



***Perry Johnson Registrars Food Safety, Inc.***

# BRCGS Certification Procedure

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PJRFSI offers certification services to companies seeking independent validation of their BRCGS Food Safety, BRCGS Packaging Materials, BRCGS Storage and Distribution, BRCGS START!, Gluten-Free Certification Program and Quality Management System through a detailed and rigorous process. This procedure details from start to finish the life cycle of the BRCGS certification process.

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## 1. References

- 1.1. ISO/IEC 17065: Conformity Assessment – Requirements for Bodies Certifying Products, Processes and Services (latest revision)
- 1.2. BRC004: Requirements for Certification Bodies Offering Certification Against the Criteria of the BRCGS Global Standards (latest issue)
- 1.3. BRC009: BRCGS Programme for Certification Body Key Performance Indicators (KPI) (latest issue)
- 1.4. BRCGS Global Standard for Food Safety (latest issue)
- 1.5. BRCGS Global Standard for Packaging Materials (latest issue)
- 1.6. BRCGS Global Standard for Storage and Distribution (latest issue)
- 1.7. BRCGS Global Standard Start! (latest issue)
- 1.8. BRCGS Global Standards Directory Logo Guidelines (latest issue)
- 1.9. BRCGS Global Standards Issued Position Statements and Guidance Notes (latest issue)
- 1.10. BRCGS Issued Audit Checklist and Audit Report (latest issue)
- 1.11. Gluten-Free Certification Program (latest issue)
- 1.12. iCompliance License Agreement
- 1.13. FS-1 – Food Safety Certification Questionnaire/Client Application
- 1.14. F-207 – Food Safety Quote Approval and Audit Justification Checklist
- 1.15. F-3brc – Certification Agreement
- 1.16. F-3tc – Terms and Conditions
- 1.17. PFCbrc-AP – BRCGS Audit Package Component Identification Key
- 1.18. F-71fs65 – Certification Personnel Statement of Availability Form
- 1.19. F-163fsi – Audit Scheduling Acknowledgement Form
- 1.20. F-27fsi – Auditor Assignment Form
- 1.21. WBfs65 – Auditor Workbook with Opening/Closing Meeting Minutes
- 1.22. F-184fs65, F-184fs65-A – Audit Plan Template and Site Plan
- 1.23. F-67fs65 - Audit Package Review Form – Food Safety Programs
- 1.24. F-67fs65-A, Audit Report Review Form - Food Safety Programs
- 1.25. F-144fsi Transfer of Certification Body Checklist
- 1.26. F-102brc – BRC Scope Approval Form
- 1.27. FS-228brc BRCGS Risk Assessment
- 1.28. FS-228gfcg – GFCP Risk Assessment
- 1.29. FS-229 – Risk Assessment Review Form
- 1.30. FS-108ict – Virtual Audit Questionnaire
- 1.31. SOP-10 Dispute/Appeal Procedure
- 1.32. BRCGS Global Directory (BRCGS database and web application)
- 1.33. PJView – Perry Johnson Registrars Food Safety Inc.'s client database and project management system

## 2. Definitions

- 2.1 BRCGS Global Standard – HACCP based food safety and quality management system certification program published and licensed by the British Retail Consortium Global Standard (BRCGS).
- 2.2 Gluten-Free Certification Program (GFCP) - is the name for a set of standards and requirements which, when successfully implemented and verified, permit brand owners and manufacturing sites to market gluten-free assurances and claims to customers and consumers.
- 2.3 Organization - The organization seeking BRCGS certification. Until a contract for certification services is signed with PJRFSI, the Organization is initially referred to as an Applicant.
- 2.4 Scope of Certification – a description of the certification sought by the Organization which will be covered in the audit program and detailed in the certification certificate. The scope includes: the name and address of the site-specific facility(s) covered; the particular BRCGS Global Standard and Issue; the applicable BRCGS food/product sector categories; the product types and their associated processes and storage/shelf-life characteristics. The scope of certification also specifies exclusions, if any, which must be agreed and approved by PJRFSI in advance of the certification audit.
- 2.5 Site - A single physical address or facility that will be audited and granted a certificate, either

- individually or as part of a multiple site scheme as allowed by BRCGS.
- 2.6 Certificate of Registration - A certificate and associated documents affirming that the BRCGS management system operated by the Organization has, as a result of the documented assessment procedure conducted by PJRFSI, been found to be in accordance with the applicable BRCGS Global Standard and the scope of certification sought by the Organization.
  - 2.7 Auditor – an employee or contractor of PJRFSI who has been qualified by PJRFSI and registered in the BRCGS Directory as a BRCGS Auditor and is therefore qualified to conduct BRCGS certification audits.
  - 2.8 Pre-assessment - An informal and optional onsite evaluation carried out by a PJRFSI auditor to assess the Organization's overall BRCGS food safety and quality management system and to determine the Organization's readiness for a BRCGS certification audit.
  - 2.9 Certification Audit – an onsite audit of the Organization's overall BRCGS food safety and quality management system and facility conducted by a PJRFSI auditor.
  - 2.10 Recertification Audit – a six (6) month or twelve (12) month post-certification audit (based on the compliance grade achieved at the previous audit) conducted by a PJRFSI auditor to assess the continued effectiveness of the Organization's BRCGS system in its entirety and to serve as the basis for re-qualifying the Organization for continued certification.
  - 2.11 Technical Reviewer– individuals who are competent to review audit results and render certification recommendations.
  - 2.12 Designee – a PJRFSI employee who is designated and trained to complete specific procedural functions on behalf of another PJRFSI position. Throughout this SOP-1brc procedure, functions which may be completed by a designee will include the following references: “[position] or designee...” or “[position]/designee...”
  - 2.13 BRCGS Logo - The BRCGS Logo, as issued and authorized by BRCGS for use by a certified Organization, to publicize that the Organization has proven its compliance with the specified BRCGS Global Standard and scope of certification.
  - 2.14 BRCGS Database (the Global Standards Directory) – an online searchable directory of certificated Food, Packaging, Consumer Products, and Storage and Distribution companies, BRCGS approved certification bodies, and delegates who have successfully completed the BRCGS third party auditor training course. The database is a user-specific, web-based storage system of certificate and audit data which may be accessed, with varying levels of permissions, by organizations, retailers/customers, and certification bodies.

