Procedure for registered Certification Bodies conducting audits against the MarinTrust Programme

Document PRO-004 – Version 5.0

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1. Purpose & Scope

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

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

- The MarinTrust Standard
- The MarinTrust Chain of Custody (CoC) Standard
- The Improver Programme (IP)

The term "MarinTrust Standards" refers to requirements for both the Global Standard for Responsible Supply of Marine Ingredients (The MarinTrust Standard) and the MarinTrust Chain of Custody Standard.

Certification Bodies are required to manage, process, and approve applications in accordance with ISO/IEC 17065. Audit techniques and methods used during evaluations are guided by the principles outlined in ISO 19011 and ISO/IEC 17021-1, as relevant.

2. Evaluation process

2.1. General requirements for evaluation activities

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

2.1.1. Manage, process, and approve all applications for certification or acceptance of the allocation of the auditor and scheduling in accordance with document PRO-002 - *Guidelines for Certification Bodies Managing Applications to Certification for the MarinTrust Programme*.

2.1.2. Manage, coordinate, and carry out the required fishery assessments in line with the PRO-012 '*Procedure for the monitoring and allocation of fishery and by-product assessments'*, and PRO-003 – '*Conducting MarinTrust fishery and by-products assessments by registered CBs*'.

All auditors must declare to the CB any situation which may give rise to a conflict of interest with respect to facilities they have been requested to conduct evaluation activities. Each auditor shall confirm that they will notify the CB should such a situation arise through a signed Conflict and Confidentiality Declaration form.

Evaluation activities shall then be carried out as follows:

The evaluation shall verify that the objectives defined in the evaluation plan can be achieved and shall be conducted with full awareness of all planned evaluation activities.

Note: The main evaluation shall be conducted onsite unless otherwise authorised by the MarinTrust Secretariat. Remote activities may be conducted in advance for preparatory purposes, such as document and record review, but they do not replace the onsite evaluation. In the event of an extraordinary event being declared, the extraordinary event procedure shall take precedence over evaluation frequency requirements. See the *Process on Handling Remote & Enhanced Remote Factory and Chain of Custody Audits during Extraordinary events of Circumstances* for further information.

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

The scope of the evaluation shall be as per the approved application and scope extension (where applicable) which the CB receives from MarinTrust.

Auditors shall evaluate the facilities listed in the application form. Where the applicant/certificate holder notifies the CB and/or auditor of any changes to the scope of the evaluation, such as change of address, the CB shall:

- inform the applicant/certificate holder to submit a scope extension to MarinTrust for review and approval.
- notify MarinTrust for any confirmation/clarification before carrying out the evaluation.

Where possible evaluations shall be conducted in the language of the country where the facility is based, but all evaluation reports shall be written in English. Where evaluations cannot be conducted in the applicant / certificate holder's local language, CBs shall provide/offer an **independent** translator/interpreter who does not have conflict of interest to attend. The use of a translator/interpreter provided by the applicant / certificate holder is not allowed due to impartiality risks. It is advisable that the translator/interpreter has some knowledge of marine ingredients and/or conducting evaluation activities. As an alternative, where both the auditor and representatives from the facility speak a different language to a good level (e.g. English) that may be used if both parties agree.

In cases where the marine ingredient—such as fishmeal or fish oil—is not produced on a continuous basis, the following requirements shall apply:

- **Initial and recertification evaluations:** the facility shall be in production at the time of the evaluation. Confirmation of corrective actions relating to critical and major nonconformities shall be required to take place when the facility is in production.

- **Surveillance evaluations**: the facility is not required to be in production, although this is advisable. However, the auditor shall conduct traceback exercises in line with Standard requirements to verify that conformity with segregation requirements has been maintained throughout.

For guidance on evaluation requirements for subcontracted facilities / activities, the auditor shall refer to the requirements and guidance provided in the relevant Standard.

