Procedure for registered Certification Bodies conducting audits against the MarinTrust Programme

Document A4 – Version 3. 1

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1. Purpose & Scope

This document outlines the procedure for registered Certification Bodies (CB) to implement for carrying out of audits on behalf of the MarinTrust Programme to ensure efficiency, consistency, and reporting, of the planning, conducting, and reporting of all audits.

Please note that this procedure relates to certification (or acceptance in case of the Improver Programme) against any of the following key components of the MarinTrust programme:

- Factory Standard
- Chain of Custody (CoC) Standard
- Improver Programme

Herein, we use the term "MarinTrust standards" to refer to both the factory standard and chain of custody standard requirements.

2. Pre-audit Process

Prior to an audit being carried out on a facility, the CB shall:

2.1. Manage, process, and approve all applications for certification or acceptance the allocation of the auditor and scheduling in accordance with document A2 - *Guidelines for Certification Bodies Managing Applications to Certification for the MarinTrust Programme* and ISO/IEC 17065 requirements

2.2. Manage, coordinate, and carry out the required fishery assessments in line with the '*Procedure for the monitoring and allocation of fishery and by-product assessments'*, document A3 – '*Conducting MarinTrust fishery and by-products assessments by registered CBs*' and ISO/IEC 17065 requirements

All auditors, whether for initial audit or recertification audits, and in accordance with IOS/IEC 17065, are required to declare to the CB any situation, which may give rise to a conflict of interest with respect to facilities they have been requested to audit. Each auditor shall confirm that they will notify the CB should such a situation arise through a signed Conflict and Confidentiality Declaration form.

3. Audit Procedures

Upon completion of the pre-audit process, the audit shall be carried out as follows:

3.1. Stage 1 – Planning of the audit

The auditor shall verify that the objectives of audit outlined in the audit plan can be achieved and the applicant/certificate in accordance with ISO/IEC 17065 requirements and shall be informed of any onsite activities.

Note: All audits shall be carried out onsite unless otherwise authorised by the MarinTrust Secretariat. In the event of an extraordinary event being declared, the extraordinary event procedure shall take precedent over audit frequency requirements See the *Process on Handling Remote & Enhanced Remote Factory and Chain of Custody Audits during Extraordinary events of Circumstances* for further information.

Auditors shall use guidance provided by MarinTrust for the effective planning of audits.

Audits of most types of operation shall be conducted in their own language, where possible, but all reports shall be written in English. Where audits cannot be conducted in the applicant's own language CBs shall provide/offer an **independent** translator/interpreter to attend. The use of a translator/interpreter provided by the applicant or certificate holder is not allowed due to impartiality risks.

Where the marine ingredient, such as fishmeal or fish oil, is not produced continuously, for initial and recertification audits the facility shall be in production for the audit and verification of corrective actions in relation to critical and major nonconformities shall take place within a period of time that the product is being manufactured.

For surveillance audits, the facility is no required to be in production, although this is advisable, however, the facility must have MarinTrust certified product onsite, and the auditor shall conduct traceback exercises to verify that conformity with segregation requirements has been maintained throughout.

3.2. Stage 2 – The audit

The CB shall have a defined process for the conducting of MarinTrust Programme audits. The on-site audit schedule shall consist of the following elements based on ISO/IEC 17021-1 requirements (applicable to audits against the Factory and CoC Standards):

- An Opening Meeting.
- An onsite audit to obtain and verify information which shall include:
  - Documentary review
  - Observation of processes and activities
  - Interview with personnel
- Identification and review of findings
- Preparation of audit findings
- A closing meeting

Please refer to Sections 3.2.1 – 3.2.8 herein for further detailed information.

3.2.1. Conducting Opening meeting

The auditor shall conduct an opening meeting with the applicant/certificate holder, in accordance with ISO/IEC 17021-1 requirements, to explain the audit activities that will be carried out and to confirm, as necessary, the agreement of all participants to the audit plan, the objective, scope, and criteria of the audit visit to determine the availability of relevant personnel, access to required areas, confidentiality and information security, activities on site that can impact the conduct of the audit and reporting process.

