Guidelines for Certification of Halal meat products

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1. Introduction

With an objective to streamline the certification of meat and meat products as Halal from the country, a scheme titled, India Conformity Assessment Scheme (i-CAS) has been developed. The scheme shall be notified by the DGFT for export purpose. In the initial phase, meat and meat products shall be covered under the scheme for implementation.

2. Guidelines for Accreditation

There is no mandatory Halal certification system in India regulated by the Government as India does not have a National Regulation for Halal certification. However, certification is undertaken in India through private organizations who have been accredited/recognized by the importing countries. Hence, a control system shall be implemented complying with the international requirements for accreditation and certification.

The accreditation of Halal Certification Bodies shall follow ISO 17011, while the Halal Certification Bodies shall be accredited as per ISO 17065. A guideline shall be developed for the accreditation and certification procedure followed under i-CAS.

3. Accreditation Procedure for Product Certification Bodies

This document defines the procedure that has to be followed by organizations seeking accreditation and also accredited organizations operating as Product Certification Bodies (PCBs). The general information is contained in this procedure. The NABCB, on request, will provide any specific information required by the organizations. (please refer Accreditation Procedure for Product Certification Bodies, PCB-March 2020)

The other applicable procedures and information that are mandatory for the new applicant and the accredited organizations like Use of Accreditation Symbol, Complaints and Appeals procedure, Fee schedule etc. are available on NABCB website http://nabcb.qci.org.in .

3.1 Application for accreditation

- NABCB has decided to provide accreditation services to any PCB established as legal entity or identifiable part of larger legal entity in its own economy such that it can be held legally responsible for its certification services, while at the same time following principles of cross frontier accreditation laid down by International Accreditation Forum/ Asia Pacific Accreditation Cooperation (IAF/APAC).

- In legal terms, it shall be an organization which can sue and be sued in its own name as per the legal interpretation in the relevant economy. In India, it could be a public or private limited company, LLP, a trust or a society. Partnership firms and proprietary companies do not fit into this. Any exception regarding legal status would be made only by a specific decision of the Board keeping in view the legal provisions in the economy in which the PCB is established as a legal entity.

- PCBs interested to get accredited by the Board for their certification system should submit application online on NABCB accreditation portal using the link nabcbportal.qci.org,in The application form, BCB: F001 (P), (BCB:F001 (P)R for renewal of accreditation) and other related documents are available on the NABCB website for reference.

  The applicant should review the following documents prior to submitting the application online

  i. Application Form BCB:F001 (P)
  ii. Fee Schedule BCB:F002 (PRDT)
  iii. Criteria for accreditation – BCB 120
  iv. Procedures for Accreditation, Use of Accreditation Symbol & Complaints and Appeals
  v. A copy of the accreditation agreement BCB:F003 (PCB)
  vi. A blank copy of the Document review cum Cross reference matrix for ISO/IEC 17065 covering the specific scheme requirements if additional
  vii. Policy and Criteria for determination of Suitability and acceptance of conformity assessment schemes (BCB 002)

- The application is reviewed by the NABCB secretariat for completeness, clarity of accreditation requirements and the capability of NABCB to provide the services in timely manner.

- The complete application will be recorded or registered and the assessment team is appointed.

- Appointment of the Assessment Team:

  The assessment team, consisting of a Team Leader and the members, is identified from the pool of assessors and experts. The assessment team for each stage of the initial assessment normally consists of two members and the team for witness assessment will normally have
as many members as the audit/evaluation team of the applicant body. Technical Expert, if required, could be additional to the number of team members. In case the PCB has applied for more than one product certification scheme, proportionate increase in number of assessors may be done based on the man days decided for the assessment.

- All NABCB assessors have declared that they have no conflict of interest and committed to disclose if such a situation arises so that NABCB can take appropriate decision.

- On receipt of acceptance of the proposal from the applicant and the assessment fee as per the contract as well as the appointment of the assessment team, further processing of application is done.

3.2 Granting of Accreditation

- The accreditation is granted to an applicant PCB on completion of assessment as per the provisions of section 4 Accreditation Procedure of Product Certification Bodies and after the following conditions are met by the applicant PCB:

- The applicant meets the criteria of accreditation and all non-conformities and concerns found against the criteria of accreditation during assessment have been closed to the satisfaction of the Board in accordance with the guidelines on the subject.

- There are no adverse reports/information/complaints with the Board about the applicant regarding the quality and effectiveness of implementation of certification system as per the criteria of the Board. There is also no evidence of fraudulent behaviour.
- The client organizations certified by the applicant PCB are satisfied by the conduct of the applicant PCB and its certification system. NABCB may request feedback from selected client organizations certified by the PCB / publicize receipt of application and seek a feedback from stakeholders

- The applicant body has paid all the outstanding dues.

- The Initial accreditation shall be for a period of 3 years. Subsequent reaccreditations are for a period of4 years. If the PCB does not issue reasonable number of certificates, NABCB reserves the right not to reaccredit the PCB even if it applies for the reaccreditation of the same.

3.3 Maintaining of Accreditation

- The PCB shall comply with the following requirements. Subject to the PCB meeting the conditions given below, the accreditation given to a PCB shall be maintained for three years (first cycle) / four years (subsequent cycles)

    i. The accredited PCB continues to meet the criteria of accreditation and all non-conformities found against the criteria of accreditation during surveillance and witness assessments have been closed to the satisfaction of the Board as per laid down criteria.

    ii. There are no adverse reports/information/complaint with the Board about the accredited PCB regarding the implementation of certification system as per the criteria laid down by the Board. There is also no evidence of fraudulent behaviour.

    iii. The client organization certified by the accredited PCB are satisfied by the conduct of PCB and its certification system

    iv. The accredited PCB has organized witnessing as required by NABCB

    v. The accredited PCB has paid all the outstanding dues

- In the event of any adverse issue arising from the reasons specified at points ii and iii at Cl 3.2.1 or if there is evidence of fraudulent behaviour or if the PCB intentionally provides false information or if the PCB conceals information, the accredited PCB will be given an opportunity to explain its position in writing to the Board and present its case in person to the accreditation committee before a decision is taken in respect of maintaining of the accreditation. The final decision shall be taken in respect of maintenance of the accreditation on the basis of facts and the results of such presentation.

Suspension of Accreditation (Partial or full)

The PCB shall be subject to suspension of accreditation either fully or partially, both in terms of scope within a scheme or for one or more schemes in case the PCB has been accredited for more than one scheme. It shall be based on the following conditions individually or severally

a) No/ineffective corrective actions in response to the non-conformities observed during surveillance assessments (including witness assessments) or reassessment.
b) Non-payment of outstanding dues.
c) Not organizing assessments including witness assessments in time.
d) Any significant/major changes in the legal status, ownership, impartiality, use of sub-contractors, documentation, etc., which have not been informed to the Board within 30 days.
e) Any wilful misuse of the accreditation symbol of the Board.
f) Any wilful mis-declaration in the application form, which is discovered after the grant of accreditation/ reaccreditation.
g) Wilful non-compliance to the accreditation agreement.
h) Wilful misuse of accreditation conditions by certifying and issuing NABCB accredited certificate for scopes not covered under scope of accreditation.
i) Inability or unwillingness to ensure compliance of the client organization certified by the accredited PCB, to the applicable standards.
j) Fraudulent Behavior and intentionally providing false information or concealing information.
k) Excessive and or serious complaints against the certification system of the accredited PCB
l) Evidence of lack of control over the certification process/wilful bypassing of certification procedures.
m) Evidence of unethical certification practices including providing incorrect information to NABCB; misrepresentation by sales personnel of the PCB; faking of certification records; inappropriate relationship with consultants; etc.
n) Non-availability of resources in some of the technical areas/schemes covered under accreditation.
o) Inability or unwillingness to organize office/witness assessments due, in time
p) Critical or major non-conformity which may bring into question the PCB's ability to provide certification in compliance with the accreditation norms
q) Any other condition/situation deemed appropriate by the accreditation committee.

- A notice citing reasons and intention to suspend shall be sent to the PCB inviting response within 15 days.

- The accredited PCB shall be given an opportunity to explain its position in writing to NABCB and present its case in person to the accreditation committee. The final decision shall be taken in respect of Suspension of Accreditation (Partial or full) on the basis of facts and the results of such presentation.

- Notwithstanding the above provision for a representation by the PCB, the accreditation committee may decide to suspend accreditation if there is sufficient evidence of wilful misrepresentation of facts or wilful non-compliance to accreditation criteria. The period of suspension shall be formally communicated as per the criteria laid down by the Board

- The information about suspension (partial or full) of the accreditation of the PCB shall be published on NABCB website for information to all and feedback from the industry / other stakeholders.

3.4 Withdrawal of Accreditation

The PCB shall be subject to withdrawal of accreditation based on the following conditions individually or severally.

i. If an accredited PCB voluntarily relinquishes its accreditation status.
ii. If the non-conformities are not appropriately addressed in spite of suspension/withholding of reaccreditation for a period not more than six months.
iii. If no action is taken by the accredited PCB in response to the suspension on any other grounds.
iv. Complaints are received about the certification process/certified client organization and established to be based on facts.
v. Critical or major non-conformity which may bring into question the CB's ability to provide certification in compliance with the accreditation norms.
vi. Any serious non-compliance to Terms and Conditions of accreditation especially any fraudulent behaviour which may warrant withdrawal in line with IAF MD 7.
vii. Any other condition/situation deemed appropriate by the accreditation committee

- A notice of the intention to withdraw accreditation citing reasons shall be sent to the PCB. The PCB shall respond within 15 days. The accredited PCB shall be given an opportunity to explain its position in writing to the NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of Withdrawal of Accreditation on the basis of facts and the results of such presentation

- The withdrawal of accreditation shall be formally communicated as per the criteria laid down by the NABCB.

- NABCB shall publish information about any withdrawal of accreditation on its website, in its newsletter as well as in newspapers, if necessary, for information of the industry / other stakeholders and inform IAF/APAC, if required.

3.5 Assessment

The assessment shall be for generic competence of the applicant body in operating a sound certification/ system in compliance with the accreditation criteria.

Preparation for the Assessment:

- The NABCB Secretariat prepares a draft accreditation assessment plan for the initial accreditation process, covering three stages, as follows:

a) assessment of the documents. This shall cover all levels of documents of the PCB for the accreditation scheme applied for.

b) assessment of office of the applicant PCB including any branch offices/ locations from where the PCB is offering its services /sub-contractors as applicable.

c) witnessing of on-site audits being carried out by the applicant PCB based on the scopes of accreditation / certification schemes applied for.

- The draft accreditation assessment plan shall be discussed with authorized personnel of the PCB to ensure an effective assessment plan at each stage.

Assessment Process:

Accreditation Assessment plan

- Based on the draft accreditation assessment plan, NABCB secretariat prepares a detailed schedule for the following three stages of the assessment.

  a) Assessment of the documentation of the PCB.

  b) Assessment of the office of the PCB including branch offices/locations / sub-contractors.

  c) Witness of the audit / evaluation being carried out by the PCB (At least two audits/evaluations (initial /recertification) are witnessed for initial accreditation of a PCB – if the PCB has applied for more than one Scheme, it would be one witness per Scheme. NABCB shall decide on how many witnesses would be needed to cover the entire scope of accreditation sought by the applicant PCB.

- The programme shall be agreed by the NABCB Secretariat and by the applicant PCB.

Initial Assessment

The initial assessment is carried out in three steps as per the assessment programme, as described in as described in accreditation assessment plan above. (refer NABCB accreditation procedure for product certification body.

- NABCB Secretariat reviews the Document review report (DRR) and forwards a copy of the DRR to the applicant PCB for their comments and compliance. Depending on the nature of comments and changes made to the documentation, decision regarding a second review of documents shall be taken. The applicant PCB would be informed if a second review is needed. If significant changes are needed, the second review may be charged. Any review beyond second document review would be charged by NABCB.

- NABCB may decide to conduct a preliminary visit in case the documentation does not meet requirements after two reviews, to give an opportunity to the PCB to clearly understand the accreditation criteria and other requirements. The visit shall be charged to the PCB and the duration shall be decided by NABCB Secretariat based on the work involved. The preliminary visit will generally be carried out for one-man day by the appointed leader of the assessment team that carried out the DR.

If the documentation is determined to be generally meeting the accreditation criteria, after review of the changes made, NABCB Secretariat may seek evidence of implementation of changes to the system by the applicant body

- For all witness audits /evaluation under ISO/IEC 17065, the PCB shall provide details of contract review, and reports of any prior evaluation/audits, if applicable and any other document as required for completing the process of witness assessment. During the process of conduct of witness assessment, the NABCB witness assessment team may also ask for the documentation of the evaluated/audited client organization and other evidence seen by the PCB's audit/evaluation team without causing undue disturbance to the audit/ evaluation process. For the purpose of review, on completion of the witness assessment, the PCB evaluation / audit team shall provide the NABCB AT, the findings of evaluations / the witnessed audits.

The PCB shall provide at least one week in advance before the witness assessment, the following details:

i. Brief of client organization.
ii. Application received.
iii. Contract review along with evaluation / audit man-days estimation.
iv. Record of evaluator / auditor qualification for the scope/scheme along with supporting documents like CVs, knowledge & skills defined and evaluation record etc. and information on how team competence is built up for the scope/scheme.
v. Last audit report for the same client organization, if any
vi. audit plan
vii. audit programme, if applicable
viii. CB's procedures.

The evaluation/audit report along with the documented findings shall be provided to the NABCB AT as soon as the same is prepared and released for PCB's technical review process **(please see Annex – 4 for timelines).**

Assessment Report

The assessment team shall prepare a report at each stage of the assessment – office assessment, branch office assessment, and witness assessments. Non- conformities and concerns, if any, shall normally be handed over to the PCB representative at the end of each assessment.

Time Period for assessment process

A typical time line for the accreditation process is given in Annex 4 of NABCB procedure for certification of product certification body (attached). The assessment process for any applicant PCB must be completed within a maximum of one year. In the event that the process is not completed within one year, NABCB will take a decision and the application may then be kept active for one more year and applicant PCB may be given one chance to completely restart the assessment process afresh without paying any additional application fee. In such cases the assessment process must be completed in one additional year.

In the event of delay in scheduling of witness assessments for different scope sectors applied for, as per NABCB procedure, the applicant PCB may apply in writing to the Director/CEO of the Board for consideration of their application for part of the scope, for which the assessment process including witness assessments as per NABCB procedure has been completed. The Director/ CEO NABCB shall have the right to accede to that request or differ. Grant of accreditation for part of the scopes shall be done subject to completion of CAs for all the non- Conformities and concerns raised during the earlier stages - office assessment and the witness assessments conducted and their acceptance/closure as per the laid down criteria of the Board.

3.6 Accreditation Decision

- The Accreditation Committee is responsible for taking decision on granting, maintaining, suspending, reducing or withdrawing of Accreditation and also withholding of reaccreditation as well as extension of validity of accreditation. It also ensures that the members of the Accreditation Committee were not involved in the assessment and also have had no relationship for the last two years with the applicant PCB under consideration that can influence their decision on accreditation.

- The reports are forwarded to the accreditation committee along with recommendations of NABCB secretariat for the decision of accreditation.

- The decision of accreditation is taken by the Accreditation Committee unanimously and is generally not put on vote. The Head of the Committee shall be responsible for coordinating and addressing the issues raised by the members. The Head of the committee shall have the right to call for any other assessor/experts/personnel for clarifying any of the issue that is under discussion. The persons so called for clarifications, shall not take part in the decision of the accreditation. It shall be ensured that the persons so called for clarifications shall not have taken part in the assessment of the concerned PCB and shall be free from any conflict of interest, except when clarification from the assessment team is needed.

- The decisions of the accreditation committee are based on the assessment report, recommendations of the assessment team and the NABCB secretariat, any other relevant information about complaints, the market reputation obtained by the Board, etc. It may also involve interaction with the Director/CEO NABCB, assessment team and the applicant PCB. The accreditation committee in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant's certification process and the applicant shall not refuse to present such information.

3.7 Accreditation Information/Documents

- The accreditation committee shall decide to grant accreditation to the applicant PCB, only after the applicant PCB has met all the conditions specified by the Board,

- Two copies of the accreditation agreement shall be signed by the applicant PCB and the applicant PCB shall ensure that the relevant fees are paid.

- On receipt of the signed agreement and the fee as per the invoice, a set of accreditation documents is issued to the applicant PCB.

- The accreditation certificate in the standard template would include the NABCB accreditation symbol, the name of the PCB, address of the premises of the PCB from where key activities are performed, unique accreditation number, the scope of accreditation, effective date of grant of accreditation and the date of expiry of the certificate (BCB F018).

  In addition to this, the following details are also included:
  a) Certification scheme
  b) Standards/Normative documents and/or regulatory requirements to which organizations are certified
  c) IAF Scope sector

- The initial accreditation certificate is valid for 3 years and the date of issue and validity is indicated on the certificate.

- The Scope of accreditation granted to a PCB is indicated on the Accreditation Certificate or a Schedule which accompanies the accreditation certificate. Whenever there is a change in scope (extension or reduction) which calls for a revision of the schedule and / or accreditation certificate, the revised schedule and / or accreditation certificate will carry the revision no. (such as Rev 1) with a disclaimer as follows: "This certificate / schedule supersedes the earlier version of the certificate / schedule dated ……..". In addition, the PCB will also be asked to return the earlier version of the certificate and / or schedule.

  In case of scope reduction, the revised certificate and / or schedule will be issued only after receipt of earlier version of the certificate and / or schedule from the PCB.

3.8 Maintaining Accreditation and Accreditation Cycle

Surveillance Assessment

- To ensure that each PCB accredited by the Board continues to comply with the accreditation requirements, a surveillance assessment shall be carried out annually at the main office of the PCB; other offices may be covered as per the assessment programme. The first surveillance assessment shall be completed within 9 months from the date of grant of accreditation. However, the accredited PCB, for valid reasons may seek a postponement of the assessment for a maximum period of three months. For deferring the surveillance, the PCB shall give written justification and shall obtain the consent of CEO, NABCB. It shall be ensured that the first surveillance takes place within 12 months and gap between surveillance assessments shall not exceed 15 months.

  The subsequent assessments shall be every 12 months. The surveillance assessment shall be consistent with the initial assessment and include office assessment, other locations performing key activities as defined in section 4.1.1 above, including foreign locations and witness of the audit of the organizations certified by the accredited PCB. The number of locations included in the surveillance assessment would be based on the. . Locations where highest and lowest number of certifications are undertaken, will be chosen, if applicable.

- The witness assessment programme would take into account the audit resources available to the PCB, number of accredited certificates issued, spread of locations and the extent of control demonstrated by the PCB and observations of the office assessment. Specific schemes/audits or auditors may be chosen for witnessing (please see Annex - 6). A plan for

witness assessments would be communicated to the accredited PCB. The provisions of clause 4.2 would apply as regards the number of NABCB assessors/ experts for witness audits. NABCB will try to cover maximum schemes under the scope of accreditation during its surveillance activities including both office and witness assessments. In selecting schemes to be witnessed, and specific scopes in the schemes, a risk based approach will be used. Complex Scopes within a scheme and complex schemes will be chosen for witnessing. Also scopes/schemes under regulatory oversight will be chosen for witnessing more often. Similarly, scopes having highest as well as lowest number of certifications will be chosen.

- The non-conformity reports and concerns if any and the assessment report of each of the surveillance assessments shall be forwarded to the accredited PCB for taking corrective action as per the laid down criteria for the maintenance of accreditation

- In the event of any critical and/or major non-conformity that can affect the certification process, the NABCB Secretariat informs the accredited PCB and seeks a time bound corrective action plan. The decision for an additional follow up visit to verify the implementation of the corrective action plan as committed by the accredited PCB is taken by the Director/CEO, NABCB in consultation with the Team leader of the assessment team. Such decision shall be binding on the accredited PCB. The cost of the follow up visit shall be borne by the accredited PCB. In the event, that the accredited PCB has not shown evidence of completion of the corrective action agreed as per committed time period, NABCB Secretariat shall prepare a status report and submit it along with the assessment report to the accreditation committee along with recommendations of NABCB secretariat for further decision on suspension or reduction or withdrawal of accreditation. Critical/major non-conformity may lead to suspension/withdrawal of accreditation depending on the seriousness.

- The surveillance assessment reports shall be reviewed and presented to the accreditation committee for consideration and decision regarding any suspension (partial/full) of accreditation or scope extension or scope reduction of the accredited PCB.

- The frequency of surveillance assessments may be increased based on the type of non-conformities observed, complaints received, market feedback etc. The PCB shall be informed of the reasons for any change in the frequency.

Other Surveillance activities

- NABCB Secretariat shall call for information on new certificates issued on a quarterly basis and based on the same may decide to seek audit reports on a random basis. The Secretariat would have the reports reviewed and seek any clarification. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited PCB to respond. The cost for such reviews shall be charged to the PCB.

- Based on concerns noticed during the office assessment / market feedback / complaints or otherwise, Director/CEO, NABCB may decide to arrange direct interaction with or visit client organizations certified by the PCB and the cost of such interactions/visits carried out if any shall be borne by the accredited PCB. PCBs shall, in their contract with their certified organizations provide for such activities. PCBs shall be informed of any such activity and may join the NABCB assessor/AT for such activities if required. PCBs would be informed of the duration of such activities and the information planned to be collected, if felt necessary.

- If such activities indicate satisfactory operation of accredited certification, then a reduction in normal witnessing could be considered. If, however, the activities reveal unsatisfactory operation of the accredited certification scheme, then NABCB Secretariat would advise actions to be taken which could include a special office assessment and intensified witnessing,

- The PCB would have to bear the assessment charges in all such cases.

Reaccreditation

- Normally six months prior to completion of the accreditation term, the accredited PCB shall be informed through an alert generated by the accreditation portal about the reaccreditation process The PCB shall apply at least 5 months in advance of the expiry date and ensure that office assessment is carried out normally 3 months before the expiry date. In case of delays, the reaccreditation is liable to be withheld till the reaccreditation process is completed.

- For the purpose of reaccreditation, the reassessment shall be carried out in accordance with process detailed in sections 4 – 6 of this procedure as applied to initial accreditation process and assessment.

- In case during the accreditation cycle preceding the reaccreditation, witness assessments have been carried out as part of surveillance assessments exceeding the number of mandatory minimum witness assessments needed for reaccreditation, then no separate witness assessments are required as part of reaccreditation process. It is the responsibility of the PCB to ensure that it offers at least the minimum number of witness assessments required for each accreditation. These could also be certificates granted under accreditation by other ABs. The mandatory minimum number for the purpose of reaccreditation shall be the same as that for initial accreditation.

- On completion of the re-accreditation process, the accredited PCB shall initiate the relevant activities to take corrective actions on the observed non conformities and concerns, if any, and complete all actions as per the criteria of the Board to close all critical & major non-conformities and ensure that corrective action plan for minor non conformities are accepted by the assessment teams, before the reaccreditation decision can be taken.

- The assessment team shall prepare a report of all the aspects of the assessment of the office and witness assessments, if undertaken for the purpose. The final assessment report shall be made which clearly identifies the activities undertaken as part of reassessment process and includes the following:

    a) The level of conformity of the PCB’s management system against the NABCB accreditation requirements.

    b) The non-conformities and concerns observed during various stages of the assessment and details of corrective actions taken by the PC on the non-conformities/concerns and whether these are accepted by NABCB.

c) Recommendations by the NABCB assessment team with details of recommended scopes and justification for not recommending any scopes.

d) Recommendations for special conditions like early surveillance, witness of any scope sector etc, NABCB team leader shall provide appropriate justifications for recommending the special conditions to be imposed.

- The report shall be prepared as per the laid down guidelines and criteria by the team leader / team members in the established formats listing the level of compliance to the requirement of the accreditation criteria of the Board. The reports of the re-assessment, and witness assessments if undertaken, and the corrective actions taken by the accredited PCB along with recommendations of NABCB secretariat shall then be presented to the accreditation committee for a decision.

- If the decision by the accreditation committee is to continue the accreditation, a fresh set of accreditation documents shall be issued to the accredited PCB.

- The reaccreditation shall be for a period of4 years.

- All reassessment activities shall be completed prior to the expiry of accreditation. In case there is a delay in decision-making, the accreditation shall continue, if the report of the assessment team is satisfactory. The decision of the accreditation committee shall be binding on the accredited PCB.

- If the accreditation committee is not able to take a positive decision for any reason, the reaccreditation may be withheld and communicated to the accredited PCB for initiating appropriate actions including any corrective actions. The PCB shall complete all actions within 6 months failing which the reaccreditation may not be agreed to. The period from the date of previous expiry to reaccreditation shall be deemed to be suspension and reaccreditation effected from the original date of expiry.

3.9 Suspension & Withdrawal of Accreditation

Decision on Suspension and Withdrawal of Accreditation

Accreditation Committee is authorized to decide about the suspension or withdrawal of accreditation or revoking of suspension.

Suspension of Accreditation (Partial/full)

In addition to the requirements specified under section 3.3 Suspension of Accreditation (Partial or full) the following shall further apply

i. The PCB may seek on its own suspension of accreditation citing reasons for the same with justification.

ii. The period of suspension will not be more than six months. If the accredited PCB does not take suitable corrective action to the satisfaction of the Board and its assessment team within six months, the Board reserves the right to withdraw the accreditation.

iii. In the event of partial / full suspension, in terms of scope within a certification scheme or the certification scheme itself or the accreditation scheme, the accredited PCB shall be informed. The PCB is then barred from issuing accredited certificates for the scopes for which the accreditation has been suspended till the suspension is in force.

iv. It is allowed to take on surveillance assessment only with the permission of the CEO, who will ensure that adequate resources are provided by the PCB such that the surveillance process is not compromised. Where the CEO of the Board is not sure of the adequate resources, the PCB under suspension will be asked to take support of another PCB accredited by the Board.

v. For revoking suspension, the accredited PCB shall formally apply to NABCB as per the established guidelines. The suspension shall be revoked after an assessment has been carried out to verify that the corrective actions have been implemented and are effective in eliminating the reasons of suspension.

Withdrawal of Accreditation (refer above)

i. The reasons for withdrawal are already specified at clause 3.4 Additionally, the Board may decide to withdraw accreditation based on market feedback, complaints about the certification process etc. after due investigation and providing the PCB with an opportunity to respond to the findings.

ii. In the event of the decision to withdraw the accreditation, the PCB is asked to return the original accreditation certificate and the enclosure of scopes to NABCB and to stop using the accreditation symbol of NABCB with immediate effect. The Director/CEO NABCB shall also notify the legal course for initiating any penalty of such misuses if it is reported and found supported by facts and evidences

iii. In case a PCB is found using NABCB accreditation symbol after withdrawal of accreditation supported by facts and evidences, NABCB may initiate legal action.

iv. Withdrawal of an accreditation has consequences on the organizations certified by the PCB. The CB shall provide the organization it has certified, with information on the withdrawal of its accreditation and on its consequences. Any Accredited certificates shall be considered as unaccredited, once accreditation is withdrawn and NABCB may require the PCB to publicize this on its website and may place this information on NABCB website also. The PCB may, in consultation with NABCB arrange for the transfer of such accredited certificates to another accredited PCB, if possible.

v. Following withdrawal of accreditation, the PCB may seek fresh accreditation as a new applicant only after a cooling period of minimum one year. NABCB shall have the right to satisfy itself if the reasons which led to withdrawal have been addressed adequately before accepting the application. Any visits needed for such a check would be charged to the PCB.

3.10 Public Information of Suspension or Withdrawal of accreditation

The information of the suspension or withdrawal shall be placed on the NABCB website in the register of the accredited bodies and NABCB may make a public declaration in the newspapers. The charges for making the information public through newspapers shall be

recovered from the PCB involved before revoking the suspension or renewal of the accreditation.

Change in the status of the Certification Body

- As part of the application for accreditation, the applicant body / accredited PCB undertakes to inform NABCB within 30 days if any change takes place in any of the aspects of its status or operation that affects its:

  a) Legal, commercial or organizational status

  b) The organization, top management, and key personnel

  c) Significant changes in policies and/ or documented procedures, premises, personnel, equipment, facilities, working environment or other resources, where significant and relevant.

  d) Capability of certification or scope of accredited activities, or conformity with the requirements of the accreditation criteria.

  e) Addition/closure of any branches/ foreign locations where clients organizations are located / operations related to certification are performed.

  f) Changes in certifications scheme that may effect the certification process.

  g) Other such matters that may affect the ability of the PCB to fulfil requirements for accreditation.

- On receipt of the information of change in any of the above parameters, the Director/CEO decides whether an extraordinary visit is necessary or the change shall not affect the operation of the certification system within the accredited scope. If the Director/CEO decides on a visit, such a visit shall be charged as per prevailing fee structure. The invoice for such a visit is sent to the PCB. Further action shall be initiated only on timely payment of fee for the visit.

- During regular surveillance the accredited PCB is asked to confirm that no change in the parameters mentioned above or any other aspect that will affect the certification system has taken place since the last assessment.

