



GFSI BENCHMARKING REQUIREMENTS
VERSION 2024

PART II BENCHMARK REQUIREMENTS IMPLEMENTATION HANDBOOK

Benchmark Requirements Implementation Handbook

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Introduction

The Global Food Safety Initiative aims to improve food safety and business efficiency. GFSI's work in benchmarking and harmonisation fosters mutual acceptance of GFSI-recognised Certification Programmes across the industry and enables a simplified “once certified, recognised everywhere” approach. This reduces inefficiencies from duplication of audits and helps reduce trade barriers.

The GFSI Benchmarking Requirements are built through consensus of experts; they form a shared and widely accepted understanding of what constitutes a robust food safety Certification Programme. Whilst the detailed content of each individual Certification Programme shall be independently developed this Implementation Handbook aims to aid understanding and expectations of GFSI in documenting and demonstrable evidence of implementation of a robust system.

This Implementation Handbook covers Parts II and III of the GFSI Benchmarking Requirements, with part I covered separately.

This Implementation Handbook provides detailed guidance and clarity on the Benchmarking Process and Requirements outlining key steps, expectations, best practices, and examples where necessary to support with the implementation process for Certification Programmes Owners.

Part II of the GFSI Benchmarking Requirements defines the key elements required in a Certification Programme in relation to:

- Ownership, development and maintenance;
- Accreditation;
- Relationship with Certification Bodies;
- Certification body personnel;
- Management of audit and certification;
- Multisite sampling and group certification.

Part III of the GFSI Benchmarking Requirements defines the key elements required in a Certification Programme in relation to:

- Hazard and Risk Management Systems (Hazard Analysis and Critical Control Points (HACCP) or HACCP based systems);
- Food Safety Management Systems;
- Good Industry Practices, Good Manufacturing Practices, Good Agricultural Practices.

The documents are split into the 20 scopes A1 to K.

GFSI have not provided detailed guidance within this handbook for Part III as it is beyond the remit of GFSI to dictate the expectation of the implementation of requirements at the site. It is the responsibility of the Certification Programme Owner to ensure their requirements and expectations are suitably clear to stakeholders including sites implementing the Certification Programme, auditors and Certification Bodies certifying the Certification Programme and users of the certificate, to ensure that requirements are adequately met.

Section 1: Ownership, Development and Maintenance

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
1.1	Ownership	The Certification Programme Owner shall be a legal entity,	Evidence provided of legal company registration documents in home country matching CPO name.
1.2	Ownership	The Certification Programme Owner shall have the authority to establish and amend the Certification Programme.	Evidence of authority for ownership of normative documents.
1.3	Ownership	The Certification Programme Owner shall neither have conformity assessment nor certification activities for the Certification Programme. In particular, the Certification Programme shall not be developed, managed or owned by a Certification Body or group of Certification Bodies.	To maintain independence and impartiality, the Programme Owner cannot be a Certification Body or group of Certification Bodies. It is noted that Certification Bodies are a valuable asset to the development of a programme with their experience and knowledge and should be considered a stakeholder in the CPOs development process. Therefore Certification Bodies can participate in the developing process but cannot be a Programme Owner.
1.4	Ownership	The Certification Programme Owner shall not provide any consultancy on their Certification Programme.	The glossary defines consultancy as participation in: - designing, implementing or maintaining a management system, for instance: a) preparing or producing manuals or procedures, and b) giving specific advice, instructions or solutions towards the development and implementation of a management system; - designing, manufacturing, installing, maintaining or distributing of a certified product or a product to be certified, or; - designing, implementing, operating or maintaining of a certified process or a process to be certified, or; - designing, implementing, providing or maintaining of a certified service or a service to be certified.

			Note: Arranging training and participating as a trainer is not considered as consultancy, provided that, where the course relates to management systems or auditing, it is confined to the provision of generic information that is freely available in the public domain; i.e. the trainer does not provide company-specific solutions.
1.5	Self-promotion	The certification process shall not be 'self-promoting' or 'selfexpanding' by mandating that products or services from the certified organisation shall contain components which are certified under a Certification Programme owned by the Certification Programme Owner.	There shall not be conditions within the Programme which specify a requirement for certification by the CPO.
1.6	Product Labelling	The Certification Programme Owner shall not allow products produced under the conforming Certification Programme to be labelled, marked or described in any manner which implies they meet specific food safety criteria.	Evidence of documented rules for product labelling and use of brand marking. Evidence of active follow up where issues are highlighted to the CPO.
1.7	Product Labelling	The Certification Programme shall specify the use of off- product logo or mark and ensure that Certification Bodies communicate those rules to applicant/certified organisations.	Documented CPO rules of requirement for Certification Bodies to communicate to applicants/certified organisations.
1.8	Certification Programme Development and Maintenance	The Certification Programme shall be developed and maintained with the participation of technically competent representatives of direct stakeholders or be subjected to formal review by such parties and subsequently determined as appropriate.	Documented process for development and formal ongoing review of Programme and its operation. Demonstrable evidence of input e.g. feedback documentation, meeting minutes.
1.9	Certification Programme Development and Maintenance	The number and interests of the stakeholder representatives involved with the Certification Programme development shall be reflective of the sector(s) of the food supply chain for which the Certification Programme is intended.	Documented policy on determination of representatives reflective of sector i.e. needs to be justified. Demonstrable evidence of participation of stakeholders relevant to the Programme sufficiently covering different interests eg Accreditation Bodies, Certification Bodies, Auditors, Industry Groups, Brand Owners, Manufacturers, Consumers.

1.10	Certification Programme Development and Maintenance	The Certification Programme shall be subjected to stakeholder consultation during its development.	There shall be a defined process for review and evidence to demonstrate implementation. Expectation is that a representative range of persons / industries / governing bodies have the opportunity to comment and that this is advertised in an appropriate manner to ensure extensive contact and clear messaging of timelines and feedback mechanism.
1.11	Certification Programme Development and Maintenance	The consultation period shall allow sufficient time for stakeholders to review the Certification Programme under development and send their comments to the Certification Programme Owner.	Timescales will need to consider the volume of changes and therefore the amount of time required to review, the time of year when the consultation is undertaken eg further time may be required over holiday periods. The consultation duration should be proportionate to the changes and the impact to stakeholders.
1.12	Certification Programme Development and Maintenance	The Certification Programme Owner shall ensure due consideration to comments received from stakeholders during the consultation.	Evidence of consideration shall be available eg documented evidence of discussion or review of comments and their incorporation or rejection into the update.
1.13	Certification Programme Development and Maintenance	The Certification Programme's normative documents shall be established by consensus and issued using a formalised and documented approval process.	The glossary defines Normative documents as 'documents stating the specified requirements (need or expectation that is stated) such as regulations, standards, and technical specifications which are part of the Certification Programme'. Documented process outlining development and sign off of such documents considering nature and type of changes. Evidence of examples of such development eg meeting minutes, documented comments.

1.14	Certification Programme Development and Maintenance	The Certification Programme's normative documents shall be appropriately controlled and publicly available. The documents submitted to GFSI shall be translated into English and their translation appropriately controlled.	Evidence of public availability eg link to website. Expectation is that the normative documents are easily available and not subject to any type of subscriber restriction.
1.15	Certification Programme Development and Maintenance	The Certification Programme's normative documents shall be reviewed and re-issued as appropriate to remain current and address stakeholders' expectations. This shall include revision in accordance with the issuing of new versions and sub-versions of the GFSI Benchmarking Requirements.	Evidence of review where stakeholder or GFSI benchmarks have required change.
1.16	Certification Programme Development and Maintenance	The Certification Programme Owner shall inform key stakeholders, including GFSI, of any changes to the Certification Programme, in particular all those changes that may impact the recognition status of the Certification Programme. (See Glossary for Reportable incidents to GFSI).	This shall include changes to any normative documents, significant changes to operational instructions or contractual arrangements. Evidence of communications to stakeholders. Confirmation of changes communicated and received by GFSI. CPOs shall complete GFSI process to inform of changes to normative documents and impact to current benchmarking.
1.17	Certification Programme Development and Maintenance	The Certification Programme Owner shall ensure that stakeholders and other interested parties can make effective contact with the Certification Programme Owner, or authorised authority, to clarify any interpretation.	Evidence of service – e.g. website contact us details.
1.18	Documentation requirement	The Certification Programme Owner shall establish, implement and maintain a Quality Management System.	Evidence of a comprehensive QMS with policies, procedures, processes, documents, and records to evidence meeting of GFSI requirements. This shall include a clear and current model of the organization's structure and the responsibilities of all individuals within the organization.