3.2.2. Conducting the audit

Auditors shall conduct all audits, in a professional manner, as diligently as possible, with **minimum disruption as possible to the day-to-day activities of the facility undergoing the audit, and in compliance with local legislation** and any in-house policies (unless otherwise stated) whilst at the location undergoing audit.

The audit shall consist of a combination of documentary and onsite observation and verification relevant to the scope, criteria and objectives of the programme as follows:

- **Documentary review:** The auditor shall review relevant documented information and records to gather evidence to support audit activities and to confirm compliance with the reviewed systems. This shall include a review the documented traceability systems back to the approved raw material, or accepted in the case of IP, source.
- **Observation of processes and activities**: The auditor shall conduct an inspection of the facility to review practical implementation of processes and activities. This shall include traceability systems back to the approved raw material, or accepted in the case of IP, source

- **Interviews with personnel**: The auditor shall conduct interviews with relevant personnel, as applicable, that are involved in the control these systems.

All audits shall be conducted against the current issue of the relevant MarinTrust standard requirements and interpretations (ID1, ID6), and the auditor shall use the approved audit report template format (FAC1, FAC2). *It is the responsibility of the CB to ensure they have the most up-to-date copy of the relevant standard requirements under the MarinTrust programme*

Note: In all cases, legal requirements will take precedence over any requirements of the standard.

Auditors shall ensure:

3.2.2.1. All aspects of the standard requirements are addressed. At no stage can relevant elements of the MarinTrust standard be omitted.

3.2.2.2. Sufficient notes are taken during the audit to demonstrate an identifiable audit trail against each clause, and shall include reference to location, product identification, equipment or documents used, and compliance with and availability of the applicant's own documented policies and procedures where these form part of the MarinTrust Standard or MarinTrust CoC Standard requirements.

3.2.2.3. Verify whether the information provided by the applicant/certificate holder gives sufficient objective evidence (complete, correct, consistent and current) to demonstrate that the requirements are met. In cases where information is given in a way other than expected, the integrity of the evidence shall be assessed.

3.2.2.4. Special care is taken for information security especially information which lies outside the audit scope, but it is also contained in a document submitted by applicant or certificate holder due to applicable regulations on protection of data.

3.2.2.5. In the case of current certificate holders only, where a new species has been added to the raw material scope as part of a scope extension application, and has achieved 'approval' status, the auditor shall conduct a traceback exercise of the added species to verify compliance of segregation requirements has been maintained prior to the approval status of the species being granted. For additional information please also refer to document A2 – *Guidelines for certification bodies managing applications for certification to the MarinTrust Programme* and A5 – *Procedure for the issuing and withdrawal of certificates to the MarinTrust programme.*

Initial Audits. The auditor shall ensure that all areas within the scope of the MarinTrust standard application are evaluated during the audit. All areas, covering only those marine ingredients (fishmeal and fish oil) products and processes that are from approved sources stated within their application for certification, or acceptance in the case of Improver Programme, must be evaluated. If not, reasoning must be noted in the final report.

Surveillance and Re-certification Audits. The auditor shall consider nonconformities and results from previous audits and may focus more attention on areas of concern ensuring always that all applicable areas of the MarinTrust standards have been evaluated.

The auditor after 3 consecutive audits of a single plant may not be used on the 4th unless they have been given permission by MarinTrust.

The duration of the single on-site audit towards the MarinTrust Standard shall typically be up to 1.5 days for those who hold a valid GMP+ certification with a significant proportion of the time spent on reviewing Traceability Based Systems and assessment of its practical implementation, and 2 full days for those without GMP+ certification who must therefore comply with section 3.2 of the MarinTrust Standard.

The duration for a typical MarinTrust Chain of Custody standard audit shall typically take 1 day. However, more time may be required for facilities with multiple sites, or that use subcontractor facilities, or complex traceability.

3.2.3. Identifying and recording audit findings

Audit evidence shall be evaluated against the clause requirement of the relevant standard to determine audit findings.