- In case an accredited PCB is found to have given a willful wrong declaration, the Board may take suitable action and also reserves the right to suspend/withdraw the accreditation.

Extension/Reduction of the Scope

Please refer to accreditation procedure for certification of product certification body.

3.11 Fee payable for the accreditation process and Annual Fee

The fee structure shall be approved by the NABCB. The current approved fee schedule is available on NABCB website

i. The total fee shall depend on the actual assessment days and other parameters as specified in the fee schedule.

ii. Each accredited body shall pay annual operating fee as identified in the current approved schedule

iii. The NABCB shall have the comprehensive right to revise the fee schedule as and when necessary.

iv. The NABCB shall take the following actions if any applicant or accredited PCB fails to pay the fee as invoiced:

a) Stop further processing of the application/extension of scope/reaccreditation.
b) Do not offer accreditation
c) Suspend and/or withdraw the accreditation

v. All invoices are to be paid within one month. Any failure to pay the invoices timely may result in penal action like rejection of application or suspension of accreditation. If any PCB is found to be defaulting on payments repeatedly, NABCB may decide to ask for payment in advance for one year at a time.

vi. Fees for any assessment on foreign locations carried out by the local accreditation body shall be charged at the current rates of the local accreditation body.

3.12 Complaints and Appeals

The detailed procedure for complaint handling and appeals please refer NABCB Complaints and Appeals Procedure which is available on NABCB website.

Disputes

A dispute is a disagreement between the PCB and NABCB AT (such as non- acceptance of NC by PCB, non-acceptance by NABCB AT of CAs proposed / implemented by the PCBs) or PCB and NABCB Secretariat. Representation on such disagreement should be made to CEO in writing by the PCB. NABCB will handle disputes in accordance with its internal procedure for the same.

3.13 Publishing of the Information for Public & availability of accreditation schemes (Please refer to Accreditation procedure for product certification bodies BCB-201 March 2020)

The NABCB shall make public announcement of the accreditation schemes, criteria of accreditation, application for accreditation, fee schedule and other related documents on its website and on specific request.

3.14 Confidentiality and Disclosure

- The information obtained regarding the certification system of the applicant and accredited PCBs that are not of the nature of public information shall be kept confidential by all NABCB Personnel, members of the NABCB, panel of assessors, experts and the committee members.

- If the NABCB has to share any confidential information due to any legal situation, the concerned PCB shall be informed of the extent of disclosure and the body to whom the disclosure has been made.

3.15 Obligations of the certification body and NABCB

The general obligations of the applicant / accredited PCB sand NABCB are given in Annex 5 attached.

4. Requirements for Halal Certification

i-CAS

Please refer i-CAS scheme document which describes requirements which are defined in Part B of i-CAS for producers/suppliers of Halal Products, Part C of i-CAS for Halal Certification Bodies **(Annex - 1)**

5. Registration of FBO for export of Halal meat products

APEDA Process for Registration of Facilities / Business Operators for Halal Meat Products. **Please refer registration procedure dated 1 July 2021 attached Annex -5**

The APEDA has an established procedure for registration of member exporters. The exporters shall obtain Registration Cum Membership Certificate (RCMC). APEDA also issues unique identification number by issuing Certificate of Registration Integrated– Cum – Meat Processing Unit to Halal meat export unit.

6. Monitoring of Export of Halal Products

- As the Monitoring Body for Halal meat and meat products, APEDA shall have the mechanism to ensure that the certification and export of Halal products has followed the i-CAS requirements. Though the accreditation of the Certification Bodies for Halal products shall be granted by the NABCB, the export of Halal products undertaken under these Certification Bodies shall be monitored by APEDA.

- The monitoring plan shall be based on the quantum of the export of Halal products. The Certification Bodies who have certified the Food Business Operators exporting Halal meat and meat products shall be covered under the monitoring plan. The shipments made by these Food Business Operators (FBOs) shall be taken into consideration for monitoring purpose.

- The monitoring shall be done in following two ways:

    a) Offsite document review as an when required and Onsite monitoring through combined witness assessment by NABCB and APEDA

b) Digital exchange of information on the various stages of accreditation-The digital exchange of information shall be continuous process between NABCB and APEDA. The information related to receipt of application for accreditation, grant of accreditation, reaccreditation, suspension, withdrawal, appeal etc shall be shared with APEDA as and when it occurs. This ensures updated information on the accreditation status of the Certification Bodies and degree of compliance by each Certification Body.

216151/2023/Export cell (SCOMET)

National Accreditation Board for Certification Bodies

INDIA CONFORMITY ASSESSMENT SCHEME (i-CAS)
for
HALAL PRODUCTS

Summary Report and Proposed Requirements for Halal Certification in India

Submitted by

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1. EXECUTIVE SUMMARY

1.1. Globally profitable business opportunities have emerged as a result of Muslim awareness of halal lifestyles. Furthermore, the Halal industry has expanded its scope to include apparel, finance, travel and tourism, media and recreation, pharmaceuticals, and cosmetics, among other things.

1.2. There are currently no globally recognised halal standards to serve as a guideline for the establishment of a global halal system. The lack of a global halal standard limits the expansion of halal industries. There are currently more than 100 active halal certification bodies around the world, according to estimates. All countries want to be the global centre for halal certification because it opens the door to economic and financial activities.

1.3. The biggest challenge, however, is the lack of consistent global halal standards, which makes it difficult for organisations looking to export halal foods to different countries.

1.4. This report assesses the need for having harmonised guidelines for halal in order to globalize halal products. The purpose of this study is to identify and compare the halal standards applied in some countries as well as to propose a global halal standard for harmonization.

1.5. A comparative analysis methodology was applied by conducting an in-depth review on the following halal standards frequently used as references in some countries:

1.5.1. GCC Region (The GCC region covers the countries Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, and the United Arab Emirates) - GSO 2055-1:2015
1.5.2. Malaysia - MS 1500:2009
1.5.3. Singapore - MUIS-HC-S001
1.5.4. Indonesia - HAS 23000

2. INTRODUCTION

2.1 Demand for Halal food products from around the world has grown, increasing the Halal food market.

2.2 Halal products include both food and non-food products some of the examples are mentioned below:

Food	Non-Food
Meat and poultry	Cosmetics

Dairy Products	Perfumes
Bakery Products	Pharmaceuticals
Herbal Products	Leather Products
Confectionary	Toiletries
Canned and Frozen food	Beauty Products
Beverages	Nutraceuticals

3. GLOBAL PRACTICES

3.1 At the international level, Halal Guidelines for the use of the term 'Halal' were adopted by the Codex Alimentarius Commission. Consequently, a multitude of other halal standards are used in international trade flows. Some are international standards, e.g. issued by international organizations such as the Organisation of Islamic Cooperation (OIC/The Standards and Metrology Institute for Islamic Countries (SMIIC) or regional/intergovernmental organizations such as Association of Southeast Asian Nations (ASEAN) guidelines on Halal food. In addition, certain domestic standards acquired international importance (e.g. The Halal Assurance System (HAS) Indonesia and The Malaysian Standard (MS) Malaysia).

3.2 While there is no internationally harmonized standard for halal foods, the Codex Alimentarius (Codex) Guidelines for Labelling (CAC/GL 24-1997) provide a general overview of what is considered halal. Halal Food means food permitted under the Islamic Law and should fulfil the following conditions:

a) does not consist of or contain anything which is considered to be unlawful according to Islamic Law;
b) has not been prepared, processed, transported or stored using any appliance or facility that was not free from anything unlawful according to Islamic Law; and
c) has not in the course of preparation, processing, transportation or storage been in direct contact with any food that fails to satisfy a and b above.

3.3 Definitions of Halal

Standards/Associations	Definitions
OIC/SMIIC	Halal food is the food including drinks, which is allowed to be consumed according to Islamic rules and that

	comply with the requirements mentioned in OIC/SMIIC 1: 2011 standard.
ASEAN	Halal is defined as following: Halal is defined as the food or its ingredients that do not contain any components or products of animals that are unlawful as food to Muslim by Shariah Law or of lawful animals which are not slaughtered according to Shariah Law; The food does not contain any ingredients that are considered as "najis" by Shariah Law The food is not prepared, processed or manufactured by using equipment that is contaminated with things that are "najis" according to Shariah Law; During its preparation, processing, storage or transportation, the food should be fully separated from any other food that does not meet the requirements stated in items (a), (b) or (c) above or any other things that have been decreed as "najis" by Shariah Law.
Malaysian Standards (MS 1500: 2009)	Certain domestic halal guidelines also acquired international importance. Following are the definitions of halal as present in the different standards: Halal food means food and drink and/or their ingredients permitted under the Shariah law and fulfil the following conditions: does not contain any parts or products of animals that are non-halal by Shariah law or any parts or products of animals which are not slaughtered according to Shariah law; does not contain najs according to Shariah law; safe for consumption, non-poisonous, non-intoxicating or non-hazardous to health; not prepared, processed or manufactured using equipment contaminated with najs according to Shariah law does not contain any human parts or its derivatives that are not permitted by Shariah law; and During its preparation, processing, handling, packaging, storage and distribution, the food is physically separated from any other food that does not meet the requirements stated in najs by Shariah law.

GSO Standards (GSO 2055-1:2015)	Halal food and drinks, which are allowed to be consumed according to Islamic rules by eating, drinking, injecting or inhaling, and that should comply with the requirements mentioned in this standard.
Singapore Standards, MUIS-HC-S001	An Arabic term which means “permissible” or “lawful”. Halal food refers to food that is permissible for Muslim consumption.

4. GLOBAL MARKET SCENARIO

4.1 The global halal food market reached a value of US$ 1978 billion in 2021. Looking forward, the market is projected to reach US$ 3,907.7 billion by 2027, exhibiting a CAGR of 12% during 2022-2027 (Figure 1). The halal market is no longer limited to the boundary of the food sector, rather it has extended its scope to cosmetics and pharmaceuticals and so on.

4.2 The halal food and beverage (F&B) sector is also the largest in the industry. It is anticipated that by 2022, Muslims will spend $1.94 trillion on food and beverages, growing at a rate of 6.2 percent. By2050, the demand for food is anticipated to increase by more than70%, indicating a significant increase in the demand for halal food.

4.3 Healthcare products and pharmaceuticals are also potential lifestyle offerings by the halal industry, which has shown impressive growth performance. This sector has a huge opportunity to tap into the global pharmaceutical industry, which is expected to reach $1170 billion by2021, growing at a 5.8 percent annual rate. Cosmetics and personal care are an integral component of lifestyle which is expected to reach $82 by 2022.

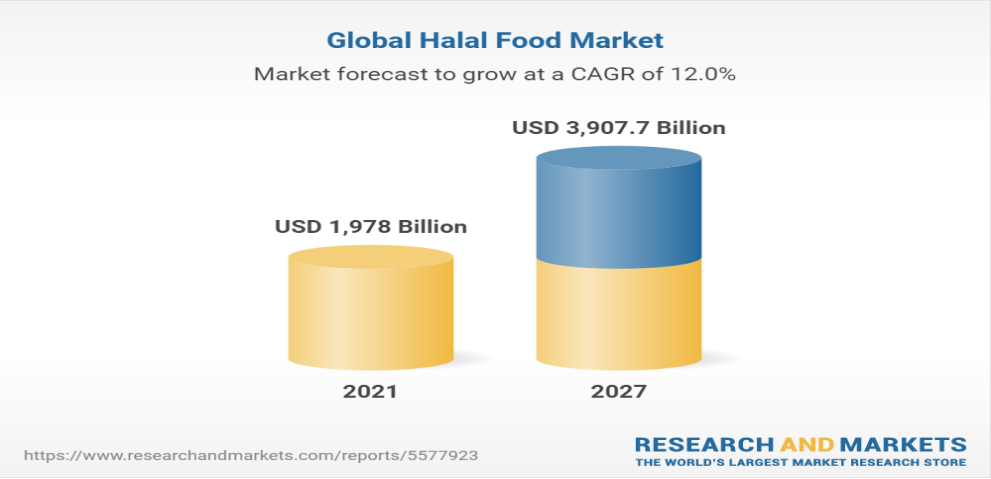


Figure 1 Market forecast of the global halal food market

5. HALAL IN INDIA

5.1 India's large Muslim population, represents huge opportunities for halal-based entrepreneurs. However, in India, despite the large size of the Muslim minority population, the country's halal industry is still in its infancy. There are no specific labelling requirements for halal food products imported into India. For all U.S.-origin meat and non-meat-based food products shipped to India, halal certification is strictly voluntary.

5.2 In India, FSSAI (Food Safety and Standards Authority of India) certification can be seen on almost all the processed foods but the government neither mandates halal certification nor does it provide a unifying regulatory law hence it is important to have halal regulations in place in India.

5.3 Halal certification is given by many private companies in India which marks the food or products permissible. The three major Halal certifying organisation (HCO) in India are:

5.3.1 Halal **India Private Limited**-Halal India is one of the established Halal certification bodies in India. They provide services like consultation, issuing, Halal compliance certification, independent auditing & monitoring system and promoting other acceptable products and services as per sharia law. Types of Halal Certifications provided by Halal India

a) Under Restaurant Scheme
b) Under Industrial Scheme
c) Under Food, beverage and catering scheme
d) Under Warehouse and storage scheme
e) Under Product endorsement scheme
f) Under Halal friendly tourism

5.3.2 **Jamiat Ulama-i-Hind Halal Trust**

In order to streamline, unify and standardize its Halal certification procedure and operation all over India Jamiat Ulama-i-Hind Halal Trust was established. It is accredited by JAKIM (Malaysia).

Halal Trust is a globally renowned and a leading Halal certification body from India. Halal trust has a distinct and patented Halal logo which is widely recognized all across the world and it helps in certifying restaurants, hotels, hospitals, processed food manufacturing units, slaughter houses and other Halal certification related services.

5.4 **NABCB – The National Accreditation Body**

5.4.1 The National Accreditation Board for Certification Bodies (NABCB), a constituent Board of Quality Council of India (QCI), [an autonomous Body under Department for Promotion of Industry and Internal Trade (DPIIT), Ministry of Commerce and Industry Govt. of India] is

the National Accreditation Body, which provides accreditation to Certification, Inspection, and Validation & Verification Bodies in accordance with international guidelines and ISO/IEC standards requirements.

5.4.2 NABCB is a signatory member and has signed Multilateral Mutual Recognition Arrangements (MLAs) with the International Accreditation Forum's (IAF) for Management Systems (ISO/IEC 17021-1), Product Certification (ISO/IEC 17065), Personnel Certification (ISO/IEC 17024), the Asia Pacific Accreditation Cooperation (APAC) MRAs for the same and Inspection (ISO/IEC 17020) and Validation & Verification Bodies (ISO 14065). NABCB is also signatory to the MRA of International Laboratory Accreditation Cooperation (ILAC) for Inspection. This confers worldwide equivalence to NABCB's accreditation programs for these areas, and facilitates global acceptance of NABCB accredited conformity assessment.

5.4.3 The National Accreditation Board for Testing & Calibration Laboratories (NABL), another constituent Board of QCI, provides accreditation to Testing & Calibration laboratories (ISO/IEC 17025), Medical testing laboratories (ISO 15189), Reference Materials Producers (ISO/IEC 17034) and Proficiency Testing Providers (ISO/IEC 17043), and is signatory to the MRAs of International Laboratory Accreditation Cooperation (ILAC) and Asia Pacific Accreditation Cooperation (APAC).

5.4.4 Further NABCB is recognized internationally by various international conformity assessment scheme owners such as GlobalG.A.P, Global Seafood Alliance-Best Aquaculture Practices (GSA-BAP), International Featured Standards (IFS), FSSC 22000 Foundation, FAMI-QS, ICAO-CORSIA, Verra, SERI, GOTS etc. with whom NABCB works very closely.

5.4.5 **IHAF – The International Halal Accreditation Forum**

IHAF is an international network of accreditation bodies mandated to enforce halal standards in their economies. IHAF strives to harmonize halal accreditation practices among member bodies to facilitate the trade of halal goods and services, and operates a multilateral recognition arrangement.

It comprises 38 accreditation bodies from over 35 countries in Africa, Asia, Australia, Europe and the America including India. India is the founder member of IHAF. It aims to develop and operate system(s) for member accreditation bodies to accept each other's halal conformity results in order to eliminate halal trade barriers.

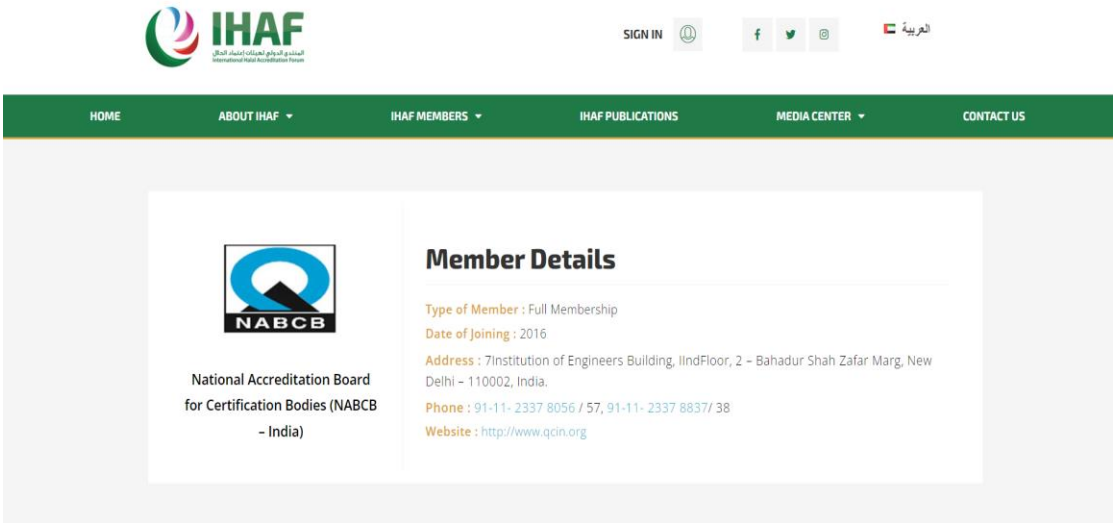
IHAF's aims are to harmonize conformity assessment practices in the halal sector by eliminating all the trade barriers for halal products throughout the world. IHAF has further aimed to support the Halal industry by:

a. Constructing a solid foundation and platform for the global Halal accreditation;

b. Verifying the halal conformity assessment practices of each country reaching an acceptable and common international agreement;
c. Being the voice to support manufacturers and producers worldwide by connecting them with our members (Accreditation Bodies) to gain a more significant market share in the Halal market;
d. Facilitating Halal trade worldwide to contribute to world economies according to the free trade system adopted by the World Trade Organization

5.4.6 IHAF membership is open to all governmental and non-governmental entities that work in the field of Halal accreditation and as specified in Article 11 in the IHAF Bylaw. Full and Associate Memberships are open for accreditation bodies only.

5.4.7 NABCB is also the full-time member of IHAF since 2016.



While regional groups of accreditation bodies, relevant parties that have objectives similar to, and compatible with IHAF can be an Associate Member of IHAF, these parties could consist of Associations of Laboratories and Inspection Entities, Sharia and Regulatory Authorities, Consumer Associations, Trade Organizations and Standardization Bodies, National coordinating bodies that handles the management of accreditation activities in some countries. A regional cooperation body in the accreditation field that consists of accreditation bodies representing at least four States with the condition that one of its members holds recognition from IHAF.

6. HALAL REGULATIONS ACROSS THE GLOBE

All the major importer countries for Halal products have their own regulations for importing Halal products.

6.1 **Malaysia Halal Regulations**: Foreign beef, lamb, and poultry plants and dairy manufacturers intending to export to Malaysia must be accredited halal by JAKIM. For any foreign country that wants to export its Halal product to Malaysia must ensure that their products are in compliance with halal requirements stipulated in the Malaysian standard and storage of halal food must be verified through site inspection, as deemed necessary by JAKIM or the particular country certifying body that is entrusted by the Malaysian government to carry out specified work according to the prescribed requirements.

6.2 **GCC Countries Halal Regulations:** The GCC nations, including KSA, the UAE, and Qatar, generally have their own separate, additional, and distinct Halal compliance requirements. For any country that wants to export its Halal product to Saudi Arabia requires Halal certification bodies to be accredited by an SFDA recognized accreditation body to be registered with SFDA.

6.3 **Singapore Halal Regulations:** If a producer wants to export to Singapore and target the Muslim community, the process would entail the following steps: As with other exporters, he must make sure his products meet Agri-Food and Veterinary Authority of Singapore (AVA) import requirements and procedures The exporter must make sure his products are certified halal by MUIS approved halal agencies in the particular country.As the products are intended for the Muslim community in Singapore, MUIS would conduct surveillance checks periodically.

6.4 **Indonesia Halal Regulation:** The Halal Products Certification Agency (BPJPH) under the *Ministry of Religious Affairs* issues Halal Certificates. Foreign companies looking to export their products to Indonesia must first be Halal-certified by a certification body from their own country and that certification body must be registered with the Product Halal Assurance Organizing Agency (BPJPH). If the export company complies with the requirements, the religion of its management team is irrelevant.

6.5 **Halal Regulation in the United States of America:** In the U.S.A the Department of Agriculture (USDA) oversees federally regulated plants and also inspects exporters to ensure that they meet the importing country requirements.

6.6 **Halal certification in the Philippines**

There is national legislation which mandates the government to regulate halal certification of goods in the Philippines as well as the promotion of halal-certified goods for export, which is known as the Philippine Halal Export Development and Promotion Program Act of 2016 (Republic Act 10817). The law took into effect on July 26, 2017 after its implementing rules and regulations was approved.

The law established the Halal Export Development and Promotion Board, an inter-agency body led by the Department of Trade and Industry along with the National Commission on Muslim Filipinos, the Departments of Agriculture, Department of Health, Department of Foreign Affairs, Department of Tourism, Department of Science and Technology, the Bangko Sentral ng

Pilipinas (the country's central bank), and the Mindanao Development Authority, along with two Muslim Filipino professionals to facilitate its implementation.

The DTI's Philippine Accreditation Bureau (PAB) is the sole agency which deals with the accreditation of halal-certification bodies, inspection bodies and testing and calibration laboratories.[3] The PAB is the representative organization for the Philippines in the International Halal Accreditation Forum since 2017.[6] The Department of Science and Technology has set up a network of one-stop laboratories dubbed as OneLab which also conduct halal testing.

7. HALAL STANDARDS ACROSS THE GLOBE

7.1 All the major importer countries for Halal products have their own regulations for importing Halal products. The most popular and well – recognized halal standards globally are:

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a) Malaysian Standard by JAKIM
b) Halal Standard of Singapore by the Islamic Religious Council of Singapore (MUIS)
c) Halal standard of Indonesia by the Indonesian Ulema Council (MUI)
d) Halal Standard by the Standards and Metrology Institute for Islamic countries (SMIIC) with the participation of Organizations of the Islamic Cooperation (OIC) member countries.

7.2 Countries across the globe including Indonesia, Malaysia, Thailand, Philippines, UAE, Pakistan and others have their own Halal standards; however, so far there has been no global halal standards.

7.3 Amongst all standards SMIIC is the only initiative that ensures the participation and contribution of multiple OIC member states and the International Islamic Fiqh Academy of the Organization of Islamic Cooperation (IIFA) with the aim of establishing a harmonized halal standard accepted globally. The rest of the countries on different continents like Europe and America use these existing standards as references for Halal certification which is done by the Halal Certification Bodies (HCBs) accredited by one or more than one internationally accrediting body for halal standards.

7.4 As each country claims its own standards. The result of a product may already have a Halal certificate in the country but in the country of destination export it can be declared not kosher. This is because there is no global Halal standard that regulates it.

7.5 Brief details of Halal Standards for various countries is provided as below:

Malaysian Halal Standard: Malaysian halal standards are governed by the Department of Islamic Development Malaysia (JAKIM). The Malaysian Standard entitled ‘Halal Food: Production, Preparation, Handling and Storage – General Guide (MS 1500:2009) was developed under the Malaysian Standard Development System, under the wing of Department of Standardization Malaysia (DSM), Ministry of Science, Technology and Innovation. This standard contains practical

guidelines for the food industry on the preparation and handling of halal food. Currently, JAKIM is the only authorized entity allowed to issue halal certification for the domestic food industry. The Malaysian standard defines all the critical terms relevant to halal matters, e.g., halal, haram, najs, halal slaughtering, the halal competent authority, premise, processing area etc. The general requirements of the standard are outlined under eight main aspects of halal compliance.

GSO Standard: The GCC region which covers the countries Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, and the United Arab Emirates is one of the largest halal food markets, importing US$ 33.8 billion of halal food in 2019. The primary halal standards setting body in the GCC is the GCC Standardization Organization (GSO), and these halal standards are adopted by all of the relevant standards setting bodies in the GCC countries.

Singapore Halal Standard: In Singapore, Muslim matters including halal food, fall under the purview of the Majelis Ugama Islam (MUIS). According to MUIS, halal certification is NOT compulsory in Singapore but rather voluntary for all businesses. Thus, in general, businesses apply for a halal certificate if they intend to target Muslim consumers.

In Singapore, the halal certifying body (Majelis Ugama Islam/MUIS) serves the country's minority Muslim population. The MUIS Halal services started in 1973, and MUIS set up its Halal Certification Standard Unit to regulate the halal sector. To continuously enhance the credibility of MUIS Halal certification, MUIS implemented several initiatives including the MUIS e-Halal System (2007), Halal Quality Management System (HalMQ; 2008), and MUIS Halal audits / inspections (2009 – 2012).

Indonesia Standard: The Halal standards and certification are governed and managed by the Assessment Institute for Food, Drugs and Cosmetics (LPPOM) of the Indonesian Council of Ulama (MUI) (Majelis Ulama Indonesia). The Halal Standard by the Indonesian Council of Ulama (MUI) is called HAS-23000 which is applicable for business owners, manufacturers as well as producers. The standard consists of two parts where the first part (HAS 23000-1) is for the criteria and general guidelines of Halal Assurance System (HAS) and the second part (HAS 23000-2) is for policies and procedures of Halal certification. The role of the Indonesia Ulema Council or Majelis Ulama Indonesia (MUI) is issuing fatwas (legal decisions) in the certification process.

MUI Standard is flexible for the company that has no Muslim personnel to appoint as IHU Coordinator. Such companies can appoint one staff who knows Islamic Law based on LPPOM guidance

7.6 **Halal Standards in European Countries** are similar to other non-Muslim majority countries European Union don't have any halal standard and mostly depend on the standards developed by the Muslim majority countries. The European Institute of Halal Certification (Germany) and Halal Certification Service (Switzerland) is the Halal institution in Europe.

The Halal Certification Europe (HCE) is an independent non-profit Organisation. It was established to formalise the investigation and Halal Certification of food, Cosmetics and pharmaceutical products. HCE has a Halal Certification Scheme which comprises of two different schemes: 1-year scheme for Non-GSO & 3 year GSO Scheme

Scheme Type	GSO SCHEME	NON-GSO SCHEME
Countries	UAE, Saudi Arabia, Kuwait, Qatar, Bahrain, Oman and Yemen	Malaysia, Indonesia, Singapore, Europe, America, Africa etc. (countries other than Gulf Countries)
Certification Process	Application Certification Agreement Application review Raw material vetting Stage one Audit/ Document Review Stage two On-site audit Lab test where necessary Certification Decision Committee Final Stage – Issue Halal certificate and HCE Halal Logo Surveillance audit in year 1 and year 2	Application Raw material vetting / Document review On-site audit Issue Halal certificate and Halal logo
Certification Period	Three-year Certification duration (Subject to annual validation)	One year certification duration
Renewal	Renewal in the third year	Renewal after one year

HCE is accredited by SFDA, GAC, JAKIM, MUI, MUIS and World Halal Food Council and Halal certification (Switzerland) by MUI (Indonesia).

7.7 **Halal Standards in the United States of America**: The non-Muslim majority country follows standards developed by Muslim majority countries such as Indonesia, Singapore, Malaysia, GCC countries and SMIIC as the reference standards. The certification in these countries is done by Halal Certification Bodies accredited by one or more than one internationally accrediting body for halal standards.

The halal certification market in the US is completely free of charge, except for New Jersey, Minnesota, Illinois, California, Michigan, Texas and Virginia states with halal food laws. In these states, slaughter according to Islamic procedures is labelled as halal under conditions approved by state governments. There are also implementation differences between states. For example, while there is a halal law (AB-1828 Halal food) in the State of California, kosher and halal terms are not included in the New Jersey model. Instead, the state monitors the suitability of products based on the definitions developed by the retailers themselves.

The certification process in the U.S.A is majorly dominated by three major HCBs all of them issuing certificates according to different Halal standards. The three certification bodies are:

i. Islamic Society of Washington Area
ii. Islamic Food and Nutrition Council of America (IFANCA)
iii. Islamic Services of America

All of the above certification bodies grant certification according to different Halal Standards for e.g. – ISWA according to GSO 2055-2:2015, ISA according to MUIS-HC-S001 & S002 & HAS 23000 (MUI).

