance Platform, and to the accepting CB when requested in the case of a transfer.

FSSC COID Code is displayed on the certificate issued by Q-CERT.

QR Code: QR code is supplied through the FSSC Assurance Platform during Organization's registration by Q-CERT, provides information about the certification status of the Organization and is included in the certificate.

3. OBLIGATIONS OF Q-CERT & THE CERTIFIED ORGANIZATION

3.1 Q-CERT'S OBLIGATIONS

QMSCERT commits that access to audit data, and in particular to the Audit Report, will only be permitted to authorized personnel as well as to the Accreditation Body's (ESYD) Authorities and the Scheme's as necessary. In any other case as well as for the disclosure of the results of the audit outside the above entities will be carried out only with the consent of the customer.

If a legal process is launched involving the safety, legality or revocation of a product of a client certified by Q-CERT, Q-CERT will activate the Complaint Management process OP-2080. If the information comes from the authorities, the internet or other source, the Complaint Management process OP-2080 is activated after the information is verified and the client is informed at the same time. Depending on the outcome of the whole process (communication and investigation) the Suspension - Revocation Procedure OP-2030 may be activated.

Q-CERT will:

-) Inform all involved (Certified Organizations, Inspectors, Personnel Management) ~~within one month~~ if the requirements of the Scheme are modified within the timeline specified by the Scheme.
-) Send the full audit report meeting the minimum requirements as set out by the Scheme, to the (certified) organization within 2 weeks of the certification decision for all audits conducted.

Q-CERT, in case of suspension or withdrawal of a certification, shall complete the following actions within 3 working days after the certification decision has been made:

-) Change the status of the certified organization in the FSSC Assurance Platform and its own Register of certified organizations and shall take any other measures it deems appropriate
-) Inform the organization in writing of the suspension or withdrawal decision
-) Instruct the organization to take appropriate steps in order to inform its interested parties

Q-CERT, in case of scope reduction, shall complete the following actions within 3 working days after the certification decision has been made:

-) Change the scope of the certified organization in the FSSC Assurance Platform and its own Register of certified organizations and shall take any other measures it deems appropriate
-) Inform the organization in writing of the scope change
-) Instruct the organization to take appropriate steps in order to inform its interested parties

When requested by the certified organization, Q-CERT shall actively provide the Certified Organization access to the associated Organization Profile, Audit and Certification data registered in the FSSC Assurance Platform using the

available functionality.

Q-CERT shall ensure that Certified Organization access is only granted to authorised individual(s).

3.2 OBLIGATIONS OF THE ORGANIZATION

The certified Organization is obliged to inform Q-CERT within three (3) working days by telephone or by fax or by e-mail at postaudit@gmscert.com in relation to the following:

- i. Any significant changes that affect the compliance with the Scheme requirements and obtain advice of the CB in cases where there is doubt over the significance of a change;
- ii. Serious events that impact the FSMS, legality and/or the integrity of the certification including situations that pose a major threat to food safety, quality, or certification integrity as a result of Force majeure, natural or man-made disasters (e.g., war, strike, terrorism, crime, flood, earthquake, malicious computer hacking, etc.);
- iii. Serious situations where the integrity of the certification is at risk and/or where the Foundation can be brought into disrepute. These include, but are not limited to:
 - a. Public food safety events (e.g., public recalls, withdrawals, calamities, food safety outbreaks, etc.); • Actions imposed by regulatory authorities as a result of a food safety issue(s), where additional monitoring or forced shutdown of production is required;
 - b. Legal proceedings, prosecutions, malpractice, and negligence; and
 - c. Fraudulent activities and corruption.
- iv. Changes to organization name, contact address and site details;
- v. Changes to organization (e.g., legal, commercial, organizational status or ownership) and management (e.g., key managerial, decision-making, or technical staff);
- vi. Major changes to the food safety management system, scope of operations and product categories covered by the certified management system (e.g. new products, new processing lines, etc.);
- vii. Any other change that renders the information on the certificate inaccurate.

