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1. SCOPE

This procedural instruction applies to all personnel of the certification body and Cert International Partners which are involved in the auditing activities and certification activities of FSSC 22000 and the appointed auditors / experts for FSSC 22000.

This procedural instruction is always valid in conjunction with the procedure 099 VA Certification procedure IMS.

This procedure describes specific points that apply in addition to the certification procedure for the certification system FSSC 22000.

The current requirements for the certification to FSSC 22000 can be found on the FSSC 22000 website (www.fssc.com) under the button "Schemes".

The entire staff of the certification body and the branch offices of Cert International, which are involved in the auditing and certification activities in accordance with FSSC 22000, as well as appointed auditors / experts for FSSC 22000 are obliged to regularly inform themselves on the homepage of FSSC 22000 about changes to the requirements.

2. PURPOSE

This procedural instruction regulates specific responsibilities and procedures for the certification process . FSSC 22000, which were determined by the standard owners and/or the Certification body and is to be followed.

3. TERMS AND DEFINITIONS

All terms and definitions set out in Appendix 1 Definitions of FSSC 22000 Version 6.0 apply.

4. PLANNINGANDMANAGINGAUDITS

4.1 GENERAL

The 3-year certification cycle shall be respected.

The CB shall perform the stage 1 and stage 2 audits for initial certification according to the requirements of ISO/IEC 17021-1 and ISO 22003-1

The interval between stage 1 and stage 2 audits shall not be longer than 6 months.

The Stage 1 shall be repeated if a longer interval is needed.

The objectives of stage 1 are to provide a focus for the planning of stage 2 of the initial audit by gaining an understanding of the organization's FSMS and the organization's state of preparedness for stage 2 by reviewing the extent to which:

a) the organization has identified PRPs that are appropriate to the business (e.g. regulatory, statutory, customer and certification scheme requirements);

b) the FSMS includes adequate processes and methods for the identification and assessment of the organization's food safety hazards, and subsequent selection and categorization of control measures (combinations);

c) the FSMS includes adequate processes and methods for the identification and implementation of relevant food safety legislation;

d) the FSMS is designed to achieve the organization's food safety policy; e) the FSMS implementation programme justifies proceeding to stage 2;

f) the validation of control measures, verification of activities and improvement programmes conform to the requirements of the FSMS standard;

g) the FSMS documents and arrangements are in place to communicate internally and with relevant suppliers, customers and interested parties;

h) there is any additional documentation which needs to be reviewed and/or information which needs to be obtained in advance.

The availability of relevant authorizations shall be checked when collecting the information regarding the compliance to regulatory aspects.

During the stage 1 of the audit areas of concern can be identified. Areas of concern include aspects that can be identified as minor or major nonconformities during the stage 2 of the audit.

By the results of the stage 1, the following audit conclusion should be made:

- Stage 1 of the audit to be repeated(the objectives of stage 1 are not achieved or major nonconformities are identified);

- Proceed to stage 2 (the objectives of stage 1 are achieved; areas of concern can be identified)

Concern areas should be eliminated before stage 2. CB should be informed by the client on elimination of concern areas.

Any part of the FOOD SAFETY MANAGEMENT SYSTEM (FSMS) that is audited during the Stage 1 audit, and determined to be fully implemented, effective and in conformity with requirements, does not necessarily need to be re-audited during Stage 2.

In this case, the audit report includes these findings and clearly states that conformity has been established during the Stage 1 of the audit.

Surveillance audits shall be conducted within the calendar year as per the requirements of ISO/IEC 17021-1, to ensure that the organization's management system continues to fulfil the Scheme requirements and that certification integrity is maintained.

The date of the first surveillance audit, after the initial certification, shall not exceed 12 months from the initial certification decision date, otherwise the certification shall be suspended.

Each surveillance audit is a full system audit and shall cover all the Scheme requirements

Recertification audits shall take place in a timely manner, preferably at least three (3) months prior to the expiry date of the certificate, allowing enough time for the certification process to be completed prior to the expiry of the certificate.