7.8 **Halal Standards in United Kingdom**:

Similar to other non-Muslim Countries U.K also follows the standard opted by major muslims countries as the reference standards. A 2012 UK House of Commons Standard Note revealed that there was no legislative requirement in the UK for products to be labelled as halal. This meant that no effort had been made to collect data on halal products, the extent to which halal products are sold without being labelled as halal, and the quality of products labelled as halal.

The absence of UK legislative obligation required an alternative robust means to assure halal integrity and quality. All HCBs must comply with UK laws for food production as well as Islamic dietary compliance laws. The Food Standards Agency (FSA), an independent government agency, works with local authority enforcement officers to make sure food law is applied throughout the UK's food chain, including halal products. It has a Muslim Organisations Working Group that advices it on halal practices and policies. Licencing of Muslim slaughterers is done by the FSA and not by independent halal authentication and certification bodies.

7.9 **Halal Standards in Russia**: Halal certification according to the Law of Russian Federation is the voluntary certification which is done to confirm that products and services comply with the requirements of the Council of Muftis of Russia. In Russia there is no mandatory application of any standard in the field of Halal, the standard named "Halal – PPT – SMR" which was prepared by the Council of Muftis of Russia is the only standard in the country.

8. COMPARISON & HARMONIZATION BETWEEN STANDARDS

8.1 Comparative analysis of five major Halal Standards i.e. (HAS, MUIS, MS, SMIIC & GSO) HAS: Indonesian Standards, MUIS: Singapore Standards, MS: Malaysian Standards, SMIIC, GSO: GCC regional Standards

8.2 On the basis of material:

S. No.	Comparison Clause	Similarities	Differences	Inference
1	Origin of material	Product must not be produced from material that are haram (impure), toxic, intoxicating or harmful	-	-
2	Halal materials	The halal-ness (purity) of plants, halal animals (e.g. aquatic animals) and animals slaughtered according to Islamic law.	-	HAS and UAE contain the fewest halal materials. SMIIC contains the most complete halal materials.
3	Haram Material	The haram-ness (impurity) of materials from pork, khamr (by product of yeast), blood, carrion and animals that are not slaughtered according to Islamic law.	-	HAS and MUIS contain the fewest haram materials. UAE and MS contain the most complete haram materials.
4	Alcohol	-	SMIIC prohibit products containing alcohol, while other standards prohibit alcohol derived from khamr	-
5	Istihalah of khamr (Conversion of Yeast from one form to another)	-	-	Only HAS stipulated the istihalah of khamr is halal.
6	By-products of the khamr (Yeast) industry	-	SMIIC prohibit yeast from the khamr industry, while HAS23000 allow it.	UAE, MS and MUIS do not stipulate this clause.

7	Microbial Material	SMIIC, UAE, MS and HAS allows microbes except those that are toxic and harmful	SMIIC, UAE, MS require halal culture medium, while HAS allows haram culture medium with conditions.	MUIS does not stipulate this clause.
8	GMO Material	-	HAS prohibit the origin of GMO genes from pigs or humans. SMIIC, UAE, MS prohibit the origin of genes from all haram materials.	MUIS does not stipulate this clause.
9	Packaging Material	Not be made from haram and hazardous materials	-	HAS and MUIS do not stipulate this clause.
10	Adequacy of material documents	UAE and HAS stipulate that there must be halal material documents.	-	SMIIC, MS, MUIS do not stipulate this clause.
11	Material Change Procedure	-	-	Only HAS stipulate that material change must be approved by HCB before use.
12	Incoming material Inspection procedure	-	-	Only HAS stipulate that every incoming or purchased material must be checked to ensure the halal conformity.

8.3 Comparative analysis of the differences among the standards against different certification requirements:

	Requirements under different component of Halal certification	**Considered as a Mandatory requirement**	**Not considered as a Mandatory requirement**
Business Profile			
	Each Subsidiary or branch would require separate certification	JAKIM, MUIS	MUI, SMIIC, GSO
Premises			
	Muslim Workers	JAKIM, MUIS,	MUI, SMIIC, GSO
	GMP and GHP	JAKIM, MUI, SMIIC, GSO	MUIS
	Special factory attire and clean clothing	JAKIM	MUI, SMIIC, MUIS, GSO
Workers			
	Staff Training on roles and responsibilities	JAKIM, MUIS, SMIIC, GSO	MUI
	Good Personal Hygiene	JAKIM, SMIIC	MUIS, MUI, GSO
	Smoking, drinking, and food stores are prohibited in the production area	JAKIM	MUIS, MUI, SMIIC, GSO
	Only assigned area of staffs	JAKIM	MUIS, MUI, SMIIC, GSO
	Good health of staffs	JAKIM	MUIS, MUI, SMIIC, GSO
Equipment			
	Safekeeping of tools and equipment	JAKIM, MUIS, GSO	MUI, SMIIC
Raw materials			
	Avoid high-risk ingredients	JAKIM, MUIS, MUI, GSO	SMIIC
	Random testing of raw materials by an approved laboratory	JAKIM, MUIS, MUI, GSO	SMIIC
Packaging and Labelling			
	Disclose all list of ingredients	JAKIM, MUIS, SMIIC, GSO	MUI
	Clear, Prominent and long-lasting printing	JAKIM, MUIS, MUI, GSO	SMIIC
	Mention name of manufacturer, and country of origin as a trademark	JAKIM, MUIS	SMIIC, MUI, GSO

	A complete prohibition on the use of the word 'halal' with the product name	JAKIM	MUIS, MUI, SMIIC, GSO
	No use of misleading and non shariah compliant signs, symbols, design, picture, or logo.	JAKIM	MUIS, MUI, SMIIC, GSO
Management and Documentation			
	Halal file	JAKIM, MUIS, MUI	SMIIC
	An internal halal committee with at least one Muslim Halal executive	JAKIM, GSO	MUIS, MUI, SMIIC
	Inspection to all certified store including the suppliers of raw material	JAKIM, MUIS, GSO	MUI, SMIIC
	Consistency in the listed items as mentioned in the application form	JAKIM, MUIS, GSO	MUI, SMIIC

9. CERTIFICATION BODIES ACROSS GLOBE FOR HALAL

Currently there are 100+ Halal certification bodies across the globe that certify products according to various Halal standards. As there is no single global Halal standard these HCBs have accreditation or recognition from Halal regulatory authorities of different countries which make it suitable for businesses certified by these HCBs to transport their products into importing countries easily. A detail list of HCBs across the globe and their accreditation or recognition can be found from the table below:

S. No.	Name of Certification Body	Country	Accreditation/Recognition
1	American Halal Foundation	U. S. A	World Halal Food Council MUI JAKIM MUIS Association of American Halal Certifiers (AAHC)
2	Islamic Society of Washington Area	U. S. A	World Halal Council GCC Accreditation Center ESMA EIAC SFDA
3	Islamic Services of America	U. S. A	JAKIM MUIS MUI World Halal Food council
4	Halal Monitoring Committee	U. K	GCC Accreditation Center

			ESMA
5	Halal Food Authority	U. K	JAKIM MUI MUIS Korea Food and Drug Administration
6	Halal Certification Services	Europe (Switzerland, France, Germany, Spain/Portugal, Greece)	World Halal Food Council MUI JAKIM MUIS The Central Islamic Committee of Thailand Gulf Cooperation Council
7	International Halal Certification Center	Russia	GCC Accreditation Center
8	Instituto Halal	Italy	JAKIM IMANOR – Morocco EIAC MUIS MUI SFDA CICOT – Thailand MFDS – South Korea
9	Japan Halal Association	Japan	GCC Accreditation Center JAKIM
10.	Halal India Private Limited	India	JAKIM MUIS
11.	Jamiat Ulama-E-Maharashtra	India	JAKIM MUI
12.	Jamiat Ulama-i-Hind Halal Trust	India	JAKIM MUI

10. BILATERAL AGREEMENTS

10.1 The agreements, signed with trade hubs and jurisdictions around the world, will support efforts to establish a global halal trade network based on common standards, allowing regional and international businesses to capitalize on the growing global interest in halal products. The bilateral agreements formed by various countries for the export and import of halal products are as follows:

10.2 Global halal trade network between Dubai and Malaysia -Dubai and Malaysia have signed a number of memorandums of understanding and agreements to establish a global halal trade network, with the goal of increasing investment opportunities and strengthening multilateral trade among halal-based industries.

10.3 These hub-to-hub agreements lay a strong foundation for the growth of the halal sector, which will in turn promote cross-border halal trade and create significant investment opportunities for major global, regional, and local corporations.

10.4 MoU between Australia Trade and Investment Commission (Austrade) and Malaysia's Halal Development Corporation (HDC)-The MoU signed in February will pave the way for Australian exporters to Malaysia's rapidly growing halal food sector. These agreement will help to develop increased information exchanges and deepen commercial collaborations, leading to long-term, mutually beneficial outcomes for businesses in both Australia and Malaysia. The MoU combines Australia's high-quality, halal-compliant produce with Malaysia's global leadership on halal matters to help strengthen two-way trade between the countries.

10.5 Australia has a well-established regulatory framework for halal certification with seven Malaysian approved certifying bodies effective 1st December 2020. Through this agreement, the Australian government and food sector will seek to tap a global and halal goods and services market.

10.6Korea signs MOU with UAE for Halal - A MoU was signed between Korea and UAE on 24th March 2015 for the development of Korea's halal industry with the aim of doubling the current Halal food exports valued at US $ 680m to US $ 1,23 bn. Under the agreement, Korean producers of Halal food will be able to obtain certification from the UAE authorities more easily, thereby smoothening the import process.

10.7 Brunei Halal Trade Development MOU Signed with Taiwan-Brunei has signed an *MOU on Shariah Compliance Products Development and Trade on 15th December 2020* with Taiwan with a particular focus on halal export development, promotional programmes and minimising technical trade barriers to trade.

11. CHALLENGES WITH HALAL IN INDIA

11.1 The rapid growth of Halal Industry has not only led to the halal technologies and Innovations but also the halal related laws and regulations which is still not harmonised globally.

11.2 In India certification bodies who are certifying the Halal trade being impanelled in country of export but halal monitoring is still subject of discussion in absence of Authority, regulation and Monitoring of products under Halal certification.

11.3 Harmonised standard and awareness for the halal standard Indian exporters only fulfil the criteria required to fulfil the requirement of the Importing country in staggered way

11.4 The uncertain scope of authority and jurisdictions in India to critically analyse the role of Govt Authorities in the issuance of Halal certificate and their monitoring, controlling and enforcement activities with the aim to suggest appropriate reformation to the current governance practices.

11.5 Due to changed Consumer Perception, the Halal market not only attracts Muslim population but also non-Muslim consumers. However, the perception towards Halal product and purchase intention is not quite the same, as Muslim consumers usually consider Halal food product mainly because of religious issue, while the increasing demand from non-Muslim consumers in globe is influenced by the growing concern of health-conscious community that request for well-prepared product in terms of slaughtering process, cleanliness and other reasons. Furthermore, culture assimilation in a multiracial country like India has shaped the purchase intention of non-Muslim consumers towards Halal food products.

12. WAY FORWARD FOR HALAL CERTIFICATION IN INDIA

***Recommendations*:**

12.1 **Role Clarity of Institutions Involved**: Defining the overarching structure for implementation of the i-CAS Halal in India, and the role clarity of the institutions involved especially relating to Scheme Ownership, Standards formulation, and Implementation of scheme, and to avoid any potential conflicts of interest.

12.2 **Aligning the i-CAS Halal as per International Requirements / Practices**: Establishing & aligning the scheme in accordance with international standards (ISO) so that accredited certification under the scheme is harmonized with the international requirements and practices, and that the i-CAS Halal can be benchmarked with other reputed global schemes. This may also require developing a new logo/mark for the i-CAS Halal.

12.3 **Conformity Assessment through Accredited Third-Party Bodies**: Prescribing the NABCB accredited third-party conformity assessment bodies under the complete oversight of QCI will facilitate robustness of assessment of the entities certified under the i-CAS Halal, as well as leveraging the already available internationally recognized accreditation infrastructure within the country. This will also facilitate international equivalence and acceptance of accredited certifications under the i-CAS Halal.

12.4 **Monitoring of Certified Organizations under i-CAS Halal**: Credibility of the i-CAS Halal should be assured through a variety of mechanisms, which would include periodic surveillance & reassessment of certified entities, strong Market Surveillance, and Integrated Information System & Data analytics.

12.5 **Awareness Campaigns**: Creating consumer awareness and recognition of i-CAS Halal certified products for influencing consumer purchasing behaviours. Active awareness campaigns to educate both consumers and producers about the i-CAS Halal Mark and its benefits.

12.6 **Target Export Markets**: The Government should prioritize specific products / sectors with maximum export volumes contributing to the Indian Economy, specifically looking into the international trade of Halal certified products and explore the potential markets for Indian manufacturers. Also, suggesting partner countries with whom India can maximum international trade for such products.

12.7 **Bilateral Trade Agreements**: Given India's good relations with Gulf countries and other Halal importing nations, MOUs and bilateral / multilateral trade agreements with these economies can be negotiated to facilitate export of Halal products from India certified under i-CAS Halal.

13. CONCLUSION

13.1 The global demand for Halal food products has increased, expanding the Halal food market. The biggest challenge, however, remains the lack of consistent global halal standards, which makes it difficult for organisations looking to export halal foods to different countries.

13.2 Additionally, there are numerous government-affiliated organisations producing standards, along with private firms and HCBs, national and regional organisations, and international organisations like the OIC initiative or the SMIIC (Standards and Metrology Institute for the Islamic Countries). With so many standards in use, it can be difficult to determine which will give exporters access to the market, and in many instances, multiple certificates are required.

13.3 As a result, a standardised halal certification standard is essential for globalising halal products as well as consumer convenience, which will strengthen the halal industry.

13.4 In addition, Halal food products are one of the main components of the Halal industry throughout the globe. It is growing more and more every year and contributes largely to economic growth. However, there are issues and challenges faced by the food industry operators in order to implement Halal concept in their businesses. The issues and challenges in Halal Trade In India are Lack of authoritative control , regulation , regular Monitoring , enforcement , awareness of the Industries , Changed consumer perception, cost, market

competitiveness, and supply chain management and By outlining these problems, it is hoped that this Guideline will give thought to discuss suggestions and identify solutions for the problems that have been raised so that food business operators in India have solid platform to implement the Halal concept in their businesses

14. INDIA CONFORMITY ASSESSMENT SCHEME (i-CAS) - HALAL

Part A: Terms & Definitions

ISO Online Browsing Platform: The International Organization for Standardization (ISO) maintains database of terms & definitions for use in standardization and which may be referred at the following web address: https://www.iso.org/obp/ui

In addition to above, the terms and definitions as given in ISO/IEC 17000 standard, and as described below shall be applicable for the purposes of i-CAS for Halal Products.

(*Note: In case of multiple definitions, the definition as given in the latest version of ISO Standard shall prevail*)

A1.1 Islamic Shariah

The revelation on Prophet Muhammad (*Allah*) in relation to the beliefs, sentiments and acts of the ordered, whether conclusive or presumptive.

A1.2 Halal

The term Halal is used for products, services or systems which are considered lawful (*Tayeib*) or permissible under the *Islamic Shariah law* that do not consist of or contain any part that is considered as unlawful (haram) according to Islamic law, and/or the actions permitted by *Shariah* law without punishment imposed on the doer.

A1.3 Haram

The term Haram refers to anything that is prohibited or forbidden in the Islamic law.

A1.4 Halal Product

Any product which is allowed to be consumed or used according to Islamic Rules by eating, drinking, injecting, inhaling, applying or wearing should comply with the requirements mentioned in this standard.

Note: Products certified for Halal by the Certification Bodies (as defined in A1.12), which are duly accredited by the official National Accreditation Body (as defined in A1.13), and approved as Notified Bodies by the Competent Authority of India (as defined in A1.14) shall only be allowed to be placed in market in India.

A1.5 Halal Food

Halal food means food and drink and/or their ingredients permitted under the *Shariah* law and that fulfil the following conditions:

a) does not contain any parts or products of animals that are non-halal by *Shariah* law or any parts or products of animals which are not slaughtered according to *Shariah* law;
b) does not contain najs according to Shariah law;
c) safe for consumption, non-poisonous, non-intoxicating or non-hazardous to health;

d) not prepared, processed or manufactured using equipment contaminated with najs according to Shariah law;
e) does not contain any human parts or its derivatives that are not permitted by Shariah law;
f) during its preparation, processing, handling, packaging, storage and distribution, the food is physically separated from any other food that does not meet the requirements stated in items a), b), c), d) or e) or any other things that have been decreed as *najs* by *Shariah* law.

A1.6 Najis

A term in Arabic language that means impurity or impure, dirty, polluted, contaminated, dirt, or filth. *Najis* according to *Shariah* law are:

a) dogs and pigs and their descendants;
b) halal food that is contaminated with things that are *non-halal;*
c) halal food that comes into direct contact with things that are *non-halal;*
d) any liquid and objects discharged from the orifices of human beings or animals such as urine, blood, vomit, pus, placenta and excrement, sperm and ova of pigs and dogs except sperm and ova of other animals;
NOTE. Milk, sperm and ova of human and animals, except dog and pig, are not najs.
e) carrion or *ha/al* animals that are not slaughtered according to *Shariah* law; and
f) *khamal* and food or drink which contain or mixed with *khamar.*

There are three types of *Najs:*

i) *mughallazah* which is considered as severe *najs* which are dogs and pigs *(khinzirj* including any liquid and objects discharged from their orifices, descendants and derivatives;
ii) *mukhaffafah* which is considered as light *najs.* The only *najs* in this category is urine from a baby boy at the age of two years and below who has not consumed any other food except his mother's milk; and
iii) *mutawassitah* which is considered as medium *najs* which does not fall under severe or light *najs* such as vomit, pus, blood, *khamar*, carrion, liquid and objects discharged from the orifices, etc.

A1.7 Slaughtering (*Tazkeya*)

According to *Shariah* law the slaughter act is that severs the trachea *(halqum),* oesophagus *(mari)* and both the carotid arteries and jugular veins *(wadajain)* to hasten the bleeding to drain blood and the death of animal.

A1.8 Halal Certification Scheme

Certification system related to specified products, to which the same specified requirements, specific rules and procedures for Halal apply.

Note: General guidance for the development of schemes is provided in ISO/IEC 17067 standard. The criteria for evaluation of conformity assessment schemes by accreditation bodies is provided in the mandatory document (IAF MD 25) published by the International Accreditation Forum (IAF), the Rules Document on the criteria for evaluating the Halal

Schemes (IHAF/RD 04) published by the International Halal Accreditation Forum (IHAF), or in similar documents published by the official National Accreditation Bodies.

A1.9 Halal Certification Scheme Owner

An organization responsible for developing and maintaining a specific certification scheme for Halal products, processes and/or services

Note: The scheme owner can be the certification body itself, a governmental authority, a trade association, a group of certification bodies or others.

A1.10 Halal Certificate

A Certificate of Conformity that confirms that the product, process or service meets the Halal standards / regulations and the Halal requirements in the *Islamic Shariah* law.

A1.11 Scope of Halal Certification

In the Halal certificate issued, the identification of:

a) the product(s), process(es) or service(s) for which the certification is granted,
b) the applicable certification scheme, and
c) the standard(s), regulation(s) and other normative document(s), including their date of publication, to which it is judged that the product(s), process(es) or service(s) comply

A1.12 Halal Certification Body

A third-party Conformity Assessment Body (CAB) that complies with the requirements of i-CAS, operates Halal Certification Scheme(s) as per ISO/IEC 17067, is accredited as per ISO/IEC 17065 standard by the national accreditation body signatory to the IAF MLA and/or IHAF MRA, performs activities for Halal Certification as per the doctrines of the *Islamic Shariah* law, and issues Halal certificates under such accreditation recognized by the Competent Authority of India.

A1.13 Accreditation Body for Halal Certification Bodies:

The official National Accreditation Body of India, the National Accreditation Board for Certification Bodies (NABCB), a constituent Board of the Quality Council of India (QCI), which is authorized by the Competent Authority of India to provide accreditation to the Halal Certification Bodies. There shall be only one single official National Accreditation Body, designated the Government, in India, as well as for other economies / regions (*see note below*) for the purpose of recognition by the Competent Authority of India.

Note: The Competent Authority may also prescribe rules and procedures to recognize on mutual reciprocal basis through G2G bi- or multi-lateral trade agreements, the official National Accreditation Body of other economies / regions, which are signatories to the IAF MLA and/or IHAF MRA, for imports of Halal Products in India. The Competent Authority, in such case, may also decide to carry out its own evaluation (and periodic re-evaluations) before recognizing the official National Accreditation Body of another economy / region on

mutual reciprocal basis. The recognition granted shall not be valid longer than 5 years, with a clause to terminate the recognition during the period by giving a 3-months' notice.

A1.14 Competent Authority of India

The Competent Authority is the ministry / department of the Government of India, or its designated sub-ordinate body, which is entrusted to establish the i-CAS for Halal Products, to prescribe the appropriate standards and/or technical regulations for Halal, to authorize the official National Accreditation Body(ies) for providing accreditation, to approve and notify the accredited Halal Certification Bodies as 'Notified Bodies', to enter into bi- and/or multi-lateral trade agreements for Halal products, to monitor the certified facilities, products & services for Halal through Market Surveillance or Surveys, to take legal/punitive actions for any misrepresentation and/or malpractices, and to carry out any other work related to Halal.

The Government of India has authorized the Department of Commerce, Ministry of Commerce & Industry as the Competent Authority of India, and has entrusted it with carrying out work as specified above.

A1.15 Notified Body for Halal Certification

The Notified Body is the Halal Certification Body (*as defined in A1.12*), which is duly accredited by the official National Accreditation Body (*as defined in A1.13*) and approved as Notified Body by the Competent Authority of India (*as defined in A1.14*).

A1.16 Halal Certification Mark

The package of each product, and where feasible the product itself, produced by the specific certified facilities, including the associated documents or brochures, shall bear the Certification Mark of the accredited Halal Certification Body (Notified Body) along with the Accreditation Mark as prescribed the official National Accreditation Body before being placed in market in India, to assure that the Halal product conforms to the requirements of i-CAS.

A1.17 Halal Certification Contract

An agreement signed between the Halal certification body and the applicant organization, so that the applicant is granted Halal certification for specific products, and the right to use Halal Mark for the product or service.

Part B: Requirements for Halal Products

B1 Scope

This standard specifies the requirements for Halal Products that shall be followed by the organization (facility and/or business operator) in their production, supply and storage, including their packaging, labelling, transportation, distribution and for providing services, while operating at any stage in the entire supply chain.

B2 Normative References

ISO 9001:2015 Quality Management Systems - Requirements

B3 General Requirements

B3.1 All products, their derivatives, products, parts and extracts shall be subject to the provisions of Islamic Rules in terms of allowance or prohibition, as per *Annex B-1*.

B3.2 The procedures derived from Islamic Rules shall be adhered to in all stages of supply chain for Halal products, including receipt, preparation, packaging, labelling, transportation, distribution, storage, display and services.

B3.3 All additives and raw materials used for the production of Halal products should be free of any non-Halal component; this should be supported by legalized official documents explaining its components including packaging materials.

B3.4 All Halal products should not contain any toxic substances and hazardous pollutants which are considered harmful to health.

B3.5 All Halal products should be devoid from Najasah (impurity) contamination that is forbidden by Islamic rules.

B3.6 All non-Halal products should be completely separated from the Halal products throughout the supply chain in order to ensure their differentiation and non-mixing with each other and to prevent its contamination.

B3.7 The official bodies & authorities may take all necessary procedures to verify compliance of products with the special requirements of Halal products, and may take the appropriate procedures in accordance with the other applicable regulations.

B3.8 At the facilities for production of Halal products, general and specific health requirements as prescribed shall be adhered to.

B3.9 Animal slaughtering (Tazkeya) requirements should be strictly followed in accordance with the Islamic Shariah Rules.

B3.10 All devices, tools, production lines and associated materials used for Halal products should be clean, and it shouldn't be made of or contain non- Halal products.

B3.11 When transforming any appliances, tools or production lines that have been used or in touch with non-Halal products, they shall be cleaned according to general cleaning rules to remove traces of non-Halal products completely. Shifting from non-Halal to Halal procedure should not be repeating on an ongoing basis.

B3.12 When cleaning or maintaining machinery or devices that goes in touch with Halal products, there shall be no use of any detergent liquids, greases, oils or fats that contain non-Halal components or materials.

B4 Organization and Management Responsibility

B4.1 The organization shall be a legal entity that can be held legally responsible for its facilities/premises, processes and/or services used for Halal products. A governmental certification body is deemed to be a legal entity on the basis of its governmental status.

B4.2 The organization, and its products, processes and services, shall at times comply with any applicable statutory, regulatory and/or contractual requirements for Halal products, as relevant specifically in the countries of its origin and its final destination.

B4.3 The organization shall have a process to identify, analyse, evaluate, treat, monitor, and document the risks related to Halal control system implemented by it on an ongoing basis. Where any risks are identified, the organization shall document and demonstrate how it eliminates or minimizes such risks. The top management of the organization shall on a continual basis review any residual risk to determine if it is within the level of acceptable risk.

B4.4 The organization shall be responsible for consistently achieving the intended results of implementation of the Halal control system and applicable requirements for certification.

B4.5 The management shall appoint a competent person(s), in general Muslim, or in its place, a qualified person having knowledge in *Islamic Shariah* law, as its Authorized Officer(s), or establish a Committee which consists of at least one Muslim person, who is/are responsible to ensure the effectiveness in implementation of internal Halal control system.

B4.6 The management shall ensure that they are trained on the Halal principles and its application.

B4.7 The management shall ensure that sufficient and appropriate resources (i.e. manpower, machines, materials, finances, facilities and infrastructure) are provided in order to implement the Halal control system.

B4.8 The organization shall be able to demonstrate that it has adequate arrangements (e.g. insurance or reserves) to cover liabilities arising from its operations for Halal products and the geographic areas in which it operates.

B5 Facilities and/or Premises

B5.1 Facilities and/or premises shall be designed and constructed or renovated so as to enable the process flow to control the risk of product contamination and shall be suitable for the intended purpose.

B5.2 The facilities and/or premises shall be designed to facilitate cleaning and proper supervision of hygiene.

B5.3 Layout of facilities and/or premises shall permit proper process flow, proper employee flow, good hygienic and safety practices, including protection against pest infestation and cross contamination between and during operations.

B5.4 Product process flow from receipt of raw materials to the finished products shall prevent cross contamination.

B5.5 Adequate sanitary facilities shall be provided and maintained.

B5.6 Loading and unloading bay shall be appropriately designed to allow effective transfer of perishable products.

B5.7 The facilities and/or premises shall be kept in good repair and condition to prevent pest access and to eliminate potential breeding sites.

B5.8 The facilities and/or premises shall be effectively separated and well insulated from pig farm or its processing activities to prevent cross contamination through personnel and equipment.

B5.9 Slaughtering and processing premises shall be dedicated for halal slaughtering and halal processing only.

B5.10 Processing of carcasses such as deboning, cutting, packing and storing shall be done in the same premises as slaughtering or in approved premises by the competent authority that meets the requirements of this standard.

B5.11 Pets and other animals shall be refrained from entering the facilities and/or premises.

B6 Devices, Machines and Processing Aids

B6.1 Devices, tools, machines and processing aids used for processing Halal food shall be designed and constructed to facilitate cleaning and shall not be made of or contain any materials that are decreed as *Najs* by *Shariah* law and shall be used only for Halal products.

B6.2 Devices, tools, machines and processing aids which were previously used or in contact with *najs al-mughallazah* shall be washed and ritually cleansed as required by *Islamic Shariah* law.

B6.3 In the case of converting *najs al-mughallazah* line or processing line containing *najs al-mughallazah* into halal production line, the line shall be washed and ritually cleansed as

required by *Islamic Shariah* law. This procedure shall be supervised and verified by Authorized Officer or a person of the Committee appointed by the Management. Upon conversion, the line shall be operated for halal products only. Frequent repetition in converting the line to *najs al-mughallazah* line and back to halal line, shall not be permitted.

B7 Hygiene, Sanitation and Safety Practices

B7.1 Hygiene, sanitation and safety practices are prerequisites in the preparation of Halal products. It includes the various aspects of personal hygiene, clothing, devices, tools, machines and processing aids, and the premises for processing, manufacturing and storage of Halal products.

B7.2 Halal product manufacturers shall implement measures to:

a) inspect and sort raw material, ingredients and packaging material before processing;
b) manage waste effectively;
c) store harmful chemical substances appropriately and away from Halal products;
d) prevent contamination of products by foreign matters such as plastic, glass or metal shards from machinery, dust, harmful gas or fumes, and hazardous chemicals; and
e) prevent excessive use of permitted additives in manufacturing and processing, and suitable detection or screening devices should be used where necessary.