When determining the audit findings, auditors shall consider follow up of previous audits and findings if applicable and requirements of the audit

The audit findings shall detail the conformity and nonconformities, as outlined in Annex 1 herein, of each clause requirement and their supporting evidence recorded.

Each of the clause requirements of the MarinTrust standards shall be designated with one of the following conformity levels, without any limitations or additions, as defined by the auditor guidance for the respective standard as follows:

- Full conformity
- Minor nonconformity
- Major nonconformity
- Critical nonconformity
- Nonapplicable

The auditor shall substantiate the conformity rating with positive and/or negative evidence and/or justification against each clause of the relevant Standard.

If the auditor is unsure how to score the evidence collated during an audit to a specific clause within the MarinTrust standard requirements, they shall consult with their CB for further guidance before the clause can be rated.

Derogations – MarinTrust Chain of Custody Standard

Derogation clauses are only applicable to the MarinTrust CoC Standard only, and CBs should refer to the CoC standard for the specific clauses that a derogation applies

Within the MarinTrust CoC certification guidance, advice is given on what evidence would constitute full compliance and what circumstances would lead to a category of nonconformity being raised. All clauses in the CoC standard shall be closed off prior to certification, recertification, or continuous maintenance of their MarinTrust CoC certificate, apart from those clauses that have been **granted a derogation period** to allow an applicant a set period to meet these requirements following initial certification.

The derogation period that has been agreed for these CoC clause requirements shall be one complete certification cycle (3 years) to reach full compliance. However, the applicant shall need to show through a reportable action plan that progress to full compliance is progressing at each annual surveillance assessment. If the auditor reports no progress from the initial certification to the next annual surveillance, this shall be deemed a nonconformity to the MarinTrust CoC standard which could result in their certificate being suspended and possibly withdrawn.

3.2.4. Closing meeting

Preparation

3.2.4.1. Upon completion of the audit, the auditor shall prepare for the closing meeting during which the auditor shall review the audit findings and any other information collected during the audit, against the audit requirement. The content of audit conclusion shall include, as a minimum:

- how the audit objectives were achieved
- whether the audit scope was covered
- how the audit requirements were fulfilled and the extend of conformity with the audit clauses
- any necessary follow up actions

Conducting the closing meeting

3.2.4.2. A formal closing meeting shall be held with the applicant or certificate holder to present the audit findings and conclusions. The auditor shall:

a) discuss any nonconformities raised, agreeing a corrective action plan (see **Annex 1**) for a definition of an effective corrective action plan) and completion date for each.

b) prepare a hand-written copy of the agreed nonconformity, which is signed and left with the applicant's or certificate holder's technical representative.
c) Not indicate whether the applicant/certificate has achieved or maintained certification status

3.2.4.3. Where nonconformities are noted, the auditor shall:

a) refrain from instructing the applicant to take any particular course of corrective action. Auditors offering a recommended course of action to close out a nonconformity shall be seen as consultancy and is in breach of ISO/IEC 17065 protocols.
b) Record the corrective action(s) and completion date(s) on the Nonconformity Report (NCR) form agreed by both the auditor and applicant/certificate holder at the closing meeting.

3.2.4.4. Where there is more than one auditor used, e.g., in an integrated facility, a thorough and precise hand-over meeting must be held. This will serve to equip the secondary auditor fully with information regarding previous findings or missing components.

3.2.5. Audit Reporting

Distribution

3.2.5.1. After each audit the auditor shall:

a) prepare a full written audit report using the approved audit report template format (FAC1, FAC2) which shall include:
   - an audit summary,
   - an overview of performance,
   - summary of nonconformities and corrective actions taken
   - comprehensive details of how the applicant complies with each clause
b) Submit the audit report to the to the Scheme Manager, designated/responsible person, within 10 days of the end of the audit. *All notes taken during the audit shall be submitted together with the audit report to the CB's Scheme Manager or delegated/responsible person.*
c) In the case of nonconformities, send a copy of the NCR to the CB within 24 hours of the end of the audit.