Where the certificate expires prior to the recertification activities being undertaken, the CB can restore certification within 6 months, provided that the outstanding recertification activities are completed, otherwise a full initial certification audit (Stage 1 and Stage 2) shall be conducted.

Recertification audits are full system audits against the Scheme requirements.

Where a certified organization moves to another location, at least a Stage 2 audit shall be conducted, resulting in the start of a new 3-year certification cycle.

Audits shall be carried out at the premises of the organization in accordance with the audit duration calculated and shall be conducted over a continuous number of days (excluding weekends when it is not a working day and public holidays).

It is the organization's responsibility to communicate any local holidays or shutdowns in a timely manner to facilitate audit scheduling.

The determining the audit timing shall to allow for auditing the organization operating on a representative number of product lines and/or activities covered by the scope of certification, including seasonal activities where relevant.

The language of audit carrying out shall be an agreed mutually. An interpreter may be added to the team to support members of the audit team.

4.2 CONTRACT WITH THE CUSTOMER

Each FSSC 22000 customer concludes a separate FSSC 22000 contract with the certification body (160 F Contract on Certification FSSC 22000).

4.3 NOTIFICATION REQUIREMENTS OF THE CERTIFICATION BODY

The Certification Body is obliged to inform all FSSC 22000 customers about all changes regarding FSSC 22000 requirements within 1 month after release.

4.4 CERTIFICATION PROCESS

4.4.1 CONTROL OF APPLICATION

The organization shall provide the certification body with all necessary information to determine the scope of the audit with the application, including outsourced processes, production sites, etc. etc.

Information must be taken into account in the customer questionnaire:

- ✓ All necessary information about the company (including effective number of employees, products/services, location factors). ✓
- ✓ It should be reported the number of employees involved in all aspects of food safety (including seasonal workers as well as office employees), number of production lines and number of HACCP studies. ✓

  When an organization deploys workers in shifts and the products and / or processes are similar, the FTE number will be calculated based on employees on the main shift (including seasonal workers) plus office workers.
- ✓ Information on external storage and offsite- activities must be taken into account in the customer questionnaire. ✓
- ✓ Information on already certified companies against Dutch HASSP, ISO 22000 or other GFSI (Global Food Safety Initiative) recognized standards must be communicated to the CB. ✓

If the client likes to receive an additional certificate for ISO 22000, he must inform on the attachment of the questionnaire.

A relevant point is given in the questionnaire. The certificate for ISO 22000 will be included in the offer.

The scope of one particular client organization may cover more than one subcategory or category.

4.4.2 CALCULATION OF THE AUDIT TIME

The time calculation procedure is established in 160 VA Audit time calculation according to FSSC 22000

4.4.3 DETERMINATION OF AUDIT TEAM

Auditing according FSSC 22000 is carried out by approved auditors and, where appropriate, experts (audit team).

The requirements are set out in document 160 Annex 1 Appointment - requirements for appointments of auditors for FSSC 22000.

The audit team shall have the combined competence for the food chain sub-categories supporting the scope of the audit and following the requirements of ISO/IEC 17021-1 and ISO 22003-1.

At least one auditor in the team must have a qualification in the category.

For the (sub) categories BIII, D and K, where the requirements above cannot be met, at least one auditor in the audit team shall have a qualification in category C.

The attendance of a trainee auditor does not lead to a reduction of audit time.

A change of auditors must be carried out after 6 years at the latest.

The auditor shall be rotated out for a minimum of 1-year regular FSSC 22000 audit (excluding Stage 1, follow-up and special audits) before being allowed to conduct FSSC 22000 audits at the applicable organization again.

The audit shall be carried out in a mutually agreed language.

An interpreter may be added to the team by the CB to support members of the audit team.