1.19	Complaint procedure	The Certification Programme Owner shall implement an effective documented complaint procedure. This procedure shall be publicly available without request.	Evidence of public availability of documented complaint procedure e.g. link to website which shall ensure an effective investigation process is conducted to identify and correct the causes of complaints with the aim to reduce complaint numbers or not to effect a repeat of the issue. Evidence of handling of specific complaints will be interrogated to ensure the process is effectively implemented. Complaint data should be available to review. If no complaints received, then other data such as appeals should be included.
1.20	Data Management	The Certification Programme Owner shall have in place a clearly defined data management system holding and maintaining data for the effective management and operation of the Certification Programme.	Evidence of a data management system which maybe a sophisticated database or manual entry type spreadsheet. However, it should be clear how the system is kept accurate and up to date and which personnel have responsibility for entering and checking the data on the system.
1.21	Data Management	The Certification Programme Owner shall ensure that the data management system shall incorporate data in relation to the GFSI Benchmarking Requirements and the annual assessment questionnaire. This system shall allow to estimate as a minimum: • Number of auditors approved to audit against the recognised programme by region; • Number of valid certificates; • Number of issued certificates within a given period; • Number of suspended certificates; • Number of withdrawn certificates.	Demonstrable evidence that the data management system contains the specified data and can be interrogated to show accurate up to date information. System shall be able to be interrogated e.g. number of auditors qualified for specific Programme, number of certificates issued between specific dates or by country, number of suspended and withdrawn certificate.
1.22	Data Management	The Certification Programme Owner shall have a process in place to verify the authenticity of the certificate.	Demonstrable evidence of authenticity of certificate which is accessible publicly e.g. certificate identification system e.g. unique number or QR code which can be checked e.g. public database or on request back to CPO.

1.23	Internal Review	The operations of the Certification Programme Owner shall be subject to formal annual internal review of its relevance and compliance to internal processes, and, where appropriate, revised.	As per expectation of a well run Quality Management System, the Certification Programme Owner shall undertake an internal audit programme of its own processes and procedures to ensure validity and relevance demonstrating that the Certification Programme Owner is doing what they say they will do and the Quality Management System is effective. A documented process shall outline what processes are reviewed, how, how often and by whom. Evidence of review and the actions taken shall be available. This internal audit should be used to implement procedure revisions where necessary.
1.24	Internal Review	The Certification Programme Owner shall ensure that the formal internal review assesses the management of the Certification Programme, and address any issues or concerns raised by stakeholders.	This assessment expectation is for external feedback and includes analysis of positives and negatives eg complaints, recalls, Certification Body performance, industry feedback, external audits.
1.25	Internal Review	The review and any arising actions shall be fully documented.	Evidence of what was reviewed and the outcome should be documented. Findings (including where there are no non-compliance) and corrective actions should be documented and evidence of a process of review to ensure timely close out is in place.

Section 2: Accreditation

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
2.1	Certification Process	The Certification Programme shall include a certification process based on one of the following standards: ISO / IEC 17065 for product Certification Bodies or ISO / IEC 17021-1 with ISO / TS 22003-1 for management system Certification Bodies.	Documented evidence for the basis of accreditation. Note whilst ISO/TS 22003-1 is mandatory within ISO / IEC 17021-1, ISO/TS 22003-2 is an optional accreditation process with ISO/ IEC 17065 and therefore GFSI do not dictate its mandatory use with ISO17065 schemes but maybe optional by the Certification Programme Owner.
2.2	Certification Process	Where scoring, ranking and grading systems are applied, these shall be clearly explained by the Certification Programme Owner and publicly available.	If applied - documented evidence of clear scoring systems and link to where these are publicly available. The implementation shall be interrogated during benchmarking activities.
2.3	Scope of certification	The Certification Programme Owner shall define clear scope(s) of certification related to the sector of the food supply chain for which the Certification Programme is intended and commensurate to the GFSI scope(s) of recognition.	Documented evidence of clear scope fitting GFSI scopes.
2.8	Relationship with Accreditation Bodies	The Certification Programme Owner shall have a process in place to inform the Accreditation Bodies of: • relevant information and developments related to the Certification Programme • extending Certification Bodies' scope of activities	Documented CPO process with evidence of communications eg regular meetings, email communications on specific issues.

2.10	Certification Bodies List	The Certification Programme Owner shall ensure that a list of active Certification Bodies is publicly available without request.	Evidence of active list e.g. link to website and confirmation that this is accurate and up to date.
2.11	Certification Bodies Requirements	The Certification Programme Owner shall have documented requirements for Certification Bodies to operate the Certification Programme.	Documented requirements may be formed by a number of documents or contractual arrangements but evidence shall outline the basis for approval for the Certification Body to operate the Programme.
2.12	Accreditation of Certification Bodies	The Certification Programme Owner shall ensure that all activities resulting in the issuing of certificates are delivered by Certification Bodies accredited by Accreditation Bodies members of the International Accreditation Forum (IAF) and signatories to the Multilateral Recognition Arrangement (MLA) for the appropriate scope.	Evidence of Accreditation Bodies being IAF MLA signatories – link to IAF website listing.
2.13	Accreditation of Certification Bodies	The Certification Programme Owner shall define clear scope(s) of accreditation for the Certification Bodies.	Definition of scope i.e. naming of the Programme to be accredited.
2.14	Accreditation of Certification Bodies	The Certification Programme Owner shall ensure that the scope of accreditation of Certification Bodies shall be publicly available and precisely defined in terms of the exact name of the Certification Programme in scope, its revision number and / or date and its sector of application reference (e.g. industry sector).	Expectation is that this is clearly and easily publicly available such as on the CPO website or Certification Body websites. Note that stakeholders would need to understand who the Accreditation Body was and find it difficult to navigate Accreditation Bodies websites, so relying on links to Accreditation Body websites would not be accepted as fulfilling this requirement.
2.17	Accreditation of Certification Bodies	The Certification Programme Owner shall ensure that Certification Bodies seeking accreditation for the Certification Programme shall be accredited within 12 months from the date of application to an Accreditation Body.	Must specify in policy that accreditation shall be achieved within 12 months from date of application to an Accreditation Body.

2.18	Accreditation of Certification Bodies	In the event that accreditation is not granted within 12 months or, in situations where there is a delay, the Certification Body shall provide a plan to the Certification Programme Owner for approval to achieve accreditation and any potential impact on GFSI Recognition be highlighted to the GFSI Senior Technical Manager.	Evidence of a plan and actions shall be reviewed for specific examples including the consideration of impact to GFSI recognition and communication as appropriate to GFSI in a timely manner - within one month of accreditation not being achieved at the maximum but as soon as the issue is identified.
2.19	Accreditation of Certification Bodies	If a Certification Body has a pending application for extension of their scope with an Accreditation Body, the Certification Body shall inform the Certification Programme Owner. The Certification Programme Owner shall acknowledge and hold written notification from the Certification Body of such a circumstance.	Evidence of requirement within Certification Programme Owner policy or contracts with Certification Bodies. Certification Programme Owner's to maintain communication records between Certification Bodies and themselves as evidence of specific examples.
2.20	Accreditation of Certification Bodies	In the event that the range of certification services offered by a Certification Body is wider than the range of those accredited, the Certification Programme Owner shall mandate that the Certification Body makes clearly and publicly available the scope of their accreditation.	This shall be documented in a policy/contractual agreement and evidence available e.g. link to accreditation certificate of Certification Body on the Certification Body or Accreditation Body website. For example a Certification Body may offer certification to a particular Programme, but may not be accredited for all of the scopes of that Programme – this shall be clearly and publicly explained. For example a Certification Programme Owner or Certification Body may offer Programme variants that are not accredited eg foundational audit programmes and therefore this must be clearly and publicly explained by the Certification Body offering those services.
2.21	Accreditation of Certification Bodies	In the event that the range of certification services offered by a Certification Body is wider than those accredited, the Certification Programme Owner shall ensure that those are transparent, not conflicting and distinguished from those that are accredited.	Evidence available e.g. website of Certification Programme Owner and/or Certification Body website with no conflicting information. There needs to be a clear distinction between those services which are accredited and those which are not which are easily identifiable and understandable for users.

Section 3: Relationship with Certification Bodies

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
3.1	Relationship with Certification Bodies	The Certification Programme Owner shall have contractual and enforceable arrangements with all Certification Bodies accredited to ISO / IEC 17065 or ISO / IEC 17021-1 with ISO / TS 22003-1 to operate their Certification Programme.	Evidence of signed legal agreements with all Certification Bodies.
3.1.2	Relationship with Certification Bodies	The Certification Programme Owner shall ensure that IAF MD4 (current version) is included as a normative reference for their certification Programme(s).	Evidence of current version of IAF MD4 (note current version is 2023) shall be referenced within normative documents.
3.2	Relationship with Certification Bodies	The Certification Programme Owner shall require that Certification Bodies notify them of any withdrawal or suspension of their accreditation.	Documented policy in place with evidence of communication where such occurs.
3.3	Relationship with Certification Bodies	The Certification Programme Owner shall ensure that a designated Certification Body employee is responsible for the quality system's development, implementation and maintenance. This designated employee shall also have the responsibility for reporting on the performance of the quality system for the purposes of management review and subsequent system improvement.	Documented policy requirement in place with evidence of CPO oversight e.g. within CPO office audit of Certification Bodies. Also check who the named designated employee is and their role within the Certification Body.