B7.3 Halal products shall be processed, packed and distributed under hygienic condition in facilities and/or premises licensed in accordance with Good Hygiene Practices (GHP), Good Manufacturing Practices (GMP) of international bodies such as WHO, Codex Alimentarius etc., and/or the international standards (ISO) for sectoral safety practices such as Food Safety Management Systems as prescribed by the official National Accreditation Body, and/or as specified by the Competent Authority of India.

B8 Processing

B8.1 The main sources of Halal products, especially Halal foods are:

i) Animals - can be divided into two categories:
Land animals - All land animals are Halal as food except the following:
a) animals that are not slaughtered according to Islamic Shariah law;
b) najs al-mughallazah animals i.e. pigs and dogs, and their descendants;
c) animals with long pointed teeth or tusks which are used to kill prey such as tigers, bears, elephants, cats, monkeys, etc.;
d) predator birds such as eagles, owls and etc.;
e) pests and/or poisonous animals such as rats, cockroaches, centipedes, scorpions, snakes, wasps and other similar animals;
f) animals that are forbidden to be killed in Islam such as bees (*al-nahlah*), woodpeckers (*hud-hud*) etc.;
g) creatures that are considered repulsive such as lice, flies, etc.;
h) farmed Halal animals which are intentionally and continually fed with *najs;* and

i) other animals forbidden to be eaten in accordance to Islamic *Shariah* law such as donkeys and mules.

Aquatic animals - those which live in water and cannot survive outside it, such as fish. All aquatic animals are halal except those that are poisonous, intoxicating or hazardous to health. Animals that live both on land and water such as crocodiles, turtles and frogs are not Halal. Aquatic animals which live in *najs* or intentionally and/or continually fed with *najs* are not Halal.

ii) Plants - all types of plants and plant products and their derivatives are Halal except those that are poisonous, intoxicating or hazardous to health.

iii) Mushroom and micro-organisms - all types of mushroom and micro-organisms (i.e. bacteria, algae and fungi) and their by-products and/or derivatives are Halal except those that are poisonous, intoxicating or hazardous to health.

iv) Natural minerals and chemicals - all natural minerals and chemicals are Halal except those that are poisonous, intoxicating or hazardous to health.

v) Drinks - all kinds of water and beverages are Halal as drinks except those that are poisonous, intoxicating or hazardous to health.

vi) Genetically Modified (GM) Foods - Food and drinks containing products and/or by-products of Genetically Modified Organisms (GMOs) or ingredients made by the use of genetic material of animals that are non-Halal by *Islamic Shariah* law are not Halal.

vii) Notwithstanding above, the products from hazardous aquatic animals or plants are Halal when the toxin or poison has been eliminated during processing as permitted by the Islamic *Shariah* law.

B8.2 Slaughtering process shall take into account animal welfare in accordance to the Islamic *Shariah* law. The following requirements shall also be complied with:

a) slaughtering shall be performed only by a practicing Muslim who is mentally sound, *baligh*, fully understands the fundamental rules and conditions related to the slaughter of animals in Islam;
b) the slaughterman shall have certificate for Halal slaughter issued by state/city/local authority;
c) the act of slaughtering shall be done with *niyyah* (intention) in the name of Allah and not for other purposes. The slaughterman is well aware of his action;
d) the animal to be slaughtered has to be an animal that is Halal*;*
e) the animal to be slaughtered shall be alive or deemed to be alive *(hayat al-mustaqirrah)* at the time of slaughter;
f) animals to be slaughtered shall be healthy and have been approved by the state/city/local authority;
g) *tasmiyyah* has to be invoked immediately before slaughtering;

h) the slaughtering is recommended to be performed while facing the *qiblah*;
i) slaughtering lines & tools shall be dedicated for Halal slaughter only;
j) slaughtering knife or blade shall be sharp and free from blood and other impurities;
k) slaughtering shall be done only once. The "sawing action" of the slaughtering is permitted as long as the slaughtering knife or blade is not lifted off the animal during the slaughtering;
l) bones, nails and teeth shall not be used as slaughtering tools;
m) the act of Halal slaughter shall begin with an incision on the neck at some point just below the *glottis* (*Adam's apple*) and after the *glottis* for long necked animals;
n) the slaughter act shall sever the trachea *(halqum)*, oesophagus *(mari)* and both the carotid arteries and jugular veins *(wadajain)* to hasten the bleeding and death of the animal. The bleeding shall be spontaneous and complete; and
o) a trained Muslim inspector shall be appointed and be responsible to check that the animals are properly slaughtered according to the *Islamic Shariah* law.

B8.3 For poultry, scalding shall only be carried out on animals that are deemed dead as a result of Halal slaughter.

B8.4 Stunning is not recommended. However, if stunning is to be carried out the conditions specified in *Annex B-2* shall be complied.

B8.5 Processing, handling, distribution and serving - all processed Halal products/foods shall meet the following requirements:

a) food or its ingredients shall not be processed using any components or products of animals that are non-Halal by *Shariah* law, or of Halal food any components or products of animals that are not slaughtered according to *Shariah* law;
b) food shall not be processed using anything in any quantity that is decreed as *najs* by *Islamic Shariah* law;
c) processed food or its ingredients shall be safe for consumption, non-poisonous, non-intoxicating or non-hazardous to health;
d) food shall be prepared, processed or manufactured using equipment and facilities that are free from contamination with *najs;* and
e) during its preparation, processing, handling, packaging, storage distribution and serving, it shall be physically separated from any other food that does not meet the requirements specified in items a), b), c) and/or d) above, or any other things that are decreed as *najs* by *Islamic Shariah* law.

B9 Packaging / Wrapping Materials, Labelling & Advertising

B9.1 Halal products shall be suitably packed, and the packaging / wrapping materials shall be Halal in nature and free from any non-Halal materials.

B9.2 Packaging / wrapping materials shall not be prepared, processed or manufactured from any raw materials that are decreed as *najs* by *Islamic Shariah* law or by using equipment that is

contaminated with non-Halal materials during preparation, storage or transportation. It shall be physically separated from any other non-Halal materials.

B9.3 Packaging / wrapping materials shall not contain any material that is considered hazardous on human health, and shall not have any toxic effect on the Halal product.

B9.4 Packaging / wrapping materials and/or their design, and the signages, symbols, logos, names and pictures used on the packaging for Halal products, or for advertising the Halal products, shall not be misleading and/or contravening the principles of *Islamic Shariah* law.

B9.5 Packaging / wrapping process shall be carried out in a clean and hygienic manner, and in sound sanitary conditions.

B9.6 Labelling materials used in direct contact with the product shall be non-hazardous and Halal.

B9.7 Halal products shall not be named or synonymously named after non-Halal products such as ham, beer, rum and others that might create confusion.

B9.8 Each package / container shall be marked legibly and indelibly or a label shall be attached to it, with at least with the following information:
a) name of the product;
b) nett content expressed in metric system (SI units);
c) name and address of the manufacturer, importer and/or distributor and trademark;
d) list of ingredients;
e) unique number identifying date and/or batch number of manufacture and expiry date;
f) country of origin.

B9.9 For primary meat products, the label or mark on the packaging shall also include the following information:
a) date of slaughter;
b) date of processing.

B9.10 Halal products containing fats, oils, meat derivatives, extracts such as gelatine or rennet, food additives, GM foods shall be declared along with its sources.

B9.10 Advertising shall not contravene with the principles of *Islamic Shariah* law, and shall not display indecent elements which are against *Islamic Shariah* law.

B10 Storage, Handling, Transportation, Display, Sale and Services

B10.1 All Halal products that are stored, transported, displayed, sold and/or served shall be categorised and labelled Halal, and segregated at every stage so as to prevent them from being mixed or contaminated with things that are non-Halal.

B10.2 Halal products based on *naj al-Mughallazah* shall be stored in a dedicated place.

B10.3 The tools, equipment and other accessories used during the storage, handling, transport, display, sale and services of Halal products shall be totally separated from those used for non-Halal products.

B10.3 Suitable vehicles for transport shall be used appropriate as per the type of the Halal product, and shall satisfy hygiene and sanitation conditions.

B11 Management System Requirements

B11.1 General

The organization shall establish and maintain a management system that is capable of achieving the consistent fulfilment of the requirements of i-CAS and the Halal control system in accordance with either Option A or Option B described below.

B11.2 Control of Documents (Option A)

The organization's top management shall document its policy and/or procedure to control the documents for fulfilment of the requirements of i-CAS and the Halal control system, and shall ensure that it is implemented at all levels of the organization.

B11.3 Management Review (Option A)

The organization's top management shall establish procedure to review its management system at planned intervals, in order to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of the requirements of i-CAS and the Halal control system. These reviews shall be conducted at least once a year.

B11.4 Internal audits (Option A)

The organization shall establish procedure for internal audits to verify that it fulfils the requirements of i-CAS and the Halal control system, and that the management system is effectively implemented and maintained. Internal audits shall be performed at least once every 12 months.

B11.5 Complaints (Option A)

The organization shall have a documented process to receive, evaluate and make decisions on complaints related to its operations and its Halal products, processes and/or services. The organization shall record and track complaints, as well as actions undertaken to resolve them.

B11.6 Option B

The organization that has established and maintains a management system, in accordance with the requirements of ISO 9001, and that is capable of supporting and demonstrating the consistent fulfilment of the requirements of this International Standard through an accredited certification under the official National Accreditation Body, fulfils the Management System Requirements as stated in clauses B11.2 to B11.5 above.

B12 Records

B12.1 The organization shall establish procedure to define the controls needed for the identification, storage, protection, retrieval, retention and disposition of its records, and to demonstrate the fulfilment of the requirements of i-CAS and the Halal control system in its internal audits as well as in audits/inspections by external bodies. The organization shall retain records for a period of at least 3 years, and/or in accordance with its contractual and legal obligations, whichever is later.

B12.2 The organization's records shall be internally traceable to the person(s) who performed the specific activities, especially the key activities.

Annex B-1: Classification of Non-Halal Animals

Species	Non-Halal
Animals	The animals that may not be slaughtered according to Islamic Rules, the slaughtered animals of polytheists, irreligious, seculars, atheists, Magis, apostates and other disbelievers other than Christians and Jews, dead animals, suffocated animals, fatally beaten animals (*Mawqouza*), falling animals (*Motaradiah*), butted animals (*Nateehah*), animals eaten by beast of prey and animals on whose slaughtering the name of Allah is not mentioned, the animals slaughtered on idols, the animals slaughtered not in approach of Allah, or the animals contaminated with prohibited animals of harm, if eaten.
	Pigs, domestic donkeys, mules, elephants, monkeys, dogs, foxes, cats and the like.
	Predators such as fanged beasts of prey and the like such as lions, cheetahs, bears, except for hyenas.
	Birds of prey with sharp claws used for attacking and the like such as eagles, falcons, hawks, sparrows, peregrines, kites and owls.
	Rodents, reptiles, pests and the like such as mice, rats, centipedes, serpents, snakes, monitors, lizards, geckos, chameleons, hedgehogs, martins, bats, squirrels, polecats, moles and Coleoptera (except for dabb lizards and jerboas)
	Scorpions and all types of insects, worms and animals prohibited to be killed by Rules and the like such as ants, bees, woodpeckers and hoopoes, except for locusts and unavoidable bee parts falling in honey.
	Odious creatures and the like such as shells, larva and other similar animals.
	Animals fed with unclean items, unless they are confined and fed with permissible feeding according to Islamic Rules for at least three days.
Aquatic	Toxicant or harmful species, unless toxicant or harmful substances are removed during preparation.
Plantation:	Plants, their products and their toxicant, harmful or narcotic derivatives, unless toxicant or harmful substances are removed during preparation.
Beverages:	Intoxicating beverages or those containing alcohols, narcotic, calming, toxicant or harmful substances.
GMF:	All foods produced by genetic modification from a prohibited specie or more than one species, of them one specie is prohibited.
Blood and Blood Derivatives from a Human or Animal Origin:	Blood and all its derivatives are prohibited and all body liquids from a human or animal origin such as vomiting and urine.
Food Additives:	All toxicant, harmful or calming food additives, products and their products and derivatives or derived from non-Halal materials.
Enzymes:	All enzymes derived from non-Halal sources.
Microorganisms:	All microorganisms such as germs, fungi, toxicant and harmful yeast produced on non-Halal environments or using non-Halal ingredients.

Annex B-2: Requirements on the use of Stunning in Slaughter

B-2.1 General Requirements

B-2.1.1 Slaughtering shall be carried out according to the requirements related to the slaughter of animals in Islam.

B-2.1.2 The animal shall be alive or deemed to be alive (*hayat al-mustaqirrah*) at the time of slaughter.

B-2.1.3 Stunning is not recommended, however if stunning has to be carried out, the permitted methods are electrical or pneumatic percussive stunning.

B-2.1.4 The use of stunning equipment shall be under the supervision of a trained Muslim and periodically monitored by state/city/local authority.

B-2.1.5 The stunning shall not kill or cause permanent physical injury to the animal.

B-2.1.6 Stunners which are used to stun the animals under *mughallazah najs* category shall not be used to stun animals for halal slaughter.

B-2.2 Electrical Stunning

B-2.2.1 The electrical stunner shall be of the type allowed by the state/city/local authority in charge of slaughter.

B-2.2.2 The type of stunner used for slaughter of halal animals shall be 'head only stunner' type, where both electrodes are placed on the head region.

B-2.2.3 Electrical stunning of poultry is allowed using "water bath stunner" only.

B-2.2.4 The strength of current used shall be supervised by a trained Muslim and monitored by state/city/local authority.

B-2.3 Pneumatic Percussive Stunner

B-2.3.1 Pneumatic percussive stunning is only suitable for all bovine animals.

B-2.3.2 The air pressure that powers the stunner should not be more than 225 psi and should be kept to the minimum required to stun the animal.

B-2.3.3 The head of the stunner shall be flat or slightly convex.

B-2.3.4 There shall be a protective collar around head of the stunner so that it shouldn't protrude more than 3mm beyond it.

B-2.3.5 The heads of animal to be stunned shall be held still before the stunner can be applied.

B-2.3.6 The centre of the stunner shall be in contact with the animal at a point of intersection of lines drawn from the medial corners of the eyes and the base of the ears.

B-2.3.7 The stunner shall be applied so that the head of the stunner is perpendicular to the frontal bone.

B-2.3.8 The animal shall be stunned once.

Part C: Requirements for Halal Certification Bodies

C1 Scope

This standard specifies the requirements for the consistent operation of the certification bodies and the implementation of certification procedures for Halal certification of the products, processes, services and management systems.

C2 Normative References

C2.1 ISO/IEC 17000: Conformity assessment - Vocabulary and general principles.

C2.2 ISO/IEC 17020: Conformity assessment - General criteria for the operation of various types of bodies performing inspection.

C2.3 ISO/IEC 17021-1: Conformity assessment - Requirements for bodies providing audit and certification of management systems- Part one: Requirements.

C2.4 ISO/IEC 17025**:** General requirements for the competence of testing and calibration laboratories.

C2.5 ISO/IEC 17065: Conformity assessment - Requirements for bodies providing certification of products, processes and services.

C2.6 ISO 19011: Guidelines for auditing management systems.

C2.7 ISO/TS 22003: Food safety management systems - Requirements for bodies providing audit and certification for Food safety management systems.

C3 General Principles

C3.1 The principles given in Clause 4 of ISO/IEC 17021-1:2015 and Annex A of ISO/IEC 17065:2012 are the basis for any specific performance and requirements described in this standard. These principles should be applied as guidance for the decisions that may need to be made in unanticipated situations.

C3.2 The overall aim of Halal certification is to give confidence to all parties that a certification body fulfils specified requirements. The value of certification is the degree of public confidence and trust that is established by an impartial and competent assessment by a third-party.

C3.3 The Halal certification body and its employees must adhere to the requirements of Halal in Islamic Law and deal with the highest degree of responsibility, integrity and neutrality when applying the requirements related to it.

C4 General Requirements

C4.1 *General*

All the requirements given in Clause 4.1 of the ISO/IEC 17065:2012 shall apply.

C4.2 *Legal Responsibility*

All the requirements given in Clause 4.1.1 of ISO/IEC 17065:2012 shall apply. In addition to that; the Halal certification body must ensure that the product, process, or service is properly offered to Muslims and that all relevant procedures are carried out to ensure that the requirements of Halal in Islamic Sharia are implemented in all its activities.

C4.3 *Halal Certification Agreement*

All the requirements given in clause 4.1.2 of ISO/IEC 17065:2012 shall apply. In addition to allowing the periodic and sudden evaluation visits of the Halal certification body and to its customers.

C4.4 *Responsibility for Halal Certification Decisions*

All the requirements given in clause 5.1.3 of ISO/IEC 17021-1:2015 shall apply.

C4.5 *Responsibility for the use of Halal Certificate and Mark*

All the requirements given in clause 4.1.3 of ISO/IEC 17065:2012 shall apply.

C4.6 *Management of Impartiality*

All the requirements given in clause 4.2 of ISO/IEC 17065:2012. The Halal certification body or any part of the same legal entity, shall be impartial in taking decisions without any financial, commercial or other pressures affecting the independence and impartiality of its certification activities or decisions, and shall not offer or provide advice or consultancy in Halal or for any other related quality systems.

C4.7 *Liability and Financing*

All the requirements given in clause 4.3 of ISO/IEC 17065:2012 shall apply.

C5 Operations

C5.1 The Halal certification body shall take all necessary steps to assess compliance with Halal standards and/or regulations as applicable, and other requirements such as sampling, testing and/or inspection in accordance with the Halal Product Certification Scheme.

C5.2 The Halal certification body shall ensure the suitability and competence of bodies and personnel as stated in Annex A of ISO/IEC 17021-1 and Annex C of ISO/TS 22003.

C6 Structural Requirements

C6.1 *Organizational Structure and Top Management*

All the requirements given in clause 5.1 of ISO/IEC 17065:2012 shall apply.

C6.2 *Committee for Safeguarding Impartiality*

All the requirements given in clause 5.2 of ISO/IEC 17065:2012 and the following shall apply:

C6.2.1 The Committee should include at least one Halal expert. The Committee must actively review work performance in accordance with the requirements of Halal in Islamic law; ensure integrity of issuance of Halal certification, and review the overall operations of the Halal certification body.

C6.2.2 The Halal certification body shall on an ongoing basis identify and analyse actual or potential risks that may arise from its activities, its personnel or its relationships in the implementation of the Halal certification requirements as per the Islamic Sharia law, and shall be able to demonstrate how it eliminates or minimizes such risks.

C7 Resource Requirements

C7.1 *Competence of Personnel*

All the requirements given in clause 6.1 of ISO/IEC 17065:2012 shall apply. Additionally, the Halal certification body shall have processes to ensure that personnel have adequate competence relevant to the categories (*Annex C-1*) in which they operate.

C7.2 *Personnel involved in the Halal Certification Procedures*

All the requirements given in clause 6.2 of ISO/IEC 17065:2012 and the following shall apply:

C7.2.1 The Halal certification body shall ensure that the auditors and decision makers for the Halal certification are technically competent and are of high ethics. Technical experts can be recruited for specific technical areas. At least one person in the audit team for Halal certification audits, as well as in decision-making shall be a Muslim.

C7.2.2 The procedures for auditing and issuing the Halal certificates shall be carried out in an effective and harmonized manner, and the Halal certification body shall specify the minimum requirements and criteria for qualifying key managerial and specialized technical personnel. These requirements may include training in the application of Halal standards and/or regulations, quality management systems, product certification and food safety management systems.

C7.2.3 The audit personnel of the halal certification body can be regular and/or on contract basis. The halal certification body shall review and monitor the work of its personnel, be responsible for their work and performance, and maintain all records to demonstrate their engagement, work and monitoring of performance.

C7.2.4 The Halal certification body shall require its personnel involved in the Halal certification to sign a contract or other document in which they commit themselves to:

a) Comply with the rules defined by the Halal certification body, including those related to confidentiality and independence from commercial and other interest(s).

b) Declare any previous or current activities in association with and/or employed in organizations involved in design, process, manufacture, service and/or supply of Halal products, or in granting Halal certificates to an organization where they are intended to be employed or hired.

C7.2.5 Records of the relevant qualifications, trainings, experience and competence of each key managerial and technical personnel involved in the Halal certification process shall be maintained by the Halal certification body.

C7.3 *Personnel for Review of Contracts*

C7.3.1 *Knowledge*

The halal certification body shall ensure that the personnel carrying out contract review shall have the appropriate knowledge and understanding, especially with regards to:

a) Relevant standard(s), regulation(s), and the processes for Halal products and/or services;
b) Quality Management Systems, especially the Food Safety Management Systems e.g. ISO 22000;
c) Product conformity requirements and procedures.

C7.3.2 *Competence*

The Halal certification body shall ensure that the personnel carrying out contract review have demonstrated ability to apply knowledge and skills in the following areas:

a) Classification of applicants in food chain categories and other sectors;
b) Assessment of applicant’s products and/or services, processes and practices;
c) Evaluation of competencies and requirements of Halal certification auditors;
d) Determination of the planning and execution time of the audit and the actual time of implementation of the audit (*Annex C-2*);
e) Halal certification body's policies and procedures related to contract review.

C7.4 *Personnel Responsible for Decision-making on Halal Certification*

C7.4.1 The Halal certification body shall ensure that the personnel who take decisions to grant, refuse, maintain, renew, suspend, restore or withdraw Halal certification, or to expand or reduce the scope of the scope of certification, have the relevant experience and demonstrated competence to understand the applicable standard and/or regulation for Halal products, processes and/or services, the certification scheme requirements and procedures, as required for a given category (*Annex C-1*), and shall be able to evaluate the outcomes of the audit processes, including the recommendations of the audit team. The committee responsible for

decision-making shall have at least 3 members, out of which at least 1 member shall be an expert on Islamic Sharia law and/or Halal certification, and preferably a Muslim. Decisions on Halal certification shall be taken unanimously.

C7.4.2 *Competence*

The Halal certification body shall ensure that the members of the decision-making committee has demonstrated ability to apply knowledge and skills especially in the following areas:

a) Requirements in Standards and/or Regulations for Halal products and services;
b) Requirements in Islamic Sharia related to Halal products, including slaughtering of animals;
c) Current principles and understanding of relevant management systems;
d) Identification and assessment of risks for Halal requirements;
e) Corrections and corrective actions to be taken with regards to Halal matters;
f) Laws/regulations and provisions therein relevant to the Halal product/services;
g) Products, processes, technology and practices involved in manufacture of Halal products and/or in providing Halal services;
h) Evaluating and reviewing the audit report for accuracy and completeness;
i) Evaluating and reviewing effectiveness of corrective actions;
j) The overall certification process;

C7.5 *Technical Auditors*

C7.5.1 The technical auditor(s) of Halal certification body shall have relevant knowledge of Islamic Shariah rules with regard to Halal certification, should have knowledge and understanding of relevant product standard(s), regulation(s) and other technical requirements, and should have received training or have demonstrated competence on certification scheme(s) related to Halal certification.

C7.5.2 The Halal certification body shall ensure that the technical auditors have successfully completed training and/or demonstrate their competence in:

a) Principles relating to management systems, including food safety management systems;
b) Regulations / legislations as applicable and relevant;
c) Standards for relevant Halal products, processes and/or services;
d) Auditor training on ISO 19011;
e) Certification scheme(s) / procedure(s) for Halal certification.

C7.5.3 *Work Experience*

The Halal certification body shall ensure that the technical auditor(s) shall have at least five years of full-time experience in a related field, with at least two years in quality assurance, product safety, conformity assessment or equivalent.

C7.5.4 *Audit Experience*

The Halal certification body shall ensure that within the last two years the technical auditor has performed at least ten certification audits (such as on product/process certification, food safety management systems etc.) under the leadership of a qualified auditor and/or as a qualified auditor as a part of audit team.

C7.5.5 *Competence*

C7.5.5.1 The competencies of technical auditors shall be recorded as per clause 7.4.5.c of ISO 19011:2011 for each category and sector (*Annex C-1*). The Halal certification body shall provide evidence of the successful evaluation of the technical auditors.

C7.5.5.2 The Halal certification body shall ensure that the technical auditors demonstrate ability to apply knowledge and skills in the following areas:

a) Audit principles, procedures and techniques: to enable the auditor to apply them appropriately in different audits and to ensure that audits are conducted in a consistent and systematic manner. A technical auditor shall be able to:

- Apply audit principles, procedures and techniques,
- Plan and organize the work effectively,
- Conduct the audit within the agreed time schedule,
- Prioritize and focus on matters of significance,
- Collect information through effective interviewing, listening, observing and reviewing documents,
- Keep records and data,
- Understand the method and techniques of sampling for auditing,
- Verify the accuracy of collected information,
- Confirm the sufficiency and appropriateness of audit evidence to support audit findings and conclusions,
- Assess those factors that can affect the reliability of the audit findings and conclusions,
- Use work documents to record audit activities,
- Prepare audit reports,
- Maintain the confidentiality and security of information,
- Communicate effectively, either through personal linguistic skills or through an interpreter.

b) Evaluate product/service certificate, and understand management systems and other reference documents;

c) Assess organizational structure, documents, processes and records;

C7.5.5.3 The Halal certification body shall ensure that the technical auditor(s) as part of audit team demonstrate their ability to apply requirements, knowledge and skills in a specific sector and the following areas:

a) Products, processes and practices of the specific sector(s) (*Annex C-1*)
b) Relevant management system requirements, if applicable.
c) Relevant product/service standards.
d) Relevant Halal requirements.

C7.6 *Technical Experts*

C7.6.1 *Education*

The requirements of clause 7.5.1 shall apply.

C7.6.2 *Work Experience*

The Halal certification body shall ensure that the technical experts have at least five years of work experience in their technical area.

C7.6.3 *Competence*

The Halal certification body shall ensure that the technical experts demonstrate their ability to provide expertise in their technical area.

C7.7 *Audit Team*

C7.7.1 The Halal certification body shall ensure that the Halal certification audit team have competencies in the specific sector required by the audit (*Annex C-1*).

C7.7.2 The audit team shall consist of at least two members. One of them shall be technical auditor having knowledge of Halal certification and Islamic Shariah law.

C7.7.3 In the case of external technical auditors and external technical experts, all the requirements given in clause 7.3 of ISO/IEC 17021-1:2015 shall apply.

C7.8 *Outsourcing*

When a Halal certification body decides to outsource the work related to Halal certification to an external body or person (e.g. audit, testing or inspection), a properly documented agreement covering the arrangements including confidentiality and conflict of interest shall be drawn up. All the requirements given in clause 7.5 of ISO/IEC 17021-1:2015 shall apply. Additionally, the Halal certification body shall:

a) Assume full responsibility for the outsourcing of the work and retain its responsibility to approve, grant, withdraw, suspend, terminate the Halal certificate and extend or reduce the scope of the Halal certificate.

b) Ensure that the outsourced body or person is competent and in conformity with the provisions of this standard and any other relevant documents related to testing, inspection or other technical procedures, and shall not be directly or indirectly involved in the design or production of the Halal product / service in a manner that may spoil objectivity and neutrality.

c) have documented procedures to control outsourcing operations and have records to demonstrate its control.

C7.8.5 *Personnel Records*

All the requirements given in clause 6.1.2.2 of ISO/IEC 17065:2012 shall apply.

C8 Information Requirements

All the requirements given in clause 8 of ISO/IEC 17021-1:2015 shall apply. The certificate shall identify in detail the type of activity or product that has been certified, referring to scope (*Annex C-1*).

C8.1 *Publicly Accessible Information*

All the requirements given in clause 8.1 of ISO/IEC 17021-1:2015 shall apply.

C8.2 Halal Certificate

All the requirements given in clause 7.7 of ISO/IEC 17065:2012 shall apply.

C8.3 *Directory of Halal Certified Clients and Products*

All the requirements given in clause 7.8 of ISO/IEC 17065:2012 shall apply.

C8.4 *Reference to Halal Certificate and use of Halal Marks*

All the requirements given in clause 4.1.3 of ISO/IEC 17065:2012 and the following shall apply:

C8.4.1 The Halal certification body must exercise proper control over the Halal certificates and the organizations to which they are issued, to ensure proper use, display and claim of the Halal certificates and certification marks.

C8.4.2 The obligation to use the Halal certificate and the Halal marks permitted by the Halal certification body.

C8.4.3 The wrong references to the requirements in the Halal certification scheme/system or the use of Halal certificate or the scope of certification, or the Halal marks should be handled appropriately, if found in advertisements, magazines etc.

C8.4.4 Holders of Halal certificates who have not been able to renew their certificates are not allowed to claim Halal certification or use the Halal mark.

C8.4.5 The Halal mark shall comply with the relevant standards and/or regulations.

C8.4.6 The Halal mark can be clearly printed on all products certified for Halal so that it can be glued to each box / package.

C8.4.7 Companies may print the Halal mark in colours appropriate for their packaging as long as this does not alter the original specifications of the mark.

C8.4.8 The Halal mark may be placed on the entrance of the approved facility.