4.4.4 PERFORMING OF AUDIT

4.4.4.1 AMOUNT OF THE AUDITING

Auditing of all standard requirements of the ISO 22000, ISO 22002-1 / ISO 22002-2 / ISO 22002-4 / ISO 22002-5 / ISO 22002-6, BSI/PAS 221 and the additional FSSC 22000 requirements during CA, SA, RA.

A minimum of 50 % of the total audit duration shall be spent on auditing the operational food safety planning and the implementation of PRPs and control measures.

This includes time spent auditing the facilities, conducting the traceability exercise(s) and reviewing the relevant records.

Operational food safety planning does not include activities related to FSMS development, training, internal audit, management review and improvement.

During the closing meeting the customer must be pointed to the use of the FSSC 22000 logos by the auditor.

The use of the logo is checked for each FSSC 22000 audit.

Any nonconformity associated with the use of the logo will require the organization to take remedial action to restore conformity with the criteria described here.

Where a certified organization moves to another location, at least a Stage 2 audit shall be conducted, resulting in the start of a new 3-year certification cycle.

4.4.4.2 INFORMATION TO THE CUSTOMER TO THE USING OF THE FSSC 22000 LOGO

Customers may use the FSSC 22000 logo.

If the customer wishes to use the Logo, the Auditors of the CB shall explain the requirements of the use of the logo during the audit to the client (FSSC 22000 requirements, Part II, Part 2.1.4.5 and ISO 17021-1, Part 8.3).

If the customer is using the logo, the auditors shall examine the use of the FSSC 22000 logo during the audit.

The conditions of the Logo use are laid down in the FSSC 22000 contract.

5.AUDIT TYPE

5.1 MULTI-SITE CERTIFICATION

A multi-site organization is an organization having an identified central function at which certain FSMS activities are planned, controlled or managed, and a network of sites at which such activities are fully or partially carried out.

The procedure for conducting multi-site certification is established in the document 160 VA Procedure for FSSC certification of organizations with several separate subdivisions (multi)

5.2 UNANNOUNCED AUDITS

The CB shall ensure that for each certified organization at least one surveillance audit is undertaken unannounced after the initial certification audit and within each 3-year period thereafter.

The decision as to which of the two surveillance audits will be carried out unannounced is the responsibility of the certification body and is determined as part of the audit program.

The organization, once certified, can voluntarily choose to conduct all audits (surveillance and recertification) as unannounced audits.

The initial certification audit (stage 1 and stage 2) cannot be performed unannounced.

The process is described in 160 VA Unannounced audits.

5.3 TRANSFER OF CERTIFICATION

The transfer of certification is defined as the recognition of an existing and valid FSSC 22000-certificationis implemented in accordance with the requirements of IAF MD2.

The requirements for the transfer of FSSC 22000-certification is established in document099 VATransfer of accredited certification

5.4 TRANSITION AUDITS TO FSSC 22000

A transition to FSSC 22000 is feasible for organization with an existing certification on ISO 22000 or other GFSI recognized certification schemes.

In order to qualify for a transition audit, the existing certification shall still be valid at the time of the transition audit and have an equivalent scope of certification.

The time calculation procedure is established in 160 VA Audit time calculation according to FSSC 22000.

A Stage 1 audit may be performed at the discretion of the CB.

The valid ISO 22000 or equivalent GFSI recognized certificate does not have to be issued by the CB undertaking the transition audit.

The organization must provide evidence of the valid certification (by providing valid certificate, audit report and report on nonconformities from previous audits).

In the FSSC Assurance Platform is create the new organization as a transition audit.

The audit report to the transition to FSSC 22000 shall: ✓

- ✓ Clearly specify the audit type “Transition” (selection 1st page in the audit report);
- ✓ Provide details of the previous audit related to nonconformities;

- ✓ Confirm the validity of the existing certificate;
- ✓ Confirm compliance with all scheme requirements.

A successful transition audit shall result in a certificate with a new validity of 3 years.