3.4	Relationship with Certification Bodies	The Certification Programme Owner shall ensure that Certification Bodies use the Certification Programme in its entirety for the relevant GFSI scope of recognition.	The 'entirety' of the Certification Programme shall be implemented ie evidence that all the rules are implemented when undertaking certification activities by the Certification Bodies.
3.5	Relationship with Certification Bodies	The Certification Programme Owner shall ensure that Certification Bodies make the following information available at all times to the Certification Programme Owner: Evaluation procedures and certification processes in relation to the Certification Programme; Details of complaints, appeals and disputes procedures; A comprehensive list of all certified organisations against the scope(s) of the Certification Programme.	Documented policy requirement in place with evidence of acknowledgement and implementation by the Certification Bodies and Certification Programme Owner oversight ensuring implementation e.g. within Certification Programme Owner office audit of Certification Bodies.
3.6	Relationship with Certification Bodies	The Certification Programme Owner shall ensure that Certification Bodies notify the Certification Programme Owner of changes to ownership, management personnel and management structure or constitution in a timely manner.	Documented policy requirement and evidence of acknowledgement and implementation by the Certification Bodies and Certification Programme Owner oversight. Evidence of communications with such occurrences.
3.7	Relationship with Certification Bodies	The Certification Programme Owner shall agree on appropriate actions with Certification Bodies to mitigate any situations which could result in bringing their Certification Programme or GFSI into disrepute, and notify GFSI of such situation. (See Glossary for Reportable incidents to GFSI).	Documented policy with details of examples considered as a risk to reputation to both the Certification Programme Owner and GFSI, not restricted to food safety but shall consider reputational damage of the Certification Body, Certification Programme Owner and GFSI. Expected mitigation details shall also be documented e.g. actions expected and timelines. This shall be clearly communicated to Certification Bodies. Consideration shall be given to communication channels – media such as mainstream press, trade press, TV as well as social media channels and whether the CPO name or GFSI name is mentioned.

			Consideration shall be given to any situation which has potential to lead to disrepute – including complaints, recalls, withdrawals, involvement of regulator, product food safety issues linked to a certificated site resulting in illnesses, injuries or any death. Issues with the certification process such as poor Certification Body or Auditor performance that may lead to suspension of Certification Body from scheme, suspension or withdrawal of accreditation of Certification Body or suspension or removal of an auditors approval and fraud shall also be considered. Fully traceable documented records of communication shall be kept and available to GFSI on request as appropriate.
3.8	Relationship with Certification Bodies	The Certification Programme Owner shall inform Certification Bodies of any relevant information and developments related to the Certification Programme. This shall include any changes to the Certification Programme.	CPO shall have appropriate mechanisms in place to inform Certification Bodies in a timely manner to allow appropriate actions to be undertaken when there are relevant developments related to the Certification Programme. This shall include clear instruction and timelines of impact for Certification Bodies to adjust their processes. Evidence of communications to Certification Bodies where such changes occur.
3.9	Relationship with Certification Bodies	The Certification Programme Owner shall publish guidance / requirements to Certification Bodies on transition arrangements when a new version of the Certification Programme is issued. The Certification Programme Owner guidance / requirements may encompass elements such as the following: • terms and conditions of transition period between previous and new versions; • defined timeline for transition; • comparative information between previous and new versions; • timeline in which Certification Bodies are required to cascade information to all auditors and certified organisations.	Documented publicly available policy which covers all the elements listed. Evidence of implementation with communications and adherence of Certification Bodies to the defined requirements and timelines.

3.10	Integrity Programme	The Certification Programme Owner shall implement a risk-based programme to monitor and regularly review the performance of Certification Bodies, and their compliance to the Certification Programme's requirements. This programme shall consider the number, size and complexity of audits carried out by the Certification Bodies.	Evidence of a risk-based programme i.e. demonstration of risk matrix considering audit numbers, size and complexity of audits by the Certification Body and how this is applied to a programme of activities e.g. desktop review of audit reports for quality and audit activities, defined office audits and defined KPI metrics such as adherence to audit activity timelines, audit duration etc for Certification Bodies.
3.11	Integrity Programme	The Certification Programme Owner shall ensure that results of the integrity programme are communicated to and reviewed with the Certification Bodies at least once a year.	Evidence of defined results for each Certification Body and evidence of communication e.g. documented report, email communications or recorded meeting. Appropriate improvement plans shall be agreed, documented and monitored.
3.12	Desktop Assessment	The Certification Programme Owner shall implement a risk-based programme of desktop assessments of Certification Body performance on audit and auditor records.	Evidence of a risk-based programme i.e. demonstration of risk matrix outlining what elements have been considered and how this has influenced the resultant activities of reviewing relevant audit files and auditor records e.g. volume of assessments by Certification Body/auditor; scope; organisation complexity; geographical spread. Demonstration of how the reviews are carried out, what the outcomes are and what follow up action is taken. Expectation of review of details contained within audit reports to ensure reports are completed as required and provide sufficient detail and accuracy of the compliance at the site. Review of auditor details shall confirm that auditors meet the documented qualification and competency criteria. Where improvement is required, appropriate action plans shall be documented and actioned.

3.13	Office Visits	The Certification Programme Owner shall implement a risk-based programme of Certification Bodies office audits, focusing on the implementation of the Certification Programme's requirements by the Certification Bodies. Risk factors may include: • the number of countries in which a Certification Body operates; • the number of auditors employed; • languages in which audits are undertaken; • number of certified companies; • number of centralised Certification Body offices; • number of audits undertaken per auditor; • grading and number of non-conformances. • management and notification of product recalls to Certification Programme Owner. • number of relevant complaints.
3.14	Key Performance Indicators	The Certification Programme Owner shall define and monitor Key Performance Indicators for Certification Bodies including complaints, results of desktop assessments and office visits. The Key Performance Indicators shall be communicated to and reviewed with the Certification Bodies at least once a year.

Evidence of a risk-based programme i.e. demonstration of risk matrix considering the elements listed and how this is applied to develop the programme of office audits.

Expectation of a documented office audit process outlining what is audited, how, how often and by whom ie competence and impartiality criteria.

Evidence of completed office audit reports along with corrective actions shall be available.

Documented policy of defined KPIs with evidence of monitoring which includes the elements listed ie complaints, audit report review and auditor record review, office audit results. Evidence of communication e.g. documented report, email communications or recorded meeting. Expectation of follow up actions.

Section 4: Certification Bodies Personnel

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
4.1	Certification Body Personnel Competence	The Certification Programme Owner shall ensure that a system is in place to ensure all personnel involved in the certification process meet the competence required by the Certification Bodies, the Certification Programme and the GFSI Benchmarking Requirements.	Documented requirement for Certification Bodies with evidence of oversight by the Certification Programme Owner e.g. registration system for auditors / certification personnel reviewed by CPO during desktop or office audits, audit of Certification Body systems by the CPO during desktop or office audits. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities.
4.2	Certification Body Personnel Competence	The Certification Programme Owner shall ensure that the Certification Bodies require all personnel involved with the certification process to sign a contract or agreement, which clearly commits them to: • Complying with the rules of the Certification Body, with particular reference to confidentiality, impartiality and independence from commercial or personal interests; • Declaring any issues in relation to personal conflicts of interest.	Documented requirement for Certification Bodies by the CPO. Evidence of signed contracts or agreements with all certification personnel with clear reference to the elements listed.
4.3	Certification Body Personnel Competence	The Certification Programme Owner shall mandate that the Certification Bodies clearly document all requirements of ISO / IEC 17021-1 and ISO / TS 22003-1 or ISO / IEC 17065, and IAF MD4, relating to personnel and make them known to their employees. This shall include systems and procedures to ensure that auditors conducting assessments meet the capabilities described in ISO / IEC 17065 or ISO / IEC 17021-1 and ISO / TS 22003-1 and the requirements of IAF MD4.	CPO documented requirement / policy for Certification Bodies. Evidence of communication / training by Certification Bodies to employees. Evidence of the Certification Bodies system and evidence of oversight checks by the CPO e.g. office audits, record checks. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities.

4.4 Certification Body Personnel Competence	The Certification Programme Owner shall ensure that the Certification Bodies hold and maintain records regarding the qualifications, training and experience of all personnel involved in the certification process. All records shall be dated. The information shall include, as a minimum: • Name of trainees; • Affiliation to the Certification Body and position held; • Educational qualifications and professional status; • Experience and training in the relevant fields of competence in relation to the Certification Programme's requirements; • Details of performance appraisal(s).	Documented requirement for Certification Bodies with evidence of oversight by the CPO e.g. registration system for auditors / certification personnel reviewed by CPO, audit of Certification Body systems by the CPO. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities which will review whether all these elements are available.
4.5 Certification Body Personnel Competence: Certification Personnel	The Certification Programme Owner shall ensure that Certification Body's competence requirement for the personnel carrying out the technical review include understanding of the Certification Programme's normative documents and of the Certification Programme's requirements on the completion of audit's report and checklist.	Documented requirement for Certification Bodies with evidence of oversight by the CPO e.g. registration system / certification personnel reviewed by CPO, audit of Certification Body systems by the CPO. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities. Note records should adhere to the details required in 4.4.
4.6 Auditors Behaviour	The Certification Programme Owner shall ensure that the Certification Bodies have a system in place to ensure auditors conduct themselves in a professional manner. This shall be evaluated through a defined witness audit process confirming acceptable auditor performance as specified by the Certification Programme Owner.	CPO policy for Certification Bodies outlining expectations of witness audits including how they are conducted, when they are conducted, by whom they are conducted with witness assessor competence criteria, what the expected evaluation points are and what the output is. Attributes to be looked for shall meet requirements within ISO/TS 22003-1 and ISO/IEC 19011 including the following examples of personal attributes and behaviour: • Ethical; i.e. fair, truthful, sincere, honest and discreet, • Open minded; i.e. willing to consider alternative ideas or points of view, • Diplomatic; i.e. tactful in dealing with people,

- Observant; i.e. actively aware of physical surroundings and activities,
- Perceptive; i.e. instinctive, aware of and able to understand situations,
- Versatile; i.e. adjusts readily to different situations,
- Tenacious; i.e. persistent, focussed on achieving objectives,
- Decisive; i.e. timely conclusions based on logical reasoning,
- Self-reliant; i.e. acts independently whilst interacting effectively with others,
- Integrity; i.e. aware of need for confidentiality and observes professional codes of conduct

Certification Bodies shall have a documented process meeting CPO requirements.

