



POLICY FOR AUDITING & CERTIFICATION

TQCSI HACCP CODE

In addition to the General Policy which applies to all Standards, this policy describes interpretations of the requirements for auditing and certification of management systems to the TQCSI HACCP Code made by TQCSI's Certification Approval Panel. It complements TQCSI Work Instructions 34 (HACCP) & 41 (FSMS, ISO 22000 & HACCP) which should also be referred to by auditors when auditing clients' management systems.

A **minor nonconformance** is to be raised where:

- a discrepancy which has the potential to have a significant impact on the effectiveness of the HACCP system has not been addressed since being raised at a previous audit
- a serious discrepancy or a number of like discrepancies indicate there is a breakdown in part of the HACCP system or the safety of food is potentially jeopardised
- monitoring of critical limits for critical control points does not provide sufficient confidence in the safety of food or the integrity of the HACCP system
- there is a significant breach of legislation or a regulatory requirement
- microbiological testing or environmental swabbing has not been undertaken in accordance with the HACCP Verification Schedule.

A **major nonconformance** is to be raised where:

- the agreed action plan to address a minor nonconformance has not been implemented within the agreed timeframe
- a very serious discrepancy or a number of like discrepancies indicate there is a total breakdown in the HACCP system or there is direct evidence of food safety being jeopardised
- monitoring of critical limits for critical control points seriously contravenes the established HACCP Plan
- there is a very significant breach of legislation.

Timeframe for major nonconformances

When a major nonconformance is raised, the respective Audit Team Leader or General Manager is to consider the risk when deciding on the time frame for the client to satisfactorily address the nonconformance. The time frame is not to be greater than three months (unless initial certification is being sought) but is to be much shorter if there is a risk to food safety. As a guide:

- major NCR related to document control, internal audit, training etc - 3 months
- major NCR related to CCP monitoring - 2 months
- major NCR related to food safety - 1 month



- major NCR posing an immediate or serious threat to public safety – 2 days.

General Policies:

- HACCP verification should include microbiological testing of:
 - shelf life if the client determines the shelf life
 - end product at least six monthly for all pathogens that could be reasonably be expected
 - the environment (eg microbiological swabbing of food contact surfaces, etc).
- Records of CCP monitoring must be retained on file for at least three years.
- Thermometers/thermostats and scales that are used to monitor CCPs are to be checked/calibrated in a manner that is traceable to national standards. This would normally require a certificate of compliance (traceable to national standards) to be held for each device or a certificate of compliance (traceable to national standards) to be held for a reference device which is then used to check other devices against (verification of this checking must be retained). Ice and boiling point checks may be used to supplement the checking of thermometers/thermostats but not be used in lieu. The period of check/calibration is normally 12 monthly but this can be varied with reasonable verification or if indicated otherwise on the respective certificate of compliance.
- Laboratories used for food and water testing must be certified/accredited by the relevant national authority (eg NATA in Australia). Certificates of Analysis (COA) do not necessarily need to be generated from a nationally accredited laboratory providing the client has reasonable assurance in the integrity of the respective laboratory test results.
- CCP decision risk assessment – the HACCP Hazard Worksheet (or similar) is used to decide if a potential hazard is high risk or not and that decision is used in the CCP Decision Tree to determine if the hazard should be treated as a CCP or not (Question #1). Essentially, the net result from the risk assessment is a binary value (ie high or low) and, consequently, to have risk criteria other than ‘high’ or ‘low’ for likelihood and severity is meaningless. Clients are not encouraged to have more complex risk assessment criteria than ‘high’ or ‘low’.

Approved: ***authorised through TQCSI Track, Documentation***

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