5.5 UPGRADEAUDITS

The Foundation will issue instructions when upgrade audits are required. This typically occurs when there is a significant change to the Scheme requirements e.g., a Version change.

5.6 SPECIAL AUDITS

Extension audit

If the scope of the existing certificate is to be expanded, this can be done through an extension audit.

The extension audit can be carried out as part of a surveillance audit, re-certification audit or at a specially scheduled appointment.

Audits announced at short notice

As soon as the certification body receives information about incidents that have an impact on the legality or safety of the product, the certification body is entitled at any time to carry out announced or unannounced audits, to assess the situation and, if necessary, to withdraw the certificate.

5.7 USEOFINFORMATIONANDCOMMUNICATIONTECHNOLOGY

To audit individual areas (e.g. for outsourced personnel departments or personnel departments located at another site), auditing using remote can be implemented.

The regulations for this are described in the document 099 VARemote Audits.

Areas in which production or quality assurance activities are performed are excluded from this regulation.

The use of remote must be agreed between the customer and the Certification body in advance of the audit and this agreement must be documented.

The times and topics for the remote audit shall be listed and marked in the audit plan. The on-site audit time must be at least 50 %, but must not be less than 1.0 MT.

The time interval between remote audit and on-site audit must not exceed 30 calendar days.

InformationandCommunicationTechnology (ICT) may be used as a remote auditing tool duringregular FSSC 22000 audits with the following applications:

1) For conducting interviews and reviewing policies, procedures, or records as part of the onsite audit; as well as head office functions where appropriate;

2) When utilizing the ICT Audit Approach as set out in 160 AA Annex 1 to Remote Audits;

3) For full remote audits, in the case of a serious event, where the requirements in the Full Remote Audit Addendum are met;

4) For category FII, the regular surveillance audits may be conducted as full remote audits.

The requirements in the Full Remote Audit Addendum shall be met, with the exception that it is not limited to circumstances linked to a serious event.

6. AUDIT DOCUMENTATION

The documentation of a FSSC 22000 audit corresponds to the procedure 099 VA Certification procedure.

The audit report must always be provided in English for the database.

The following documents are always used in the audit documentation according FSSC 22000: ✓

- ✓ 160 F Head Office Audit Report
- ✓ 160 F Report Stage 1
- ✓ 160 F Report other stage
- ✓ 160 F Participation list
- ✓ 160 F Auditplan
- ✓ 160 F Nonconformity report FSSC 22000
- ✓ 160 F Compliance with the requirements of the standard
- ✓ 160 F Auditprogramm
- ✓ 160 F Customer details

The audit report and other documentation in its current version is to be used for documentation purposes.

Consideration of point 3 of Part I FSSC 22000 description for the determination and clarification of the scope.

When certifying multi-site organizations, a separate audit report (160 F Head Office Audit Report) must be created for each site.

If necessary, at the customer's request, a certificate of compliance with ISO 22000/HACCP requirements can be issued on the basis of the above set in addition to the FSSC 20000 certificate at any stage (CA, SA, RA).

This rule applies to ISO 22000 and FSSC 22000 certificates with an identical certification scope.

If this requirement is not applicable, the ISO 22000 certification procedure is issued additionally.

In exceptional cases, standard requirements can be regarded as not applicable (exception: ISO 22000:2018).

If a requirement is not considered to be applicable, a suitable justification must be recorded in the corresponding section of the audit report.

Enter into FSSC Assurance Plattform:

The necessary dates and audit documentation must be uploaded to the database within 28 days after the certification decision / release.

This process must be completed within 2 months after the last audit day.

The CB is also responsible for uploading documents on auditor competences as well as updating the documents.

The full audit report is available within two weeks sending the certification decision / approval to the customer.

7. NONCONFORMITIES

The grading of the deviations is done in Minor nonconformity, Major nonconformity und Critical nonconformity.

Notes / potential for improvement / recommendations are not permitted.

7.1 MINORNONCONFORMITY

A minor nonconformity shall be issued when the finding does not affect the capability of the management system to achieve the intended result.