C8.4.9 The certificate holder shall not be allowed to reproduce the Halal certificate issued in such a way as to impair its clarity, nor shall he tamper with the original copies thereof or make copies of them, nor shall he be allowed to translate the certificate and / or test reports to other languages without the consent of the Halal certification body.

C8.5 *Confidentiality*

All the requirements given in clause 8.4 of ISO/IEC 17021-1:2015 shall apply.

C8.6 *Information exchange between a Halal Certification Body and its Clients*

All the requirements given in clause 8.5 of ISO/IEC 17021-1:2015 shall apply.

C9 Process Requirements

C9.1 *General Requirements*

C9.1.1 The Halal certification body must specify the exact scope of application for Halal certification in terms of categories of Halal product and/or service e.g. primary production (raw materials or intermediate product), processing of products, production of packaging materials, etc. or categories and areas in accordance with *Annex C-1*. The certification body should not exclude part of the processes, areas, products, or services from the scope of application for the Halal certification when those processes, areas, products or services have an impact on the requirements of Halal in finished products.

C9.1.2 The Halal certification body shall have a process for selecting the audit day, time and category so that the audit team has the opportunity for auditing the organization operating on a representative number of product lines, categories and sectors covered by the scope. If the subject of the certification is Halal product certification, the Halal certification body shall review the results of all laboratory tests regarding the Halal status of the product.

C9.1.3 The audit programme shall include a two-stage initial audit, surveillance audit in the first and the second years, and a recertification audit in the third year prior to expiration of certification. The three years certification cycle begins with the certification or recertification decision. The

determination of the audit programme and any subsequent amendments shall consider the size of the organization of the client, the scope and complexity of its management system, products and processes as well as the demonstrated effectiveness of level of management system and the results of any previous audits. When a halal certification body is taking into account the certificate or other audits already granted to the client, it shall collect sufficient, verifiable information to justify, and record any adjustments to the audit programme. The halal certificate is valid for three years and will be suspended or cancelled at any time when the certified organization is found to contravene the approved halal standard and any related requirements.

C9.1.4 All the requirements given in clauses 9.1.1 to 9.1.3 of ISO/IEC 17021-1:2015 in regards to submission of the application and revision and setting the audit programme shall apply.

C9.1.5 The Halal certification body shall have documented procedures for determining audit timelines. The Halal certification body shall determine the time needed for each client to plan and accomplish a complete and effective audit of the client's product/service and/or Halal management system. The audit time specified by the Halal certification body, and the justification for the identification shall be recorded. While determining the audit time, the Halal certification body should consider *Annex C-2* and reference document (IAF- MD5) and the following aspects:

a) Requirements of the approved Halal standards;
b) Size and complexity of the organization.
c) Technological and regulatory context.
d) Outsourced activities included in the scope of the production or procedures or product safety management system.
e) Results of any prior audit(s).
f) Number of sites or establishments with multiple locations.

C9.1.6 Each site of a multi-site establishment needs to be assessed and certified separately.

C9.1.7 All the requirements given in clauses 9.1.4 to 9.1.6 of ISO/IEC 17021:2015 and clauses 7.2 to 7.4 of ISO/IEC 17065:2012 shall apply.

C9.1.8 The Halal certification body shall provide a written report for each audit. The report shall be based on relevant guidance provided in ISO 19011 where the audit team may identify opportunities for improvement but shall not recommend specific solutions perceived as consultancy. Ownership of the audit report shall be maintained by the Halal certification body. If the product/service is in the food-chain operations, the report shall include references to issues relevant to the Food Safety Management System.

C.9.1.9 All the requirements given in clauses 9.4.8 to 9.4.10 of ISO/IEC 17021-1:2015 and clauses 7.5 and 7.6 of ISO/IEC 17065:2012 shall apply.

C9.2 *Initial Audit and Halal Certification*

C9.2.1 *Application*

a) All the requirements given in clause 9.1.1 of ISO/IEC 17021-1:2015 shall apply.

b) The Halal certification body shall require the applicant for the Halal certificate to provide detailed information concerning its entity / legal status, raw materials, processes, food safety management system issues, HACCP analysis plan, number of work shifts and number of employee per shift etc.

C9.2.2 *Application Review*

All the requirements given in clause 9.1.2 of ISO/IEC 17021-1:2015 shall apply.

*NOTE***:** In case of non-conformities found during the audit, the producer/service owner shall make a declaration, before renewal of application, that he has completely removed all the non-conformities detected in the audit. In case of any unsuccessful procedures in the process of issuing the certificate, the new application shall only be accepted if the client makes such a declaration. If the first application for certification was unsuccessful and the client wishes to approach another certification body, then the applicant shall provide detailed information regarding its first application for certification.

C9.2.3 *Initial Halal Certification Audit*

The initial certification audit of Halal product/service/management system shall be conducted in two stages:

C9.2.3.1 *Stage 1 Audit*

C9.2.3.1.1 All the requirements given in clause 9.3.1 of ISO/IEC 17021-1:2015 and the following shall apply:

When outsourced control measures are applied, stage 1 audit shall review the documentation included in Halal requirements and/or the product safety management system to determine if the combination of control measures is suitable for the organization, and conform to requirements of Halal standards. The availability of relevant licenses should also be verified when collecting information on compatibility with national or international regulatory aspects.

C9.2.3.1.2 The objectives of the stage 1 audit are to present a scenario for developing a plan for the stage 2 audit by gaining an understanding of good practices and the concept of identifying and analysing product safety risks such as PRPs (ISO 22002), HACCP, and in particular, the organization's state of readiness for audit by reviewing the extent to which:

a) The organization has identified (PRPs) that are appropriate to the business (e.g. regulatory and statutory requirements),

b) The product safety management system includes adequate processes and methods for the identification and assessment of the organization's safety hazards, and subsequent selection and categorization of control measures (combinations),

c) Availability of legislations regarding the safety of products in the areas relevant to the organization,

d) The product safety management system is designed to achieve the organization's safety policy,

e) The product safety management system implementation program justifies for further audit (stage 2),

f) The validation, verification and improvement programs conform to the requirements of the product safety management system standard,

g) The product safety management system documents and arrangements are in place to communicate internally and with relevant suppliers, customers and relevant parties

h) Any additional documentation that requires revision and/or knowledge that needs to be obtained in advance.

C9.2.3.1.3 Stage 1 audit can be carried out at the premises of the Halal certification body or at the applicant's organization premises according to complexity of production or service in order to achieve the objectives stated above.

a) In the case of categories, A, B, F, J, H, G (*Annex C-1*), it is not necessary that stage 1 audit be on-site. However, it is up to the audit team to decide to carry out an onsite audit. In categories C, D, E, I, and K (Annex A) it is obligatory that stage 1 audit is done on-site.

b) Where stage 1 audit has not been performed on-site, the duration of stage 1 audit may not exceed 20% of the total audit time (Annex B). Where stage 1 audit is performed on-site, duration of the stage 1 audit may not exceed 30% of the total audit duration (Annex B).

C9.2.3.1.4 All the requirements given in clause 9.3.1.2 of ISO/IEC 17021-1:2015 shall apply.

C9.2.3.1.5 Any part of the product safety management system that is audited during stage 1 audit and determined to be fully implemented, effective and in conformity with requirements, may not need to be re-audited during stage 2 audit. However, the Halal certification body shall ensure that the already audited parts of the product safety management system continue to conform to the certification requirements. In this case, stage 2 audit report shall include these findings and shall clearly state that conformity has been established during stage 1 audit.

C9.2.3.1.6 All requirements given in clause 9.3.1.2 of ISO/IEC 17021-1:2015 shall apply. The interval between stage 1 and stage 2 audits is reasonably expected not to be longer than 6 months. Stage 1 audit should be repeated if a longer interval is needed.

C9.2.3.2 *Stage 2 Audit*

All the requirements given in clause 9.3.1.3 of ISO/IEC 17021-1:2015 shall apply.

C9.2.4 *Initial Halal Certification Audit Conclusions*

All requirements given in clause 9.3.1.4 of ISO/IEC 17021-1:2015 shall apply.

C9.2.5 *Sampling*

C9.2.5.1 When necessary, the audit team shall take samples in sufficient quantities from production/service premises to perform required inspections and tests.

C9.2.5.2 If the Halal certificate of products is based on testing / inspection of halal products, it must be in accordance with a specific sampling schedule using statistical methods at different levels of confidence. In determining any sampling requirements, the Halal certification body shall establish documented procedures for the selection and control of samples to ensure traceability, and that they represent the Halal product.

C9.2.5.3 Samples taken by the audit team shall be sent for analysis to a laboratory accredited in accordance with ISO/IEC 17025 by the National Accreditation Body as recognized by the Competent Authority of India.

C9.2.6 *Inspection and Testing*

C9.2.6.1 Inspections and tests on the Halal product/service shall be determined in accordance with the requirements of the Halal product/service and the national and/or regional or international legal provisions.

C9.2.6.2 Bodies that undertake inspections shall be accredited in accordance with the standard ISO/IEC 17020 from the National Accreditation Body as recognized by the Competent Authority of India.

C9.2.6.3 When independent testing facilities are not available, the Halal certification body shall ensure that the specified controls are in place at the supplier's testing facilities, and are managed in a manner which provides confidence in the results obtained and that records are available to justify the confidence.

C9.3 *Surveillance Activities*

All requirements given in clause 9.6.2 of ISO/IEC 17021-1:2015 and clauses 7.9 and 7.10 of ISO/IEC 17065:2012 and the following shall apply:

C9.3.1 The Halal certification body shall conduct surveillance at certain time intervals according to clause 9.6.2.2 of ISO/IEC 17021-1:2015, as deemed necessary in order to verify the continued compatibility of the Halal Product / Service with the requirements of the certificate, taking

into account the requirements of the Halal product / service criteria on which the certificate was based, the nature of the product / service being monitored, the requirements of the certificate, inconsistencies in conformity to Halal product / service or in the Halal production / service premises or any complaints received regarding the Halal product / service.

C9.3.2 When Halal production/service premises are audited and nonconformities that directly affect Halal product/service safety are detected, samples are taken for surveillance purposes.

C9.3.3 In all cases, the procedures with regard to issued reports as a result of surveillance shall be determined by decision maker(s).

C9.4 *Recertification*

All requirements given in clause 9.6.3 of ISO/IEC 17021-1:2015 and the following shall apply:

C9.4.1 Halal certificate owners (certified organization) should submit a recertification or renewal application six (6) months prior to the expiry date of current Halal certificate.

C9.4.2 Halal certificate owners who failed to renew their certificates will not be allowed to use the Halal mark at the premises or on the manufactured products.

C9.5 *Special Audits*

All requirements given in clause 9.6.4 of ISO/IEC 17021-1:2015 shall apply.

C9.6 *Cancelling, Suspending, Withdrawing Halal Certification or Reducing the Ccope*

All requirements given in clauses 9.6.5 of ISO/IEC 17021-1:2015 and clause 7.11 of ISO/IEC 17065:2012 shall apply.

C9.7 *Appeals and Complaints*

All requirements given in clause 9.7 and 9.8 of ISO/IEC 17021-1:2015, clause 7.13 of ISO/IEC 17065:2012 and the following shall apply.

C9.7.1 Applications in the case of any appeals or complaints regarding Halal certification services shall be raised to the Halal certification body. A committee, or two distinct committees, for appeals and complaints shall be established and be responsible for resolving such cases and informing the concerned parties accordingly.

C9.7.2 The members of this committee shall be independent from the Halal certification activities related to the subject complaint or appeal.

C9.7.3 This committee shall consist of a minimum of three persons, where at least one of them must be a Halal certification expert having knowledge on Islamic Shariah law.

C9.7.4 Complaints by consumers regarding a certified Halal product/service shall be evaluated by the Halal certification body, which will be responsible for making the necessary investigations. As a result of such evaluations, if the complaint is found to be justified then the certificate holder shall be required to compensate for the damage(s) caused under the relevant provisions of the contract.

C9.8 *Records of Applicants and Products that are Halal Certified*

All requirements given in clause 9.9 of ISO/IEC 17021-1:2015 and clause 7.8 of ISO/IEC 17065:2012 shall apply.

C10 Management System Requirements

All requirements given in clauses 10.1 to 10.3.4 of ISO/IEC 17021-1:2015 and clause 8 of ISO/IEC 17065:2012 shall apply.

Annex C-1: Classification of Halal Product / Service Categories
(Normative)

The Halal certification body shall use Table C-1.1

a) to define the scope of its work,
b) to identify technical qualification (if any) of its auditors that is necessary for that particular category or sector,
c) to select a suitably qualified audit for a particular category,
d) to select a suitably qualified audit team for a particular category,
e) audit time determination is given as per table C-2.1 of this standard,
f) Identify the appropriate part of the ISO 22002 standard set, if possible, to assess compliance to ISO 22000 standard clause 2.7, and
g) Specify the scope of the certificate document at the subcategory level.
(The scope of the given client organization may cover more than one category)

Table C-1.1 — Food Chain Categories

Cluster[a]	**Category**		**Subcategory**		**Examples of included Activities**
Farming	A	Farming of Animals	AI	Farming of Animals for Meat/ Milk/ Eggs/ Honey	Raising animals (other than fish and seafood) used for meat production, egg production, milk production or honey production Growing, keeping, trapping and hunting (slaughtering at point of hunting) Associated farm packing[b] and storage
			AII	Farming of Fish and Seafood	Raising fish and seafood used for meat production Growing, trapping and fishing (slaughtering at point of capture) Associated farm packing[b] and storage
	B	Farming of Plants	BI	Farming of Plants (other	Growing or harvesting of plants (other than grains

				than grains and pulses)	and pulses): horticultural products (fruits, vegetables, spices, mushrooms, etc.) and hydrophytes for food Associated farm packing[b] and storage
			BII	Farming of Grains and Pulses	Growing or harvesting of grains and pulses for food Associated farm packing[b] and storage
Food and feed processing	C	Food Manufacturing	CI	Processing of perishable animal products	Production of animal products including fish and seafood, meat, eggs, dairy and fish products
			CII	Processing of perishable plant products	Production of plant products including fruits and fresh juices, vegetables, grains, nuts, and pulses
			CIII	Processing of perishable animal and plant products (mixed products)	Production of mixed animal and plant products including pizza, lasagne, sandwich, dumpling, ready- to-eat meals
			CIV	Processing of ambient stable products	Production of food products from any source that are stored and sold at ambient temperature, including canned foods, biscuits, snacks, oil, drinking water, beverages, pasta, flour, sugar, food-grade salt
			CV	Animal slaughtering	Processing of carcasses including slaughtering in slaughterhouses, cutting, cleaning and packing.

	D	Animal Feed Production	DI	Production of Feed	Production of feed from a single or mixed food source, intended for food-producing animals
			DII	Production of Pet Food	Production of feed from a single or mixed food source, intended for non-food producing animals
Catering	E	Catering			Preparation, storage and, where appropriate, delivery of food for consumption, at the place of preparation or at a satellite unit
Retail, transport and storage	F	Distribution	FI	Retail / Wholesale	Provision of finished food products to a customer (retail outlets, shops, wholesalers)
			FII	Food Broking / Trading	Buying and selling food products on its own account or as an agent for others Associated packaging[C]
	G	Provision of Transport and Storage Services	GI	Provision of Transport and Storage Service for Perishable Food and Feed	Storage facilities and distribution vehicles for the storage and transport of perishable food and feed Associated packaging[C]
			GII	Provision of Transport and Storage Services for Ambient Stable Food and Feed	Storage facilities and distribution vehicles for the storage and transport of ambient stable food and feed Associated packaging c
Auxiliary services	H	Services			Hospitality services, Islamic banking, veterinary services and provision of services

			related to the safe production of food, including water supply; pest control services, cleaning services, waste disposal.
	I	Product ion of Food Packaging and Packaging Material	Production of food packaging material
	J	Equipment manufacturing	Production and development of food processing equipment and vending machines
Biochemical	K	Production of (Bio) Chemicals	Microbiology, Production of food and feed additives, vitamins, minerals, bio-cultures, flavourings, enzymes and processing aids Pesticides, drugs, fertilizers, cleaning agents, cosmetics, textiles, leather products, etc.
Clusters are intended to be used for accreditation scope of accredited certification bodies, and for accreditation bodies witnessing certification bodies. “Farm packing” means packaging without product modification and processing. “Associated packaging” means packaging without product modification and processing and without altering the primary packaging.			

Annex C-2
(Informative)
Minimum Audit Time

C-2.1 General

In determining the audit time needed for each site as required in Clause 9.1.4, the Halal certification body should consider the minimum required time on-site for initial certification given in Table C-2.1.

The minimum time includes stage 1 and stage 2 of the initial certification audit (Clause 9.2.3) but does not include the required time for the preparation of the audit nor the time for writing the audit report.

To avoid duplication where another relevant management system is in place and certified by the certification authorityItself, no additional time is required (table C-2.1) and in case of joint audit involving a Food safety management system, the audit time can be reduced if it is justified and documented.

The minimum audit time is established for the audit of a Food System Managements System which includes only one HACCP study. A HACCP study corresponds to a hazard analysis for a group of products/services with similar hazards and similar production technology and, where relevant, similar storage technology.

The minimum audit time has been determined to audit the product safety management system, which includes only one DSM HACCP Critical Analysis Point Plan. The HACCP study is the risk analysis of the Group Products / services having similar risks and similar production and storage technology.

The minimum on site surveillance audit time for product and/or services should be, with a minimum of half audit day (Applied to all types of audits).

The number of auditors for each audit day takes into account the effectiveness of the audit and the resources of the entity being subject, as well as the resources of the certification authority.

And where additional meetings are required, for example audit meetings, coordination and briefings audit, an increase in audit time may be required.

The number of employees should be expressed as the number of full-time equivalent employees (FTEs). When an enterprise operates workers in shifts, the products and / or operations are Similar, FTE is calculated based on employees in the main shift (including workers, Seasoners) as well as office workers.

Some categories are subject to multi-site sampling, and this can be taken into consideration when calculating audit time.

If sites are sampled, the site sample is selected before the audit period is applied.

Therefore, audit time accounts should be applied to each site in accordance with the requirements of this Annex and Table C-2.1.

If the scope of a single client facility covers more than one category, the audit time account is the highest recommended basic check. Additional time is needed for each risk analysis point and critical control point, (i.e. a minimum of 0.5 man-day audit for each risk analysis point and critical control point.

Other factors may necessitate increasing the minimum audit time (e.g. number of product types, number of product lines, product development, number of CCPs, number of operational PRPs, building area, infrastructure, in-house laboratory testing, need for a translator).

C-2.2 Calculation of minimum initial certification audit time

C-2.2.1 The minimum audit time for a single site, Ts, expressed in days, is calculated as follows:

Ts = (TD + **T**H + **T**MS + **T**FTE**), w**here
TD: is the basic on-site audit time, in days;
TH: is the number of audit days for additional HACCP studies;
TMS: is the number of audit days for absence of relevant management system;
TFTE: is the number of audit days per number of employees.

C-2.2.2 The audit time for each site in addition to the main site, is calculated according to Table C-2.1 with a minimum of 1 audit day per site.

When properly documented and justified, a reduction can be made for a less complex organization measured by number of employees, size of the organization and/or product volume or within categories having a (**T**s) time of less than 1,5 audit days.

Table C-2.1

Category [a]	**Basic on-site audit time, in audit days** ***T***D	**Number of audit days for each additional HACCP study** ***T***H	**Number of audit days for absence of certified relevant management system** ***T***MS	**Number of audit days per number of employees** ***T***FTE	**For each additional site visited**
A	0,75	0,25		1 to 19 = 0	50% of Minimum on-site audit time
B	0,75	0,25		20 to 49 = 0,5	
C	1,50	0,50		50 to 79 = 1,0	
D	1,50	0,50		80 to 199 = 1,5	
E	1,00	0,50		200 to 499 = 2,0	
F	1,00	0,50	0,25	500 to 899 = 2,5	
G	1,00	0,25		900 to 1299 = 3,0	
H	1,00	0,25		1300 to 1699 = 3,5	
I	1,00	0,25		1700 to 2999 = 4,0	
J	1,00	0,25		3000 to 5000 = 4,5	
K	1,50	0,50		> 5000 = 5,0	

C-2.3 Calculation of minimum surveillance and recertification audit time

The minimum surveillance audit time shall be one-third of the initial certification audit time, with a minimum of 1 audit day (0,5 audit day for categories A and B). The minimum recertification audit time shall be two-thirds of the initial certification audit time, with a minimum of 1 audit day (0,5 audit day for categories A and B). When properly documented and justified, a reduction to the minimum can be made in a less complex organization measured by number of employees, size of the organization and/or product volume or within categories having an initial minimum audit time of less than 1,5 audit days.

Part D: Criteria for Evaluating Halal Product Certification Schemes

D1 Scope

This standard is applied for all Halal product certification schemes. The Schemes Owners shall ensure that their Halal product certification schemes are complying with the requirements of ISO/IEC 17065 and this document. The Halal certification bodies who are willing to obtain accreditation from National Accreditation Body as recognized by the Competent Authority of India shall comply with these requirements.

Requirements specified in this document are general requirements for Halal product and are applicable to any sub-scope e.g. food, cosmetics, pharmaceuticals, utilities product (tissue, textile, resin), disinfectant and cleaning agent, etc. during all stages of processing.

D2 Normative References

The following referenced documents are indispensable for the application of this document. The latest edition of the referenced document (including any amendments) applies:

- ISO/IEC 17000: Conformity assessment - Vocabulary and general principles.
- ISO/IEC 17007: Conformity assessment - Guidance for drafting normative documents suitable for use for conformity assessment.
- ISO/IEC 17065: Requirements for bodies certifying products, processes and services.
- ISO/IEC 17067: Conformity assessment - Fundamentals of product certification and guidelines for product certification schemes
- ISO 22000: Food Safety Management Systems - Requirements for any organization in the food chain
- IAF MD 25: Criteria for evaluation of Conformity Assessment Schemes

D3 General Requirements for Halal Product Certification Schemes:

Any Scheme developed for Halal product either related to food, cosmetics, pharmaceuticals, textile and leather etc., and to related process and services shall comply with ISO/IEC 17067 and the following:

D3.1 Within the content of the certification scheme, the following shall be clearly defined:

- The competencies related to its scope (s);
- Brief about the scheme owner; either if it is an accreditation body, government, certification body etc.;
- Parties involved in developing the scheme;
- Declaration that the scheme is based on the requirements of ISO/IEC 17065 Standard: Conformity assessment - Requirements for bodies certifying products, processes and services and does not contradict the requirements of this international standard;

- Scope of the scheme with regard to the sectors/products covered under the halal certification process with specifying any exclusions, if any;
- Specify the qualified applications for the scheme;
- Conditions for the clients seeking halal certificate/halal mark for their products;
- Clearly defined criteria for evaluation;
- Reference standards/regulations/legislations that shall be met;
- Any additional requirements that shall be met in a specific sector; either related to premises, staff, systems, processes, transportation…etc. (if any);
- Description of the certification process, or reference to any relevant document that describes the certification process;
- The stages of certification activities, to include as minimum selection, determination, review, decision on certification and attestation
- Description of the competency criteria required for staff involved in the halal certification process for the product(s) within the scheme scope;
- Description of the decision-making process or reference to any relevant document that describes the decision-making process;
- Requirement for the client to have arrangements for segregation and procedure to prevent cross contamination.
- Requirement for the client to have arrangements for handling nonconformities related to halal products/halal activities; this includes taking strict measures to prevent re-occurrence of such non-conformities.
- Description of the mechanism for handling claims related to halal certified products;
- General conditions for using halal certificates and marks or reference to any relevant document;
- Provisions for misuse halal certificates or marks;
- Description of the monitoring process for issued halal certificates and marks.

D3.2 The certification scheme shall comply with the country-specific Halal regulations of manufacture and final destination.

D3.3 For high-risk scope products as defined in the scheme (e.g. animal derivatives and gelatin) the determination activities shall include sampling and inspection, and/or testing.

D3.4 The certification scheme shall ensure that the following requirements are met for products declared “HALAL”. These requirements shall be clearly stated within the certification scheme:

- Halal product shall not contain any element/part/or traces of animals that are non-halal or that comes from animals which are not slaughtered according to Islamic law;
- Halal product shall not contain synthetic alcohols, liquors, or wines;
- Halal Product shall not be subjected to come in contact with any processing aid which is Haram.
- Halal product shall not contain narcotic drugs;

- Hygiene requirements shall be met for halal products.
- Any equipment/tool contaminated with non-halal elements or Najis shall not be used in any step of the preparation, manufacturing, packaging, storage, and transportation of the halal product.
- Source of materials used in the halal products shall be halal;

D3.5 The certification body shall appoint minimum of one staff in a permanent supervisory post who is competent and well trained in Halal requirements.

D4 Additional Requirements for Halal Food Product Certification Schemes:

D4.1 Halal Food Product Certification Schemes shall require implementation of other relevant systems like Food Safety Management Systems (FSMS), Hazard Analysis Critical Control Points (HACCP) and/or Good Manufacturing Practices (GMPs) as applicable in manufacture and services for Halal foods.

D4.2 Products covered within the scheme shall fulfil the countries relevant polices and requirements of concerned authority(ies).

D5 Additional Requirements for Halal Pharmaceuticals Certification Schemes:

D5.1 Halal Pharmaceuticals Certification Schemes shall require compliance with Good Manufacturing Practices (GMP) and compliance with Good Distribution Practices (GDP) that exists in the scheme owner’s country.

D6 Additional Requirements for Halal Cosmetics:

D6.1 Halal Cosmetic Certification Schemes shall require compliance with Good Manufacturing Practices (GMP).

D6.2 Products covered within the scheme shall fulfil the countries relevant polices and requirements of concerned authority(ies).

Part E: Requirements for Accreditation Bodies accrediting Halal CBs

E1 Scope

This standard specifies the requirements for competence, consistent operation and impartiality of the accreditation bodies offering accreditation services to Halal certification bodies in accordance with the requirements of ISO/IEC 17011:2017 and this document.

E2 Normative References

E2.1 ISO/IEC 17000: Conformity assessment - Vocabulary and general principles.
E2.2 ISO/IEC 17011: Conformity assessment — Requirements for accreditation bodies accrediting conformity assessment bodies.
E2.3 IHAF/RD 03: Criteria for Halal accreditation body

E3 General Requirements

E3.1 Legal Responsibility

Requirements of clause 4.1 of ISO/IEC 17011:2017 shall be applicable.

In addition, the accreditation body shall have the responsibility to ensure compliance to applicable Islamic requirements by the Halal certification bodies, and shall have a mechanism and structure to ensure it while providing its accreditation services.

E3.2 Accreditation Agreement

Requirements of clause 4.2 of ISO/IEC 17011:2017 shall be applicable.

E3.3 Use of Accreditation Symbols and Other Claims of Accreditation

Requirements of clause 4.3 of ISO/IEC 17011:2017 shall be applicable.

In addition, accreditation body providing accreditation services to Halal certification bodies shall be signatory to the International Accreditation Forum (IAF) MLA for Product Certification (ISO/IEC 17065) and/or the International Halal Accreditation Forum (IHAF) MRA for Halal.

E3.4 Impartiality Requirements

Requirements of clause 4.4 of ISO/IEC 17011:2017 shall be applicable.

E3.5 Financing and Liability

Requirements of clause 4.5 of ISO/IEC 17011:2017 shall be applicable.

E3.6 Establishing accreditation schemes

The accreditation body shall establish halal compliant accreditation schemes that define rules and processes of accrediting conformity assessment bodies as per the requirements of clause 4.6 of ISO/IEC 17011: 2017 and this document.

E4 Structural Requirements

Requirements of clause 5 of ISO/IEC 17011:2017 shall be applicable.

In addition, the accreditation body shall:

i) Have the authority and be responsible for its Halal compliant accreditation decisions, which shall not be subject to approval by any other organization or person.
ii) Document the duties, responsibilities and authorities of top management and other personnel associated or involved in the accreditation process for Halal.
iii) Develop polices related to Halal conformity assessment practices.
iv) Identify requirement for decision making for Halal compliant accreditation process.
v) When authorities are delegated to other committees or individuals, the accreditation body shall ensure competency of such parties in Halal principles and practices.
vi) Have access to needed expertise in the field of Halal. Access to the necessary expertise may be obtained through one or more committees (either ad-hoc or permanent), each responsible within its scope.
vii) For committees formed to be involved in halal compliant accreditation, the accreditation body shall ensure the competency of committee members including expertise in Islamic affairs matters.
viii) Comply to Halal regulation within their territory.

E5 Resource Requirements

E5.1 Competence of Personnel

E5.1.1 Requirements of clause 6.1 of ISO/IEC 17011:2017 shall be applicable.

E5.1.2 Determination of Competence Criteria: Requirements of clause 6.1.2 of ISO/IEC 17011:2017 shall be applicable.