Note GFSI Food Safety Auditor Professional Development Framework could be referenced and used as guidance for implementing an appropriate auditor development pathway.

Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities typically review of witness records looking for evidence of these attributes. Note records should adhere to the details required in 4.4.

4.6.1**Auditors
Behaviour**

If the Certification Programme Owner allows the use of ICT to assess auditor behaviour as per 4.6, the Certification Programme Owner shall ensure that IAFMD4 is included as a normative reference of their Certification Body requirements on assessing auditor behaviour.

IAF MD 4 current version shall be adequately referenced in Certification Programme Owner policy outlining what they allow for remote witnessing of auditors.

4.7	Auditors' Scopes of Activity	The Certification Programme Owner shall ensure that Certification Bodies base the scopes of auditors' activities on the sectors described in table 1 and the scopes of certification defined by the Certification Programme Owner.	CPO categories shall be able to be cross referenced to the listed GFSI categories - if GFSI categories are not used directly, they need to be clear as to which CPO category fits to which GFSI category. CPO shall mandate how Certification Bodies use the categories in terms of auditor competence and site certification scopes and have systems of oversight e.g. auditing of Certification Bodies processes or auditor registration. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities typically reviewing auditor competence records and the audits they have conducted to confirm the Certification Bodies has correctly identified an auditors suitability for a category.
4.8	Auditors' Industry Experience	The Certification Programme Owner shall ensure that Certification Bodies appoint auditors with experience in the food or associated industry, including at least two years full time work in food safety functions and requirements defined in table 1, column 4.	Documented evidence shall be clearly available to demonstrate the auditors work experience. Two years full-time work experience in food safety functions is required. ▶ Auditing experience is excluded as it does not involve managing or implementing food safety. ▶ Consultant experience may count if: • The role demonstrates responsibility for food safety at the site. • Evidence details the nature of responsibilities and includes documented work days equating to two years. Evidence of Relevant Experience Evidence must relate to the relevant GFSI scopes (A1 to K) and include: • Job descriptions specifying food safety duties. • Employment records showing time in food safety roles. • Employer statements verifying direct food safety responsibilities.

		Food Safety Functions Defined Includes roles responsible for: • Developing or managing food safety systems (e.g. HACCP plans). • Ensuring regulatory compliance. • Conducting hazard analyses and risk assessments. • Overseeing corrective and preventive actions related to food safety. Scope-Specific Relevance Relevant experience must align with the specific GFSI scope(s) the auditor is qualified for (e.g., scope A1 experience for scope A1 qualification).
4.9 Auditors Training	The Certification Programme Owner shall ensure that the Certification Bodies appoint auditors that have the required education, as described in table 1, column 3, and Hazard Analysis and Critical Control Point (HACCP) / Hazard and Risk Assessment training course relevant to their sector of activities.	A Bioscience Degree with a Focus on Food An academic programme merging the study of living organisms and biological processes with practical applications in food production, safety, and sustainability. Key Features • Core Subjects: Food microbiology, biochemistry, nutrition, genetics, biotechnology, and ecology. • Specialized Focus: Deep dives into food preservation, fermentation, agricultural biosciences, foodborne pathogens, and the role of biotechnology in modern food systems. • Practical Skills: Comprehensive training in laboratory techniques, food analysis, quality control processes, and cutting-edge methods for sustainable food production. • Applications: Addressing critical issues such as reducing food waste, improving crop yields, creating functional and nutritionally enhanced foods, and ensuring global food security.

Educational Qualifications

- Auditors must hold a degree in a relevant discipline or have completed a related higher education course.
- Certification Bodies must confirm and retain records of all qualifications.

No Grandfather Rights

All auditors, regardless of tenure, must meet current requirements. Certification Bodies should review qualifications and experience to ensure compliance.

Degree Relevance: The degree subject must be appropriate for the auditor's sector. For example, Chemistry and Veterinary Science may be acceptable for scopes A1, A2, and C0, while Veterinary Science is less suitable for C4, and Environmental Biology is generally not appropriate.

Justification and Equivalence: Justifications for "relevant" higher education courses or "equivalent" qualifications must be robust and defensible, with evidence and consideration of course details including learning outcomes and duration or professional experience.

HACCP Training: HACCP or Hazard and Risk Assessment training must be separate from other qualifications (e.g., degrees) and aligned with the auditor's sector of activities.

Framework Reference: The GFSI Food Safety Auditor Professional Development Framework may be used as a reference for qualifications and training standards

4.10	Initial Auditor Qualification	The Certification Programme Owner shall ensure that Certification Bodies have a documented program for initial auditor qualification. This shall include as a minimum that auditors will be assessed on their performance during at least 3 food safety audits against the GFSI-recognised Certification Programme the auditor is being qualified for, including at least one witness audit, and until they are assessed as competent.	CPO shall mandate the policy for initial auditor qualification and have systems of Certification Body oversight e.g. auditing of Certification Body processes or auditor registration. Note the requirement for assessment during 3 audits of the GFSI recognised Programme with at least one witness audit until they are deemed competent i.e. that they can audit independently. The CPO shall outline the requirements for 'assessment' which may include ICT remote activities subject to conformance to point 4.10.2. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities typically reviewing the documents of auditor assessment e.g. witness audits and documented performance assessment.
4.10.2	Initial Auditor Qualification	The Certification Programme Owner shall ensure that the witness audit(s) carried out as part of the certification body's initial auditor qualification follows the standard audit plan agreed with the certified organisation, including the use of ICT if applicable, as long as this does not compromise the effectiveness of the assessment. The Certification Programme Owner shall ensure that the witness assessor is present on site for parts of the audit carried out on site.	CPO shall have a clearly defined policy for Certification Bodies. The witness audit (minimum one required) can be carried out during an audit which combines on site and ICT (remote) auditing, however, where the audit is carried out onsite, the witness assessor must also be present onsite. The witness audit shall follow 'the standard audit plan' ie it will be for the full duration of the audit and witness of part audits for initial qualification are not acceptable. Implementation and adherence to requirements will be sampled by GFSI through benchmarking activities typically reviewing the documents of auditor assessment eg witness audits and documented site audit plan.
4.11	Scope Extension of Auditor Activities	The Certification Programme Owner shall ensure that Certification Bodies require an auditor extending their scope of activity to undergo a programme including training in the new sector, supervised audits as per 4.10 and assessment and sign off as competent in the new sector by the Certification Body.	CPO shall have a clearly defined policy for Certification Bodies. Extension of scope includes extension to further sectors / CPO defined product categories where assessment in 3 audits is required.

4.12	Maintenance of Auditor Skills and Competence	The Certification Programme Owner shall ensure that auditors are regularly trained and evaluated on their understanding of the Certification Programme.	CPO shall have a clearly defined requirement for Certification Bodies to ensure auditors are trained and evaluated with oversight of implementation such as auditor registration/desktop or office audit. CPOs may specify the regularity of training depending on need e.g. annual, Programme updates or new Programme version. Evidence of systems shall be in place to demonstrate that these training requirements are met in line with the specified frequency and that appropriate action is taken where required. Evidence of evaluation may be through formal examination during training, documented evaluation of ongoing work or specific exercises such as calibration exercises or discussions.
4.13	Maintenance of Auditor Skills and Competence	The Certification Programme Owner shall ensure that Certification Bodies have a structure in place so that auditors keep up to date with industry sector best practice, food safety and technological developments, have access to and can apply relevant laws and regulations. The Certification Bodies shall maintain written records of all relevant training undertaken.	CPO shall have a clearly defined requirement for Certification Bodies so that auditors keep up to date with industry sector best practice, food safety and technological developments, have access to and can apply relevant laws and regulations. The CPO shall have processes of oversight of implementation such as auditor registration / desktop audit or witness audit and be able to demonstrate evidence of how auditors are kept up to date. Note training records shall conform to point 4.4. Note GFSI Food Safety Auditor Professional Development Framework could be referenced and used as guidance for implementing an appropriate auditor development pathway
4.14	Maintenance of Auditor Skills and Competence	The Certification Programme Owner shall ensure that the Certification Bodies implement an annual programme for auditors to carry out at least five on-site audits at different organisations against any of the relevant GFSI-recognised Certification Programmes owned by the Certification Program Owner to maintain sector and Certification Programme knowledge.	CPO shall have a policy for Certification Bodies that auditors carry out at least five on-site audits at different organisations against any of the relevant GFSI-recognised Certification Programmes i.e. if the CPO has more than one defined Programme there can be a total of 5 audits across all these Programmes and not 5 audits each Programme.

4.15	Maintenance of Auditor Skills and Competence	In specific situations where requirement 4.14 cannot be met, the Certification Programme Owner shall ensure that Certification Bodies implement an annual programme for auditors to carry out at least five onsite audits against GFSI approved Certification Programmes and at least one annual onsite audit against the relevant GFSI Certification Programmes.	CPO shall have a documented policy outlining the specific situations in which this may be applied. A total of 5 audits against any GFSI recognised Programme (i.e. not owned by the CPO) maybe included but must include one of the named GFSI Programme. This policy should be applied as an exception only and where evidence of regular occurrences are seen then this shall be challenged by GFSI during benchmarking activities.
4.16	Auditor Register	The Certification Programme Owner shall have in place a register of approved auditors including the details of the auditors' competence, education, relevant experience and scope(s) of activities, and applicable Certification Bodies. The register shall remain current and be made available to GFSI upon request.	Evidence of register of approved auditors listed according to GFSI sector (or cross reference of CPO sector / category to GFSI specified sectors). Evidence of process to keep accurate, up to date and current.