If a minor nonconformity was identified in the audit, the organization shall provide with objective evidence of the correction, a root cause analysis and analysis of the identified risks in the form of a corrective action plan (CAP).

The documents must be submitted to the certification body within 28 calendar days of the audit.

Exceeding this timeframe shall result in a suspension of the certificate.

In the case of an initial audit, the stage 2 audit shall be repeated within maximal 6 months of the last day of the previous stage 2 audit.

Corrective action(s) shall be implemented by the organization within the agreed timeframe.

The effectiveness of implementation of the corrective action plan shall be reviewed, at the latest, at the next scheduled audit.

Failure to address a minor nonconformity from the previous audit could lead to a major nonconformity being raised at the next scheduled audit.

7.2MAJOR 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.

If a major nonconformity has been identified in the audit, the organization shall provide with objective evidence of a root cause analysis, analysis of the identified risks and evidence of effective implementation of the corrective actions in the form of an action plan.

The certification body shall review the corrective action plan and conduct an on-site follow-up audit in the organization within 28 calendar days from the last day of the audit, in order to verify implementation to close major nonconformity.

In cases where documentary evidence is sufficient to close out the major nonconformity, the CB may to decide to perform a desk review.

The major nonconformity shall be closed within 28 calendar days from the last day of the audit.

When the major cannot be closed in this timeframe, the certificate shall be suspended.

Where completion of corrective actions might take more time in specific instances, the CAP shall include any temporary measures or controls necessary to mitigate the risk until the permanent corrective action is implemented.

This must be set out in the corrective action plan.

Supporting evidences of the temporary measures or controls shall be submitted to the CB for review and acceptance within 28 calendar days from the last day of the audit.

In addition, where temporary measures are accepted, the CB shall agree a suitable timeframe with the organization, to verify effective implementation of the permanent corrective action, but not later than 6 months after the last day of the audit.

Where the 28 calendar days after the last day of the audit exceeded, the full stage 2 audit shall be repeated.

7.3CRITICAL 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.

The certificate shall be suspended within 3 working days of being issued, for a maximum period of 6 months.

The organization shall provide with objective evidence of an investigation into cause factors, exposed risks and the proposed CAP.

This shall be provided to the CB within 14 calendar days after the audit

A separate audit shall be conducted between 6 weeks to 6 months after the regular audit to verify the effective implementation of the corrective actions.

This audit shall be a full on-site audit (with a minimum on-site duration of one day).

After a successful follow-up audit, the certificate and the current cycle will be restored.

The follow-up audit shall be documented, and the report uploaded as part of the audit documentation linked to the audit where critical nonconformity was raised.

The certificate shall be withdrawn when the critical nonconformity is not effectively resolved within the 6 months timeframe.

When a critical nonconformity is raised at an initial certification audit, the audit is failed, and the full certification audit shall be repeated.

Important:

If a nonconformity is identified in one site / area of an organization, the organization shall consider to what extent this nonconformity affects other sites / areas within the scope of the management system.

This shall be documented in the 160 F Nonconformity report.

The assignment auditors are obliged to realize the time limits of the respective nonconformity.

If the assigned auditor is uncertain about the determination of a nonconformity, this must be communicated immediately with the CB.

If a critical nonconformity detected, the CB must inform immediately, because this results in a suspension of the certificates.

The certificates shall be based on the templates specified in this Annex 3 of FSSC 22000.

The validity of the certificate is max. 3 years.

The rules for the scope statements on the FSSC Certificate are based on the requirements stated in Annex 1 of FSSC 22000.

The certificate must be in English and uploaded to the FSSC Assurance Plattform.

The certificate remains the property of the CB under the conditions outlined in the contract.

Always the current certificate template must be used!

On the released certificate it must be specified the category(ies) in accordance with the scope.

The certificate also contains a QR code and COID as well as the complete date of the last unannounced audit.