2.2. Evaluation

The CB shall have a documents plan for evaluation activities. The process for conducting MarinTrust evaluation activities within this procedure (PRO-004) shall include the following steps:

- An opening meeting.
- An evaluation to obtain and verify information, using audit methos which may include:
  - Documentary review and records
  - A walk through of the facility to observe processes and activities
  - Interviews with personnel
- Identification and review of findings
- Preparation of evaluation findings
- A closing meeting

Evaluation activities shall be conducted in accordance with ISO/IEC 17065, which is the sole normative standard governing certification activities under this Programme.

To support the effective planning and conduct of evaluation activities, the following standards may be used strictly as informative guidance, and are not applied as normative requirements:

- **ISO/IEC 17020** – used for guidance on inspection-type techniques (e.g., traceback, verification of records, technical conformity).
- **ISO 19011** and **ISO/IEC 17021-1** – used for guidance on audit methods and audit planning where evaluation tasks include audit-type activities.
- **ISO 9001** – referenced as a source of general quality management principles, where relevant to the QMS elements included within the MarinTrust Standard

See Sections 2.2.1 – 2.2.8 for further detailed information.

2.2.1. Conducting opening meeting

The auditor shall conduct an opening meeting with the applicant/certificate holder to explain:

- the evaluation activities that will be carried out,
- the agreement of all participants to the plan for evaluation activities,
- the objective, scope, and criteria of the evaluation including determination of the availability of relevant personnel,

- access to required areas,
- confidentiality and information security requirements,
- any onsite activities that could impact the conduct of the evaluation and
- the evaluation reporting process

2.2.2. Conducting the evaluation

Auditors shall conduct all evaluations in a professional manner and diligent manner, with as **minimum disruption as possible to the day-to-day activities of the facility. Evaluations shall be conducted in compliance with applicable local legislation** and any facility policies (unless otherwise stated) during the onsite evaluation activities.

The evaluation shall consist of a combination of activities relevant to the scope, criteria, and objectives of the Programme as follows:

- **Document review:** The auditor shall review relevant documented information and records to gather evidence to support evaluation activities and to determine whether reviewed systems are in accordance with MarinTrust Standards requirements. This shall include a review of the documented traceability systems back to the approved raw material or accepted in the case of the Improver Programme (IP), source.
- **Observation of processes and activities**: The auditor shall conduct a walk-through inspection of the facility to observe practical implementation of processes and activities. This shall include traceability systems back to the approved raw material or accepted (in the case of IP) source.
- **Interviews with personnel**: The auditor shall conduct interviews with relevant personnel who are involved in the control of activities related to the audit.

All evaluations shall be conducted against the current issue of the relevant MarinTrust Standard's requirements and interpretations (STG-002, STG-003), and the auditor shall use the approved evaluation report template format (TEM-001, TEM-022). *It is the responsibility of the CB to ensure they have the most up-to-date copy of the relevant standard's requirements under the MarinTrust Programme.*

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

Auditors shall ensure:

2.2.2.1. All aspects of the requirements of the Standard are addressed. At no stage can applicable elements of the relevant MarinTrust Standards be omitted.

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

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

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

2.2.2.5. In the case of current certificate holders only, where a new species has been added to the raw material scope as part of a scope extension application, and has achieved 'approval' status, the auditor shall conduct a traceability check of the new approved species to verify compliance of segregation requirements has been maintained prior to the approval status of the species being granted. For additional information please refer to documents PRO-002 – *Guidelines for certification bodies managing applications for certification to the MarinTrust Programme* and PRO-005 – *Procedure for the issuing and withdrawal of certificates to the MarinTrust Programme.*

2.2.2.6. Where a main certificate holder/applicant subcontracts to a separate certificate holder who is withdrawn from the Programme due to noncompliance, fraud and/ or corruption for non-certified MarinTrust activities, the main applicant / certificate holder shall be deemed as high risk.

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

Surveillance and recertification evaluations. The auditor shall consider nonconformities and results from previous evaluations and may focus more attention on areas of concern, ensuring that all applicable areas of the relevant MarinTrust Standard have been evaluated.

After 3 consecutive evaluations of a single facility, the auditor may not be used on the 4th audit unless they have been given permission by MarinTrust.