In addition; the accreditation body shall:

a) Have a documented process for determining and documenting the competence criteria for personnel involved in the management and performance of Halal compliant accreditation and assessment activities. Competence criteria shall be determined with regard to the requirements of Halal accreditation schemes and shall include the required knowledge and skills for performing Halal compliant accreditation activities.
b) Ensure that its personnel who work in the field of Halal are having the required knowledge in Halal compliant conformity assessment practices.

c) Ensure the assessment team, and the accreditation body personnel who review documents, review assessment reports, and make accreditation decisions includes personnel who demonstrate knowledge of Halal and are qualified, shall be reviewed by the accreditation body (*refer ISO/IEC 17065 clause 4.6.3*).
d) Ensure the assessment team, and the accreditation body personnel who review assessment reports, make accreditation decisions and manage accreditation schemes, demonstrate knowledge of risk-based assessment principles related to Halal compliant accreditation activities/practices.
e) Ensure the assessment team has personnel who demonstrate(s) knowledge of Halal compliant practices and processes of the conformity assessment body's business environment.
f) Ensure that the group or individual that takes the accreditation decisions totally understand the applicable Halal compliant accreditation scheme requirements and shall have competence to evaluate the outcomes of the Halal compliant assessment, including where appropriate related recommendations of the assessment team related to Halal compliance.

E5.1.3 Competence Management: Requirements of clause 6.1.3 of ISO/IEC 17011:2017 shall be applicable.

In addition:

a) The accreditation body shall have access to expert personnel who can evaluate assessors conducting assessments in the field of Halal.
b) Each assessor working in Halal compliant assessment shall be observed at regular intervals. This shall be at least every three years, unless there is sufficient supporting evidence that the assessor is continuing to perform competently.

E5.2 Personnel Involved in the Accreditation Process

Requirements of clause 6.2 of ISO/IEC 17011:2017 shall be applicable.

In addition, the accreditation body shall:

a) Describe the qualifications, experience, knowledge, competence and training required for personnel who are working in Halal compliant conformity assessment practices.
b) Have access to experts in Halal who can carry out Halal compliant assessments, review Halal compliant schemes and documents, and can be involved in decision making process of Halal compliant accreditation.
c) Ensure that assessors and, where relevant, experts who will work in the field of Halal compliant accreditation:
    i) familiar with Halal, competent and well trained on different aspects of the Halal regulation and Halal requirements in the specific area of specialization.
    ii) familiar with halal compliant accreditation procedures, IAF and/or IHAF requirements for conformity assessment schemes, accreditation criteria, and other relevant requirements,
    iii) have undergone a relevant assessor training related to Halal compliant.

iv) Have access to at least one assessor/expert and one Islamic affairs expert for each halal discipline that is within its scope of work.

E5.3 Personnel Records

Requirements of clause 6.3 of ISO/IEC 17011:2017 shall be applicable.

In addition, the accreditation body shall maintain records of relevant qualifications, training, experience and competence of each person involved in the accreditation process related to halal compliance.

E5.4 Outsourcing

Requirements of clause 6.4 of ISO/IEC 17011:2017 shall be applicable.

In addition, if the accreditation body outsources any of its IAF and/or IHAF recognized accreditation activities, then it shall have a policy describing the conditions under which outsourcing may take place, and any outsource of service or part of service shall be done with an IAF and/or IHAF MRA signatory accreditation body.

E6 Process requirements

E6.1 Accreditation Requirements

Requirements of clause 7.1 of ISO/IEC 17011:2017 shall be applicable.

In addition, Halal compliant conformity assessment scheme shall comply with accreditation rules and procedures related to halal field and to iCAS Part D - Criteria for Evaluating Halal Product Certification Schemes.

E6.2 Application for Accreditation

Requirements of clause 7.2 of ISO/IEC 17011:2017 shall be applicable.

E6.3 Resource Review

Requirements of clause 7.3 of ISO/IEC 17011:2017 shall be applicable.

E6.4 Preparation for Assessment

Requirements of clause 7.4 of ISO/IEC 17011:2017 shall be applied.

In addition, the accreditation body shall appoint an assessment team consisting of a team leader and a suitable number of assessor(s)/expert(s) who is/are qualified in halal and competent enough in halal products and services requirements as per the scope of the halal certification scheme.

When selecting the assessment team, the accreditation body shall ensure that the expertise brought to each assignment is appropriate. In particular, the team as a whole:

a) shall have appropriate expertise in the specific scope of halal compliant accreditation;
b) shall have sufficient understanding to make a reliable assessment of the competence of the conformity assessment body to operate within its halal' compliant scope of accreditation.

E6.5 Review of Documented Information

Requirements of clause 7.5 of ISO/IEC 17011:2017 shall be applicable.

E6.6 Assessment

Requirements of clause 7.6 of ISO/IEC 17011:2017 shall be applicable.

E6.7 Accreditation Decision-making

Requirements of clause 7.7 of ISO/IEC 17011:2017 shall be applicable.

In addition:

a) The accreditation body shall ensure that personnel involved in halal compliant accreditation decision-making are having appropriate knowledge on halal requirements including Islamic affairs.
b) The accreditation body shall define the criteria of competency for personnel involved in halal compliant accreditation decision making.

E6.8 Accreditation Information

Requirements of clause 7.8 of ISO/IEC 17011:2017 shall be applicable.

E6.9 Accreditation Cycle

Requirements of clause 7.9 of ISO/IEC 17011:2017 shall be applicable.

E6.10 Extending Accreditation

Requirements of clause 7.10 of ISO/IEC 17011:2017 shall be applicable.

E6.11 Suspending, Withdrawing or Reducing Accreditation

Requirements of clause 7.10 of ISO/IEC 17011:2017 shall be applicable.

E6.12 Complaints

Requirements of clause 7.12 of ISO/IEC 17011:2017 shall be applicable.

In addition, the decision to be communicated to the complainant shall be made by, or reviewed and approved by, individual(s) not involved in the activities in question and knowledgeable in Halal compliant accreditation process and halal requirements.

E6.13 Appeals

Requirements of clause 7.13 of ISO/IEC 17011:2017 shall be applicable.

In addition, the decision to be communicated to the appellant shall be made by, or reviewed and approved by, individual(s) not involved in the activities in question and knowledgeable in Halal compliant accreditation process and Halal requirements.

E6.14 Records on Conformity Assessment Bodies

Requirements of clause 7.14 of ISO/IEC 17011:2017 shall be applicable.

E7 Information Requirements

E7.1 Confidential Information

Requirements of clause 8.1 of ISO/IEC 17011:2017 shall be applicable.

E7.2 Publicly Available Information

Requirements of clause 8.2 of ISO/IEC 17011:2017 shall be applicable.

E8 Management System Requirements

E8.1 General

Requirements of clause 9.1 of ISO/IEC 17011:2017 shall be applicable.

E8.2 Management System

Requirements of clause 9.2 of ISO/IEC 17011:2017 shall be applicable.

In addition, the accreditation body shall ensure having all needed procedures and policies that enables it to fulfil requirements related to halal accreditation in conformity assessment practices.

E8.3 Document Control

Requirements of clause 9.3 of ISO/IEC 17011:2017 shall be applicable.

E8.4 Records Control

Requirements of clause 9.4 of ISO/IEC 17011:2017 shall be applicable.

E8.5 Nonconformities and Corrective Actions

Requirements of clause 9.5 of ISO/IEC 17011:2017 shall be applicable.

E8.6 Improvement

Requirements of clause 9.6 of ISO/IEC 17011:2017 shall be applicable.

E8.7 Internal Audits

Requirements of clause 9.7 of ISO/IEC 17011:2017 shall be applicable.

E8.8 Management Reviews

Requirements of clause 9.8 of ISO/IEC 17011:2017 shall be applied.

In addition, the inputs to management reviews shall include:

a) Considering results of peer evaluations done under IAF and/or IHAF.
b) Feedback from interested parties in field of halal.

15. ABBREVIATIONS

1. FSSAI: Food Safety and Standards Authority of India
2. GCC: Gulf Cooperation Council
3. ISO: International Organization for Standardization
4. MOU: Memorandum of Understanding
5. SMIIC: Standards and Metrology Institute for Islamic Countries
6. OIC: Organization of Islamic Cooperation
7. HAS: Halal Assurance System
8. MS: Malaysian Standard
9. ASEAN: Association of Southeast Asian Nations
10. GSO: GCC Standards Organization
11. HCO: Halal Certifying Organisation
12. JUM: Jamiat Ulama - E – Maharashtra
13. JAKIM: JABATAN KEMAJUAN ISLAM MALAYSIA (Department of Islamic Development Malaysia)
14. UAE: United Arab Emirates
15. SFDA: Saudi Food and Drug Administration
16. AVA: Agri-Food and Veterinary Authority
17. USDA: U.S. Department of Agriculture
18. MUI: Majelis Ulama Indonesia
19. MUIS: Islamic Religious Council of Singapore
20. IIFA: International Fiqh Academy
21. HCBs: Halal Certification Bodies
22. LPPOM: Assessment Institute for Food, Drugs and Cosmetics
23. HCE: Halal Certification Europe
24. GAC: Gulf Accreditation Center
25. IFANCA: Islamic Food and Nutrition Council of America
26. GMO: Genetically Modified Organism
27. EIAC: Emirates International Accreditation Centre
28. MFDS: Ministry of Food and Drug Safety
29. HDC: Halal Development Corporation

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- ISBN: 978-1-63248-058-3 doi: 10.15224/ 978-1-63248-058-3-53 Department of Islamic Development Malaysia (JAKIM) and Halal Development Corporation (HDC).

- Issues and Challenges of Halal Implementation in Food Industry in Malaysia [Asnidar Hanim Yusuf, Syadiyah Abdul Shukor, Ummi Salwa Ahmad Bustamam]

216151/2023/Export cell (SCOMET)

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Accreditation Procedure

for

Product Certification Bodies

BCB 201 (PCB) – Mar 2020

Effective : Immediate

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Introduction

This document defines the procedure that has to be followed by organizations seeking accreditation and also accredited organizations operating as Product Certification Bodies (PCBs). The general information is contained in this procedure. The NABCB, on request, will provide any specific information required by the organizations.

The other applicable procedures and information that are mandatory for the new applicant and the accredited organizations like Use of Accreditation Symbol, Complaints and Appeals procedure, Fee schedule etc. are available on NABCB website http://nabcb.qci.org.in .

1. Application for accreditation

1.1. NABCB has decided to provide accreditation services to any PCB established as legal entity or identifiable part of larger legal entity in its own economy such that it can be held legally responsible for its certification services, while at the same time following principles of cross frontier accreditation laid down by International Accreditation Forum/ Asia Pacific Accreditation Cooperation (IAF/APAC).

1.2. In legal terms, it shall be an organization which can sue and be sued in its own name as per the legal interpretation in the relevant economy. In India, it could be a public or private limited company, LLP, a trust or a society. Partnership firms and proprietary companies do not fit into this. Any exception regarding legal status would be made only by a specific decision of the Board keeping in view the legal provisions in the economy in which the PCB is established as a legal entity.

1.3. PCBs interested to get accredited by the Board for their certification system should submit application online on NABCB accreditation portal using the link nabcbportal.qci.org,in The application form, BCB: F001 (P), (BCB:F001 (P)R for renewal of accreditation) and other related documents are available on the NABCB website for reference.

1.4. The applicant should review the following documents prior to submitting the application online

a) Application Form BCB:F001 (P)
b) Fee Schedule BCB:F002 (PRDT)
c) Criteria for accreditation – BCB 120
d) Procedures for Accreditation, Use of Accreditation Symbol & Complaints and Appeals
e) A copy of the accreditation agreement BCB:F003 (PCB)
f) A blank copy of the Document review cum Cross reference matrix for ISO/IEC 17065 covering the specific scheme requirements if additional
g) Policy and Criteria for determination of Suitability and acceptance of conformity assessment schemes (BCB 002)

1.5. Any additional explanation needed by the applicant is provided by the NABCB Secretariat on behalf of the Board on receipt of a specific request for the same including the necessary explanations on the specific schemes and scopes of accreditation that are covered

1.6. Before applying for accreditation, the applicant body shall have met the following conditions

a) Operated the certification process for at **least 6 months**. This is necessary to assess the ability of the PCB to carry out the certification process as per the documented system. In case the same is not implemented the PCB should inform NABCB and

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CEO/Director NABCB may accept the deviation based on justification provided

b) Granted at least two certifications under the Certification Scheme for which it is seeking accreditation. If accreditation is sought for more than one Certification Scheme, one certification per Certification scheme would be sufficient.

Note: In cases where the PCB had been carrying out audits on behalf of its principals, who had been responsible for decision making, and now wants to operate the certification independently under NABCB accreditation, then the PCB should be able to demonstrate its competence for decision making, through means like parallel decision making, etc.

c) Carried out minimum one internal audit against the applicable criteria of accreditation including applied scheme/scope for accreditation, one management review for the documented Quality system and one meeting of the impartiality committee, if established.

d) Product Certification scheme meets the requirements of NABCB policy on Conformity assessment schemes and is accepted by NABCB. NABCB may need to review the certification scheme to determine its suitability for accreditation. The man-days for scheme review would depend on extent of suitability determination. The application shall be accepted and registered only after determination of suitability of the scheme(s).

1.7. An authorization letter shall be uploaded along with all other documents at the time of submitting the online application form, in case the application is submitted by anyone other than the top management of the PCB. The application fee is non-refundable except when the application is not accepted by NABCB.

1.8. The applicant must also upload the required information and documents as specified in the application form.

Note 1 Evidences of the documents and records relating to the completion of internal audit and Management review shall be submitted along with the application

Note 2 In case the PCB gets accredited by NABCB, the organizations that were certified prior to the assessment by NABCB may be issued NABCB accredited certificates subject to a clear demonstration of compliance to NABCB accreditation criteria and seeking approval for the same. It shall also be ensured that they are covered by the scope for which the PCB is accredited by NABCB.

1.9. The application is reviewed by the NABCB secretariat for completeness, clarity of accreditation requirements and the capability of NABCB to provide the services in timely manner. NABCB will review its ability to carry out the assessment in terms of its own policy and procedure, its competence and the ability of personnel suitable for assessment activities. Any mismatch is clarified and the outcome of the review is communicated to the applicant regarding acceptance of the application for further processing, or for completing any further requirements identified during the review. NABCB reserves the right to seek information on the antecedents of the owners / those managing certification activities and analyse it before deciding to accept the application for further processing. It may decide not to accept application if there is any adverse finding in the above exercise The decision of the NABCB shall be communicated to the applicant with reasons for not accepting the application. The applicant can appeal against such a decision.

1.10. Upon deciding to accept the application, the same is recorded or registered and the assessment team is appointed.

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1.11. At any point of time during the accreditation process the applicant may request for transferring the registered application to another legal entity. NABCB would allow the same without any additional application fees based on the justification provided by the PCB and subject to the new legal entity meeting all the requirements of application for PCB scheme.

1.12. NABCB at the time of application review will decide on the number of witnesses to be done within a scheme to recommend the scopes sought by the applicant PCB. Same shall be communicated to CB along with the proposal .

1.13. **Appointment of the Assessment Team:**

The assessment team, consisting of a Team Leader and the members, is identified from the pool of assessors and experts. The assessment team for each stage of the initial assessment normally consists of two members and the team for witness assessment will normally have as many members as the audit/evaluation team of the applicant body. Technical Expert, if required, could be additional to the number of team members. In case the PCB has applied for more than one product certification scheme, proportionate increase in number of assessors may be done based on the mandays decided for the assessment.

In case the application is accepted for further processing, a formal acknowledgement along with a proposal is sent for carrying out the assessment of the applicant body based on the expected mandays and fee schedule .The names of the members of the assessment team for carrying out the Document review and the Office assessment are also communicated to the applicant PCB along with the proposal and the PCB is requested to inform NABCB about acceptance of / objection against, the appointment of any of the team members. Any objection by the applicant PCB against any of the team members must be in writing, accompanied with adequate grounds for the objection. The Director/CEO of the Board will evaluate the objection and decide whether to change the team member or to overrule the objection raised by the applicant PCB. The assessment team is then formally appointed. Efforts are made to ensure that the team is kept intact throughout the initial assessment process, however this cannot be guaranteed. The team members are asked to commit that they do not have relationship - direct/indirect with the applicant body that can affect the objectivity of the assessment at the time of their appointment as NABCB assessor / expert. The team members are required to maintain confidentiality of the sensitive information about the operation of the applicant obtained as part of the assessment process unless required by law, in which case the same will be done under intimation to the PCB.

All NABCB assessors have declared that they have no conflict of interest and committed to disclose if such a situation arises so that NABCB can take appropriate decision.

On receipt of acceptance of the proposal from the applicant and the assessment fee as per the contract as well as the appointment of the assessment team, further processing of application is done.

NABCB publishes on its website, information about new applications for accreditation, for information and for receiving feedback from the industry / other stakeholders. In case any feedback from industry or stakeholders calls for a review by the NABCB, the required formalities shall be completed before further processing of the application.

1.14. If a preliminary visit is requested by the applicant PCB the NABCB secretariat shall organize the same after obtaining the acceptance of the preliminary visit fee by the applicant PCB. Such a visit would solely be for the purpose of gaining a better understanding of the operations of the PCB and for the PCB to better understand the accreditation process and clarify the

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expectations of NABCB as regards the requirements of the standards. The visit may result in communication of findings to the PCB. Such a visit would not result in any decrease in the mandays for the initial assessment.

1.15. **Assessment at foreign locations:**

NABCB would reserve the right to take the assistance of local IAF MLA members for assessments at foreign locations. The applicant / accredited PCB would have the normal right to appeal against specific assessors for reasons of conflict of interest. If the PCB does not prefer to involve the local accreditation body, then the reasons for the same would have to be clearly indicated. NABCB reserves the right to share such information with the concerned accreditation body / IAF.

1.16 At any point in the application or initial assessment process, if there is evidence of fraudulent behaviour, if the PCB intentionally provides false information or conceals information, NABCB will reject the application or terminate the assessment process.

2. Criteria for accreditation

2.1. Adoption of Criteria

2.1.1. The Board has adopted the accreditation criteria for PCBs based on international standards and guides, supported by the guidance documents released by the International Accreditation Forum (IAF) and Asia Pacific Accreditation Cooperation (APAC Definitions of various terms related to conformity assessment shall be as given in ISO 17000 and ISO 17011 (Annex1)

2.1.2. The Criteria is available on the NABCB website. The criteria documents, that have been adopted directly from international standards and are covered by copyright laws, are not available on the website. For such documents only the reference number and issue level is given. In case of need, the applicant PCBs are required to procure such documents from the respective national standards bodies like the Bureau of Indian Standards (BIS) in India or International Organization for Standardization (ISO) or through other authorized sources.

Note: The applicant PCB has the responsibility to obtain approval from the scheme owner in case it is not the owner of the Product certification scheme for which it is seeking accreditation.

2.2. Amendment to the Criteria

2.2.1. The amendment to the Criteria shall be based on the nature of changes required The Criteria of accreditation and any guidance documents may also be taken up for amendment based on following conditions individually or severally

i. Any change in the International standards and guides
ii. Any change in the IAF/APAC documents for implementation of international standards and guides
iii. Significant feedback from the Peer Review assessment team that warrants amendment
iv. Critical feedback from the implementation of the criteria
v. Any other reason as deemed fit by the Board

2.2.2. The Board shall approve the amended criteria after due consultation, if needed, as

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follows:

a) Seek the advice of the Technical Committee, if one exists,
b) Seek representation of PCBs before approval of the amendment.
c) Seek public comments on the proposed changes through the Members of the Board and other representative bodies as the Board may deem fit.

2.2.3. The issue status of the Criteria documents is identified by the month and year of the issue.

2.3. Communication of changes to the Criteria

2.3.1. Any change in the criteria shall be notified to the accredited / applicant PCBs by e mail/ any other means and a suitable time frame shall be given for implementing the modified criteria. Any transition policy announced by IAF would be adopted by NABCB and communicated to the PCBs. The accredited PCBs shall communicate their objection, if any, in writing within 30 days of the receipt of the amended criteria. If no communication is received within 30 days, it will be presumed that the accredited PCB is willing to adopt the changed criteria.

2.3.2. The implementation of the changed criteria shall be verified during the surveillance assessment of each PCB. In the event of any major change in the criteria, NABCB will reserve the right to carry out an additional assessment visit and the fee for such assessment visit shall be borne by the PCB. The quote for such fee will be provided to the PCB in advance. The assessment will be conducted with prior intimation to the PCB.

2.3.3. In the event that an accredited PCB is not willing to adopt the changed criteria, it is allowed to opt out of the accreditation programme and the accreditation is withdrawn with effect from the date of the implementation of revised criteria. The PCB in such cases shall forfeit the fees already paid.

3. Conditions for Accreditation

3.1. Granting of Accreditation

3.1.1. The accreditation is granted to an applicant PCB on completion of assessment as per the provisions of section 4 of this procedure and after the following conditions are met by the applicant PCB:

a) The applicant meets the criteria of accreditation and all non-conformities and concerns found against the criteria of accreditation during assessment have been closed to the satisfaction of the Board in accordance with the guidelines on the subject.
b) There are no adverse reports/information/complaints with the Board about the applicant regarding the quality and effectiveness of implementation of certification system as per the criteria of the Board. There is also no evidence of fraudulent behaviour.
c) The client organizations certified by the applicant PCB are satisfied by the conduct of the applicant PCB and its certification system. NABCB may request feedback from selected client organizations certified by the PCB / publicize receipt of application and seek a feedback from stakeholders

Note: NABCB shall obtain on regular basis, through appropriate mechanism, feedback from few of the client organization certified by the PCB to assess the

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integrity and compliance aspects of the PCB.

d) The applicant body has paid all the outstanding dues.
e) The Initial accreditation shall be for a period of 3 years. Subsequent reaccreditations are for a period of4 years. . If the PCB does not issue reasonable number of certificates, NABCB reserves the right not to reaccredit the PCB even if it applies for the reaccreditation of the same.

3.1.2. In the event of any adverse issue arising from the reasons specified at points b and c of 3.1.1 or if there is evidence of fraudulent behavior or if the applicant PCB intentionally provides false information or conceals information, the applicant PCB will be given an opportunity to explain its position in writing to NABCB and present its case in person to the accreditation committee before a decision is taken in respect of granting of the accreditation. The final decision shall be taken in respect of granting of accreditation on the basis of facts and the results of such presentation.

3.1.3. NABCB shall publish on its website as well as in its newsletter, grant of any new accreditations for information and feedback from the industry / other stakeholders.

3.2. Maintaining of Accreditation

3.2.1. The PCB shall comply with the following requirements. Subject to the PCB meeting the conditions given below, the accreditation given to a PCB shall be maintained for three years (first cycle) / four years (subsequent cycles)

i. The accredited PCB continues to meet the criteria of accreditation and all non-conformities found against the criteria of accreditation during surveillance and witness assessments have been closed to the satisfaction of the Board as per laid down criteria.
ii. There are no adverse reports/information/complaint with the Board about the accredited PCB regarding the implementation of certification system as per the criteria laid down by the Board. There is also no evidence of fraudulent behavior.
iii. The client organization certified by the accredited PCB are satisfied by the conduct of PCB and its certification system
iv. The accredited PCB has organized witnessing as required by NABCB
v. The accredited PCB has paid all the outstanding dues

3.2.2. In the event of any adverse issue arising from the reasons specified at points ii and iii at Cl 3.2.1 or if there is evidence of fraudulent behavior or if the PCB intentionally provides false information or if the PCB conceals information, the accredited PCB will be given an opportunity to explain its position in writing to the Board and present its case in person to the accreditation committee before a decision is taken in respect of maintaining of the accreditation. The final decision shall be taken in respect of maintenance of the accreditation on the basis of facts and the results of such presentation.

3.3. Suspension of Accreditation (Partial or full)

The PCB shall be subject to suspension of accreditation either fully or partially, both in terms of scope within a scheme or for one or more schemes in case the PCB has been accredited for more than one scheme. It shall be based on the following conditions individually or severally

a) No/ineffective corrective actions in response to the non-conformities observed during surveillance assessments (including witness assessments) or reassessment.

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b) Non payment of outstanding dues.
c) Not organizing assessments including witness assessments in time.
d) Any significant/major changes in the legal status, ownership, impartiality, use of sub-contractors, documentation, etc., which have not been informed to the Board within 30 days.
e) Any wilful misuse of the accreditation symbol of the Board.
f) Any wilful mis-declaration in the application form, which is discovered after the grant of accreditation/ reaccreditation.
g) Wilful non-compliance to the accreditation agreement.
h) Wilful misuse of accreditation conditions by certifying and issuing NABCB accredited certificate for scopes not covered under scope of accreditation.
i) Inability or unwillingness to ensure compliance of the client organization certified by the accredited PCB, to the applicable standards.
j) Fraudulent Behavior and intentionally providing false information or concealing information.
k) Excessive and or serious complaints against the certification system of the accredited PCB
l) Evidence of lack of control over the certification process/wilful bypassing of certification procedures.
m) Evidence of unethical certification practices including providing incorrect information to NABCB; misrepresentation by sales personnel of the PCB; faking of certification records; inappropriate relationship with consultants; etc.
n) Non-availability of resources in some of the technical areas/schemes covered under accreditation.
o) Inability or unwillingness to organize office/witness assessments due, in time
p) Critical or major non conformity which may bring into question the PCB's ability to provide certification in compliance with the accreditation norms
q) Any other condition/situation deemed appropriate by the accreditation committee.

3.3.1. A notice citing reasons and intention to suspend shall be sent to the PCB inviting response within 15 days.

3.3.2. The accredited PCB shall be given an opportunity to explain its position in writing to NABCB and present its case in person to the accreditation committee. The final decision shall be taken in respect of Suspension of Accreditation (Partial or full) on the basis of facts and the results of such presentation.

3.3.3. Notwithstanding the above provision for a representation by the PCB, the accreditation committee may decide to suspend accreditation if there is sufficient evidence of wilful misrepresentation of facts or wilful non-compliance to accreditation criteria. The period of suspension shall be formally communicated as per the criteria laid down by the Board

3.3.4. The information about suspension (partial or full) of the accreditation of the PCB shall be published on NABCB website for information to all and feedback from the industry / other stakeholders.

3.4. Withdrawal of Accreditation

3.4.1. The PCB shall be subject to withdrawal of accreditation based on the following conditions individually or severally
i. If an accredited PCB voluntarily relinquishes its accreditation status
ii. If the non-conformities are not appropriately addressed in spite of suspension/withholding of reaccreditation for a period not more than six months
iii. If no action is taken by the accredited PCB in response to the suspension on any

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other grounds.

iv. Complaints are received about the certification process / certified client organization and established to be based on facts
v. Critical or major non conformity which may bring into question the CB's ability to provide certification in compliance with the accreditation norms
vi. Any serious non-compliance to Terms and Conditions of accreditation especially any fraudulent behaviour which may warrant withdrawal in line with IAF MD 7.
vii. Any other condition/situation deemed appropriate by the accreditation committee

3.4.2. A notice of the intention to withdraw accreditation citing reasons shall be sent to the PCB. The PCB shall respond within 15 days.

3.4.3. The accredited PCB shall be given an opportunity to explain its position in writing to the NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of Withdrawal of Accreditation on the basis of facts and the results of such presentation

3.4.4. The withdrawal of accreditation shall be formally communicated as per the criteria laid down by the NABCB.

3.4.5. NABCB shall publish information about any withdrawal of accreditation on its website, in its newsletter as well as in newspapers, if necessary, for information of the industry / other stakeholders and inform IAF/APAC, if required.

3.4.6. The PCB shall inform the client organization it has certified, about withdrawal of accreditation and its consequences and replace their certificates either by unaccredited certificates or certificates with another accreditation or help them transfer to another PCB within 3 months.

4. Assessment

The assessment shall be for generic competence of the applicant body in operating a sound certification/ system in compliance with the accreditation criteria

4.1. Preparation for the Assessment:

4.1.1. The NABCB Secretariat prepares a draft accreditation assessment plan for the initial accreditation process, covering three stages, as follows:

a) assessment of the documents. This shall cover all levels of documents of the PCB for the accreditation scheme applied for.
b) assessment of office of the applicant PCB including any branch offices/ locations from where the PCB is offering its services /sub-contractors as applicable.
c) witnessing of on-site audits being carried out by the applicant PCB based on the scopes of accreditation / certification schemes applied for.

The normal assessment duration for each stage of assessment is described at Annex 2. The draft assessment plan (for individual assessments in an assessment programme) may be prepared in stages as mentioned above depending on the information supplied and as and when the individual assessment activity is planned and executed using a risk based approach. The clarifications regarding the scopes/schemes applied for, auditor expertise available with applicant, etc. shall be provided in advance for finalizing assessment plan; if necessary, the same shall be further verified as part of the office assessment.

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For Product Certification "Key Activities" shall include the following:

Policy formulation; Process and/or procedure development; Initial approval of auditing/evaluating personnel, or control of their training; On-going monitoring of auditing/evaluating personnel; Contract review; Assignment of auditing/evaluating personnel and technical experts if any, handling of samples and items, Control of surveillance or recertification audits, Final report review or certification decision, issue of certificates.

