Assessment and Certification – HACCP MS1480

CLIENT INFORMATION NOTE

Introduction

This Client Information Note describes the requirements for food safety according to the Hazard Analysis and Critical Control Point (HACCP) system to ensure the safety of food during preparation, processing, manufacturing, packaging, storage, transportation, distribution, handling or offering for sale or supply in the food supply chain.
Under the certification scheme, food companies are required to follow the MS 1480 "Food Safety According to Hazard Analysis and Critical Control Point (for HACCP) System."
Accreditation is by the Department of Standards Malaysia (STANDARDS MALAYSIA).

Process

The assessment process normally includes two visits to your site(s) before we can recommend approval.
We call these two visits:

- Stage 1 (document review and planning visit)
- Stage 2 (initial assessment)

Once we have issued your approval certificate, we will carry out surveillance visits at least annual to maintain your approval.

At each visit, our assessors will be open and helpful, and will follow a practical approach. In this way we believe that we add value to the assessment process.
Before we visit, we will discuss and agree with you the visit dates, start and finish times, the assessment team members, how long the visit will last, and which parts of your business we will visit.
Visits will be carried out and reported in your national language unless otherwise agreed.

Stage 1 - Document review and planning visit

Purpose of the visit

We do this visit to:
• find out whether the management system processes and documents required by the standard are in place and put into practice so that a meaningful Stage 2 assessment can take place
• collect information about your company's organisation, processes and activities so that we can develop a plan for the Stage 2 assessment
• confirm the scope, assessment team requirements and timing for the Stage 2 assessment
• answer any questions you may have about our service.
The visit will identify any weaknesses or omissions in your system that may need to be put right before the Stage 2 assessment.

Carrying out the visit

The visit starts with an opening meeting. The assessor will explain to your management team how we carry out assessments, and you will be able to introduce your company. The assessor will agree a plan for the visit with you.
The assessor will then review:

a) the organizations' PRPs that are appropriate to the business (e.g. regulatory and statutory requirements);
b) the food safety system includes adequate processes and methods for the identification and assessment of the organization's food safety hazards, and subsequent selection and categorization of control measures (combinations);

c) food safety legislation is in place for the relevant sector(s) of the organization (example; Table 2 – List of Act & Regulation);
d) the food safety system is designed to achieve the organization's food safety policy and objectives;
e) the food safety (including PRP) system implementation programme justifies proceeding to the audit (stage 2);
f) the HACCP plan has been validated;
g) The HACCP system has been verified;
h) the food safety system documents and arrangements are in place to communicate internally and with relevant suppliers, customers and interested parties, and additional documentation needs to be reviewed and/or other knowledge needs to be obtained in advance before Stage 2.

The visit ends with a closing meeting to present the Stage 1 report and agree the next stage of the assessment process, including any health and safety, security and administrative issues.

The documentation reviewed during the Stage 1 visit will be used at future visits as a baseline. However, you should continue to amend system documents as a result of internal improvement activities. At each visit we will need to identify the changes between the latest issue and the baseline.

Stage 2 Audit – Initial Assessment

Purpose of the visit

During this visit the assessor will focus on how your management system has been put into practice.

Carrying out the visit

The assessment follows the plan prepared during the Stage 1 visit. The Stage 2 assessment usually includes a meeting with the representative of senior management with overall responsibility for the management system.
It shall include the review and verification of at least the following:

a) information and evidence about conformity to all requirements of the MS 1480 standard;
b) key food safety objectives and targets (consistent with the expectations in MS 1480 standard);
c) the organization's HACCP systems and performance as regards legal compliance and PRP;
d) operational control including CCPs during processing of the food;
e) internal audit and management review;
f) management responsibility (including HACCP team) for the organization's food safety policies;
g) links between MS 1480 requirement, food safety policy, key food safety objectives and targets (consistent with the expectations in MS 1480 standard), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.
h) follow-up of findings from the Stage 1 visit

The assessment team will hold review meetings with you each day to discuss any findings. Appropriate staff should be present to confirm that you accept these findings. Please see below in the 'Reporting' section for how we define findings. We finalize the grade of findings at the end of the visit.

The visit ends with a closing meeting to present a summary of the findings, and to agree the next stage of the assessment process. The assessor will give a complete report to your management representative. If we have not reported any Major Nonconformities, and you have informed the assessor of your proposed corrective action for any Minor Nonconformities, the assessor will recommend approval to the assessment standard (although this depends on an independent technical review by our office.) However, if any Major Nonconformities have been reported, we will delay approval and carry out a follow up assessment to review corrective actions. Our team leader will agree with you the arrangements for this.

Surveillance

Purpose of the visit

Once we have certified your management system, we will begin a programme of surveillance visits (which normally take place at a minimum of every twelve months). The surveillance visits aim to confirm that the approved management system continues to:
• be maintained
• be in operation, and
• deliver continual improvements.
We also consider the implications of changes to the system. Such changes may have been carried out as a result of changes in your activities, products or services.
We will then consider whether you continue to meet certification requirements.