The duration of an evaluation of the MarinTrust Standard for the Responsible Supply of Marine Ingredients shall typically be:

- 1.5 days for those facilities which utilise a recognised equivalent Standard. A significant proportion of the time will be spent reviewing Traceability Based Systems and assessment of its practical implementation.

- 2 full days for facilities those without a recognised equivalent Standard, who must be audited against all sections of the MarinTrust Standard.

Please refer to *STG-019 Audit duration calculation – guidance* and *STG-020 Audit duration calculation* – for further details on calculating audit duration.
The duration for a typical evaluation of the MarinTrust Chain of Custody Standard shall be 1 day. However; more time may be required for facilities with multiple sites, or that use subcontractor facilities, or have complex traceability.

Less time may be justified for facilities which have simpler operations however this shall not compromise the audit.

2.2.3. Identifying and recording evaluation findings

The evaluation results shall document all the conformity and nonconformities, as outlined in **Appendix 1, Table 1**, of each clause with supporting evidence recorded. Each clause shall be assigned one of the following conformity levels based on predefined criteria, as detailed in the in auditor interpretation guidance for the respective Standard:

- Full conformity
- Minor nonconformity
- Major nonconformity
- Critical nonconformity
- Not applicable

Definitions of these ratings are provided in **Appendix 1**. Auditors must substantiate the assigned conformity level with evidence and/or justification against each clause. All identified nonconformities shall be listed in the nonconformity report (NCR).

If the auditor is unsure how to rate a clause using the evidence collated during an evaluation to a specific clause within the Standard's requirements, they shall consult with their CB for further guidance before the clause can be rated.

2.2.4. Closing meeting

Preparation

2.2.4.1. Upon completion of the evaluation, the auditor shall prepare for the closing meeting. The auditor shall review the evaluation findings and any other information collected during the evaluation against applicable clauses of the relevant Standard. The content of the evaluation conclusion shall include, as a minimum:

- review the evaluation findings and any relevant information against the evaluation objectives and applicable clauses of the relevant Standard, and classify the nonconformities;
- confirm the suitability of the evaluation audit programme or identify any modification required for future evaluations (e.g. scope of certification, evaluation timing, surveillance frequency, audit team competence).
- **Agreement upon the evaluation conclusions,** taking into account the uncertainty inherent in the evaluation process;
- agree any necessary follow-up actions.

Conducting the closing meeting

2.2.4.2. A formal closing meeting shall be held with the applicant / certificate holder to present the evaluation findings and conclusions. The auditor shall:

a) discuss any nonconformities raised, agreeing a corrective action plan (see **Appendix 1** for a definition of an effective corrective action plan) and completion date for each.
b) prepare a hand-written copy of the agreed nonconformity, which is signed and left with the applicant / certificate holder's technical representative.
c) Not indicate whether the applicant/certificate has achieved or maintained certification status.

2.2.4.3. Where nonconformities are noted, the auditor shall:

a) refrain from instructing the applicant / certificate holder to take any particular course of corrective action. Auditors offering a recommended course of action to close out a nonconformity shall be seen as consultancy and is in breach of MarinTrust procedures.
b) record the corrective action(s) and completion date(s) on the NCR agreed by both the auditor and applicant/certificate holder at the closing meeting.
c) provide the applicant/certificate holder with the opportunity to ask questions if needed.
d) discuss and resolve any disagreement/issue regarding the audit findings where possible.
e) refer to the CB where it is not possible to agree and/or resolve evaluation findings.

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

2.2.5. Evaluation Reporting

Distribution

2.2.5.1. After each evaluation the auditor shall:

a) prepare a full written audit report using the approved audit report template (TEM-001, TEM-022) which shall include:

- an evaluation summary,
- an overview of performance,
- summary of nonconformities and corrective actions to be taken,
- comprehensive details of how the applicant / certificate holder complies with each clause.

b) Submit the evaluation report to the Scheme Manager or delegated/responsible person, within 7 calendar days at the end of the evaluation. *All notes taken during the evaluation shall be submitted together with the evaluation report to the CB's Scheme Manager or delegated/responsible person.*

c) In the case of nonconformities, send a copy of the NCR to the CB within 24 hours of the end of the evaluation.