### **3. Request for Certification**

- 3.1 The Applicant initiates the application for certification process via a written or verbal request.
- 3.2 In response, a PJRFSI Project/Sales Manager or the Food Safety Sales Coordinator or designee provides the Applicant with the FS-1 – Food Safety Certification Questionnaire/Client Application.
- 3.3 For iCompliance requests for certification a General Quote Request Form will come from the application through iCompliance team.
- 3.4 Duly Authorized representatives of the Applicant must complete and sign the Questionnaire/Application to provide PJRFSI with sufficient information required for providing a quote.
- 3.5 Upon receipt of the signed application, PJRFSI's Food Safety Sales Coordinator or designee trained in BRCGS quoting procedures conducts an application review to ensure that:

- a. certification requirements are clearly defined, documented, and understood;
- b. any differences in understanding between PJRFSI and the Applicant are resolved; and
- c. PJRFSI has the technical resource and competencies to perform the certification services sought by the applicant, and if not, PJRFSI's Food Safety Sales Coordinator or designee in consultation with the Food Safety Program Accreditation Manager will reject the application.

The record of this review is the Food Safety Sales Coordinator or designee's signature at the bottom of the FS-1 Food Safety Certification Questionnaire/Client Application and a completed F-207 – Food Safety Quote Approval and Audit Duration Justification Checklist.

For BRCGS application review the record of this review is the Food Safety Sales Coordinator or designee's signature at the bottom of the completed F-207 Food Safety Quote Approval and Audit Duration Justification Checklist.

3.5 Based on the information furnished by the Applicant and the input from the application review process, the Food Safety Sales Coordinator or designee completes an F-207 which is a record of: the determination of scope including exclusions; the justification for quoted audit days; and the overall quote approval.

3.5.1 The scope of certification is determined using the latest BRCGS guidance regarding, as applicable, audit scope, exclusions, extensions, and auditing of multiple sites. The scope and exclusions, if any must be approved by BRCGS Technical Specialist or designee and documented on F-102brc BRC Scope Approval Form in advance of the Certification Audit.

3.5.2 The required number of audit days is determined using the latest BRCGS audit duration guidance with consideration of the following possible deviations:

3.5.2.1 Possible reasons for increasing audit duration include the following:

- a. complicated logistics involving more than one building/location where work is carried out including additional storage facilities and head office assessments
- b. a site whose age and layout may impact material flow
- c. a very large site for the number of employees
- d. labor intensity of processes
- e. highly complex processes and/or HACCP plans/studies
- f. a relatively high number of unique products
- g. seasonal factors related to harvesting, weather, and/or timed production, etc.
- h. staff speaking more than one language so as to require language interpretation and/or preventing individual auditors from working independently
- i. more than one shift per day, regularly scheduled weekend and/or night work
- j. a large number of internal or external complaints/incidents
- k. the number of non-conformities recorded in previous audits
- l. implementation history of a management system (or absence of)
- m. the quality of company preparation: documentation, HACCP, QMS
- n. additional or unusual statutory, regulatory, or license conditions
- o. additional requirements for other audit standards/programs/reports e.g., ethical sourcing, customer checklists, etc.
- p. first visit by the auditor to the company, particularly for transfer certifications
- q. any difficulties experienced during the audit which require further evaluation

3.5.2.2. Possible reasons for decreasing audit duration include the following:

- a. a modern purpose-built plant
- b. a very small site for number of employees
- c. an abnormal number of employees for the processes involved, e.g., some plants in some developing countries
- d. a high degree of automation
- e. a simple, single process (e.g., packing)
- f. limited product and process diversity

- g. integration of other management systems in the company
  - h. a long history of effective management system implementation
  - i. high degree of company knowledge, commitment, and preparedness
- 3.5.3 Deviations from the audit duration guidance are justified on the F-207. [Due to factors which might only be revealed once the Auditor is onsite, the Auditor may request a deviation in the actual audit time from the quoted audit time. In this case, the Auditor always contacts PJRFSI's Food Safety Program Accreditation Manager or designee for pre-approval and the Auditor justifies the deviation on the BRCGS audit report.]
- 3.5.4 PJRFSI may conduct BRCGS audits combined with other certification system audits or audit elements, as long as all program rules are met and the integrity of any one component of the combined audit is not compromised. PJRFSI does not, however, conduct any consulting or training in combination with BRCGS audit activity. Details of combined audits are specified in the audit report.
- 3.6 A pre-assessment is optional but encouraged, particularly those seeking initial certification to the applicable standard.
- 3.7 Transfers are handled in accordance with @Section 12 below.
- 3.8 Based on the information from the application review (FS-1) and quote approval process (F-207), the Food Safety Sales Coordinator or designee completes a quotation in the form of a Certification Agreement (FS-3brc) to cover the costs of the proposed audit activity [pre-assessment, certification audit, and/or recertification audit(s) as applicable] and any associated fees.
- 3.9 A PJRFSI Project/Sales Manager or designee provides the Applicant with a duly authorized copy of the Certification Agreement (FS-3brc) and the Terms and Conditions (FS-3tc). (In some cases, the Certification Agreement and Terms and Conditions are forwarded directly to the Applicant by PJRFSI's Sales Coordinator or the Food Safety Program Coordinator/designee.) The Applicant then signs and returns a copy of the Certification Agreement bearing an original signature.
- 3.10 Signatures by both parties indicate mutual agreement of Certification Agreement including the scope of certification and any exclusions, the certification costs, and the associated Terms and Conditions. After the Certification Agreement is signed, amendments agreed upon by both parties, may be made as necessary. However, once the certification audit has begun, the scope of the certification shall not be altered.
- 3.11 Receipt of the signed Certification Agreement and the first installment payment from the Organization is taken by PJRFSI as an instruction to proceed in accordance with the BRCGS Certification Agreement and the Terms and Conditions. The Food Safety Program Coordinator or designee sends the Applicant, hereafter referred to as the Organization:
- 3.1. a summarized version of the Certification Procedure (SOP-01brc);
  - 3.2. other guidance documents describing the audit process, as appropriate; and
  - 3.3. a list of documents/information required from the Organization, as necessary, in preparation for the audit.
- 3.12 The Food Safety Program Coordinator or designee is responsible for monitoring and verifying the progress of the Organization's certification program including but not limited to audit/certification status, and timeline/due date performance for both Organization and Certification Body (PJRFSI) activities. To support these monitoring and verification activities, the Food Safety Program Accreditation Manager or designee utilizes: PJRFSI's database; PJView; and the BRCGS Directory.
- 3.13 If the requirements for certification change at any time and need retroactive implementation, PJRFSI's Food Safety Program Accreditation Manager or designee will ensure that the Organization is notified as soon as possible by the most appropriate means and that the new requirements are followed/implemented at the next onsite audit activity or sooner if necessary.