Table 1: GFSI sector and sub-sector scopes for recognition and the associated competence of auditors

GFSI SCOPE OF RECOGNITION		REQUIRED EDUCATION	REQUIRED WORK EXPERIENCE
AI	Farming of Animals for Meat / Milk / Eggs / Honey	A degree in a food-related or bioscience discipline, veterinary science or agronomy, or, at a minimum, has successfully completed a food related or bioscience higher education course or equivalent.	Experience of farming is required in the following sectors, as applicable: • Cattle • Sheep and Goats • Pigs • Poultry • Bees • Game
All	Farming of Fish and Seafood	A degree in a food-related or bioscience discipline, veterinary science or agronomy, or, at a minimum, has successfully completed a food related or bioscience higher education course or equivalent.	Experience of farming is required in the following sectors: • Fish Aquaculture • Seafood Aquaculture
BI	Farming of Plants (other than grains and pulses)	Education in an agricultural/crop-based discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the fresh produce farming sectors: • Fruit • Vegetables Herbs and Spices • Grasses (Sugar)
BII	Farming of Grains and Pulses	Education in an agricultural /crop-based discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the fresh plant farming sectors: • Grains and Cereals • Nuts • Pulses and Legumes

BIII	Pre-Process Handling of Plant Products, Nuts and Grains	Education in an agricultural/crop-based discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Crop based experience such as the farming and handling of: • Grains and Cereals • Nuts • Pulses and Legumes • Fruits and Vegetables
C0	Animal Conversion	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required of conversion in the following sectors: • Cattle • Sheep and Goats • Pigs • Poultry Fish • Game
CI	Processing of Perishable Animal Products	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Red Meat Processing • Poultry Processing Fish Processing • Seafood Processing Meat Product Processing • Fish Product Processing • Dairy Technology • Egg Processing
CII	Processing of Perishable Plant Products	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Fruit and Vegetable Processing

CIII	Processing of Perishable Animal and Plant Products (mixed products)	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Meat Product Processing • Fish Product Processing • Dairy Technology • Ready to Eat Food Processing
CIV	Processing of Ambient Stable Products	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Meat Product Processing • Fish Product Processing • Dairy Technology • Ready to Eat Food Processing. • Experience is required in the following food industry sectors: • Thermal Processing • Baking Technology • Dairy Technology • Brewing Technology • Extrusion Technology • Vegetable and Animal Fats and Oils Processing • Sugar Refining • Beverage Production • Alcoholic Drink Production • Drink Production

D	Production of Feed	Post-secondary education in related field or equivalent by experience. Trained on the sector specific risk assessments. Work experience or training in the feed and / or food sector, and experience in quality management environment in the feed / food sector.	Experience is required in the following feed industry sectors: • Compound Feed Production • Plant Protein Processing • Rendering Technology • Fermentation Technology • Dry Milling Technology • Wet Milling Technology • Extrusion Technology • Dairy Processing Technology • Vegetable and Animal • Fats and Oils Processing
E	Catering	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Catering • Food service
FI	Retail / Wholesale	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following food industry sectors: • Retail • Wholesaling
FII	Food Broker / Agent	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent. Trained on the sector specific risk assessments.	Experience is required in the following industry sectors: • Perishable Food and Feed • Non-Perishable Food and Feed • Packaging Materials • Based on sector of activity of the broker

G	Provision of Storage and Distribution Services for Food, Feed and / or Packaging	A degree in a food-related or bioscience discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent. Trained on the sector specific risk assessments.	Experience is required in the following industry sectors: • Perishable Food, and / or Feed Storage and Distribution • Non-perishable Food, Feed and / or Packaging • Storage and Distribution
H	Provision of Food Safety Services	A degree in a food-related or bioscience discipline; or, successfully completed a food-related or bioscience higher education course or equivalent. Trained on the food and service specific risk assessments.	Experience is required in the food sector or relevant service provision. The auditor shall be able to demonstrate an understanding and knowledge of specific categories of service provision for which they are approved. The verification to carry out work within specific categories of service provision will be carried out by the certification body
I	Production of Food Packaging	A primary qualification, a degree or higher certificate in packaging technology or material engineering, and a relevant certificate recognised by the Certification Programme Owner in food technology, food hygiene or related science subject OR a primary qualification in food technology, food safety / hygiene or related science subject and a certificate in packaging technology that is recognised by the Certification Programme Owner.	Experience is required in the specific sectors of packaging manufacture: • Plastics • Paper and Board • Metal • Glass
JI	Hygienic Design of Food Buildings and Processing Equipment (for building constructors and equipment manufacturers)	A degree in architecture; civil, mechanical or chemical engineering; food related or bioscience discipline. Additional training in hygienic design, the hygienic design process and food safety.	Experience in building design and construction or food processing equipment design and construction.

JII	Hygienic Design of Food Buildings and Processing Equipment (for building and equipment users)	As currently for scopes A-G, I and K plus a short course on the scope JII hygienic design process.	As currently for scopes A-G, I and K.
K	Production of (Bio) Chemicals (Additives, Vitamins, Minerals, Bio-cultures, Flavourings, Enzymes and Processing Aids)	A degree in a food-related, bioscience or chemical engineering discipline or, at a minimum, has successfully completed a food-related or bioscience higher education course or equivalent.	Experience is required in the following industry sectors: • Fermentation Technology • Chemical Engineering • Biochemical Engineering

Section 5: Management of Audit and Certification

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
5.1	Audit Programme – scope of the audit	The Certification Programme Owner shall ensure that the Certification Bodies clarify the activities and products of the audited organisation to include in the scope of the audit.	Expectations shall be clearly set by the Certification Programme Owner to ensure the scope of the audit clearly describes products and processes so there is no ambiguity for the reader in understanding what has been audited. Generalisations such as ‘fruit and vegetables’ should not be considered acceptable. Procedures shall be in place by Certification Bodies to ensure accurate audit scopes that meet the defined requirements e.g. documented check on activities of site during application and audit. Evidence of implementation will be sampled during GFSI benchmarking activities.
5.2	Audit Programme – audit frequency	The Certification Programme Owner shall have a clearly defined and documented audit frequency programme: - Ensuring a minimum audit frequency of one full audit of an organisation’s facility and food safety management system against the elements of the Certification Programme’s normative documents per 12-month period on average; - Defining the frequency of audit for each product category covered by the scope of certification of the Certification Programme; - Defining a time window during which next recertification audit shall be conducted;	Evidence of CPO defined rationale referencing all listed factors with an audit frequency giving 12 months on average. Implementation will be challenged during GFSI benchmarking activities.

- Considering a number of factors to decide the audit frequency such as activities and products of the audited organisation to include in the audit (scope of the audit), previous audit history, concerns about compliance with a Certification Programme's normative documents, seasonality of product, significant capacity increases, structural changes, changes in product technology or changes in product type.

The Certification Programme Owner shall clearly define the rationale for the determination of frequency within the Certification Programme.

5.3

Audit
Programme
– audit
frequency

If a Certification Programme Owner has scopes of certification that include the growing or production of seasonal products and, therefore, require some limited flexibility of audit frequency to allow effective auditing of seasonal products, these variations to audit frequency shall be clearly defined.

CPO defined policy with seasonality defined.

Implementation will be challenged during GFSI benchmarking activities.

5.4

Audit
programme
– re-auditing

The Certification Programme Owner shall ensure that the Certification Bodies re-evaluate the certified organisations to assess compliance with the Certification Programme normative documents in the event of:

- Significant changes which could affect the safety of product;
- Changes to the normative documents of the Certification Programme;
- Changes of ownership or management of the certified organisations;

or if the Certification Bodies have reason to believe there could be compliance issues in relation to certification.

Documented CPO policy which outlines expectations and includes examples of the changes that would lead to re-evaluation.

Implementation will be challenged during GFSI benchmarking activities

5.5	Audit Programme – audit frequency	Irrespective of the defined minimum audit frequency, the Certification Programme Owner shall ensure that the Certification Bodies undertake additional audits if there is evidence or suspicion that the integrity of the Certification is at risk within a certified organisation.	The Certification Programme Owner shall have a defined documented process for Certification Bodies to assess the impact to continued certification and undertake additional investigation activities if there is concern regarding the integrity of certification of a certified organisation. This may include additional onsite audits. Implementation will be challenged during GFSI benchmarking activities.
5.6	Audit Programme – unannounced audit	The Certification Programme Owner shall ensure that Certification Bodies perform at a minimum: - For scopes AI, AII, BI, BII and BIII: 10% of audits unannounced per year or one audit every 4 years for each certified organisation; - For scopes C0, CI, CII, CIII, CIV, DI, E, FI, G, H, JI, K and I: one audit unannounced every 3 years for each certified organisation. For scopes FII and JII, unannounced audits may be available as an option.	CPO documented policy including outlining the timelines i.e. when did the 3/4-year period start; how is 10% of audits calculated. CPO shall have methods of ongoing review and tracking of Certification Body process. Any variations to policy shall be clear in the circumstances required and the handling of the process e.g. reduced unannounced window maybe required for seasonal sites which typically operate for a short amount of time. CPO policy will outline what actions are expected when Certification Bodies do not meet this requirement. Note the definition of unannounced audit is that it will be ‘no notice’. The scope of any such unannounced audit shall meet all GFSI requirements and shall include evaluation of appropriate operational activities.
5.7	Audit Programme – unannounced audit	Reports, certificates and grading systems shall clearly identify whether certification audits are unannounced.	Clear documented CPO policy on identification of unannounced audits on reports and certificates and explanation, where applicable, within any grading system. Where no detail is given on certificates or reports it is acceptable to assume the audit was ‘announced’. Evidence of reports and certificates being correctly identified as ‘unannounced’.