Will inform its clients in case of modification of its certification status (suspension or withdrawal of the certificate or reinstatement of a suspended or withdrawn certificate).

Will inform its clients in case Q-CERT's audit result leads to modification of the scope of certification.

By signing the Contract, the Organization accepts the requirements of the Scheme regarding:

-) Exchanging information on the Organization with the Scheme and with State Services (where necessary)
-) Viewing information about its certification status on the Scheme's website.
-) The presence of a Scheme's representative during the audit from Q-CERT.

3.3 MANAGEMENT OF SERIOUS EVENTS

In case the Organization is facing a Serious Event as described above (Obligations of the Organization), must complete and send back to Q-CERT the F-2531 form, in order to assess the situation and take the necessary measures.

In cases where the annual surveillance audit cannot take place within the calendar year as a result of a serious event, an exemption shall be requested from the Foundation or the certificate shall be suspended.

All communication will be kept by Q-CERT as a controlled document.

Depending on the severity of the situation, Q-CERT may:

1. Ask for documentation to be sent to demonstrate that the Organization is able to meet the requirements of the Scheme.
2. Conduct an on-site audit to realize that the Organization is able to meet the requirements of the Scheme.
3. If it receives data from the Certified Organization (as in case 1 above) indicating that the Management System continues to be effective, extend the timeframe set out in the Scheme for performing the surveillance or recertification audit (by updating and obtaining approval from the Secretariat of the Scheme):
 - i. In case of 1st Surveillance Audit: the period shall not exceed the 6 months (i.e. 18 months in total since the date of initial certification).
 - ii. In case of 2nd Surveillance Audit: the above also apply and moreover if the certified organization is forced to discontinue completely its activities (shut down) for a certain period of time (which should not be longer than six (6) months) then the planned audit may be postponed until the Organization's activities are fully operational. The Certified Organization is obliged to inform Q-CERT about the time of commencement of its activities in order to plan and conduct the audit.
 - iii. For recertification audit / certificate's validity: extend the validity of the certificate for a period not exceeding 6 months. The recertification audit can be performed within these 6 months. Otherwise (i.e. if the audit is carried out outside the extension time given) a certification inspection must be conducted.
Note: The expiration date of the certificate will follow the initial certification cycle.
4. To suspend or withdraw the validity of the Organization's certificate if:
 - i. The actions designed and implemented by the Organization are not able to "restore" the management system's compliance with the requirements of the Scheme.
 - ii. Communication with the certified Organization is not possible.
 - iii. The time required to complete the actions exceeds the 6 months in the cases mentioned above.

4. FSSC LOGO USE

The Certified Organization shall use the FSSC 22000 logo only for marketing activities such as organization's printed matter, website and another promotional material.

In case of using the logo, the certified Organization shall:

- request a copy of the latest FSSC 22000 logo from Q-CERT
- comply with the specifications defined by the Scheme in Part 2 of Standard's version 6.

The Certified Organization is not allowed to use the FSSC 22000 logo, any statement or make reference to its certified status on:

1. a product
2. its labelling
3. its packaging (primary, secondary or any other form)
4. certificates of analysis or certificates of conformance (CoA's or CoC's)
5. in any other manner that implies FSSC 22000 approves a product, process or service and
6. where exclusions to the scope of certification apply.

5. FSSC ADDENDA

Foundation FSSC has voluntary Addenda and Modules that can be undertaken together with FSSC 22000 certification audits. Refer to the FSSC website for details on the Addenda and Modules currently offered by the Foundation, including the related conditions and requirements.