#### **4. Scheduling Audits**

- 4.1 Once the signed Certification Agreement (FS-3brc) is received, the Food Safety Program Accreditation Manager or designee assigns a BRCGS registered auditor to the audit after verifying that:
- a. The Auditor is registered in the BRCGS Directory as qualified to audit all food sector categories in the Organization's scope of certification;
  - b. The Auditor has had no prior relationship with the Organization which would present a conflict of interest. The Auditor will confirm this by signing a Certification Personnel Statement of Availability (F-71fs65) before completing the audit.
  - c. The same auditor is not permitted to undertake audits on more than three (3) consecutive occasions at the same site. This includes when a facility changes locations and keeps the same BRCGS site code.
    - i. Food Safety – limited to three (3) consecutive occasions
    - ii. Packaging – limited to three (3) consecutive occasions
    - iii. Storage and Distribution – limited to three (3) consecutive occasions
    - iv. Gluten-Free Certification Program – limited to three (3) consecutive occasions
    - v. Start! – limited to three (3) consecutive occasions
- 4.2 The Organization is assigned to Food Safety Audit Program Coordinator (Scheduler) who will contact the Organization's Management Representative to schedule dates for the auditing activities. The Scheduler then coordinates the desired dates with the availability of the assigned Auditor pre-selected by the Food Safety Program Accreditation Manager or designee. Often, this process takes several contacts between the Organization and the Auditor before dates for the auditing activities are mutually agreed upon.
- 4.3 The Scheduler sends the Scheduled Audit Form to the auditor when the dates are confirmed and entered into PJview.
- 4.4 The Scheduler then sends the Organization an Audit Scheduling Acknowledgement form (F-163fsi) or equivalent document for the Organization to sign and return by fax which indicates:
- a. Organization's acceptance of the proposed audit dates and time;
  - b. Organization's acceptance of the proposed audit team whose background information is available upon request. The Organization has the right to object in writing to the appointment of any particular auditor or technical expert providing the objection is valid, i.e., employee of a competitor, personal differences, etc.
  - c. Organization's confirmation that all processes/procedures/activities will be ready by the proposed audit date.
- 4.5 The Scheduler then creates an Auditor Assignment Form (F-27fsi) and forwards it to the Auditor(s) after approval by relevant Customer Service Personnel.
- 4.6 Prior to the start of the onsite audit the Organization must have completed an Internal Audit and Management Review Meeting as according to BRCGS Standard.

#### **5 The Certification Audit (Initial Certification and Recertification Audits)**

- 5.1 BRCGS Auditors utilize the latest issue of the relevant BRCGS Global Standard to conduct BRCGS audits but will not add additional standards or criteria. PJRFSI may seek additional guidance/interpretation from the BRCGS and/or Accreditation Bodies as needed.
- 5.2 PJRFSI undertakes the Certification Audit to verify the effectiveness of the Organization Organization's BRCGS System in its entirety to establish and ensure:
- a. the effective interaction between all elements of the BRCGS System; and