For the purpose of assessing scope of accreditation/ certification schemes applied for, the same shall be assessed through a combination of means such as documentation review where the PCB's system for competence and qualification would be reviewed, office assessment where records of persons qualified for the scope sectors/schemes is reviewed and witness of PCB's evaluations/audits. The choice of assessment technique will be decided based on risk.

4.1.2. The draft accreditation assessment plan shall be discussed with authorized personnel of the PCB to ensure an effective assessment plan at each stage.

4.2. Assessment Process:

4.2.1. Accreditation Assessment plan

4.2.1.1. Based on the draft accreditation assessment plan , NABCB secretariat prepares a detailed schedule for the following three stages of the assessment

a) Assessment of the documentation of the PCB.
b) Assessment of the office of the PCB including branch offices/locations / sub-contractors
c) Witness of the audit / evaluation being carried out by the PCB (At least two audits/evaluations (initial /recertification) are witnessed for initial accreditation of a PCB – if the PCB has applied for more than one Scheme, it would be one witness per Scheme. NABCB shall decide on how many witnesses would be needed to cover the entire scope of accreditation sought by the applicant PCB.

4.2.1.2. The programme shall be agreed by the NABCB Secretariat and by the applicant PCB.

4.2.1.3. The Leader of the assessment team, in consultation with Director/CEO NABCB, is authorized to identify the auditors (within the scope of accreditation) of the applicant PCB that his team would wish to observe during the witness of audit by the applicant PCB.

4.2.2. Initial Assessment

The initial assessment is carried out in three steps as per the assessment programme, as described in section 4.2.1.1 of this document

4.2.2.1. The documents are verified by the assessment team leader/or a member for compliance to the accreditation criteria as supported by the guidance documents, if any, and the scope applied for by the applicant PCB. In case the PCB applies for more than one accreditation scheme, then it shall be ensured by having

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appropriate number of assessors that at least one assessor qualified for each accreditation scheme is part of the assessment team. A document review report of any omissions of the criteria elements is forwarded by the team leader, to NABCB Secretariat.

4.2.2.2. In case the PCB has applied for more than one Scheme, then additional man-days may be added for document review and office assessment.

4.2.2.3. NABCB Secretariat reviews the Document review report (DRR) and forwards a copy of the DRR to the applicant PCB for their comments and compliance. Depending on the nature of comments and changes made to the documentation, decision regarding a second review of documents shall be taken. The applicant PCB would be informed if a second review is needed. If significant changes are needed, the second review may be charged. Any review beyond second document review would be charged by NABCB.

4.2.2.4. Any further review of documents would be charged to the CB. If the documentation does not meet the requirements even after 3rd review, the application is liable to be rejected. In such an event, the decision of the NABCB shall be communicated to the applicant with reasons for rejecting the application. The applicant can appeal against such a decision.

4.2.2.5. NABCB may decide to conduct a preliminary visit in case the documentation does not meet requirements after two reviews, to give an opportunity to the PCB to clearly understand the accreditation criteria and other requirements. The visit shall be charged to the PCB and the duration shall be decided by NABCB Secretariat based on the work involved. The preliminary visit will generally be carried out for one man day by the appointed leader of the assessment team that carried out the DR.

If the documentation is determined to be generally meeting the accreditation criteria, after review of the changes made, NABCB Secretariat may seek evidence of implementation of changes to the system by the applicant body

4.2.2.6. Subsequent to the documentation review stage, the onsite assessment of the head office and the branch offices/sub-contractors, if any, etc, as per the assessment programme decided at the beginning (see section 4.1.1 of this document), shall be planned. The team leader and the team member involved in the documentation review activity shall generally be part of the assessment team. Any additional team members may be inducted based on the review of mandays and the scope / certification scheme applied for.

4.2.2.7. The assessment plan for the office assessments as per the **accreditation assessment plan** , as prepared by the team leader is shared with the PCB for their agreement. The responsibility for preparation of assessment plan is that of the team leader for the individual office assessments as per the **accreditation assessment plan**.

4.2.2.8. The assessment team will carry out the assessment of the implementation of the applicant PCB's documented system in the head office of the applicant body and if necessary at other office sites / sub-contractors included in the accreditation application/**accreditation assessment plan**.

4.2.2.9. In case information collected during the head office assessment of the PCB

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requires inclusion of other locations in the **accreditation assessment plan**, the applicant PCB shall be informed and the same shall be modified to cover such locations. Subsequent monitoring at these offices / new locations shall depend on the nature of activities carried out there and the extent of control demonstrated by the applicant PCB.

4.2.2.10. The branch offices / sub-contractors carrying out activities as defined above (refer section no. 4.1.1) shall be included in the assessment programme and shall be covered during an accreditation cycle

4.2.2.11. During the assessment and/or on demand at any time, the applicant / accredited PCB shall provide unrestricted access to the documents and records that pertain to implementation of systems in accordance with the accreditation criteria for the scopes applied for. The records shall also include the records pertaining to applicant and client organizations certified by the PCB and the certification process and the scopes applied for. Access shall also be provided to the records of the complaints, appeals and disputes along with corrective actions and the method of verifying the effectiveness of the corrective actions. Under certain circumstances, where possibility of irregularity, malpractice and/or fraud is suspected, the records under review may also include the financial records as relevant/applicable to the certification process. Under these circumstances the NABCB assessors shall demand and take copies in any form as relevant – hard copies, scanned copies, etc.

4.2.2.12. The non-conformities observed during the office assessment shall be explained to the applicant PCB and given in NABCB designated format for carrying out root cause analysis and proposing corrective actions for preventing recurrence as well as corrections, where applicable. Concerns may also be raised. The time lines for the corrective action completion shall be agreed to by the assessment team leader and the authorized personnel of the applicant PCB as per the timelines laid down on this aspect (Pl see section 9 of this procedure).

4.2.2.13. The team leader shall recommend, at this stage, whether to await completion of the corrective actions or to proceed with the witness of the onsite evaluations/audits scheduled to be carried out by the applicant PCB. Generally any major NC in respect of areas like evaluator / auditor competence or certification process, would require the PCB to take corrective actions before a witness is planned. The Team leader shall send a report to NABCB Secretariat , including details of the recommendations for witness audits and the witness audit plan, as per the Guidelines of the Board.

4.2.2.14. The team, nominated by NABCB Secretariat, shall carry out the witness assessment as per the **accreditation assessment plan**, based on the scopes/schemes applied for. The PCB should ensure that the witness offered covers the representative processes of the concerned scheme. The assessment shall cover the complete process of evaluation/audit for certification.

4.2.2.15. For all witness audits /evaluation under ISO/IEC 17065, the PCB shall provide details of contract review, and reports of any prior evaluation/audits, if applicable and any other document as required for completing the process of witness assessment. During the process of conduct of witness assessment, the NABCB witness assessment team may also ask for the documentation of the evaluated/audited client organization and other evidence seen by the PCB's audit/evaluation team without causing undue disturbance to the audit/ evaluation

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process. For the purpose of review, on completion of the witness assessment, the PCB evaluation / audit team shall provide the NABCB AT, the findings of evaluations / the witnessed audits.

The PCB shall provide at least one week in advance before the witness assessment, the following details:

i) Brief of client organization
ii) Application received
iii) Contract review along with evaluation / audit man-days estimation
iv) Record of evaluator / auditor qualification for the scope/scheme along with supporting documents like CVs, knowledge & skills defined and evaluation record etc. and information on how team competence is built up for the scope/scheme.
v) Last audit report for the same client organization, if any
vi) audit plan
vii) audit programme, if applicable
viii) CB's procedures.

The evaluation/audit report along with the documented findings shall be provided to the NABCB AT as soon as the same is prepared and released for PCB's technical review process (please see Annex – 4 for timelines).

4.2.2.16. The NABCB assessment team shall identify the findings (non-conformities, concerns, etc).

4.2.2.17. A meeting shall be held on completion of witness assessment and the applicant PCB's audit team shall be explained and provided with, as far as possible, documented copy of the non-conformities/concerns observed during the assessment for corrective action as per the guidelines established by the Board. Additional NCs/Concerns may also be raised based on review of other records pertaining to the witnessed audit, contract review and mandays estimation, auditor qualification, etc, in addition to those raised during the witness assessment, as applicable. The team also provides an opportunity for the applicant PCB to ask any question about the findings and its basis during the meeting.

4.2.3. Assessment Report

4.2.3.1. The assessment team shall prepare a report at each stage of the assessment – office assessment, branch office assessment, and witness assessments. Non-conformities and concerns, if any, shall normally be handed over to the PCB representative at the end of each assessment. The report at each stage of assessment shall be sent by the NABCB within timelines as prescribed at Annex - 4 of this document to the PCB for their agreement. If no comments are received within a week, then the report is considered to be acceptable to the PCB and is deemed as final. The NABCB AT shall try to resolve any comments received on the report within timelines as prescribed at Annex 4 of this document and shall submit the report at the end of this period along with any unresolved comments from the PCB. NABCB Secretariat would coordinate, as needed. The unresolved comments if any would be handled as per the internal procedure of NABCB for disputes

For any witness audits, the PCB shall provide the witness audit report as per timelines prescribed at Annex 4 of this document and in case the report is not

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provided, then the NABCB assessment team would record the same in their report of the witness assessment and finalize its witness assessment report. NABCB assessment team may raise non-conformities/observations later, on the basis of any report submitted by the PCB If the PCB fails to submit its evaluation / audit report in time, then any information contained in the report may not be accepted as evidence for any contention by the PCB against observations by the NABCB assessment team.

4.2.3.2. After completion of various stages of assessments and after verifying the documents and records submitted by the applicant PCB on all the non-conformities and concerns , the team leader shall prepare a final report covering all the aspects of the initial assessment - documentation review, office (including assessment of any other locations as applicable) assessment, the witness assessments and the follow-up assessments, if any, assessment findings and the acceptance of CAs, etc. The final report of initial assessment is required to be made in the prescribed format and shall essentially consist of the following:

a) A report indicating the level of conformity of the PCB's management system against the NABCB accreditation requirements.
b) The non-conformities and concerns observed during various stages of the assessment and details of corrective actions taken by the PCB on the non-conformities/concerns and whether these are accepted by NABCB AT
c) Recommendations by NABCB assessment team with details of recommended scopes and justification for not recommending any scopes
d) Recommendations for special conditions like early surveillance, witness of any scope sector beyond those witnessed as part of initial assessment for reasons like confirmation of documented competence criteria, etc. NABCB team leader shall provide appropriate justifications for recommending the special conditions to be imposed.
e) The report shall be prepared as per the laid down Guidelines and criteria by the team leader in the established formats listing the level of compliance to the requirement of the accreditation criteria of the Board.

4.2.3.3. All the assessment reports at the stage of initial accreditation, reaccreditation and scope extension assessments which require a decision are reviewed. In respect of surveillance office/witness assessments, as a part of monitoring mechanism of NABCB, any report may be picked up for the review after it has been issued.

4.2.3.4. The NABCB secretariat shall organize a review of the assessment reports, to ensure that the laid down criteria are addressed correctly. In case the review requires additional action from the PCB, it shall be escalated to the CEO of the Board, who shall take the final decision on the matter. Based on the review, there may be a need for making changes in recommendations as needed based on the NABCB Board's accreditation criteria. Any revised report shall be sent to the applicant PCB along with reasons for any change

4.2.3.5. At any stage of the assessment process, if there is a need for a full or partial reassessment or a written declaration of compliance from the PCB ,in response to the non-conformities observed, the same shall be communicated to the applicant PCB by the Director/ CEO of the Board after obtaining the relevant supportive facts relating to assessment from the leader of the assessment team.

4.2.3.6. In case that the report sent has any difference from the information presented to the applicant PCB by the assessment team at the closing meeting, the same is

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highlighted and the explanation of the differences is enclosed.

4.2.3.7. The process of closing the non-conformities/concerns and verification must be completed in the specified time. If the applicant PCB delays the process of acceptable corrective action beyond the time limits specified by the NABCB, the NABCB will reserve the right to reject the application. The fees paid by such applicant PCB will be forfeited. In such an event, the decision of the NABCB shall be communicated to the applicant with reasons for rejecting the application. The applicant can appeal against such a decision.

4.2.3.8. After all the preceding steps are over, the final report shall be reviewed for completeness, by the NABCB, with respect to guidelines on the subject and shall be presented to the accreditation committee for its decision on the grant of accreditation to the applicant PCB.

4.2.3.9. Wherever needed, to support the evidence of competency of the applicant PCB, they may submit the documents and records of assessments undertaken on the applicant PCB by other IAF MLA Members. Director/ CEO NABCB, shall ensure a detailed review, on a case-to-case basis, and provide a report of the same to the Accreditation Committee. The Committee shall decide on the extent of its consideration for the grant of scopes based on such reports. Appropriate guidelines on this subject shall be laid down for the use of assessment teams as well as applicant bodies. In case of any difference in interpretation, the Board decision shall be final and binding on the applicant PCB (please see Annex 3 for details)

4.2.4. Time Period for assessment process

A typical time line for the accreditation process is given in Annex 4. The assessment process for any applicant PCB must be completed within a maximum of one year. In the event that the process is not completed within one year, NABCB will take a decision and the application may then be kept active for one more year and applicant PCB may be given one chance to completely restart the assessment process afresh without paying any additional application fee. In such cases the assessment process must be completed in one additional year.

In the event of delay in scheduling of witness assessments for different scope sectors applied for, as per NABCB procedure, the applicant PCB may apply in writing to the Director/CEO of the Board for consideration of their application for part of the scope, for which the assessment process including witness assessments as per NABCB procedure has been completed. The Director/ CEO NABCB shall have the right to accede to that request or differ. Grant of accreditation for part of the scopes shall be done subject to completion of CAs for all the non-Conformities and concerns raised during the earlier stages - office assessment and the witness assessments conducted and their acceptance/closure as per the laid down criteria of the Board.

5. Accreditation Decision

5.1. The Accreditation Committee is responsible for taking decision on granting, maintaining, suspending, reducing or withdrawing of Accreditation and also withholding of reaccreditation as well as extension of validity of accreditation. It also ensures that the members of the Accreditation Committee were not involved in the assessment and also have had no relationship for the last two years with the applicant PCB under consideration that can influence their decision on accreditation.

5.2. The reports are forwarded to the accreditation committee along with recommendations of

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NABCB secretariat for the decision of accreditation.

5.3. The decision of accreditation is taken by the Accreditation Committee unanimously and is generally not put on vote. The Head of the Committee shall be responsible for coordinating and addressing the issues raised by the members. The Head of the committee shall have the right to call for any other assessor/experts/personnel for clarifying any of the issue that is under discussion. The persons so called for clarifications, shall not take part in the decision of the accreditation. It shall be ensured that the persons so called for clarifications shall not have taken part in the assessment of the concerned PCB and shall be free from any conflict of interest, except when clarification from the assessment team is needed.

5.4. The decisions of the accreditation committee are based on the assessment report, recommendations of the assessment team and the NABCB secretariat, any other relevant information about complaints, the market reputation obtained by the Board, etc. It may also involve interaction with the Director/CEO NABCB, assessment team and the applicant PCB. The accreditation committee in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant's certification process and the applicant shall not refuse to present such information.

6. Accreditation Information/Documents

6.1. The accreditation committee shall decide to grant accreditation to the applicant PCB, only after the applicant PCB has met all the conditions specified by the Board,

6.2. Two copies of the accreditation agreement shall be signed by the applicant PCB and the applicant PCB shall ensure that the relevant fees are paid.

6.3. On receipt of the signed agreement and the fee as per the invoice, a set of accreditation documents is issued to the applicant PCB.

6.4. The accreditation certificate in the standard template would include the NABCB accreditation symbol, the name of the PCB, address of the premises of the PCB from where key activities are performed, unique accreditation number, the scope of accreditation, effective date of grant of accreditation and the date of expiry of the certificate (BCB F018).

In addition to this, the following details are also included:

- Certification scheme
- Standards/Normative documents and/or regulatory requirements to which organizations are certified
- IAF Scope sector

6.5. The initial accreditation certificate is valid for 3 years and the date of issue and validity is indicated on the certificate.

6.6. The Scope of accreditation granted to a PCB is indicated on the Accreditation Certificate or a Schedule which accompanies the accreditation certificate. Whenever there is a change in scope (extension or reduction) which calls for a revision of the schedule and / or accreditation certificate, the revised schedule and / or accreditation certificate will carry the revision no. (such as Rev 1) with a disclaimer as follows: "This certificate / schedule supersedes the earlier version of the certificate / schedule dated ……..". In addition, the PCB will also be asked to return the earlier version of the certificate and / or schedule.

In case of scope reduction, the revised certificate and / or schedule will be issued only after receipt of earlier version of the certificate and / or schedule from the PCB.

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7. Maintaining Accreditation and Accreditation Cycle

7.1. Surveillance Assessment

7.1.1. To ensure that each PCB accredited by the Board continues to comply with the accreditation requirements, a surveillance assessment shall be carried out annually at the main office of the PCB; other offices may be covered as per the assessment programme. The first surveillance assessment shall be completed within 9 months from the date of grant of accreditation. However, the accredited PCB, for valid reasons may seek a postponement of the assessment for a maximum period of three months. For deferring the surveillance, the PCB shall give written justification and shall obtain the consent of CEO, NABCB. It shall be ensured that the first surveillance takes place within 12 months and gap between surveillance assessments shall not exceed 15 months.

The subsequent assessments shall be every 12 months. The surveillance assessment shall be consistent with the initial assessment and include office assessment, other locations performing key activities as defined in section 4.1.1 above, including foreign locations and witness of the audit of the organizations certified by the accredited PCB. The number of locations included in the surveillance assessment would be based on the . . Locations where highest and lowest number of certifications are undertaken, will be chosen, if applicable.

7.1.2. The witness assessment programme would take into account the audit resources available to the PCB, number of accredited certificates issued, spread of locations and the extent of control demonstrated by the PCB and observations of the office assessment. Specific schemes/audits or auditors may be chosen for witnessing (please see Annex - 6). A plan for witness assessments would be communicated to the accredited PCB. The provisions of clause 4.2 would apply as regards the number of NABCB assessors/ experts for witness audits. NABCB will try to cover maximum schemes under the scope of accreditation during its surveillance activities including both office and witness assessments. In selecting schemes to be witnessed, and specific scopes in the schemes, a risk based approach will be used. Complex Scopes within a scheme and complex schemes will be chosen for witnessing. Also scopes/schemes under regulatory oversight will be chosen for witnessing more often. Similarly, scopes having highest as well as lowest number of certifications will be chosen.

7.1.3. The non-conformity reports and concerns if any and the assessment report of each of the surveillance assessments shall be forwarded to the accredited PCB for taking corrective action as per the laid down criteria for the maintenance of accreditation

7.1.4. In the event of any critical and/or major non-conformity that can affect the certification process, the NABCB Secretariat informs the accredited PCB and seeks a time bound corrective action plan. The decision for an additional follow up visit to verify the implementation of the corrective action plan as committed by the accredited PCB is taken by the Director/CEO, NABCB in consultation with the Team leader of the assessment team. Such decision shall be binding on the accredited PCB. The cost of the follow up visit shall be borne by the accredited PCB. In the event, that the accredited PCB has not shown evidence of completion of the corrective action agreed as per committed time period, NABCB Secretariat shall prepare a status report and submit it along with the assessment report to the accreditation committee along with recommendations of NABCB secretariat for further decision on suspension or reduction or withdrawal of accreditation. Critical/major non conformity may lead to suspension/withdrawal of accreditation depending on the seriousness.

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7.1.5. The surveillance assessment reports shall be reviewed and presented to the accreditation committee for consideration and decision regarding any suspension (partial/full) of accreditation or scope extension or scope reduction of the accredited PCB.

7.1.6. The frequency of surveillance assessments may be increased based on the type of non-conformities observed, complaints received, market feedback etc. The PCB shall be informed of the reasons for any change in the frequency.

7.2. Other Surveillance activities

7.2.1. NABCB Secretariat shall call for information on new certificates issued on a quarterly basis and based on the same may decide to seek audit reports on a random basis. The Secretariat would have the reports reviewed and seek any clarification. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited PCB to respond. The cost for such reviews shall be charged to the PCB.

7.2.2. Based on concerns noticed during the office assessment / market feedback / complaints or otherwise, Director/CEO, NABCB may decide to arrange direct interaction with or visit client organizations certified by the PCB and the cost of such interactions/visits carried out if any shall be borne by the accredited PCB. PCBs shall, in their contract with their certified organizations provide for such activities. PCBs shall be informed of any such activity and may join the NABCB assessor/AT for such activities if required. PCBs would be informed of the duration of such activities and the information planned to be collected, if felt necessary.

7.2.3. If such activities indicate satisfactory operation of accredited certification, then a reduction in normal witnessing could be considered. If however, the activities reveal unsatisfactory operation of the accredited certification scheme, then NABCB Secretariat would advise actions to be taken which could include a special office assessment and intensified witnessing,

7.2.4. The PCB would have to bear the assessment charges in all such cases.

7.3. Reaccreditation

7.3.1. Normally six months prior to completion of the accreditation term, the accredited PCB shall be informed through an alert generated by the accreditation portal about the reaccreditation process The PCB shall apply at least 5 months in advance of the expiry date and ensure that office assessment is carried out normally 3 months before the expiry date. In case of delays, the reaccreditation is liable to be withheld till the reaccreditation process is completed.

7.3.2. For the purpose of reaccreditation, the reassessment shall be carried out in accordance with process detailed in sections 4 – 6 of this procedure as applied to initial accreditation process and assessment.

7.3.3. In case during the accreditation cycle preceding the reaccreditation, witness assessments have been carried out as part of surveillance assessments exceeding the number of mandatory minimum witness assessments needed for reaccreditation, then no separate witness assessments are required as part of reaccreditation process. It is the responsibility of the PCB to ensure that it offers at least the minimum number of

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witness assessments required for each accreditation. These could also be certificates granted under accreditation by other ABs. The mandatory minimum number for the purpose of reaccreditation shall be the same as that for initial accreditation.

7.3.4. On completion of the re-accreditation process, the accredited PCB shall initiate the relevant activities to take corrective actions on the observed non conformities and concerns, if any,and complete all actions as per the criteria of the Board to close all critical & major non-conformities and ensure that corrective action plan for minor non conformities are accepted by the assessment teams, before the reaccreditation decision can be taken.

7.3.5. The assessment team shall prepare a report of all the aspects of the assessment of the office and witness assessments, if undertaken for the purpose. The final assessment report shall be made which clearly identifies the activities undertaken as part of reassessment process and includes the following:

a) the level of conformity of the PCB's management system against the NABCB accreditation requirements.
b) The non-conformities and concerns observed during various stages of the assessment and details of corrective actions taken by the PCB on the non-conformities/concerns and whether these are accepted by NABCB AT
c) Recommendations by the NABCB assessment team with details of recommended scopes and justification for not recommending any scopes
d) Recommendations for special conditions like early surveillance, witness of any scope sector etc, NABCB team leader shall provide appropriate justifications for recommending the special conditions to be imposed.

7.3.6. The report shall be prepared as per the laid down guidelines and criteria by the team leader / team members in the established formats listing the level of compliance to the requirement of the accreditation criteria of the Board. The reports of the re-assessment, and witness assessments if undertaken, and the corrective actions taken by the accredited PCB along with recommendations of NABCB secretariat shall then be presented to the accreditation committee for a decision.

7.3.7. If the decision by the accreditation committee is to continue the accreditation, a fresh set of accreditation documents shall be issued to the accredited PCB.

7.3.8. The reaccreditation shall be for a period of4 years.

7.3.9. All reassessment activities shall be completed prior to the expiry of accreditation. In case there is a delay in decision-making, the accreditation shall continue, if the report of the assessment team is satisfactory. The decision of the accreditation committee shall be binding on the accredited PCB.

7.3.10. If the accreditation committee is not able to take a positive decision for any reason, the reaccreditation may be withheld and communicated to the accredited PCB for initiating appropriate actions including any corrective actions. The PCB shall complete all actions within 6 months failing which the reaccreditation may not be agreed to. The period from the date of previous expiry to reaccreditation shall be deemed to be suspension and reaccreditation effected from the original date of expiry.

8. Suspension & Withdrawal of Accreditation

8.1. Decision on Suspension and Withdrawal of Accreditation

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Accreditation Committee is authorized to decide about the suspension or withdrawal of accreditation or revoking of suspension.

8.2. Suspension of Accreditation (Partial/full)

8.2.1. In addition to the requirements specified under section 3.3 Suspension of Accreditation (Partial or full) the following shall further apply
The PCB may seek on its own suspension of accreditation citing reasons for the same with justification.

8.2.2. The period of suspension will not be more than six months. If the accredited PCB does not take suitable corrective action to the satisfaction of the Board and its assessment team within six months, the Board reserves the right to withdraw the accreditation.

8.2.3. In the event of partial / full suspension, in terms of scope within a certification scheme or the certification scheme itself or the accreditation scheme, the accredited PCB shall be informed. The PCB is then barred from issuing accredited certificates for the scopes for which the accreditation has been suspended till the suspension is in force.

8.2.4. It is allowed to take on surveillance assessment only with the permission of the CEO, who will ensure that adequate resources are provided by the PCB such that the surveillance process is not compromised. Where the CEO of the Board is not sure of the adequate resources, the PCB under suspension will be asked to take support of another PCB accredited by the Board.

8.2.5. For revoking suspension, the accredited PCB shall formally apply to NABCB as per the established guidelines. The suspension shall be revoked after an assessment has been carried out to verify that the corrective actions have been implemented and are effective in eliminating the reasons of suspension.

8.3. Withdrawal of Accreditation

8.3.1. The reasons for withdrawal are already specified at clause 3.4 Additionally, the Board may decide to withdraw accreditation based on market feedback, complaints about the certification process etc. after due investigation and providing the PCB with an opportunity to respond to the findings.

8.3.2. In the event of the decision to withdraw the accreditation, the PCB is asked to return the original accreditation certificate and the enclosure of scopes to NABCB and to stop using the accreditation symbol of NABCB with immediate effect. The Director/CEO NABCB shall also notify the legal course for initiating any penalty of such misuses if it is reported and found supported by facts and evidences

8.3.3. In case a PCB is found using NABCB accreditation symbol after withdrawal of accreditation supported by facts and evidences, NABCB may initiate legal action.

8.3.4. Withdrawal of an accreditation has consequences on the organizations certified by the PCB. The CB shall provide the organization it has certified, with information on the withdrawal of its accreditation and on its consequences. Any Accredited certificates shall be considered as unaccredited, once accreditation is withdrawn and NABCB may require the PCB to publicize this on its website and may place this information on NABCB website also. The PCB may, in consultation with NABCB arrange for the transfer of such accredited certificates to another accredited PCB, if possible.

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8.3.5. Following withdrawal of accreditation, the PCB may seek fresh accreditation as a new applicant only after a cooling period of minimum one year. NABCB shall have the right to satisfy itself if the reasons which led to withdrawal have been addressed adequately before accepting the application. Any visits needed for such a check would be charged to the PCB.

8.4. Public Information of Suspension or Withdrawal of accreditation

The information of the suspension or withdrawal shall be placed on the NABCB website in the register of the accredited bodies and NABCB may make a public declaration in the newspapers. The charges for making the information public through newspapers shall be recovered from the PCB involved before revoking the suspension or renewal of the accreditation.

9. Assessment findings (Nonconformities/Concerns) and Corrective Actions

9.1. The Non conformities observed shall be categorised in three categories:

a) Critical:

- Any evidence that indicates that the certificates issued by the PCB may not be based on sound judgment and objective evidences and may not be a true reflection of the compliance to the standards.
- Any failure of implementation of the certification rules as per accreditation criteria and raises doubts on the operation and practice of the certification and the results of the certification system being operated by the PCB.
- Any evidence that indicate possibility of fraudulent/irregular behaviour by the PCB, such as issuance of certificates without audit or minimal audit, violation of impartiality requirements which indicates an unacceptable threat to impartiality, issuance of certification to a client not observed to be fit for certification during validation assessments, etc.
- Critical non-conformities shall call for the immediate correction and corrective actions based on appropriate root cause analysis. Such actions shall have to be completed and non-conformities addressed within 30 days of the date these have been observed by the assessment team as per the established criteria of the Board. Critical NC shall be brought to the immediate notice of Director/CEO NABCB by the Team Leader of the NABCB AT. The PCB may be liable for suspension/withdrawal of accreditation with due notice if such NCs are raised even as it takes action to address them. In case the corrective action is not completed within the stipulated time frame, the accreditation may be liable for suspension partially or completely or withdrawal based on the nature of non-conformity.

b) Major:

- Any evidence that casts doubt on the certification system and is less severe than in case of the critical (which bring into question the validity of certificate issued) and is evident in failure of certain elements of the criteria individually (e.g. absence of liability insurance or internal audit system not working). It may have less direct impact on the certification system and its results or any minor non-conformities that have not been acted upon within the stipulated time frame. A number of minor nonconformities associated with the same requirements or issue may be considered as major nonconformity if it indicates a systemic failure.