TABLE I

Cluster	Category		Subcategory	Examples of included activities and products	Normative Documents
Primary production	B	Farming or Handling of Plants	BIII Pre-process handling of plant products	Activities on harvested plants that do not transform the product from original whole form, including horticultural products and hydrophytes for food. These include cleaning, washing, rinsing, fluming, sorting, grading, trimming, bundling, cooling, hydro-cooling, waxing, drenching, aeration, preparing for storage or processing, packing, repacking, staging, storing and loading.	ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional requirements
Processing food for humans and animals	C	Food, ingredient and pet food processing	CO Animal – Primary conversion	Conversion of animal carcasses intended for further processing including lairage, slaughter, evisceration, bulk chilling, bulk freezing, bulk storage of animals and game gutting, bulk freezing of fish and storage of game.	ISO 22000:2018, ISO/TS 22002-1:2009 FSSC 22000 Additional requirements
			CI Processing of perishable animal products	Processing and packaging including fish, fish products, seafood, meat, eggs, and dairy requiring chilled or frozen temperature control. Processing pet food from animal products only.	ISO 22000:2018, ISO/TS 22002-1:2009, FSSC 22000 Additional requirements
			CII Processing of perishable plant-based products	Processing and packaging including fruits and fresh juices, vegetables, grains, nuts, pulses, frozen water-based products, plant-based meat, and dairy substitutes. Processing pet food from plant products only.	ISO 22000:2018, ISO/TS 22002-1:2009, FSSC 22000 Additional requirements
			CIII Processing of perishable animal and plant products(mixed products)	Processing and packaging including pizza, lasagna, sandwiches, dumplings and ready-to-eat meals. Includes off-site catering kitchens. Includes products of industrial kitchens not offered for immediate consumption. Processing perishable pet food from mixed products.	ISO 22000:2018, ISO/TS 22002-1:2009, FSSC 22000 Additional requirements
			CIV Processing of ambient stable products	Processing and packaging of products stored and sold at ambient temperature including canned foods, biscuits, snacks, oil, drinking water, beverages, pasta, flour, sugar, and food-grade salt. Processing ambient stable pet food.	ISO 22000:2018, ISO/TS 22002-1:2009, FSSC 22000 Additional requirements
	D	Feed and animal food processing	D Processing of feed and animal food	Processing feed material intended for food and non-food producing animals not kept in households, e.g. meal from grain, oilseeds, by-products of food production. Processing feed mixtures, with or without additives, intended for food-producing animals, e.g. premixes, medicated feed, compound feeds.	ISO 22000:2018, ISO/TS 22002-6:2016, FSSC 22000 Additional requirements

Catering / food service	E	Catering / food service		Open exposed food activities such as cooking, mixing, and blending, preparation of components and products for on-site direct consumer consumption or take away. Examples include restaurants, hotels, food trucks, institutions, work places (school or factory cafeteria), including retail with on-site preparation (e.g. rotisserie chicken). Includes reheating of food, event catering, coffee shops and pubs.	ISO 22000:2018, ISO/TS 22002-2:2013, FSSC 22000 Additional requirements	
Retail, transport and storage	F	Trading, retail and e-commerce	FI	Retail /Wholesale/ E-commerce	Storage and provision of finished products to customers and consumers (retail outlets, shops, wholesalers). Includes minor processing activities, e.g., slicing, portioning, reheating.	ISO 22000:2018, BSI/PAS 221:2013, FSSC 22000 Additional requirements
			FII	Brokering /Trading /E-commerce	Buying and selling products on its own account without physical handling or as an agent for others of any item that enters the food chain.	ISO 22000:2018, FSSC 22000 Additional requirements
	G	Provision of Transport and Storage Services	G	Transport and storage services	Storage facilities and distribution vehicles for perishable food and feed where temperature integrity shall be maintained. Storage facilities and distribution vehicles for ambient stable food and feed. Relabelling/repackaging excluding open exposed product materials. Storage facilities and distribution vehicles for food packaging material.	ISO 22000:2018, ISO/TS 22002-5:2019, FSSC 22000 Additional requirements
Packaging material	I	Production of packaging material.		Production of packaging material in contact with food, feed, and animal food. May include packaging produced on-site for use in processing,	ISO 22000:2018, ISO/TS 22002-4:2013, FSSC 22000 Additional requirements	
Biochemical	K	Production of Bio/chemicals		Production of food and feed processing aids, additives (e.g., flavorings, vitamins), gases and minerals. Production of bio-cultures and enzymes.	ISO 22000:2018, ISO/TS 22002-1:2009, FSSC 22000 Additional requirements	