- b. that the Organization has demonstrated a commitment to maintaining the effectiveness of the BRCGS System and to meeting regulatory and customer requirements.
- 5.3 The Auditor is responsible for completing the Audit Workbook (WBfs65) and creating an Audit Plan using the F-184fs65 and F-184fs65-A Audit Plan Templates, which will be forwarded to the Organization at least one week in advance of the audit.
- 5.4 The Organization's senior management personnel, who have the appropriate authority to ensure that corrective actions will be implemented in response to any non-conformities found, are expected to attend the opening and closing meetings for all audit activity. In particular, the most senior operations manager onsite or their nominated deputy shall be available at the audit and attend the opening and closing meetings. All of the Organization's personnel are expected to fully assist the Auditor at all times.
- 5.5 At the time of the audit, the Organization is expected to have been in operation for at least three (3) months. For planned audits, the Organization shall ensure at the time of the audit that the production program includes all products and processes covered by the scope of the certification. When a significant production process cannot be observed during the audit, PJRFSI may elect to conduct a separate audit at a later time in order to audit that process.
- 5.6 The onsite audit consists of the following seven (7) stages:
1. Opening meeting to confirm the scope and process of the audit. The Auditor will utilize the Opening Meeting Agenda found in the Auditor Workbook (WBfs65).
  2. Document review including a review of the HACCP and quality management systems.
  3. Traceability challenge including a vertical audit of associated records of production.
  4. Production facility inspection to review the practical implementation of the systems and which should account for at least 50% of the audit time and include personnel interviews and observations of product changeover procedures.
  5. Review of production facility inspection to verify and conduct further documentation checks.
  6. Final review of findings by the auditor in preparation for the closing meeting.
  7. Closing meeting to review audit findings with the Organization management personnel.
- 5.7 The Auditor should audit the Organization's processes where they occur. Audit evidence gathered through interviews should be verified by acquiring supporting information from independent sources, such as observations, records, and results of existing measurements. The names, job titles, and working shifts of those interviewed are to be recorded. The Auditor must record copious notes of conformity and nonconformity, including the nature and severity of any nonconformity. These notes serve as the basis for the audit report and will be submitted to PJRFSI with the audit package. Should objective evidence exist to support writing a nonconformity, the following format is used:
- a. Citation of the requirement(s) not being met
  - b. Statement of nonconformity
  - c. Objective evidence observed that supports the statement of nonconformity
- 5.8. For multiple day audits, the Auditor must hold a daily wrap-up meeting with the PJRFSI audit team and the Organization's key personnel to discuss a summary of the findings of that day.
- 5.9. On the last day of the audit, the Auditor will hold a closing meeting using the Closing Meeting Agenda. During this meeting, the Auditor reviews the audit findings, including the non-conformities, with the Organization's senior management personnel. When discussing the findings, the Auditor should never comment on the likely outcome of the certification process.
- 5.10. At the close of the audit or within one working day of the last day of the audit, the Auditor provides the Organization with a written summary of the non-conformities discussed at the closing meeting.
- 5.11. Unannounced Audit Protocol: BRCGS certificated sites (with food safety, packaging materials or storage & distribution scopes) are to have at least 1 unannounced audit every 3 years. For sites



new to certification the first (initial) audit should be announced, (unless the site has specifically requested an unannounced audit (refer to section @8.14), with the first unannounced audit occurring within either of the following 2 years. Subsequent unannounced audits will occur at least every 3 years. For sites with annual (12 month) audits, this will result in at least every 3rd audit being unannounced.

- 5.12. Unannounced Audit Protocol: PJRFSI will aim for approximately a third of the BRCGS certificated sites, within the announced or blended announced audit programmes, to be completed as unannounced audits per year (this is in addition to any sites that have opted for the fully unannounced audit programme). PJRFSI will discuss audit options with sites and notify them which year an unannounced audit will take place (obviously the actual date of the unannounced audit will not be communicated to the site). This discussion must occur within 3 months after the last audit, to ensure that the site knows if an unannounced audit will take place in the coming year.
- 5.13. Unannounced Audit Protocol: The unannounced audit can take place at any time during the 4 months prior to the audit due date. This period, when an audit can occur, includes the 28 days immediately prior to the audit due date. It should be remembered that BRCGS audits cannot take place after the audit due date, except by concession in the event of exceptional circumstances or seasonal sites. Where a site has included additional modules within the scope of the audit, the audit protocol for the specific module applies. The audit of the module can be completed as part of the BRCGS audit and can therefore be completed unannounced when the audit of the Standard is unannounced. Where a site needs an extension to scope audit, separate from the scheduled annual audit, for example, due to the introduction of a new product or process, this may be completed as an announced audit.
- 5.14. Unannounced Audit Protocol: A site may nominate a maximum of 10 days when they are not available for an audit. Sites on a 6-month audit schedule (e.g., sites certificated to the Global Standard Food Safety with grades C or D) may nominate a maximum of 5 days. Days when the factory is not operating (e.g., public holidays or site holidays) are not included in the 10 days (or 5 days). Any such non-production days must be notified to PJRFSI. Any nominated non-audit days must be for a justifiable reason, for example due to a customer visit for a scheduled first production, which involves technical and managerial staff. Whereas non-audit days caused by a specific colleague being absent (such as on holiday) is not justifiable (refer to section 5.2) nor is booking a single day every week. The dates and reasons must be provided to PJRFSI as soon as known and at least 4 weeks in advance. PJRFSI may challenge the reason where this does not appear appropriate and at its discretion refuse these nominated dates if they are not justifiable.
- 5.15. Unannounced Audit Protocol: Unannounced audits will commence with a short opening meeting followed by an immediate inspection of the production facilities. It is expected that the production facility audit will commence within 30 minutes of the auditor arriving on site. If the auditor arrives for the audit and is denied access, the site's certification will be suspended. The site will remain suspended until a new unannounced audit can be completed.
- 5.16. Unannounced Audit Protocol: Sites having an unannounced audit will receive an unannounced audit grade (e.g., AA+ or A+).

## **6 The Use of Information Communication Technology (ICT) in the Audit Process**

- 6.1 The Blended Audit is an audit which comprises an offsite - remote assessment followed by an onsite audit. This option is only available for the announced audit program. The remote audit takes place using ICT (Information & Communication Technology).
- 6.2 Blended audits can be used for BRCGS GFSI benchmarked standards. They only apply to announced recertification audits and not for the first BRCGS audit at a site. That means it is not applicable for initial audits or for sites not holding a current BRCGS certificate. Remote audits can be used as part of the re-certification audit, irrespective of the site's previous grade (i.e., all grades from AA – D can receive a remote audit), however, consideration shall be given during the risk assessment. The remote audit duration shall not exceed 50% of the total audit duration in any case.

It should be noted that 50% represents the maximum proportion of the audit that may be completed remotely.