2.2.5.2. The evaluation report shall be a factual record of the results of the evaluation and shall clearly document any nonconformity against the relevant Standard's criteria and, where appropriate, corrective actions. In addition, objective evidence is required and agreed timescales for completion.

2.2.5.3. Within 5 calendar days after the evaluation, the Scheme Manager or delegated/responsible person shall:

a) check the NCR for completeness and accuracy.

b) dispatch a final copy to the applicant/certificate holder via email.

c) confirm that the applicant/certificate holder shall have up to 30 calendar days to close out the nonconformities in the NCR.

d) complete and submit the MarinTrust certification timeline tracker to the applicant/certificate holder and the MarinTrust Secretariat (for initial and recertification evaluations only).

***Note** - If the auditor and applicant cannot reach agreement on a nonconformity that has been raised or not satisfactorily closed, it will remain recorded as a nonconformity in the final audit report. In this case, the nonconformity remains open, and no positive certification decision can be made. Therefore, this shall result in a 'do not certify' decision. The applicant or certificate holder may appeal the decision to not certify (see Appeals and Complaints Document).*

2.2.6. Nonconformity Follow-up

The CB shall require that the applicant/certificate holder to provide them with written confirmation that the corrective action has been taken with respect to all critical, major, and minor nonconformities identified during the evaluation. This confirmation shall describe the corrective actions already taken.

Depending upon the extent of the nonconformity, either documentary evidence or onsite review shall be required to evaluate full conformity before a certificate of conformity, or acceptance in the case of Improver Programme, can be granted.

See **Appendix 1**, Table 1 for detailed information about nonconformity ratings, timescales, and follow-up requirements.

The CB Scheme Manager or delegated/responsible person, shall check the applicant / certificate holder's file at 20 calendar days to evaluate the progress of the corrective actions. If necessary, they will contact the applicant / certificate holder to remind them of their obligation to provide evidence within the timeframes defined and agreed. **All nonconformities shall be fully closed out within the specified timeframes.**

The auditor shall review and check the evidence within 7 calendar days of either the submission of all evidence provided by the applicant/certificate holder or passing of the submission deadline, whichever comes first. The auditor shall determine the effectiveness of this evidence in addressing the nonconformity, before submitting the final evaluation report, evidence, and recommendations to the Scheme Manager or delegated/responsible person, for technical review.

2.2.7. Technical Review

2.2.7.1. Prior to the certification decision, the Scheme Manager, delegated/responsible person, shall be responsible for the coordination and completion of the technical review within 7 calendar days of receiving the final evaluation report.

2.2.7.2. The technical review shall be carried out by technically competent and authorised personnel, in accordance with document PRO-014 - *Procedure for Appointment, Training, and Approval of Certification Body Personnel involved in the assessment, evaluation, and certification process*, who shall confirm:

a) The final evaluation report and all associated information fully substantiates the auditor recommendations and any nonconformities raised in the final report. All evidence is available, presentable, and clearly identifiable.
b) That the nonconformities have not been recorded as a statement of corrective action or direction, and the corrective action plan and actions have been reviewed, accepted, and checked.
c) There is sufficient evidence of corrective actions and timescales to close out nonconformities, and that these have been agreed between the applicant/certificate holder and the auditor at the closing meeting.

2.2.7.3. Within 7 calendar days of completing the technical review, the Scheme Manager, or delegated/responsible person, shall submit the technically reviewed final report and evidence to the certification committee or delegate/responsible person.

2.2.8. Certification Decision

2.2.8.1. Within 7 calendar days of receiving the technically reviewed evaluation report and evidence, the certification committee, or delegated/responsible person, shall review the final report and evidence file and determine if the applicant / certificate holder conforms with all the clauses as required in the relevant MarinTrust Standard.