5.8	Audit Programme – audit duration	The Certification Programme Owner shall define the expected duration of audits and the rationale for the determination of the duration of the audit; it is expected the duration of an audit to be at minimum: • Half a day for scopes AI, AII, BI, BII, BIII, E, FI and FII; • One day for scopes G, I, JI and JII; • Two days for scopes C0, CI, CII, CIII, CIV, DI and K; in order to effectively assess an organisation's systems and premises against the Certification Programme's normative documents and provide confidence in the certification process.	Clearly defined CPO policy outlining rationale for the determination of audit duration meeting the GFSI defined minimums. It is expected that the CPO will have oversight mechanisms to check the Certification Body implementation of the requirement. Implementation will be challenged during GFSI benchmarking activities.
5.9	Audit Programme – audit duration	The Certification Programme Owner shall define clear criteria, which specify the justification for deviation from the minimum audit durations, including the effectiveness of the audit such as the level and depth of assessment of management systems and GAP / GMP / GDP and premises / systems (e.g. product lines, products and product categories).	Clearly defined CPO policy outlining criteria for deviation meeting the requirement. It is expected that the CPO will have oversight mechanisms to check the Certification Body implementation of the requirement. Corrective actions to be described. Implementation will be challenged during GFSI benchmarking activities.
5.10	Audit Programme – audit duration	The Certification Programme Owner shall implement monitoring procedures to ensure that contracted Certification Bodies comply with the defined audit duration criteria and that appropriate actions are taken if they do not meet those criteria.	Definition of CPO monitoring process. Implementation will be challenged during GFSI benchmarking activities with records of review, the outcome and evidence of appropriate actions taken where relevant.

5.11	Audit Programme – audit duration	The Certification Programme Owner shall ensure that the audit report incorporates details of the audit duration and shall monitor such information.	Documented requirement e.g. details of information that should be included in the report or standard audit report template. Definition of CPO monitoring process. Implementation will be challenged during GFSI benchmarking activities with records of review, the outcome and evidence of appropriate actions taken where relevant.
5.12	Audit Programme – auditor selection	The Certification Programme Owner shall ensure that Certification Bodies have rules for the appointment of auditors to audits to ensure impartiality, including rotation of auditors.	CPO defined policy for Certification Bodies on auditor appointment and oversight mechanism to ensure these are applied. This shall consider rules around certification audits following any ‘pre-audits’ by the auditor as well as any consultancy activity by the auditor. Typically includes records of auditor self-declaration of impartiality for specific audits or a signed contractual agreement for informing the Certification Body of impartiality concerns. Evidence of policy on rotation of auditors and documented justification of deviation from the policy.
5.13	Audit Reporting	The Certification Programme Owner shall have in place a clearly defined system for the generation and issue of audit reports. The Certification Programme Owner shall ensure that Certification Bodies provide the report to audited organisations within a defined timeline.	CPO defined policy for Certification Bodies with specified timeline. It is expected that CPO will have a monitoring process that Certification Bodies adhere to timeline that forms part of KPIs (ref 3.14).
5.14	Audit Reporting	The Certification Programme Owner shall ensure that Certification Bodies have processes in place to address situations when reports may be translated.	CPO defined policy for translation to and from various languages defining how and by whom the translation will occur to ensure accurate translation.

5.15	Audit Reporting	The Certification Programme Owner shall ensure that the audit report incorporates an executive summary and / or a summary of each main section of the Certification Programme's audit requirements, even in case of absence of non-conformities.	CPO defined expectation on audit report quality. Audit report should provide sufficient details to enable the reader to ascertain whether all aspects of the Certification Programme have been reviewed in full. Expectation that there shall be detail of conformance by the site to the requirements which will be over and above a 'checklist'. Expected that CPOs will have a process of audit report quality monitoring as part of their desktop assessments (ref 3.12).
5.16	Audit Reporting	The Certification Programme Owner shall ensure that clear and concise details of the non-conformities are provided in the audit report when identified.	CPO defined expectation on audit report quality in documenting non-conformities and where these should be detailed in the report. Expected that CPOs will have a process of audit report quality monitoring as part of their desktop assessments (ref 3.12).
5.17	Audit Reporting	The Certification Programme Owner shall ensure that the audit report contains evidence that all the specified requirements of the Certification Programme related to the GFSI scope(s) of recognition have been evaluated during the audit and clearly express the outcome of the evaluation.	CPO defined expectation on audit report quality typically through defined audit report content. Expectation that there shall be detail of conformance by the site to all requirements which will be over and above a 'checklist'. Expected that CPOs will have a process of audit report quality monitoring as part of their desktop assessments (ref 3.12).
5.18	Audit Reporting	The Certification Programme Owner shall ensure that appropriate confidentiality is in place and that the audit report is only released at the discretion of the contracted organisation. Ownership of the audit report, determination of details made available and authorisation for access shall remain with the contracted organisation.	Outline of CPO policy and demonstration of mechanism. Typically, through secure log on of online database system or secure release to nominated organisation contact. Other methods shall be clearly defined and demonstrated.

5.19	Audit Reporting	The Certification Programme Owner shall ensure that necessary agreements are in place with the audited organisations and the Certification Bodies so that the audit records are available on request to the Certification Programme Owner and to GFSI.	Evidence of signed agreements with the audited organisations stating that audit information may be shared with GFSI. Typically, within contractual agreement or referenced as part of Programme rules. Audit records include any records that form part of the audit process and do not just refer to any final audit report.
5.20	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies have a clearly defined system for the granting, suspension and withdrawal of certification for the scope of their Certification Programme.	CPO defined policy requirement for Certification Bodies to have documented the conditions and process for the granting, suspension and withdrawal of certification.
5.21	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies have a tool in place to evaluate conformance with the Certification Programme's audit requirements.	Evidence of Certification Body having a self-assessment process to evaluate conformance with the Certification Programme's audit requirements. e.g. internal audit or ongoing monitoring / internal KPIs. CPO shall have a policy requirement and have evidence that this is monitored during CPO's audit's of CBs.
5.22	Management of Certification	The Certification Programme Owner shall specify the information required on the certificate.	Evidence of direction from CPO typically a certificate template or clear details of minimum required information.
5.23	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies verify that the audited organisation implements corrective action plans. Verification of the corrective action plan and of the implementation of the corrective actions may take various forms (further on-site assessment or the scrutiny of submitted evidence through ICT); it must be carried out by technically competent personnel of the Certification Bodies using a method appropriate to an effective verification of the corrective actions.	CPO policy on the requirement for Certification Bodies outlining expectation on process to verify corrective actions – how this is done, under what circumstances and by whom.

5.24	Management of Certification	Evidence of corrections or corrective actions shall be returned, completed and verified by the Certification Bodies, within a timescale defined with the Certification Programme Owner, before certification can be awarded.	CPO policy on the requirement for Certification Bodies outlining expectation on process for completing and verifying corrections or corrective actions including timescale. This shall ensure this covers all audit stages such as where CPOs operate surveillance or monitoring audits as part of a certification cycle longer than one year. Evidence of oversight by the CPO e.g. desktop assessment or office audits.
5.25	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies perform a thorough technical review of each audit report prior to granting, suspending, withdrawing or renewing certification. For the review process to be effective it shall ensure that: • Reports are accurately assessed to demonstrate satisfactory evidence of compliance with the Certification Programme; • All applicable requirements of the Certification Programme have been fully covered, using any supporting notes made during the assessment; • The scope of the report covers the scope applied for by the audited organisation and the report provides satisfactory evidence that all areas of the scope have been fully investigated; • All areas of non-conformity have been identified and effective corrective actions have been completed and verified to resolve these non-conformities.	CPO policy on the requirement for Certification Bodies outlining expectation on technical review process. Typically evidenced through a documented 'technical review checklist. Evidence of oversight by the CPO e.g. desktop assessment or office audits may be requested during GFSI benchmark activities as well as evidence of the Certification Bodies technical review documentation on request
5.26	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies have in place a clearly defined and publicly available appeals procedure.	Defined CPO policy outlining expected appeals process including timelines with evidence of implementation by Certification Body e.g. website link. Evidence of oversight by the CPO e.g. desktop assessment or office audits.