- 6.3 Prior to the blended audit, PJRFSI determines the feasibility of using ICT methods with the site by sending the FS-108ict Virtual Audit Questionnaire to the site to fill out and return. After it is reviewed and approved by the Food Safety Program Accreditation Manager or Designee then a blended audit can be scheduled. The virtual audit button is marked in PJview and the remote activities will be designated on the F-27 Auditor Assignment Form.
- 6.4 PJRFSI will assign GoToMeeting as the ICT platform or the Food Safety Program Accreditation Manager or designee approves the use of a client's preferred secure platform.
- 6.5 Where different auditors are used for the remote and onsite audits there shall be a clear handover process in place prior to the onsite audit, to ensure that the auditor has all the necessary information to fully complete the audit and ensure all the requirements of the Standard are fully covered either remotely or onsite. PJRFSI will require the auditor that performs the remote audit to fill out the BRC Audit Report with evidence collected and the WB-fs65. The auditor that performs the onsite audit will be provided copies of the report and any NCRs prior to the audit. The onsite auditor will be required to fill out the rest of the audit report; update the onsite audit plan and complete the WB-fs65.
- 6.6 The remote audit shall be conducted first before the onsite audit and planned in a way that the site has enough time for non-conformity closure and the certification decision can take place within 42 days of onsite audit. The onsite audit shall be conducted within 28 days of the remote audit in a way that the site has enough time for non-conformity closure and the certification decision can take place within 42 days of onsite audit. Although it is recommended that remote and onsite audits shall be planned as close to each other as possible. In exceptional, justifiable circumstances, the certification body may request a concession from BRCGS for a maximum of 90 days.
- 6.7 If a critical non-conformity and/or the number and level of non-conformities identified at the remote audit would result in the failure to achieve a certificate, the existing certificate for the site shall be immediately withdrawn. A new audit shall be completed. This new audit shall be fully onsite.
- 6.8 Any non-conformities identified during the remote and onsite audit shall follow the existing requirements of the scheme. Evidence of the action taken to correct non-conformities identified at the remote audit and onsite audit shall be submitted to the certification body within 28 days of the onsite audit. The grade awarded is based on the total number of non-conformities identified (i.e., it is the sum of non-conformities identified at the onsite and remote audit) and according to announced audit protocol in the Standard. Non-conformities identified during the remote audit, which have been closed out and corrected before the onsite audit, are included in the grade calculation.

## **7 Nonconformities and Corrective Actions**

- 7.1 PJRFSI defines the following three levels of nonconformities:
  - a. Critical nonconformity - a critical failure to comply with a food safety or legal issue.
  - b. Major nonconformity - a substantial failure to meet the requirements of a "statement of intent" or any clause of the Standard, or a situation is identified which would, on the basis of available objective evidence, raise significant doubt as to the conformity of the product being supplied. Where minor nonconformities are repeatedly raised against a particular clause of the Standard, the findings may be combined and escalated to a major nonconformity.
  - c. Minor nonconformity - a clause has not been fully met but, on the basis of objective evidence, the conformity of the product is not in doubt.
- 7.2 Once the Auditor has made an observation during the audit, the Organization, if possible, may take corrective action during the audit. However, the Auditor's rating must reflect the condition or status prior to the Organization's corrective actions.
- 7.3 Regardless of the severity of findings, the Auditor is expected to complete the audit except when

extreme circumstances would not allow him/her to do so.

- 7.4 The number and type of nonconformities found during an audit determine, according to BRCGS guidelines: the grade achieved, whether certification will be granted, and the resulting audit frequency. The findings, as well as the full audit report, are always subjected to a full technical review by PJRFSI's Technical Reviewer. If the technical review process results in any change in the findings, the Organization will be notified.
- 7.5 If during the course of the audit, the Auditor identifies findings which would result in non-certification:
- a critical nonconformity; and/or
  - a major nonconformity against the statement of intent of a fundamental clause; and/or
  - a combination of nonconformities whereby their number and type exceed the limits for certification as allowed by BRCGS;

The auditor will contact PJRFSI's Food Safety Accreditation Manager/Technical Specialist or designee to discuss the findings and verify their severity. If findings are confirmed which would result in non-certification, PJRFSI's Food Safety Program Accreditation Manager or designee immediately suspends certification for a certified Organization.

In this case, the Organization is required to undertake another full audit to allow the auditor to review the BRCGS system and verify all corrections and corrective actions. Where an Organization cannot effectively implement corrective actions and have the Auditor verify their closure by means of an onsite revisit audit within 28 calendar days from the last day of the audit, Food Safety Program Accreditation Manager or designee immediately withdraws certification for a certified Organization.

- 7.6 In the event of a failure to achieve or maintain certification, Organizations, where required by their customers, must notify their customers of the circumstances and the Organization's intended corrective actions.
- 7.7 No certificate shall be issued until the Organization has corrected all major and minor nonconformities permanently or via a temporary solution as accepted by the Food Safety Accreditation Manager/Technical Specialist or designee.
- 7.8 For any nonconformity identified, the Organization must:
- take corrective action to remedy the immediate issue; and
  - undertake a root cause analysis of the nonconformity; and
  - develop a corrective action plan and timeline to address the root cause.
- 7.9 The Organization must submit a corrective action plan for all nonconformities to the Auditor for approval within seven (7) calendar days of the last day of the audit.
- 7.10 For BRC Packaging and BRC Storage and Distribution Initial Audit only: Major and Minor non-conformities, the Organization should submit satisfactory objective evidence to the Auditor within 90 calendar days of the last day of the audit to allow the Auditor time to close the nonconformities by day 104.
- 7.11 For all major and minor non-conformities, the Organization should submit satisfactory objective evidence to the Auditor within 21 calendar days of the last day of the audit to allow the Auditor time to close the nonconformities by 28 calendar days of the last day of the audit.
- 7.12 If the number and type of nonconformities resulted in a "C" grade, the non-conformities shall be closed out by means of an onsite revisit within 28 calendar days of the last day of the audit if a certificate is to be issued.
- 7.13 If the Organization achieves an A or B grade, PJRFSI determines whether documentary evidence or an onsite revisit is required. A revisit may be favored when:
- a relatively large number of minor nonconformities were found;
  - documentary evidence of compliance would be difficult to effectively demonstrate, i.e., cleaning

- c. there is a history of nonconformities closed through documentary evidence which have occurred at subsequent audits.
- 7.14 If satisfactory evidence to close out nonconformities is not provided within the 28 calendar days of the first day of the audit, PJRFSI will not grant certification or will withdraw certification as appropriate and the Organization will require an additional full audit to be considered for certification.
- 7.15 Any required onsite revisit audit will primarily review the effectiveness of the corrective action taken for nonconformities. However, if new nonconformities are identified during the course of the revisit, these nonconformities must also be satisfactorily resolved before a certificate can be issued.
- 7.16 PJRFSI must notify the BRCGS of any changes in an Organization's certified status and amends the Organization's record on the BRCGS Directory accordingly.