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

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

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

The certification decision, final evaluation report, and certificate (if achieved) shall be despatched via email to the applicant/certificate holder and MarinTrust Certification Programme Officer or MarinTrust delegated/responsible person, within 7 calendar days of the certification decision. For further information on the issuing and withdrawal of certificates, refer to document PRO-005 (A5) – *Issuing and withdrawal of certificates to the MarinTrust Programme.*

In the case of acceptance for the Improver Programme, the acceptance decision and final audit report shall be despatched via email to the applicant/accepted site and MarinTrust Certification Programme Officer, or MarinTrust delegated/responsible person, within 7 calendar days of the acceptance decision.

The Improver Programme applicant / accepted site shall not be referred to as 'certified' and a certificate of conformity shall not be issued. Instead, a letter of acceptance shall be issued by the MarinTrust Secretariat within 7 calendar days of notification of the CB's acceptance decision. For further information on the issuance of IP Acceptance letters, please refer to the *Improver Programme Acceptance Mechanism* (IPAM) document.

All IP evaluation reports received shall be reviewed by MarinTrust prior to issuance of the IP acceptance document. If any issues are raised during this review, the IP acceptance document may not be issued until those issues are resolved.

[1] In such instances, further information shall be requested from the applicant with a maximum of 5 working days permitted for submission of the required additional evidence if the certification committee or delegate/responsible person, feel that more information is required to meet the intent of the relevant MarinTrust Clause.

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

3. Notification of Serious Food Safety/Legality Issues

As applicable, MarinTrust shall immediately notify buyers of certified products of any serious traceability and/or legality issues arising out of a supplier audit. In this unlikely event, MarinTrust shall discuss with the applicant/certificate holder what action is necessary to meet the wishes of the purchaser(s) involved. In all cases, evaluation reports are only distributed to third parties when the applicant / certificate holder, or Improver Programme Accepted Facility has consented in writing.

4. Records

A copy of the final evaluation report, information and evidence, NCR form, and correspondence conveying the certification committee, or delegated person's, certification decision shall be held in the applicant/certificate holder's file for a period of 6 years.

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

Further information

For further information on appeals and complaints requirements, please refer to document PRO-006 – *Appeals and complaints procedure for the MarinTrust Programme.*

Appendix 1 – Conformity ratings, timescales, and follow up requirements

Conformity ratings

Table 1 includes a definition of conformity ratings.

For each clause, each standard includes further guidance and how to achieve 'full conformity'. There is separate auditor guidance which provides the expected requirements for each rating, for each clause.

Table 2 below provides timescale and follow up requirements applicable to the relevant nonconformity categorisation.

Table 1: Conformity definitions

Definitions

Full conformity	Minor nonconformity	Major nonconformity	Critical nonconformity
The requirement of the clause is fully met. There is evidence to demonstrate conformity to all the requirements of the clause.	The requirements of the clause are partially met. And; - The non-conformity does not adversely affect the health or safety of a product or person.	The requirements of the clause are not met. And; - The non-conformity cannot be completely eliminated by re-work or reduced to a minor non-conformity (excludes critical non-conformity). - A requirement of the Standard has been addressed but there is insufficient evidence to demonstrate that it has been properly controlled or implemented.	The requirements of the clause are not met. And; The non-conformity may: - result in imminent and/or highly probable hazardous or unsafe conditions for individuals. - result in serious injury or death. - be a legal or regulatory violation. - be a marine ingredient safety failure. - be a programme integrity risk from a failure to implement the clause.

Guidance	All requirements of the clause are met and there is evidence to fully demonstrate this.	There is a small discrepancy with demonstrating full compliance with all the requirements of the clause BUT safety, welfare or product integrity is not compromised.	There is insufficient evidence to meet the requirement of the clause. There is evidence that the intent of the clauses has not been met, for example, through missing requirements.	The auditor provides evidence to show that the marine ingredients labelled, or intended to be labelled, as compliant were found not to have originated from an approved fishery or by-product of the MarinTrust Programme, or from an officially recognised fishery that has been accepted into the MarinTrust Improver Programme. Or The auditor has been deliberately misled on the credibility of the information provided by the applicant. More generally, that the applicant has broken a legal obligation which puts food/feed safety, employee safety, or worker welfare at risk. This does not necessarily need to relate to a specific requirement in the MarinTrust Standards, but the details of the critical nonconformity must be detailed by the auditor.