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- Major non-conformities shall call for the early correction and corrective actions based on appropriate root cause analysis. Such actions shall be completed and non-conformities addressed within 60 days of the date these have been observed by the assessment team as per the established criteria of the Board. The PCB shall get 10 days for proposing corrective actions and the NABCB AT shall get 10 days for review and response on these. In case the corrective actions are accepted, the PCB shall be given 15 days to submit evidence of the implementation of the accepted corrective actions which the NABCB AT will review and respond within 15 days. In case the NC is not addressed within the stipulated time frame, the accreditation may be liable for suspension partially or completely based on the nature of the non-conformity.

c) Minor:

- Any evidence that indicates a non-compliance to the accreditation criteria and the application documents, which has negligible impact on the certification system and its results.
- Minor non conformities shall need to be addressed and corrected as early as possible but not later than 3 months (90days) from the date these have been observed by the assessment team, as per the established criteria of the Board. In case of minor NCs also the PCBs will be required to undertake appropriate root cause analysis before deciding the corrective action. One of the analysis it will require to do is to establish whether it is an isolated case or there are other instances the same finding is observed since the rigour of the corrective actions decided will depend on the same.
- PCB is required to propose corrective actions within 15 days, and the NABCB AT should review / respond on proposed CAs within 10 days.

Note 1: Multiple Minor NCs with related impact on the certification system shall result in a Major non-conformity based on the judgement of the assessment team.
Note 2: NCs remaining unresolved after the prescribed timelines are liable to be upgraded to the next higher category.

d) Concerns: NABCB assessment teams may also raise concerns under the following circumstances:

- minor gaps/inadequacies observed, in PCB's documented system or practices, which do not directly amount to non-compliance. However, if no action is taken they are likely to result in nonconformities.
- Issues observed during witness assessments, which may require further review and assessment of the systems of the PCB in the office.
- Findings of minor nature where, in the judgement of the assessment team, root cause analysis in not required
- Issues from documentation review, minor in nature, which have remained unresolved subsequent to office assessment, where the practice of the PCB was observed to be complying with the requirements of the standard.
- Concerns are findings which do not require the PCB to carry out any root cause analysis. It can directly inform the correction/corrective actions it has taken or intends to take (where it would take time). In certain cases, where these are unresolved issues from documentation review, the NABCB AT may ask the PCB to submit the evidence of Corrective actions for the resolution of the concerns.

9.2. The PCB shall be given only two chances/iterations for acceptance of corrective actions (proposed/implemented) and closure of non-conformities/concerns and from 3rd iteration onwards, they would be charged for the additional review accordingly (0.5/1 manday as

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decided on case- to case basis).

9.3. The time for addressing the NCs/Concerns shall be reckoned from the day the non-conformities are handed over to the PCB.

9.4. Non-conformities of critical or major nature shall normally call for a follow up visit as per recommendation of the assessment team. Such a follow up visit shall be charged as per prevailing fee structure.

9.5. In case of minor non-conformities, a declaration in respect of completion of the corrective action by the authorized person of the PCB may be accepted. However, during surveillance, if it is found that the Minor non-conformity is not effectively addressed, the non- conformity shall be upgraded into major non-conformity and shall have to be treated as per the criteria laid down for Major Non conformity.

Note: The assessment team may also identify opportunities for improvement and convey the same to the PCB as observations and include in their final report.

10. Change in the status of the Certification Body

10.1. As part of the application for accreditation, the applicant body / accredited PCB undertakes to inform NABCB within 30 days if any change takes place in any of the aspects of its status or operation that affects its:

a) Legal, commercial or organizational status
b) The organization, top management, and key personnel
c) Significant changes in policies and/ or documented procedures,
d) premises
e) personnel, equipment, facilities, working environment or other resources, where significant and relevant.
f) capability of certification or scope of accredited activities, or conformity with the requirements of the accreditation criteria.
g) Addition/closure of any branches/ foreign locations where clients organizations are located / operations related to certification are performed
h) Changes in certifications scheme that may effect the certification process
i) Other such matters that may affect the ability of the PCB to fulfil requirements for accreditation.

10.2. On receipt of the information of change in any of the above parameters, the Director/CEO decides whether an extraordinary visit is necessary or the change shall not affect the operation of the certification system within the accredited scope. If the Director/CEO decides on a visit, such a visit shall be charged as per prevailing fee structure. The invoice for such a visit is sent to the PCB. Further action shall be initiated only on timely payment of fee for the visit.

10.3. During regular surveillance the accredited PCB is asked to confirm that no change in the parameters mentioned above or any other aspect that will affect the certification system has taken place since the last assessment.

10.4. In case an accredited PCB is found to have given a willful wrong declaration, the Board may take suitable action and also reserves the right to suspend/withdraw the accreditation.

11. Extension/Reduction of the Scope

11.1. Extension of the scope is of two types. One where the extension of scope is being asked for

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a completely new certification scheme that makes it necessary to process the application similar to the initial assessment. The second is where the extension of scope has been asked for within the same certification scheme for new field/subgroup/technical area as applicable. In case it is a new scheme, then the scheme should meet the requirements of NABCB policy on conformity assessment schemes and should be accepted by NABCB as per clause 1 of this document

11.2. Normally the extension of the scope will be carried out as part of the surveillance visit by increasing the number of assessor mandays necessary, or alternatively NABCB or the applicant PCB may ask for an additional assessment. In case of extension of scope with in the same scheme, the decision of extending the scope may be done based on the assessment of the office to verify the resources only. No special witness assessment may be undertaken for the extended scope.

11.3. In case extension of scope is for a new scheme, then NABCB would conduct document review, office assessment and witness assessment either based on the requirements prescribed in the scheme or based on elements of the scheme. NABCB may omit any of the 3 steps after review of elements/requirements of the scheme.

11.4. The proposal for the application and other fees for extension of the scope shall be forwarded to the PCB.

11.5. The scope extension visits shall be charged as per the prevailing fee structure. Further action shall be initiated only after timely payment of fee for the scope extension visit. The procedure followed for the assessment and decision for extension of the scope is similar to the initial assessment as described in sections 4 to 6 except number of witness assessments. If the PCB has applied for more than one Scheme as a scope extension, it would be one witness per Scheme.

11.6. The reduction of the scopes is done based on the following:

a) The accredited PCB may like to reduce their scope of accreditation of their own accord.
b) The accredited PCB has been placed under partial suspension on account of inadequate resources for part of the scopes and subsequently agrees for the reduction of scope.

11.7. The decision for extension and reduction of scope is taken by the accreditation committee.

12. Fee payable for the accreditation process and Annual Fee

The fee structure shall be approved by the NABCB. The current approved fee schedule is available on NABCB website

12.1. The total fee shall depend on the actual assessment days and other parameters as specified in the fee schedule.

12.2. Each accredited body shall pay annual operating fee as identified in the current approved schedule

12.3. The NABCB shall have the comprehensive right to revise the fee schedule as and when necessary .

12.4. The NABCB shall take the following actions if any applicant or accredited PCB fails to pay the fee as invoiced

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a) Stop further processing of the application/extension of scope/reaccreditation
b) Do not offer accreditation
c) Suspend and/or withdraw the accreditation

12.5. All invoices are to be paid within one month. Any failure to pay the invoices timely may result in penal action like rejection of application or suspension of accreditation. If any PCB is found to be defaulting on payments repeatedly, NABCB may decide to ask for payment in advance for one year at a time.

12.6. Fees for any assessment on foreign locations carried out by the local accreditation body shall be charged at the current rates of the local accreditation body.

13. Complaints and Appeals

The detailed procedure for complaint handling and appeals BCB 203 is available on NABCB website and the same may be referred to.

Disputes

A dispute is a disagreement between the PCB and NABCB AT (such as non- acceptance of NC by PCB, non-acceptance by NABCB AT of CAs proposed / implemented by the PCBs) or PCB and NABCB Secretariat. Representation on such disagreement should be made to CEO in writing by the PCB. NABCB will handle disputes in accordance with its internal procedure for the same.

14. Publishing of the Information for Public & availability of accreditation schemes

14.1. The NABCB shall make public announcement of the accreditation schemes, criteria of accreditation, application for accreditation, fee schedule and other related documents on its website and on specific request.

14.2. The NABCB shall maintain a list of the accredited PCBs and the applicants on its website. It also makes this information available on request.

14.3. The accreditation schemes are open to all applicants within the capability and scope of the NABCB.

14.4. The NABCB shall also make public information about suspension withdrawal of accreditation, with holding of reaccreditation and extension of validity of accreditation.

15. Confidentiality and Disclosure

15.1. The information obtained regarding the certification system of the applicant and accredited PCBs that are not of the nature of public information shall be kept confidential by all NABCB Personnel, members of the NABCB, panel of assessors, experts and the committee members.

15.2. If the NABCB has to share any confidential information due to any legal situation, the concerned PCB shall be informed of the extent of disclosure and the body to whom the disclosure has been made

16. Obligations of the certification body and NABCB

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The general obligations of the applicant / accredited PCB sand NABCB are given in Annex 5.

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Annex 1 (Clause 2.1.1)
(Definitions)

Definitions of terms used in the accreditation process have been adopted from ISO 17000 & ISO 17011. Some of the definitions are reproduced here

Appeal

Request by a PCB for reconsideration of any adverse decision made by the accreditation body related to its desired accreditation status.

Note: Adverse decisions include

- refusal to accept an application,
- refusal to proceed with an assessment,
- corrective action requests,
- changes in accreditation scope,
- decisions to deny, suspend or withdraw accreditation, and
- any other action that impedes the attainment of accreditation.

Complaint:

Expression of dissatisfaction, other than appeal, by any person or organization, to an accreditation body, relating to the activities of that accreditation body or of an accredited PCB, where a response is expected.

Dispute
The disputes about the accreditation system, assessment process etc.

Reducing accreditation
Process of withdrawing accreditation for part of the scope of accreditation

Scope of accreditation
Specific conformity assessment services for which accreditation is sought or has been granted

Surveillance
Set of activities, except reassessment, to monitor the continued fulfilment by accredited PCBs of requirements for accreditation

Suspending accreditation
Process of temporarily making accreditation invalid, in full or for part of the scope of accreditation Partial suspension of accreditation for specific technical areas / scopes or for specific geographic areas
Withdrawing accreditation
Process of terminating accreditation in full

Witness Assessment
observation by the accreditation body of a conformity assessment body carrying out conformity assessment activities within its scope of accreditation

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Annex 2 -Assessment duration (clause 4.1.1)

The normal assessment duration would be as follows

- Document review (Manuals, procedures, other documents as needed – 3 mandays for initial accreditation, 2 man days for reaccreditation and 1 man day for each subsequent schemes for both initial and reaccreditation.
- Review of corrective actions and revised documents – to be estimated by NABCB Secretariat
- Office assessment – 4 mandays for one product certification scheme, at least one manday would be added for each extra scheme covered in assessment. Need for any additional mandays for specific situations would be estimated by NABCB Secretariat and informed to the PCB in advance
- Branch office / sub-contractor assessment – generally 1 manday depending on the activities carried out in the branch
- Witness assessments – As per plan of PCB– NABCB would deploy a competent team comprising of assessors and TEs if required.
- Follow up assessments – To be estimated by NABCB secretariat
- In case of initial accreditation assessment, the preparation of final report by team leader and / or virtual closing meeting - 1.5 manday
- Review of response to NCs - as per Annex - 4
- Surveillance assessments – 2 mandays for PCB accreditation scheme and at least one manday for each additional accreditation scheme
- Any extension of scope assessment – To be estimated by NABCB secretariat. May require both office assessment and witnessing.

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Annex 3

Norms for using reports from other accreditation bodies for use in NABCB accreditation process (The subject report should be of same or equivalent scheme)

Background:
NABCB, as an MRA signatory of APAC and MLA signatory of IAF is obliged to recognize accreditations issued by other MRA / MLA signatory accreditation bodies. A provision exists in the MRA / MLA procedures of APAC / IAF respectively for exchange of documents among ABs and to recognize the work done by each other.

NABCB procedure for accreditation BCB 201 also includes a provision for using reports issued by other accreditation bodies.

The recommendations by NABCB may take into account the results of assessments by other IAF MLA members.

Therefore, NABCB would consider reports of other ABs who are signatory to IAF MLA / APAC MRA for ISO/IEC 17065.

Framework for use of reports from other ABs for initial assessments

1. NABCB would carry out its own office assessment. Use of reports from other ABs would be restricted to witness assessment reports only, for the present.

2. NABCB would carry out at least one witness assessment to confirm the PCB's process for evaluating before using reports from other ABs. If however, NABCB has witnessed an evaluation for another AB, such a report would be acceptable in lieu.

3. NABCB would witness assessments in Schemes identified as critical as a part of initial assessment

4. When the applicant PCB is already accredited by an APAC MRA or IAF MLA signatory AB then NABCB may accept a witness report. In case of a new PCB, where accreditation is granted after 2 WAs, NABCB may accept a foreign AB's witness report not older than 3 years in lieu of one WA

5. If a PCB already holds NABCB accreditation for a PCB scheme, it can be granted additional scopes in that Scheme based on foreign AB's accreditation without WAs. Further if a PCB is already accredited by NABCB and has applied for scope extension for another scheme it may be granted additional scopes in that Scheme based on a foreign AB's accreditation without WAs, NABCB may take the above decision based on review of scheme as per NABCB policy.

6. Reports of witness assessments should be reasonably current – not older than 3 years on the date of NABCB assessment and audit witnessed should meet the general NABCB criteria – a) should be either an initial audit / renewal audit covering all the requirements of the Scheme; b) at least all key processes of the scheme are audited

7. NABCB would follow the IAF Guidance on exchange of documents among IAF MLA signatories. The reports would be sought from the AB directly based on the information provided by the PCB. It shall be the responsibility of the PCB to ensure that the AB concerned releases the reports or PCB can submit the reports directly and NABCB will get the report authenticated by the foreign AB.

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8. The PCB shall also confirm that there had been no issues raised by the other AB on auditor competency requirements during their previous assessment.

9. NABCB Accreditation Committee may decide not to use such reports citing clear reasons

Framework for use of reports from other ABs for surveillance assessments

NABCB may utilise any witness assessment report of an IAF MLA signatory in lieu of its own witnessing requirements as part of surveillance activities. The process would be similar to that detailed above except that any report of surveillance audits would also be acceptable

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Annex 4

Timelines for accreditation process

(Section 1-6 of BCB 201)

Timelines - The normal time period for the various stages of the accreditation process would be as follows:

Sl.	Accreditation Process		Time Norms
1.	Application review by Dealing Officer (from the date of receipt of application)		1 week
2.	Recording of Application (from date of receipt of complete application)		1 week
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of complete application)		1 week
4.	DR to be completed by AT and sent to CAB & NABCB Secretariat by Team Leader (from the date of receipt of complete application)		4 weeks
5.	CAB to respond to comments on DRR (from the date of receipt of DRR)		2 weeks
6.	Preliminary Visit to be fixed if DR issues are not resolved within 2 rounds (from date of receipt of Round 2 response on DRR from CAB)		4 weeks
7.	Report of Preliminary Visit (from the date of the visit)		2 weeks
8.	OA to be carried out (from the date DR is deemed satisfactory)		4 weeks
9.	OA Report to be submitted by AT to CAB as well as NABCB (after completion of assessment)		3 weeks
10.	Dates of WA to be fixed by CABs (after completion of OA ,if there are no NCs on Competence)		2 weeks
11.	CAB to respond to Findings of OA		
	Critical NC	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT
	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
		Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT

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		Closure of NC	Within 60 days of the date on which the NC is observed by the AT
	Minor NC	Proposed Corrective Actions	Within 15 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 90 days of the date on which the NC is observed by the AT
12.	NABCB Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 2 days from the receipt
	Major NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
	Minor NC	Proposed Corrective Action	Within 15 days from the receipt
13.	WAs to be carried out (from the date of notification by CAB)		Desirable 2 weeks from the day CAB offers WA; max 4 weeks
14.	CAB to submit the required documents for WAs (before the date of assessment)		Min 1 week before the WA
15.	CAB to provide report of witnessed audit/inspection to AT (after completion of assessment)		Max 1 week after the WA
16.	WA Report to be submitted by AT to CAB as well as NABCB (after receipt of witnessed audit/inspection report from CAB)		3 weeks
17.	CAB to respond to Findings of WA		**As given at Sl. No. 11 above**
18.	NABCB Response on Findings		**As given at Sl. No. 12 above**
19.	Consolidated IA Report (in case of Initial Accreditation)		1 week after closure of all issues in OA/WAs by CAB
20.	Technical Review of IA Report (after receipt of IA report from TL)		1 week
21.	IA report to be sent to CAB (after Technical Review)		1 week after review
22.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)		1 day
23.	Once decision of accreditation is announced by NABCB, CAB has to pay the fees and sign the agreement		1 week
24.	Accreditation certificate to be issued by NABCB (after signing of agreement/clearance of payment)		1 day
25.	CAB to ensure that SA is completed (before the month of validity)		3 months

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26.	RA application to be received from CAB of last accreditation cycle	6 months before date of expiry of accreditation
27.	Re accreditation OA to be completed	3 months before the date of expiry
28.	Case for Grant of Reaccreditation to AC	Within the month of validity of accreditation

Time lines for Scope Extension:

Sl	**Scope Extension Process**		**Time Norms**
1.	Preliminary Scrutiny of application for completeness with regard to documentation and fees (from the date of receipt of application)		2 days
2.	Application review by Dealing Officer (from the date of receipt of application)		2 days
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of application)		3 days
4.	Offsite review of documents to be completed by AT/assessor and sent to CAB		2 weeks
5.	Findings of offsite review to be addressed by CAB (if any) (from the completion of offsite review)		1 week
6.	Carrying out onsite assessment (if required) (from the date issues in offsite review addressed)		4 weeks
7.	Report to be submitted by AT to CAB (from date of onsite assessment)		2 weeks
8.	CAB to respond to Findings of OA – (from the last date of assessment		
	Critical NC	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT
	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
		Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Closure of NC	Within 60 days of the date on which the NC is observed by the AT
	Minor NC	Proposed Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT

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		Implementation of Corrective Actions and closure of NC	Within 90 days of the date on which the NC is observed by the AT
9.	NABCB Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 2 days from the receipt
	Major NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
	Minor NC	Proposed Corrective Actions	Within 15 days from the receipt
10.	Technical Review of OA Report (from the date of closure of findings)		5 days
11.	WA to be carried out (from the date of completion of OA)		Desirable 2 weeks from the day CAB offers WA; max 4 weeks
12.	CAB to submit the required documents for WAs		1 week before the date of assessment
13.	CAB to provide audit/inspection report to AT (after completion of WA)		1 week
14.	WA Report to be submitted by AT to CAB (after receipt of audit/inspection report from CAB)		2 weeks
15.	CAB to respond to Findings of WA		**As given at Sl. No. 8**
16.	NABCB Response on Findings		**As given at Sl. No. 9**
17.	WA Report review to be completed (from the day of closure of findings)		3 days
18.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)		1 day
19.	Accreditation certificate to be issued by NABCB (from the day of approval of minutes of the AC meeting)		3 days

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Annexure 5 (Clause 16)

(Obligations of the applicant / accredited PCB)

The obligations of the applicant / accredited PCB are;

a) The PCB shall commit to fulfil continually the requirements for accreditation set by NABCB for the scopes for which accreditation is sought or granted including adapting to changes in the requirements for accreditation as and when communicated and shall also commit to provide evidence of fulfilment.

b) When requested, the PCB shall afford such accommodation and cooperation as is necessary to enable the accreditation body to verify fulfilment of requirements for accreditation. This applies to all locations where the certification activities take place.

c) The PCB shall provide access to PCB personnel, locations, equipment, information, documents and records as necessary to verify fulfilment of requirements for accreditation.

d) The PCB shall provide access to those documents that provide insight into the level of independence and impartiality of the PCB from its related bodies, where applicable.

e) The PCB shall arrange the witnessing of certification activities when requested by NABCB

f) The PCB shall have, where applicable, legally enforceable arrangements with their clients certified by them that commit the clients to provide, on request, access to NABCB assessment teams, to assess the PCB's performance when carrying out certification activities on the client site.

g) The PCB shall claim accreditation only with respect to the scope for which it has been granted accreditation.

h) The PCB shall commit to follow NABCB's policy for the use of the accreditation symbol

i) The PCB shall not use its accreditation in such a manner as to bring NABCB into disrepute.

j) The PCB shall pay fees as determined by NABCB timely.

k) The PCB shall inform without delay, any significant changes relevant to its accreditation, in any aspect of its status or operation relating to:

(i) its legal, commercial, ownership or organizational status,
(ii) the organization, top management and key personnel,
(iii) main policies,
(iv) resources and locations,
(v) scope of accreditation, and
(vi) other such matters that can affect the ability of the PCB to fulfil requirements for accreditation.

l) The PCB shall assist in the investigation and resolution of any accreditation related complaints about itself, referred to it by NABCB.

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Obligations of NABCB

a) NABCB shall provide information on accreditation to the accredited PCB that shall identify the following:

(i) the identity and where relevant, NABCB accreditation symbol
(ii) the name of the accredited PCB and the name of the legal entity, if different
(iii) scope of accreditation
(iv) locations of the accredited PCB and as applicable the certification activities performed at each location and covered by the scope of accreditation
(v) the unique accreditation identification of the accredited PCB
(vi) the effective date of accreditation and, if applicable, its expiry or renewal date, and
(vii) a statement of conformity and a reference to the international standard(s) and or other normative document(s) including issue or revision used for assessment of the PCB
(viii) NABCB shall make all the above information publicly available. NABCB shall also make publicly available, where applicable, information on withholding of reaccreditation, extension of validity of accreditation and suspension or withdrawal of accreditation, including dates and scopes.

b) NABCB shall, where applicable, provide information about international arrangements in which it is involved.

c) NABCB shall give due notice of any changes to its requirements for accreditation. It shall take account of views expressed by interested parties before deciding on the precise form and effective date of the changes. Following a decision on, and publication of, the changed requirements, it shall verify that each accredited PCB conforms to the changed requirements.

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Annex 6

(Norms for witness assessments for initial accreditation and surveillance)

1. OBJECTIVE:

To provide Guidance in the classification of the Scope categories for the purpose of planning for witness assessments for initial accreditation and surveillance.

2. SCOPE;

This annex is applicable to PCB accreditation scheme.

3. RESPONSIBILITY:

Director/CEO, NABCB is responsible for ensuring compliance.

4. PROCEDURE:

4.1. Scope Classification

4.1.1. There are 2 situations

a) One scheme with different products i.e If a single scheme covers various products which can be classified based on IAF scopes than all the scopes may be witnessed for grant of accreditation unless some scopes can be shown to be related and competence can be ensured by a single witness.
b) If PCB has applied for more than one scheme, then NABCB would witness at least one audit per Scheme.

4.2. Witness assessment plans for surveillance assessments

4.2.1. Witnessing is a part of the surveillance programme. The witness assessment plans would depend on various factors including the number of clients issued with NABCB accredited certificates, the number of auditors employed/ empaneled by the PCB, feedback from the market, complaints received and inputs from any office assessment. NABCB may demand to witness a specific auditor or any organization issued with accredited certificate.

4.2.2. The normal plan for witnessing based on the number of certificates issued and the number of auditors employed/empaneled by the PCB would be

Sl No.	No. of certified clients issued with NABCB accredited certificate in past year	No. of witness required on a yearly basis	Remarks
1	0-20	1	High risks category would
2	20-50	2	
3	50-100	4	
4	100 & above	6	

Sl No.	Number of auditors Employed / empanelled by the PCB	No. of auditor to be witnessed annually	Remarks

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1	1-5	1	High risks category would
2	6-25	3	
3	25 & above	7	

Note: At least one audit shall be witnessed in a year.

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Amendment Record

Date	Auth. By	Description of Amendment
April 2016	CEO	Clause 0 - Revision of Guide 65-Updation of document as per ISO 17065 requirements Clause 1.1 – NABCB expanded its mandate of accreditation beyond SAARC countries Clause 1.5 – Defining Technical area Clause 1.10 – Concept of preliminary visit is introduced Clause 3.3.2 – Process for suspension in further detailed based on the experience Clause 3.4 – updation is done in reasons for withdrawal Clause 4.3.2.1 – No. of mandays for assessment is updated Clause 4.3.2.2 – No. of reviews done by NABCB is defined Clause 4.3.2.6 – No. of days for responding to NC Clause 7.1.3 – Time period for scheduling first surveillance is defined Clause 7.2.1 – Concept of other surveillance activities is defined Clause 8.3.3 – Updation of process for withdrawal of accreditation Annex 2 – Norms of witness evaluation for Initial Accreditation and surveillance Annex 3 – Assessment duration Annex 4- Norms for using reports from other accreditation bodies for use in NABCB accreditation process
March 2019	CEO	To align with requirements of ISO 17011:2017
March 2020	CEO	Cl. 1 16 added Re-accreditation cycle to re-align with other accreditation schemes; annex 2 (Assessment duration) elaborated.

Online Registration Procedure

Step 1 Sign-up through the APEDA Website. (Click on "Register as Member" link on the Home Page).".

Step 2 The exporter requires to first enter the basic detail, IE CODE, Email ID & Mobile number and submit.

Step 3 An OTP (One Time Password) for confirming the details will be sent on E- mail and Mobile number. Exporter should enter the OTP of mobile and E-mail on the verification screen to verify the both and click on Submit to proceed for application.

Step 4 After verification confirmation, exporter will require to fill online application and upload the required documents. The documents should be in the JPEG, PDF or PNG formats only. The exporter should enter all required information carefully and ensure correct information is submitted in the on- line application form.

Step 5 On-line application can be completed in one or more sessions by revisiting the website using the assigned OTP (One Time Password) of E-mail and Mobile. After filling the fields, the exporter can save the information in between by using the Save button. The exporter can edit the filled data until online payment is not made.

Step 6 The exporter may submit registration fees of Rs. 5000/- excluding taxes = Rs. 5900/- (with GST) maybe made through any of the followingmodes:-

Online

- Credit Card(Master Card and Visa)
- Debit Card (MasterCard and Visa)

Offline

- Demand draft in favour of "APEDA" payable at respective cities of APEDA offices

*(**Note :-** APEDA GST No. – **07AAAJA1150H1ZU**)*

Step 7 After completion of Payment process an application number will be generated. Please note the application number for future reference.

Step 8 On issuance of RCMC, Login detail is sent to the registered email of the exporter. The Exporter may login in to their account through "Exporter Login" link given at APEDA website.

Step 9 The exporter can view the status of the RCMC application by clicking the "Track Application" link to view the status of application by submitting the IE Code and Application number until it is issued.

Step 10 In case of any shortcoming is observed in the application the exporter will require to resubmit the document online. Therefore, exporter is required to monitor the status of the RCMC application as informed above at Step 10.

Step 11 Following documents are required with application form:

I. **For Merchant exporter :-**

1. Self-certified copy of Import-Export code issued byD.G.F.T.

II. **For Manufacturer exporter:-**

1. Self-certified copy of Import-Export code issued by D.G.F.T.
2. Exporter should furnish a self- attested copy of the registration of the company with the relevant certification agencies for the products given below :-

Product	Certification Agency
Floriculture and Fruits & Vegetable Seeds:	Department of Horticulture /DIC/SIA/FSSAI
Herbal & Medicinal Plants	Department of Horticulture /DIC/SIA/FSSAI, certificate issued by any Govt. institution of Ayurveda.
Fresh Fruits & Vegetables	Department of Horticulture /DIC/SIA/FSSAI
Groundnut/Pulses/Guargum	FSSAI/ Certificate issued by MSME (Udyam Registration certificate) / NOC issued by Pollution Control Board.
Processed Fruits & Vegetables/Other Processed Fruits & Vegetables/ Processed Food Products/Dried and Preserved Vegetables/Cereals preparations/ Misc. Preparations/Non-Alcoholic Beverages/Cocoa Products:	FSSAI/ Certificate issued by MSME (Udyam Registration certificate) / NOC issued by Pollution Control Board.
Dairy/Poultry/Honey/Meat	FSSAI/MSME (Udyam Registration certificate) / NOC issued by Pollution Control Board.
Cereals and Cereal Products:	FSSAI/MSME (Udyam Registration certificate) / NOC issued by Pollution Control Board.
Alcoholic Beverages	FSSAI/ Department of Excise Commissioner/ NOC issued by pollution control Board.

Note: No Hard Copy of any document is required for seeking RCMC from APEDA.

Step 12 After the approval of RCMC from APEDA officials, exporter may take printout of their Certificate through their APEDA Login under the heading of "View RCMC Certificate" under RCMC Menu.

Renewal of RCMC:

I. **For Merchant exporter:-** There will be auto-renewal of RCMC in case of Merchant exporter after making payment of registration fee after five years, no requirement for submission of any document.