## **8. Audit Reporting and the Certification Decision**

- 8.1 The Auditor documents the results of the audit using the latest version of the BRCGS Audit Report and following the latest BRCGS guidelines for audit reporting. Where the report is produced in a language other than English, at a minimum, the summary sections and the nonconformities (along with the corrective actions eventually submitted by the Organization) must be reported in English.
- 8.2 Within ten (10) calendar days from the last day of the audit, the Auditor submits the preliminary audit report, audit notes, auditor working documents, and Organization's action plan to PJRFSI's Food Safety Program Coordinator or designee to forward to a Technical Reviewer for a preliminary technical and grammatical review. [Note: the Organization is required to submit their corrective action plan to the Auditor by calendar day seven (7).]
- 8.3 PJRFSI's Technical Reviewers are required to sign the F-71fs65 – Certification Personnel Statement of Availability prior to beginning a review of an audit report or package in order to confirm that they are impartial and free from any conflict of interest. Note: the Auditor who carried out the evaluation may not serve as the Technical Reviewer.
- 8.4 The PJRFSI Technical Reviewer conducts a preliminary technical and grammatical review of the audit package and documents the review on the Audit Report Review Form (F-67fs65-A), or an equivalent format. If needed the report is returned to the Auditor for clarification or revision. A record of reviews is maintained using the Audit Package Review Form (F-67fs65).
- 8.5 By 28 calendar days from the last day of the audit, the Auditor submits the final audit report and complete audit package, including the Organization's corrective actions to the Food Safety Program Accreditation Manager or designee to forward to a Technical Reviewer for the final technical review and certification recommendation.
- 8.6 The Technical Reviewer completes the final technical review and documents it and certification recommendation on the Audit Report Review Form (F-67fs65-A) or an equivalent format.
- 8.7 In cases where the Technical Reviewer rejects the package, s/he or the Food Safety Program Accreditation Manager or designee is responsible for contacting the Auditor or Organization for resolution. As appropriate, the Technical Reviewer or other competent designee is responsible for providing any clarification or any additional training to the Auditor.
- 8.8 Certification of BRCGS Systems is awarded to Organizations who achieve the minimum compliance audit rating or greater with no outstanding non-conformities, meaning all nonconformities have been corrected and verified by PJRFSI by onsite visit or by other appropriate means. However, regardless of the audit and/or certification outcome, PJRFSI will upload all audit reports to the BRCGS Global Directory.
- 8.9 Certification decision will be taken by PJRFSI's BRCGS technical reviewer. If Certification is granted, PJRFSI's Food Safety Program Coordinator or designee notifies the PJRFSI's PJRFSI Certificate

Department.

- 8.10 The Certificate Department creates a draft certificate conforming to BRCGS requirements and obtains approval of the certificate from the Organization.
- 8.11 By 42 calendar days following the first day of the audit, PJRFSI's Certificate Coordinator or designee issues the certificate. Delivery of the Certificate and other documents may be delayed until all outstanding invoices have been paid by the Organization.
- 8.12 By 49 calendar days following the last day of the audit, PJRFSI's Food Safety Certificate Coordinator or designee uploads the audit report and a copy of the certificate to the BRCGS Global Standards Directory.
- 8.13 Certification of an Organization's BRCGS System by PJRFSI shall provide confidence that the System meets the specified requirements and that the Organization has implemented and is maintaining and operating the BRCGS System effectively and in accordance with the scope specified on the Certificate of Registration.
- 8.14 Ongoing Audit Frequency and Maintenance of Certification
  - i. In order to maintain Certification, an Organization is required to:
  - ii. attain the minimum compliance audit rating or greater; and
  - iii. ensure all nonconformities are corrected within specified timeframes.
- 8.15 Recertification audit due dates are based on the first day of the initial audit. All audits are due within the 28-day window in advance of the due date.
- 8.16 The audit frequency following a certification audit is determined by the compliance rating achieved during the audit and the audit program desired, announced or unannounced. In the Announced Audit Program, Organizations achieving an A or B grade maintain a 12-month audit frequency and Organizations who achieve a C grade maintain a 6-month audit frequency until an A or B grade is achieved. Only Organizations who achieve an A or B grade may opt for either of the Optional Unannounced Audit Program options as described in the BRCGS Standard.
- 8.17 PJRFSI may be unable to conduct an audit of an Organization and therefore unable to renew their certificate on a six (6) or twelve (12) month basis due to the following justifiable circumstances:
  - a. situated in a specific country or an area within a specific country or an area within a specific country where there is government advice to not visit and there is no suitable local auditor;
  - b. within a statutory exclusion zone that could compromise food safety or animal welfare;
  - c. in an area that has suffered a natural or unnatural disaster, rendering the site unable to produce or the auditor unable to visit.
- 8.18 Where audits are delayed beyond the 28-day window up to and including the next audit due date without a justifiable reason, a major nonconformity is raised. Unjustifiable reasons include but are not limited to: combining audits, lack of personnel, or undertaking construction or renovation at the site.
- 8.19 Audit dates can only be reset and treated as an initial audit if the site has been out of certification for 6 months or longer.
- 8.20 Audits may be undertaken earlier than the due date in order to reset audit dates to allow combined audits with another program or to include a product produced at a different season. In these cases:
  - a. The audit report will detail the reasons why an audit has been brought forward.
  - b. The audit due date and certificate issuance/expiry will be "reset" based on the new audit date.
- 8.21 When a seasonal Organization's production schedule is affected by harvest timing, the audit date may vary from the 28-day due date window and the justification for an early or late audit must be

detailed in the audit report.