Carrying out the visit

The scope of the surveillance visits will normally have been agreed with you at your previous visit. We will confirm the details with you at an opening meeting. The surveillance audit shall also include a review of:

a) nonconformities from previous audits;
b) changes in raw materials, ingredients, packaging materials, suppliers, products and/or services;
c) changes in production systems and/or equipment;
d) changes in PRPs;
e) changes in personnel, their qualification level and/or allocation of responsibilities;
f) training;
g) anticipated changes of consumer usage and consumer groups;
h) relevant enquiries from external interested parties and/or complaints indicating health hazards associated with the product;
i) changes in regulatory requirements;
j) customer, sector and other requirements which the establishment have undertaken to observe;
k) new knowledge on hazards;
l) verification activities; and

m) other conditions or changes which have an impact on food safety and food hygiene.

Certificate renewal

Planning for the certificate renewal

We conduct certificate renewals on a three-yearly basis, planned at the previous surveillance visit and agreed with you.

The certificate renewal planning process contains three steps: Review, Preview and Planning.

Review

This step includes the review of past performance such as:

• trend information on complaints and other performance indicators
• system documentation improvements
• Improvement Log projects
• lessons learned from audits
• trends in our findings.

Based on this review of past performance, our assessor will identify any potential risks in the present management system regarding successful implementation of the strategies and objectives.

Preview

The aim of the preview is to align our assessment activities with your strategy and objectives. The assessor will use their conversation with senior management to understand your longer-term expectations, for example, strategy issues such as business and operational risks, competitive issues, changes to internal and external environment, etc. Our assessor will establish, through the interview, whether these expectations, objectives and strategies will impact your management system or the stakeholders of your organisation.

The preview stage will be used to identify further themes that can be used in the coming certificate renewal visit and for the next three-year cycle.

Planning

The next step in the visit is planning the certificate renewal. In this part of the visit, our assessor will:

• identify any aspects of the system that have not been appropriately addressed during the surveillance cycle, and plan how to review these

• use the information gained during the review and preview stages to support the planning process
• if appropriate, consider how best to give attention to any themes identified (including the improvement tracking log)
• identify the areas, departments, processes and activities to be assessed

• agree with you sensible durations for each of these, commensurate with risk
• try to identify the best use of resources, and avoid duplication
• add appropriate time for reporting, consolidating and presenting reports
• consolidate the information into a sensible visit plan.

Our assessor will allow time for discussion with all relevant managers and for a review of records for all relevant departments.

Conducting certificate renewal visits

We conduct the certificate renewal visit similarly to a Stage 2 assessment. In addition, we include a review of your system documentation to ensure that it:

• continues to suit your company, and
• complies with th9e certification requirements and the scope of certification, including continual improvement.

Changes to your approval

For any increase or decrease in your certificate of approval, please submit a formal request for the change. LRQA will review the request to consider:

• additions or changes to competency requirements for the visit team(s)
• additions or reductions in visit duration requirements

and you will be notified of any changes by an amended contract.

If the change requested has meant a major change or addition to your documented system, we will undertake a separate document review visit (Stage 1).

We will conduct the change to approval visit in line with our process for Stage 2 assessment visits, although we do not normally produce a formal visit plan. If we did not need to conduct a document review (Stage 1), we will allow time during the visit for the team leader to review relevant documentation and to agree a plan for the visit.

Change to approval visits may be carried out as separate visits or may be combined with a scheduled (Surveillance or Certificate Renewal) visit.

LR will issue an amended certificate(s), using the same expiry date as on the current certificate.

Reporting

The assessor will complete assessment reports to record findings, progress against the audit plan, positive comments, and also points of clarification or interpretation.

The assessor records the assessment findings in a Findings Log, and identify them as Major Nonconformity or Minor Nonconformity.

We define these finding terms as follows:

Major Nonconformity: The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve:

- the policy, objectives or public commitments of the organisation
- compliance with the applicable regulatory requirements
- conformance to applicable customer requirements
- conformance with the audit criteria deliverables.

Generally, a major nonconformity will be a systematic failure that:

- is already affecting system effectiveness or deliverables
- puts at risk the capability of the management system
- requires immediate containment
- requires immediate root cause analysis and corrective action.

Our team leader will make arrangements with you for follow up audit activity.

Minor Nonconformity: A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Sampling

It is important to remember that even though a problem may not have been identified in the area of activity, it does not necessarily mean that there are no problems. As assessment work is based on sampling techniques, statistically there is always a possibility that issues will not be identified during an assessment.

Certification decision

Following an audit where an assessor makes a recommendation in relation to your certification, accreditation rules require that this recommendation will be subject to an independent review or certification decision, only following this decision will certification be either granted, renewed, extended, reduced, suspended or withdrawn.

Confidentiality

We will not pass on any of the information we gather about your organisation (including the contents of reports) to any other person or organisation without your permission (except, as required, by the accreditation body).

Further information

To find out more about how LRQA can help you to increase performance and reduce risk, please visit our website www.lrqa.com. From here you can also visit one of our country specific websites to find out about LRQA in your country.

We have taken care to ensure that the information in this Client Information Note is accurate at the time of issue. However, the requirements that this document is based on can change. If in doubt, please contact your local office to ensure that you have the latest version.

Get in touch

Visit **www.lrqa.com** for more information

LRQA
1 Trinity Park
Bickenhill Lane
Birmingham
B37 7ES
United Kingdom

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