The CB must post the following changes within 3 days enter the certification decision in the portal: suspension, withdrawal and changes in the scope (see cl. 9.2).

8. CERTIFICATES

The certificates shall be based on the templates specified in this Annex 3 of FSSC 22000.

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The certificate must be in English and uploaded to the FSSC Assurance Plattform.

The certificate remains the property of the CB under the conditions outlined in the contract.

Always the current certificate template must be used!

On the released certificate it must be specified the category(ies) in accordance with the scope.

The certificate also contains a QR code and COID as well as the complete date of the last unannounced audit.

The CB must post the following changes within 3 days enter the certification decision in the portal: suspension, withdrawal and changes in the scope (see cl. 9.2).

9. CERTIFICATESUSPENSION, WITHDRAWALORSCOPEREDUCTION

9.1 GENERAL

Suspension: the CB shall suspend certification when a critical nonconformity is issued and/or there is evidence that the certified organization is either unable or unwilling to establish and maintain conformity with Scheme requirements.

Withdrawal: the CB shall withdraw a certificate when:

a. The status of suspension cannot be lifted within six (6) months;

b. The organization ceases its FSSC 22000 certification activities;

c. Any other situation where the integrity of the certificate or audit process is severely compromised.

Scope reduction: When the CB has evidence that the certified organization holds a certificate where the scope is not an accurate reflection of the management system for example due to changes at locations or the control of the organization, the CB shall reduce the certification scope accordingly.

The CB shall 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 of the end products as defined in the scope of certification.

Certificates may be suspended or withdrawn by The Foundation or by the CB upon instruction by the Foundation, as a result of CB noncompliance to Scheme requirements or termination of a CB license with the Foundation

9.2 ACTIONUPONSUSPENSIONORWITHDRAWALANDSCOPEREDUCTION

In case of suspension or withdrawal, the organizations' management system certification is invalid. The CB shall complete the following actions within **3 working days after** the certification decision for suspension or withdrawal has been made:

a. Change the status of the certified organization in the Assurance Platform and its own system and shall take any other measures it deems appropriate;

b. Inform the organization in writing of the suspension or withdrawal decision, including the reason for the suspension or withdrawal and resulting actions required from the organization;

c. Instruct the organization to take appropriate steps in order to inform its interested parties.

In case of scope reduction, the organizations' management system certification is invalid beyond the revised certification scope statement. The CB shall **complete the following actions within** 3 working days after the certification decision has been made:

a. Change the scope of the certified organization in the FSSC 22000 database and its own system and shall take any other measures it deems appropriate;

b. Inform the organization in writing of the scope change;

c. Instruct the organization to take appropriate steps in order to inform its interested partie

10. FSSC 22000 AUDITSTHROUGHFSSC

The Foundation FSSC 22000 conducts unannounced FSSC 22000 Audits = FSSC 22000 Witnessaudits.

That means that a FSSC22000 audit performed by an auditor determined from the certification body will be accompanied by a member of the Foundation FSSC 22000 (similar to a witness audit through SNAS).

For this purpose, the Foundation regularly challenges from the CB the planned audit dates in a certain time period and announces in a short-term manner the customer, where the witness audit will be conducted.

The rejection of a FSSC 22000 witness audit by the client is not acceptable since we as Certification Body are obliged per contract to realize from the foundation determined witness audits at any time.

11. RELATED DOCUMENTATION

099 VA Certification procedure.

099 VA Transfer of accredited certification.

099 VA Remote Audits.

160 AA Annex 1 to 099 VA Remote Audits.

160 VA Audit time calculation according to FSSC 22000.

160 VA Procedure for FSSC certification of organizations with several separate subdivisions (multi).

160 VA Unannounced audits.

12. REGULATORY REFERENCES

FSSC 22000 Version 6.0.

ISO/IEC 17021-1

ISO 22003-1

IAF MD2.

FSSC Scheme managerof the Certification Body
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23.12.2025

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