## 9 Conditions for Suspending or Withdrawing Certification

- 9.1 PJRFSI is responsible for initiating the suspension and withdrawal of the BRCGS Certificate. PJRFSI suspends the BRCGS Certificate of Registration where:
- a. nonconformities as described in @Section 7.0 are detected at an audit; or
  - b. the Organization fails to have a required audit conducted according to their audit frequency except as justifiably allowed.
  - c. failure of the client to comply with PJRFSI's terms and conditions (i.e., nonpayment of fees)
  - d. non-compliance to certification protocol
  - e. pending complaint investigation
  - f. major change to the site or its activities that require action
  - g. a site visit raises doubt to the validity for the current certificate
  - h. pending appropriate corrective action following an investigation into product recall and/or product withdraw
  - i. failure to notify PJRFSI of significant changes to the company see @Section 10.1
- 9.3 Where the Organization's BRCGS Certificate of Registration is suspended, PJRFSI's Food Safety Program Accreditation Manager or designee immediately amends the Organization's details on the BRCGS Directory to a "suspended" status indicating the reason for the suspension and the date of effect. The Food Safety Program Accreditation Manager or designee will inform the Organization in writing and sent by certified mail, that their certificate has been suspended, the reasons for doing so and action required from the Organization including timescale in order to lift the certification.
- 9.4 Where PJRFSI has suspended an Organization's BRGSC Certificate of Registration, for the duration of the suspension, the Organization:
- a. shall not represent itself as holding a BRCGS Certificate of Registration;
  - b. shall not use any goods, products, packaging, stationery, or other items that contain a BRCGS Logo that may indicate the Organization holds a BRCGS Certificate of Registration;
  - c. shall notify any customers as required.
- 9.5 The maximum period for suspension shall be 6 months, after which time the certificate should be either re-instated or withdrawn, if it has not already expired.
- 9.6 A certificate may be withdrawn by PJRFSI for the following reasons:
- a. failure of the client to adequately comply with the Certification Body's request for action following a complaint investigation
  - b. following investigation or a scheduled audit, where a site is not maintaining the standards expected of a BRCGS certified site
  - c. the company no longer trades
  - d. the site no longer undertakes the scope activities e.g., cessation of manufacture due to extensive site damage by fire
  - e. a suspended site exceeds the 6 months' time period to demonstrate compliance for recertification
- 9.7 Where the Organization's Certificate of Registration is withdrawn, PJRFSI's Food Safety Program Accreditation Manager or designee as appropriate immediately amends the Organization's details on the BRCGS Directory to a "withdrawn" status indicating the reason for the withdrawal and the date of effect; and in writing;
- a. informs the Organization that the BRCGS Certificate of Registration has been withdrawn, the reason for such action, the date of effect, and in writing sent by certified mail;
  - b. instructs the Organization to return the Certificate of Registration;
  - c. instructs the Organization to return any electronic copies of the BRCGS Logo and comply accordingly with the BRCGS Logo Guidelines;

- 9.8 PJRFSI's Food Safety Program Accreditation Manager or designee shall require the client to
- a. withdraw any claim that imply that the site has been certificated;
  - b. cease to advertise or use any certification mark issued by PJRFSI;
  - c. cease using the BRCGS logo within 48 hours of certificate withdrawal or as agreed with BRCGS.

## 10 Organization Requirement to Notify PJRFSI of Special Situations

- 10.1 The Organization is required to notify PJRFSI in writing and in a timely manner about any significant change(s), actual or intended, which include but are not limited to:
- a. changes in legal or commercial status including changes in name;
  - b. changes in ownership;
  - c. changes in key managerial, decision-making or technical staff;
  - d. changes in the number of employees;
  - e. changes in location and/or number of sites;
  - f. damage to the site, e.g., damage by fire or natural disaster such as a flood;
  - g. changes to the physical building(s) and/or processing operations and equipment;
  - h. changes to the scope of certification (including expansion or reduction) in terms of products, processes, and/or facilities;
  - i. changes in the Organization's BRCGS System or factors influencing the Organization's BRCGS System; and
  - j. a food safety incident as described in @10.2.
- 10.2 If at any time based on available information, the Organization becomes aware that concerns about actual or suspected threats to food safety exist which could require intervention to protect consumers' interests, Organization must notify PJRFSI immediately. Upon identification that a food safety event requires public notification (such as a Class I or Class II recall), the Organization shall, within 3 workings days of identifying the event, notify Perry Johnson Registrars Food Safety, Inc's Food Safety Program Accreditation Manager in writing and by phone call:**
- a. **Business hours M-F, 9-5 EST: 248-519-2523**  
**After hours and weekends: 248-648-0216**
  - b. **Email: [foodsafety@pirfsi.com](mailto:foodsafety@pirfsi.com);**
- 10.3 Following notification of a food safety event by the Organization, PJRFSI will notify BRCGS and any Accreditation Bodies, as necessary, within a further forty-eight (48) hours of any action PJRFSI intends to take to ensure the integrity of the certification.
- 10.4 When a certified Organization relocates its business premises, the Organization's Certificate of Registration is no longer valid until a successful Recertification Audit of the new premises as conducted.
- 10.5 A certified Organization must notify PJRFSI of any change in ownership within thirty (30) days of the effective change. When a certified Organization's ownership changes but key staff responsible for the BRCGS System have been retained, PJRFSI confirms the continued effectiveness of the BRCGS System within sixty (60) days of the change of ownership by means of a site audit and upon confirmation. This allows the Organization to retain the existing audit frequency status and certification number. If significant changes in key personnel have occurred with the change in ownership, PJRFSI shall complete a full Facility Audit and the Organization's audit frequency status will be based on this new audit activity.
- 10.6 PJRFSI reserves the right to conduct special audits during the course of the certification period, and as needed in response to changes/incidents as described above. Where such changes may affect the conformity of the product(s) and/or the Organization's BRCGS System, PJRFSI's Food Safety Program Accreditation Manager or designee as appropriate determines whether the announced changes require further investigation and schedules a special audit as necessary.