3.2.5.2. The audit report shall be a factual record of the results of the audit carried out and shall clearly document any nonconformity against the relevant MarinTrust standard requirements and where appropriate corrective actions. Objective evidence is required and the agreed time scales for completion.

3.2.5.3. The Scheme Manager, or delegated/responsible person, shall, within 3 working days of the end of the audit:

a) check the form for completeness and accuracy

b) despatch a final copy to the applicant/certificate holder via email
c) confirm that the applicant/certificate holders shall have within 21 working days to close out the nonconformities raised
d) complete and submit the MarinTrust certification timeline tracker to applicant/certificate holder and the MarinTrust secretariat (for initial and recertification audits only)

Note - The auditor on the final audit report shall record where it has not been possible to agree a nonconformity with the applicant/certificate holder. The nonconformity shall still stand, and the applicant/certificate holder can appeal the decision to the CBs and to the MarinTrust Governance Board Committee (Please refer to the Appeals and Complaint Document).

3.2.6. Nonconformity Follow-up

The CB shall require that the applicant/certificate holder to provided them with written confirmation that describe that the corrective action has or will be taken with respect to all critical, major, and minor nonconformities identified during the audit.

Depending upon the nature of the nonconformity, either documentary evidence or a re-visit shall be required to fully evaluate conformity before a certificate of conformity, or acceptance in the case of Improver Programme, can be granted.

The CB Scheme Manager, or assigned/responsible person, shall check the applicant's file after 15 working days to evaluate the progress of the corrective actions and if necessary, contact the applicant to remind them of their obligation to provide evidence within the timeframes defined and agreed.

All nonconformities shall be closed out within the specified timeframes unless a request for extension has been approved. Extensions shall only be permitted for up to 6 months.

Where this results in an extension of the validity of the certificate, CBs must also share the certificate extension to both the client and MarinTrust 1 month before the certificate expiry for posting on the MarinTrust website. Please refer to document A5 – *Issuing and Withdrawal of Certificates Procedure*, for further information.

Within 1 week of the submission by the applicant/certificate holder of all evidence required, or passing of the submission deadline, whichever comes first, the auditor shall review and verify the evidence and determine its effectiveness in addressing the nonconformity prior to submitting the final audits report, evidence, and recommendations to the Scheme Manager, delegated/responsible person, for technical review.

3.2.7. Technical Review

3.2.7.1. Prior to the certification decision, the Scheme Manager, delegated/responsible person, shall be responsible for the coordination and completion of the technical review within 1 week of receiving the final audit report.

3.2.7.2. The technical review shall be carried out by technically competent and authorised personnel, in accordance with document B3 - *Procedure for Appointment, Training, and Approval of Certification Body Personnel involved in the assessment, audit, and certification process*, who shall verify:

a) The final audit report and information fully substantiates recommendations and any nonconformities raised in the final report and all evidence is available, presentable, and, clearly identifiable.
b) That the nonconformities have not been recorded as a statement of corrective action or direction, and the corrective action plan and actions have been reviewed, accepted, and verified
c) There is sufficient evidence of corrective actions, time frames agreed upon, and authorisations by the applicant/certificate holder and the auditor during the closing meeting to close them out

3.2.7.3. Within 1 week of completing the technical review, the Scheme Manager, or assigned/responsible person, shall submit the technically reviewed final report and evidence to the certification committee or delegate/responsible person, in accordance with ISO/IEC 17065.

3.2.8. Certification Decision

3.2.8.1. Within 1 week of receiving the technically reviewed audit report and evidence, the certification committee, or delegated/responsible person, shall review the final report and evidence file and determine if the applicant conforms with all the clauses as required in the MarinTrust Standard and/or Chain of Custody Standard.

The result of a certification decision, or acceptance in the case of Improver Programme, shall be categorised as follows:

- Certification (*acceptance*) achieved
- Certification (*acceptance*) not achieved[1]
- Certification (*acceptance*) not granted

The Scheme Manager, or delegated/responsible person, shall notify the auditor of the need for his/her presence at any certification, or acceptance in the case of Improver Programme, decision meeting at which the report shall be reviewed if applicable.