Table 2 provides the timescale, and follow up requirements applicable to the nonconformity categorisation.

Note: *Where nonconformities are upheld (*i.e. the CB determines the nonconformity is **not** closed out) resulting in the suspension or withdrawal of a certificate, the CB shall consult document *'PRO-005(A5) Issuing and Withdrawal Procedure'* for guidance and adhere to all related requirements.

Table 2: conformity timescales and follow up requirements

Nonconformity categorisation	Timescales	Follow-up
Minor nonconformity	Where minor nonconformities are not closed within the 30 days: **Initial:** The facility shall not be awarded certification and no less than 3 months shall pass prior to re-applying for certification. **Recertification and surveillance:** The facility's certification shall be immediately suspended for a period of up to 6 months. Where minor nonconformities are not closed within the specified suspension period, the facility's certification shall be withdrawn.	Documentary evidence may be sufficient for the Certification Body to close the nonconformity
Major nonconformity	Where major nonconformities are not closed within the 30 days: **Initial:** The facility shall not be awarded certification and no less than 3 - 6 months, depending on the nature and quantity, shall pass prior to re-applying for certification.	Either documentary evidence or an onsite evaluation may be required for the Certification Body to close the nonconformity. Depending on the extent, an onsite evaluation may be required, at the discretion of the auditor, to ensure the nonconformity has been addressed in full.

	Recertification and surveillance: The facility's certification shall be immediately suspended for a period of up to 6 months. Where major nonconformities are not closed within the specified suspension period, the facilities certification shall be withdrawn. Please refer to *'PRO-005(A5) Issuing and Withdrawal Procedure'* for further detailed information on the process for the suspension and withdrawal of certificates.	To determine whether an onsite evaluation is required, the auditor shall consider in full the nature of the nonconformity and potential risks to the Programme and value chain. Where onsite is required, confirmation of corrective actions relating to major nonconformities shall be required to take place when the facility is in production. Certificate Holders are required to absorb costs of additional necessary evaluations.
Critical nonconformity	**Initial:** The facility shall not be awarded certification and no less than 6 months shall pass prior to re-applying for certification. **Recertification and surveillance:** Where critical nonconformities are not closed within the specified suspension period, the facility's certification shall be withdrawn. No less than 6 months shall pass prior to re-applying for certification. Please refer to *'PRO-005(A5) Issuing and Withdrawal Procedure'* for further detailed information on the process for the suspension and withdrawal of certificates.	An onsite evaluation is required to ensure the critical nonconformity has been addressed in full. Certificate Holders are required to absorb costs of additional necessary evaluations. In the event of a critical nonconformity, the auditor will immediately terminate the evaluation if their safety is compromised. Confirmation of corrective actions relating to critical nonconformities shall be required to take place when the facility is in production.

Effective corrective action plan

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

- An appropriate time frame to address and resolve the nonconformity shall be given. Noting that all NCs must be fully closed out within 30 calendar days.
- A root cause analysis of why the nonconformity occurred.
- Identify the actions required to ensure that future nonconformities shall not re-occur (to include changes to policy and procedures).
- An appropriate person to oversee that the nonconformity has been resolved shall be identified.

Appendix 2

Code of Conduct for all CB Staff/Auditors

Objective

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

Responsibilities

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

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

Procedure Independence, Impartiality, and Integrity

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

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

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

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

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

Evaluation Process

Auditors shall be aware that applicants require evaluations which challenge their systems against the applicable MarinTrust Standard and which identify deficiencies that require appropriate corrective action. In addition, the judgment of the auditor must be based upon objective evidence and be independent of any outside pressure or influence.

It is essential that the evaluation is seen as 'challenging' by the applicant due to the thoroughness of the evaluation methods, not because of the way in which the auditor conducts the evaluation or communicates with employees of the facility.