5.27	Management of Certification	The Certification Programme Owner shall define minimum requirements for Certification Bodies considerations when organisations switch between GFSI-recognised Certification Programmes. This should include but not be limited to an evaluation of the organisation's audit history, last unannounced audit, etc.	Defined CPO policy outlining expected process including how unannounced audits details are captured so that the timelines of unannounced audits (i.e. every 3 or 4 years) is adhered to. Evidence of oversight by the CPO e.g. desktop assessment or office audits.
5.28	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies have agreements in place with certified organisations ensuring that the Certification Programme Owner is informed of any significant public food safety incidents, such as significant regulatory food safety non-conformities, product recalls.	CPO detailed policy for Certification Bodies with evidence of agreements in place between audited organisations and the Certification Body. Agreements may be in the form of contracts or individual audit agreements for the audit being scheduled but in all cases must include the required details. Consideration shall be given to incidents that affect the operation of the site or safe production of product such as legal proceedings, food safety regulatory authorities non-conformities or enforcement proceedings as well as product recalls and significant product withdrawals.
5.29	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies have procedures in place to ensure the integrity of certification is maintained after such notification.	CPO detailed policy for Certification Bodies with expectation of actions following such notifications in 5.28. Evidence of actions taken when there are such occurrences. Evidence of oversight by the CPO e.g. desktop assessment or office audits.
5.30	Management of Certification	The Certification Programme Owner shall ensure that Certification Bodies notify them of any withdrawal or suspension of certification of an organisation.	CPO policy for Certification Bodies with evidence of process. Typically through update of online database or timely communication of change in status. Evidence of email communication are acceptable where this is recorded and records maintained.
5.31	Use of ICT during the audit	With the exception of audits under the scope of recognition "FII - Broker", At least part of the annual full audit shall be carried out on site.	CPO defined process with an expectation that the audit process shall be clear from the audit report.

5.32	Use of ICT during the audit	The Certification Programme Owner shall define what part(s) of the audit may be carried out remotely without compromising the effectiveness of the audit. On site audit activities shall include as a minimum inspection / physical verification of Good Manufacturing Practices, and verification that the Food Safety Management System (including HACCP) addresses all applicable parts of the operation of the audited organisation.	CPO defined process.
5.33	Use of ICT during the audit	The remote part of the audit may only be carried out with the mutual agreement of the audited organisation and the Certification Body.	CPO defined policy. Evidence of agreement between Certification Body and audited site.
5.34	Use of ICT during the audit	The CPO shall specify the maximum period of time between the beginning and the end of all audit activities included in the audit duration to maintain the audit efficiency and integrity. That period of time shall not exceed 30 days.	CPO policy with design of audit stages. Evidence of oversight by the CPO e.g. desktop assessment or office audits.
5.34.1	Use of ICT during the audit	In specific situations where requirement 5.34 cannot be met, the Certification Programme Owner shall ensure that Certification Bodies have a clear dispensation process including at least the risk assessment of further extension on the efficiency and integrity of the audit. The period between the beginning and the end of all audit activities included in the audit duration shall not be extended beyond 90 days.	CPO policy with outline of specific scenarios which shall be seen as exceptional. Evidence of oversight by the CPO e.g. desktop assessment or office audits.

Section 6: Multi-site Certification

Only the following scopes of recognition may be considered for certification of multi-site organisations, based on a sampling of the sites:

- AI FARMING OF ANIMALS FOR MEAT/ MILK/ EGGS / HONEY
- All FARMING OF FISH AND SEAFOOD
- BI FARMING OF PLANTS (OTHER THAN GRAINS AND PULSES)
- BII FARMING OF GRAINS AND PULSES
- BIII PRE-PROCESS HANDLING OF PLANT PRODUCTS, NUTS AND GRAINS
- G PROVISION OF STORAGE AND DISTRIBUTION SERVICES

It shall be stressed that certification of multi-site organisations based on sampling is not compulsory for a Certification Programme Owner within these scopes of recognition and a Certification Programme Owner may opt for single site certification only.

Where a Certification Programme Owner permits the use of certification of multi-site organisations based on sampling, then the Certification Programme shall satisfy the below GFSI Benchmarking Requirements.

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
6.1	General Requirements	Certification Programmes shall ensure that Certification Bodies meet or exceed the requirements defined in IAF MD1 current version.	Policy within normative documents shall clearly state conditions. Definition of how CPO's assess that CBs are in alignment with the requirements.
6.2	General Requirements	The Certification Programme Owner shall clearly specify the conditions for certification of multi-site organisations based on sampling for eligible scopes	Policy within normative documents shall clearly state conditions.
6.3	General Requirements	All sites included in the scope of certification of a multi-site organisation shall operate under the same Food Safety Management System and under the control of a central function.	Policy within normative documents shall clearly state conditions.
6.4	General Requirements	There shall be a legal or contractual link between the sites and the central function.	Policy within normative documents shall clearly state conditions. Evidence of contract/legal link between the site and central function.

6.5	General Requirements	The central function shall request certification as a multi-site organisation based on sampling in their application to the Certification Body. The central function, not the individual sites, shall be contracted to the Certification Body.	Policy within normative documents shall clearly state conditions Evidence of contract with Certification Body with the central function.
6.6	General Requirements	The central function shall be included in the scope of the certification.	Policy within normative documents shall clearly state conditions Evidence of certification scope including the central function.
6.7	General Requirements	The central function shall be audited by the Certification Body at least annually and before the Certification Body undertakes the auditing of sample sites. If necessary, a small number of the sample sites may be audited prior to the audit of the central function.	Policy within normative documents shall clearly state conditions including the conditions for exceptions. Evidence of CPO oversight of adherence to rule eg sampling, desk top assessment.
6.8	Central Function	The central function shall ensure management commitment to the system / integrity and clearly describe the roles and responsibilities of management, internal auditors and other members of the organisation. The central function shall be separate from the sites.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.9	Central Function	The central function shall have authoritative control of the Food Safety Management System of all sites within the certification and shall maintain traceability and issue, maintain and retain all relevant documents relating to the sites within the Programme.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.10	Central Function	The central function shall have an effective customer complaint procedure.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.

6.11	Central Function	The central function shall manage and maintain relations with the sites for the activities related to the scope of certification.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.12	Central Function	The central function shall have in place sufficient management and technical capacity to implement and maintain the internal audit programme.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.13	Central Function	The central function shall be subject to management review in accordance with Certification Programme requirements and shall be itself subject to internal audit.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.14	Internal Audit	An internal audit programme based on site and risk profile shall be in place and undertaken by the central function. This programme shall ensure audits of all sites within the scope of certification the central function and the food safety management system at least annually.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.15	Internal Audit	The internal audit programme shall have documented procedures and be both practical and feasible in operative terms.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.16	Internal Audit	Clear requirements for internal auditors and technical reviewers shall be defined, documented and reviewed by the Certification Body.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.

6.17	Internal Audit	Internal auditors shall meet similar or comparable requirements to those for external auditors, as set out within each Certification Programme Owner's rules. This shall include, at a minimum, requirements related to internal auditor education, training, work experience or other qualifications. Their qualifications shall be assessed annually by the Certification Body. Certification Programme Owners may require the organisation's internal auditors to successfully complete the Certification Programme Owners specific auditor training.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.18	Internal Audit	Internal auditors shall be regularly evaluated, calibrated and monitored.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.
6.19	Internal Audit	Internal auditors shall be assigned by the central function that are independent to the sites to ensure impartiality.	Policy in normative documents shall clearly state conditions. Evidence documented within the audit report. Note expectation is that 'independent to site' shall mean they are not employed and working at the site, but may be employed at the central function for example.
6.20	Internal Audit	Internal audit reports shall be reviewed by the central function and include addressing the non-conformities resulting from the internal audit.	Policy within normative documents shall clearly state conditions. Evidence documented within the audit report.

6.21	Site Audit Sampling	The Certification Programme Owner shall have a system in place for the Certification Bodies to define a risk-based sampling programme that includes a minimum sample size determined by the Certification Programme Owner. The sampling programme shall include provisions to increase sample size based on various risk factors (e.g., audit scope, types of activities on-site, findings of the central management system audit, findings at sampled sites, customer requirements, etc.), size of the group or multi-site organisation and the internal structure.	CPO Policy shall clearly state conditions. Evidence shall confirm sampling meets IAF MD1.
6.22	Site Audit Sampling	The Certification Programme Owner shall ensure that Certification Bodies audit a sample of the sites every year.	CPO Policy shall clearly state conditions. Evidence shall confirm sampling meets IAF MD1.
6.23	Site Audit Sampling	The annual sampling size of the Certification Body audit sampling programme shall be based on IAF MD1 current version. The square root sample of the Certification Body's audit of the sites shall be calculated per risk category. The sampling programme can be adjusted based on the use of monitoring technologies as per IAF MD1.	CPO Policy shall clearly state condition.s Evidence shall confirm sampling meets IAF MD1.
6.24	Site Audit Sampling	The programme shall be partly selective and partly non-selective, but at least 25% of the sample shall be randomly selected from the total number of sites. Selected sites shall be identified based on the organisation's internal audit programme findings and the site risk profiles as per IAF MD 1.	CPO Policy shall clearly state conditions. Evidence shall confirm sampling meets IAF MD1.