The certification decision, final audit report, and certificate (if achieved) shall be despatched via email to the applicant/certificate holder and MarinTrust Operations Manager, or delegated/responsible person, within 1 week of the certification decision. For further information on the issuing and withdrawal of certificates, please refer to document A5 – *Issuing and withdrawal of certificates to the MarinTrust Programme.*

In the case of acceptance for the Improver Programme, the acceptance decision and final audit report shall be despatched via email to the applicant/certificate holder and MarinTrust Operations Manager, or delegated/responsible person, within 1 week of the acceptance decision. Improver Programme applicants shall not be referred to as certified and a certificate of conformity shall not be issued. Instead, a letter of acceptance shall be issued by the MarinTrust Secretariat within 1 week of notification of the acceptance decisions. For further information on the issuance of IP Acceptance letters, please refer to the *Improver Programme Acceptance Mechanism* (IPAM) document.

Ownership of the audit report shall be maintained by the CB, however, MarinTrust shall use these audit reports and certification decisions for standard consistency, monitoring and record keeping purposes, and for the publication of certificate on the MarinTrust website. The contents of audit reports shall be treated as strictly confidential and shall not be placed in the public arena.

[1] In such instances, further information shall be requested from the applicant with a maximum of 7 days permitted for submission of the required additional evidence if the certification committee or delegate/responsible person, feel that more information is required to meet the intent of the relevant MarinTrust Clause.

4. Notification of Serious Food Safety/Legality Issues

It is a requirement of many purchasers that MarinTrust notify them immediately of serious traceability and/or legality issues arising out of a supplier audit. In this unlikely event, MarinTrust shall discuss with the applicant/certificate holder what action is necessary to meet the wishes of the specific purchaser(s) involved. In all cases, audit reports are only distributed to third parties provided the applicant, certificate holder, or Improver Programme Accepted Site has consented in writing.

5. Records

A copy of the final audit report, information and evidence, NCR form, and correspondence conveying the certification Committee's, or delegated person, certification decision shall be held in the applicant/certificate holder's file for a period of 5 years.

Where a certificate has lapsed, moved to another CB, or if it is a current certificate, records for the previous two certification cycles shall be maintained.

Further information

For further information on appeals and complaints requirements please refer to document A6 – *Appeals and complaints procedure for the MarinTrust Programme*

Annex 1 – Definitions

Conformity ratings

Full conformity – The applicant/certificate holder fully meets the standard requirements.

At the initial certification audit **all nonconformities shall be addressed** in an effective action plan and closed off or downgraded prior to certification.

Minor nonconformity definition – Any nonconformity which does not adversely affect the health or safety of a product, i.e., where absolute compliance to the statement of intent has not been met but based on objective evidence the conformity of the product is not in doubt.

Where a Minor nonconformity is identified at the initial certification, the CB shall not issue a certificate until this has been addressed in an effective action plan that has been agreed by the CB.

Major nonconformity definition – Any nonconformity other than critical, which cannot be completely eliminated by re-work or reduced to a minor nonconformity. In addition, this could also be where a requirement of the MarinTrust standards have been addressed but there is insufficient evidence to demonstrate that it has been properly controlled or implemented. For example, the traceability system is found to be inadequate to meet the requirements of the statement of intent or any clause of the Standard.

All major nonconformities must be closed off or downgraded to a minor with an agreed action plan before the applicant can be certified to the MarinTrust standards.

If the CB cannot close off or down grade a major nonconformity in a period of 3 calendar months for new applications or 1 calendar month for an annual surveillance, from the point at which it is raised, the CB shall instigate a full re-audit.

At this point in the process, where it is an existing client, their MarinTrust or CoC certificate shall be suspended until the re-audit has been conducted. If the re-audit determines that no nonconformity were found, the client's certificate shall be re-instated. If there is persistent failure to meet the requirements of the MarinTrust Certification the certificate may be completely withdrawn. Please refer to the MarinTrust issuing and withdrawal of certificates procedure (A5) for further guidance.