- 10.7 The Organization must not promote products, processes, and/or facilities/sites which have not been covered in the scope of certification as audited and approved by PJRFSI. Unauthorized promotion will result in the withdrawal of the BRCGS Certificate.
- 10.8 Where Organization fails to notify PJRFSI of any of the above changes, PJRFSI may accordingly suspend or withdraw, as deemed appropriate, the BRCGS Certificate and reserves the right to retroactively invalidate the BRCGS Certificate effective as of the date the change occurred.
- 10.9 If the site's recertification audit is due but the site is inaccessible due to genuinely unable to receive a physical audit because the site is located in a country or region where government advice/restrictions. prevent movement or access to the site, PJRFSI will conduct a risk assessment to determine the risk to food safety and the site's BRCGS certification by extending the certificate. This process must be used as a last resort and extensions must be approved by BRCGS through a concession. Concession requests for Certificate Extensions must include justification for the extension and a date when an onsite or blended audit will take place. This process is not applicable to sites not currently certificated to BRCGS.
- 10.10 The Scheduler sends the site the FS-228brc to fill out and send back. A two-hour risk assessment is then scheduled with an approved BRCGS auditor. The auditor documents the information from the risk assessment information and conversation with the site on the FS-229brc and fills out the BRCGS Risk Assessment Report Template. Where sites are currently certificated with a grade C or D, these shall be classified as 'high risk' and certificates may not be extended.
- 10.11 If any areas of concern are documented by the auditor, then they must be closed out using the BRCGS corrective action process prior to extending the certificate. The risk assessment is then reviewed by a BRCGS auditor and the certificate decision is reported on F-67fs65-A.
- 10.12 If PJRFSI is satisfied that continued certification of the site is appropriate, a certificate extension of up to a maximum of 6 months may be issued.
- 10.13 PJRFSI will reissue the certificate with the extended expiration date and send an electronic copy of the certificate to the client. The Food Safety Certificate Coordinator or designee uploads the revised certificate and BRCGS Risk Assessment Report Template to the BRCGS Database. The re-audit shall be planned and undertaken at the earliest opportunity following the lifting of the Covid19 restrictions.

## **11 Promotion of BRCGS Certification by Organization**

When providing copies of any certification documents (certificates and audit reports) to interested parties, Organizations shall reproduce those documents in their entirety or otherwise seek permission in writing from PJRFSI. Organizations shall contact the BRCGS for authorization to use the BRCGS Logo and shall comply with: the latest Terms and Conditions and Logo Guidelines as published by BRCGS; and any additional requirements issued by PJRFSI regarding use of certification marks and promotion of certification. The proprietary names and logos of BRCGS, any applicable accreditation bodies, and PJRFSI shall not be used by the Organization in any manner which could be misconstrued or defamatory to the respective parties and/or parties' brands. Any misuse of these proprietary names or logos by a certified Organization or an Organization seeking certification shall be reported to the interested parties and responded to with appropriate actions by PJRFSI.

## **12 Conditions for Change of Certification Body (Transfers)**

- 12.1 A Certified Organization shall ensure it has a certification body appointed at all times. A Certified Organization may elect to cease being a client of a certification body (Former Certifier) and to have PJRFSI, as a New Certifier, undertake audits of its BRCGS System.
- 12.2 Where a Certified Organization elects to transfer to PJRFSI, PJRFSI's Food Safety Program



Accreditation Manager or designee as appropriate undertakes a pre-transfer review of the Organization's Certification and completes the F-144fsi Transfer of Certification Body Checklist to:

- a. confirm the BRCGS Certificate is current, valid, and relates to the BRCGS System is Certified;
- b. confirm Certification under Former Certifier is not suspended or under threat of suspension or withdrawal.
- c. confirm that the Organization has closed all non-conformities issued by the Former Certifier;
- d. review the Organization's Audit history (where the Organization can demonstrate such history to the satisfaction of PJRFSI by way of copies of Audit reports completed by any Former Certifier) and the impact of any outstanding Nonconformities.
- e. Confirm date of the last unannounced audit

12.3 Where a decision is made to proceed with Certification, PJRFSI:

- a. Food Safety Program Accreditation Manager or designee signs off on the completed F-144fsi.
- b. PJRFSI conducts the required audit which was described by the Former Certification Body within timelines consistent with the BRCGS program audit frequency and certification requirements.

### **13 Appeals**

Appeals are handled in accordance with PJRFSI's Appeal Procedure (SOP-10), which is available upon request.

### **14 Confidentiality**

PJRFSI, including all auditors, administrative staff, Technical Reviewer, Impartiality Committee, and any other employee or contractor, ensures that all records, data, and information received during the execution of any audit activity remain confidential and the property of the Organization. Only with the Organization's authorization will PJRFSI release audit data to any entity other than BRCGS except when mandated by law, statute, or the regulations of accreditation bodies. In the event that disclosure of such information is required by law or statute or accreditation body regulations, PJRFSI will disclose the information as required and inform the Organization of such disclosure in writing in a timely fashion.