6.25	Management of non-conformities	Non-conformities found on sites shall be assessed to ascertain if these indicate an overall Food Safety System deficiency and therefore may be applicable to all or other sites. If non-conformities relate to all or other sites, corrective action shall be undertaken and verified both by the central function and by the Certification Body as per IAF MD 1.	CPO Policy shall clearly state conditions. Documented within audit report and evidence shall confirm meets IAF MD1.
6.26	Management of non-conformities	In the event that non-conformities are found when auditing sites, which may not jeopardise certification but may raise concerns on conformity of the organisation, the Certification Body shall increase the sample size to ensure adequate confidence in the conformity of the organisation as per IAF MD 1.	CPO Policy shall clearly state conditions. Evidence shall confirm meets IAF MD1.
6.27	Management of non-conformities	If the central function, or any site fails to meet the critical Certification Programme requirements, then the whole organisation, including the central function and all sites, will fail to gain certification. Where certification has previously been in place, this shall initiate the Certification Body's process to suspend or withdraw its certification.	CPO Policy shall clearly state conditions. Evidence shall confirm meets conditions.

In addition, Certification Programmes recognised against those scopes:

- AI FARMING OF ANIMALS FOR MEAT/ MILK/ EGGS / HONEY
- AII FARMING OF FISH AND SEAFOOD
- BI FARMING OF PLANTS (OTHER THAN GRAINS AND PULSES)
- BII FARMING OF GRAINS AND PULSES
- BIII PRE-PROCESS HANDLING OF PLANT PRODUCTS, NUTS AND GRAINS
- G PROVISION OF STORAGE AND DISTRIBUTION SERVICES

shall satisfy the below criteria, where:

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
6.28	Site Audit Sampling	A risk-based approach shall be in place to determine the eligibility of commodities. Certain crops or activities deemed “high-risk” shall be risk assessed to determine their eligibility for multi-site or group certification.	CPO Policy shall clearly state conditions that will be based on risk. The Certification Body shall define the risk level in accordance to data and facts associated with known food safety hazards and risks and not perceived risk linked to quality or commodity value. Certification Bodies shall have clear process of implementation with clear details from sites to agree multisite option for site.
6.29	Site Audit Sampling	The sampling programme shall be determined so that all members within the group or multi-site organisation are audited within a defined period, based on the risk of the commodity, for example 3-5 years.	CPO Policy shall clearly state conditions.
6.30	Site Audit Sampling	A proportion of the sites selected to be audited by the Certification Body shall be unannounced. The unannounced audit sample size shall be determined by the risk of the commodity but be at a minimum of 20% of the sample size.	CPO Policy shall clearly state conditions.

6.31	Certificates	The Certification Programme Owner shall determine the methodology for issuing certificates to the central function and the sites. A certificate shall be issued to the central function of the group or multi-site organisation. Separate certificates may only be issued to sites that were audited as part of the sample programme. Those certificates shall be clearly distinguishable from certificates that are issued to individually certified companies and shall state explicitly that the recipient is part of a certified group or multi-site organisation, and any limitations to the scope of certification shall be transparent to customers.	CPO Policy shall clearly state conditions.
6.32	Certificates	If the multi-site organisation is allowed to sell their product outside of the group or multi-site organisation, in all cases the member sites shall be transparent about the source and scope of certification, by providing customers with a copy of the certificate as issued above.	CPO Policy shall clearly state conditions.

In addition, Certification Programmes recognised against those scopes:

- G PROVISION OF STORAGE AND DISTRIBUTION SERVICES

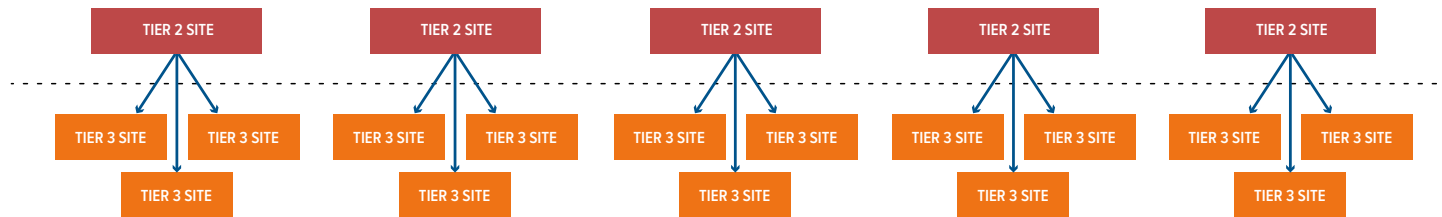
shall satisfy the below criteria, where:

- Tier 1 (T1): Main / National / Regional Distribution Centres or Central Warehouses: Food, Feed or Packaging Distribution or Storage Facilities, at a single site or location and operating under one Food Safety Management System. T1 facilities can have T2 facilities and / or sites (T3) managed by the organisation seeking the certification (each site shall have a certificate, no multi-site sampling option available).
- Tier 2 (T2) and Tier (T3): Satellite Warehouse, Distribution Hub, Cross Docking site: Food, Feed or Packaging Distribution or Storage Facilities, at a single site or location and operating under one Food Safety Management System. These sites are always linked to a larger T1 distribution centre, storage warehouse or organisation with multiple T1 facilities or in the case of a T3 site via a T2 site. T2 sites and T3 sites are always managed and under the direct control of a T1 facility or an organisation with multiple T1 facilities seeking certification (multisite sampling option available).

SINGLE SITE CERTIFICATION

TIER 1 SITE

MULTI-SITE CERTIFICATION



MULTI-SITE CERTIFICATION

CLAUSE NUMBER	CLAUSE NAME	REQUIREMENTS	IMPLEMENTATION GUIDANCE
6.33	General Requirements	Multi-site certification shall only apply to organisations with more than 20 sites operating similar processes	CPO Policy shall clearly state conditions meeting IAF MD 1 conditions.
6.34	General Requirements	A Certification Programme shall certify each Tier 1 facility site of a company's distribution and / or warehouse operations with each T1 site having its own single certificate. However, a multi-site approach may be used to include all T2 or below (e.g. T3) satellite sites linked to the T1 organisations' certification.	CPO Policy shall clearly state conditions. Evidence of compliance through certificates.
6.35	General Requirements	All sites within a multi-site sampling programme shall be operating under the same storage conditions (e.g. ambient stable, refrigerated, frozen or combinations of these) and have the same risk profile (e.g. size of site, shift patterns, management structure and employee numbers). Therefore, it is recognised that an organisation could have several multi-site sampling programmes based on different process and risk profile, but these programmes shall be clearly defined and documented.	CPO Policy shall clearly state conditions.
6.36	Site Audit Sampling	The sample size shall meet the requirements defined in the table 2.	CPO Policy shall clearly state conditions.

Table 2: Minimum sample size for the certification of multisite organisations based on sampling for scope G

20-25	5
26-50	8
51-100	10
101-250	16
251-500	23
501-1000	32
Over 1000	Roundup number of square root of total number of sites.

Glossary Clarifications

Site	A site could include all land on which processes/activities under the control of an organisation at a given location are carried out, including any connected or associated storage of raw materials, by-products, intermediate products, end products and waste material, and any equipment or infrastructure involved in the processes/activities, whether or not fixed. Alternatively, where required by law, definitions laid down in national or local licensing regimes shall apply. Where it is not practicable to define a location (e.g. for services), the coverage of the certification should take into account the organisation's headquarters processes/activities as well as delivery of its services. Where relevant, the Certification Body may decide that the certification audit will be carried out only where the organisation delivers its services. In such cases all the interfaces with its central function shall be identified and audited.
Single site certification	A full certification audit covering the entire scope (of the audit) shall be conducted at the site. This certification option does not allow for sampling (multi-site) or partial audits.
Central function	An identified central department (but not necessarily the headquarters of the organisation) which has the responsibility to plan, control and manage the organisation's food safety management system. Note: this could also be an organisation which is employed by or is a subsidiary of a larger organisation. Note: This is only applicable to scopes stated within Section 6 Multisite
Multi-site organisation	A multi-site organisation need not be a unique legal entity, but all sites shall have a legal or contractual link with the central function (See Glossary) of the organisation and be subject to a single management system, which is laid down, established and subject to continuous surveillance and internal audits by the central function. This means that the central function has rights to require that the sites implement corrective actions when needed in any site. Where applicable this should be set out in the formal agreement between the central function and the sites. PLEASE NOTE: This definition does not apply to multi-site organisations with multiple management systems implemented across the organisation. In such cases, each site is treated as a single-site organisation and audited accordingly.
Remote	From a location other than the physical location of the audited organisation
On-site	On-site audit activities are performed at the location of the audited organisation.
ICT	Information and communication technology. The use of technology for gathering, storing, retrieving, processing, analysing and transmitting information. It includes software and hardware such as smartphones, handheld devices, laptop computers, desktop computers, drones, video cameras, wearable technology, artificial intelligence, emails, and others.

These glossary definitions shall help to clarify the expectations of design of audits.

Note that section 6 'multisite' audit design is only permissible for scopes for the specified farming scopes AI, AII, BI and BII, BIII PRE-PROCESS HANDLING and G PROVISION OF STORAGE AND DISTRIBUTION. Iterations of multisite auditing within other scopes is not permitted.

Site certification is based on undertaking the audit and issuing a certificate to the audited site and shall meet all GFSI requirements ensuring the Certification Programme is audited in its entirety at the certificated site which may include remote auditing activities.

For example:

- Specific functions eg purchasing, product development are audited remotely using ICT at the time of (including within 30 days of) the site audit is acceptable.
- Central office functions audited at a separate time and used as part of certification of a number of single site audits is **NOT** acceptable.
- Physically separate sites incorporating part of the manufacturing process such as storage is physically audited at the time of the onsite audit is acceptable.

Documented rules around these permitted scenarios shall be clear and unambiguous ensuring GFSI requirements are met.