Downgrade definition – where the applicant can provide evidence which challenges the auditor's original decision on the grading of a nonconformity sufficiently to allow a lower grading on the nonconformity to be issued.

Critical nonconformity definition – Any nonconformity which may result in hazardous or unsafe conditions for individuals. In addition, this could also be a legal or regulatory violation, or a complete marine ingredient

safety failure to implement a requirement of the MarinTrust Standards resulting in a programme integrity risk. For example, the auditor provides evidence to show that the marine ingredients labelled, or intended to be labelled, as compliant were found not to have originated from an approved fishery or by-product of the MarinTrust programme, or from an officially recognised fishery that has been accepted into the MarinTrust Improver Programme, or the auditor has been deliberately misled on the credibility of the information provided by the applicant.

It could also mean, more generally, that the applicant has broken a legal obligation which puts food/feed safety, employee safety, or worker welfare at risk. This does not necessarily need to relate to a specific requirement in the MarinTrust Standards, but the details of the critical nonconformity must be detailed by the auditor.

In the event of a critical nonconformity, the auditor will end the on-site audit immediately, if the safety of the auditor is compromised. The CB shall not grant certification to the applicant, and any future applications to the programme by the applicant must include documented evidence of the policies and/or systems put in place to ensure the critical nonconformity does not re-occur. A period of no less than 6 months shall pass before an applicant can reapply for certification to the Standard, to ensure that the systems that are preventive of the critical nonconformity re-occurring have been fully embedded into the applicant's quality management systems and culture.

Note: *If a critical nonconformity is established at an existing certificate holder of the programme, the CB scheme Manager, or delegated/responsible person, shall instruct the is certificate holder shall be instructed to immediately inform its customers to make them aware of the circumstances. The certificate holder shall inform both their CB and MarinTrust when this communication has been sent to their customers, and on its content, to allow MarinTrust to support their customers in obtaining a different supply of MarinTrust compliant marine ingredients until they can reattain certification. Please refer to the MarinTrust issuing and withdrawal procedure (A5) for further guidance.*

The CB shall immediately suspend the MarinTrust certificate pending a full investigation by the CB. If the nonconformity is upheld the client shall have their certificate withdrawn and shall not be allowed to re-apply for the Standard for a period of 6 months. Please refer to A5 - *The Issuing and Withdrawal of Certificates to the MarinTrust Certification Programme Procedure*.

Effective corrective action plan

For an action plan to be deemed as effective it shall address the following key areas:

- An appropriate time frame to address and resolve the nonconformity shall be given
- A root cause analysis of why the nonconformity occurred
- Identify the actions required to ensure that future nonconformities shall not occur (to include changes to policy and procedures)
- An appropriate person to oversee that the non-compliance has been resolved shall be identified.

At an annual surveillance, a raised minor nonconformity does not prevent the applicant from maintaining its certification to the MarinTrust standards. An action plan is presented, and this shall be a focus of the subsequent surveillance audit. If subsequently the organisation is deemed to still fall short of full compliance, the auditor will upgrade the nonconformity and raise a major nonconformity. Corrective action will then be required before certification can be maintained.

Note - The only exception to this rule is under circumstances where a minor nonconformity is raised due to records not being maintained for a sufficiently long duration. In these circumstances, the minor nonconformity will remain minor as long as records continue to be built up. This is to reflect the impossibility of creating 3 years of records in 1 year.

Appendix 1

Code of Conduct for all CB Staff/Auditors

Objective

To define the code of conduct, which shall be adhered to when operating the CBs certification services.

Responsibilities

Everyone in the CB, both office and home based has the responsibility to ensure their conduct does not compromise the independence, integrity, and impartiality of the CB.

All managers are responsible for ensuring that staff is aware of the need to maintain independence, integrity and impartiality and operate in accordance with this procedure.

Procedure Independence, Impartiality, and Integrity

It is essential that audits and related activities are demonstrable independent of pressure from the inspected applicant or any other parties. The CB must take steps to ensure that commercial activities, which have the potential to conflict with the inspection process, are always avoided.

The CB must not provide consultancy, advice, or bespoke training. It is essential that the CB's staff, including the auditors, do not offer advice, or provide information either at the time of the Audit or at any time that may compromise the independence, integrity, or impartiality of CB.

The following are examples of activities, but not limited to, that are prohibited:

- Providing specific recommendations to an applicant on how requirements of the MarinTrust standards could be met.
- Providing documentation other than the MarinTrust standards, CB certification protocols or auditor inspection guidance notes.
- Providing advice in response to specific queries that could be interpreted as how an applicant can comply with the correct MarinTrust standard.
- Providing advice on the design/ development of facilities or processes.
- Participating in the decision-making process on applicant's management system matters.

Where unsolicited requests for such services are received the CB's staff is required to politely decline such requests and inform the applicant of the CB's policy.

Audit Process

Auditors shall be aware that applicants require audits which fully 'test' their systems against an agreed Standard such as the correct MarinTrust standard and which identify deficiencies that require appropriate corrective action. In addition, the judgment of the auditors must be based upon objective evidence and must be independent of any outside pressure or influence.

It is particularly important that the audit is seen to be 'testing' by the applicant because of the thoroughness of the audit method and not because of the way in which the auditor relates to the employees of the inspected applicant.

It is the 'questions asked' and 'not the way in which they are asked' which should determine this issue.

Audits shall therefore:

- Be thorough and be undertaken diligently.
- Auditors must be always courteous and avoid being influenced by their own emotions.
- Be aimed at gathering objective evidence to either support compliance to standards or to identify deficiencies.
- Conform to the CBs documented structure.
- Results in reports, which contain only those deficiencies discussed and agreed at the closing meeting.

Hospitality and Gifts

At all times the CBs staff and Auditors shall remain above reproach and their integrity and credibility maintained.

Whilst staff/Auditors may be provided with lunch or may be invited to dinner by applicant's staff, it is clear that there is a 'fine line' between normally accepted Standards of Hospitality and possible bribery and corruption. The CB's staff therefore needs to act with caution and if in doubt refuse such hospitality.

Similarly, in relation to gifts, it is advisable to refuse such offers, but again common sense needs to prevail. Factors to consider in such situations are as follows:

- Is the hospitality or gift within the normal bounds of commercial practice?
- What are the company's intentions?
- What is the stage of the audit – is the offer made after the closing meeting?
- Would public knowledge of the gift undermine the auditor's or the CBs integrity and credibility?
- Would a legal defence in court be undermined by the offer?
- Is the gift an example of product produced on-site or has it been specifically purchased for the auditor.

Where there is a clear attempt to bribe the auditor, then the audit process should be ended, and the CB's Senior Manager or Programme Manager/Administrator informed immediately.

Disciplinary Action

Any CB staff/ auditors found to contravene this code of conduct guideline would be judged to have contravened their contract of employment and will be subject to disciplinary proceedings.

AMENDMENT LOG

DATE	ISSUE	AMENDMENT	AUTHORISED BY
08/05/2015	1.3	Introduction of IFFO RS Logos, IFFO RS Ltd and the wording Marine ingredients	Francisco Aldon
26/01/2016	1.4	Edit of title in 1.1 '*Pre-audit Process'*	Francisco Aldon
26/01/2016	1.4	Addition of wording in 1.1, fourth paragraph "*will be confirmed in writing to the applicant and the IFFO RS Secretariat from the Programme Manager/Administrator*."	Francisco Aldon
21/01/2016	1.4	Edit of section title, 1.1, paragraph 6 '*The pre-audit process for audits subsequent to the initial audit - termed here as "Re-audits - does not include a Pre-Audit Check."* '	Francisco Aldon
21/01/2016	1.4	Wording edit in 1.1, paragraph 6 "*to take into account changes in the Audit Frequency*"	Francisco Aldon
12/09/2017	1.5	Amendments to paragraph 4, page 1 "*If the Pre-audit Check is successful, the Audit Date along with a Site Audit Schedule, (developed in conjunction with the Auditor if applicable), will be confirmed in writing to the Applicant. IFFO RS secretariat/Standards Administrator from each IFFO RS approved Certification Body will receive a monthly Certification Tracker indicating the audit schedule."*	Francisco Aldon
Version 2 edits (MarinTrust conversion)			
01/10/2020	2.0	MarinTrust Header & Footer inserted	Libby Woodhatch
01/10/2020	2.0	Wording throughout document amended to read *'MarinTrust Programme'* to encompass both the MarinTrust Standard and	Libby Woodhatch
01/10/2020	2.0	Addition of wording ', upon receiving the MarinTrust application form of an applicant from the MarinTrust secretariat,' and '5 working days' , in section 1.0, first paragraph	Libby Woodhatch
01/10/2020	2.0	Inclusion of minimum data to be captured in the Certification Tracker held by the CB, in section 1.0, fourth paragraph	Libby Woodhatch
01/10/2020	2.0	Addition of note '*Note in the event of an extraordinary event being declared, the extraordinary event procedure shall take*	Libby Woodhatch

		precedent over audit frequency requirements' in section 1.0	
01/10/2020	2.0	Addition of further guidance on language and conducting audits in section 2.0 – general, information, first paragraph	Libby Woodhatch
01/10/2020	2.0	Inclusion of wording 'The auditor after 3 consecutive audits of a single plant may not be used on the 4th unless they have been given permission by MarinTrust.' And further guidance on key elements for consideration during the on-stie audit in section 2.0, page 4.	Libby Woodhatch
01/10/2020	2.0	Inclusion of specific audit duration guidance and requirement for the completion of the certification timeline tracker in section 2.0, final paragraphs	Libby Woodhatch
01/10/2020	2.0	Conformance definitions split into own section, now section 2.2., and addition of further guidance in the case of a critical non-conformance raised for new and existing applicants in the final paragraphs	Libby Woodhatch
01/10/2020	2.0	Addition of section 2.3 – closing meeting	Libby Woodhatch
01/10/2020	2.0	Addition of section 2.4 – derogations for the Chain of Custody	Libby Woodhatch
01/10/2020	2.0	Additions of Sections 2.5 – Notification of Serious Food Safety / Legality issues, 2.6 – Audit frequency, 3.1 – Initial Audit Reports, 3.2 Non-conformance follow-up and 3.3 – Distribution of Final Audit Report from appendix A2 removed and included in appendix A4 – Guidelines for CBs managing applications to certification for the MarinTrust Programme.	Libby Woodhatch
01/10/2020	2.0	Addition of further guidance on records in section 4.0, first paragraph.	Libby Woodhatch
02/08/2022	3.0	Inclusion of additional guidance and clarification of the scope, and reference to Improver Programme throughout	Governing Body Committee
02/08/2022	3.0	Streamlining of section 2 for alignment with ISO/IEC 17065 accreditation requirements	Governing Body Committee
02/08/2022	3.0	Removal of registered and subcontracted requirements to reduce	Governing Body Committee

		duplication. Instead, this is outlined in appointment, training, and approval requirements	
02/08/2022	3.0	Addition of further guidance in Section 3 for the process of carrying out site audits and increased alignment with ISO/IEC 17065 requirements. This includes further guidance on production requirements in Section 3.1.	Governing Body Committee
02/08/2022	3.0	Increased alignment with ISO/IEC 17065 requirements in section 3.2. including addition of guidance for the evaluation of new species (raw material) added as part of a scope extension prior to audit to section 3.2.2.5 and further detailed information on the process and personnel responsibilities for the technical review of audit reports (section 3.2.7), and Improver Programme requirements in Section 3.2.8 Certification Decision	Governing Body Committee
02/08/2022	3.0	Addition of 'further information' for procedures on appeals and complaints requirements	Governing Body Committee
02/08/2022	3.0	Renumbering and reformatting of sections throughout the document for clarity and clear order of process requirements	Governing Body Committee
31/10/2023	3.1	Section 3.2 and 3.2.1: correction of the reference to requirement from 'ISO/IEC 17065' to ISO 17021-1 requirements.	Governing Body Committee