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

Evaluations shall therefore:

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

Hospitality and Gifts

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

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

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

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

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

Disciplinary Action

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

Appendix 3: Certification Decision Timeline

Activity	Timeframe
Auditor submission of audit report to the Scheme Manager, or delegated/responsible person.	Within **7 calendar days** at the end of the evaluation.
In the case of nonconformities, send a copy of the NCR to the CB.	Within **24 hours** of the end of the evaluation.
Applicant / certificate holder opportunity to close out nonconformities .	Within **30 calendar days of receiving NCR**
The CB Scheme Manager or designated/responsible person, shall check the applicant's file to evaluate the progress of the corrective actions.	At 20 calendar days of sharing NCR with applicant / certificate holder.
Auditor review of the NC evidence provided by applicant/certificate holder.	Within **7 calendar days** of either the submission of all evidence provided by the applicant/certificate holder or passing of the submission deadline, whichever comes first.
Coordination and completion of the technical review.	Within 7 **calendar days** of receiving the final evaluation report.
Submission of the technically reviewed final audit report and evidence to the certification committee.	Within **7 calendar days** of completing the technical review.
Certification committee review of the final evaluation report and evidence file and determination if applicant conforms with all the clauses in the Standard.	Within **7 calendar days** of receiving the technically reviewed evaluation report and evidence.
Certification decision and dispatch of final evaluation report, and certificate (if achieved).	Within 7 **calendar days** of the certification decision.

AMENDMENT LOG

DATE	ISSUE	AMENDMENT	AUTHORISED BY
02/08/2022	3.0	Inclusion of additional guidance and clarification of the scope, and reference to Improver Programme throughout	Governing Body Committee
02/08/2022	3.0	Streamlining of section 2 for alignment with ISO/IEC 17065 accreditation requirements	Governing Body Committee
02/08/2022	3.0	Removal of registered and subcontracted requirements to reduce duplication. Instead, this is outlined in appointment, training, and approval requirements	Governing Body Committee
02/08/2022	3.0	Addition of further guidance in Section 3 for the process of carrying out site audits and increased alignment with ISO/IEC 17065 requirements. This includes further guidance on production requirements in Section 3.1.	Governing Body Committee
02/08/2022	3.0	Increased alignment with ISO/IEC 17065 requirements in section 3.2. including addition of guidance for the evaluation of new species (raw material) added as part of a scope extension prior to audit to section 3.2.2.5 and further detailed information on the process and personnel responsibilities for the technical review of audit reports (section 3.2.7), and Improver Programme requirements in Section 3.2.8 Certification Decision	Governing Body Committee
02/08/2022	3.0	Addition of 'further information' for procedures on appeals and complaints requirements	Governing Body Committee
02/08/2022	3.0	Renumbering and reformatting of sections throughout the document for clarity and clear order of process requirements	Governing Body Committee
31/10/2023	3.1	Section 3.2 and 3.2.1: correction of the reference to requirement from 'ISO/IEC 17065' to ISO 17021-1 requirements.	Governing Body Committee
29/01/2024	4.0	Update from 'Operations Manager' to 'Certification Programme Officer'	Governing Body Committee
29/01/2024	4.0	Inclusion of further guidance about scope extension, Section 3.1	Governing Body Committee
29/01/2024	4.0	Addition of criteria for selecting a translator or interpreter	Governing Body Committee

29/01/2024	4.0	Addition of information regarding subcontracted sites that already holds MarinTrust CoC certification.	Governing Body Committee
29/01/2024	4.0	Removal of reference to specific section of the MarinTrust Standard to be audited for facilities without a recognised Standard	Governing Body Committee
29/01/2024	4.0	Inclusion of further guidance for auditors where a certificate holder/applicant subcontracts a certificate holder withdrawn due to noncompliance, fraud and/ or corruption for non-certified MarinTrust activities.	Governing Body Committee
29/01/2024	4.0	Addition of information regarding review of IP audit reports.	Governing Body Committee
29/01/2024	4.0	Update from 5 years to 6 years, section 5.	Governing Body Committee
29/01/2024	4.0	Section 3.2.4.3: Inclusion of further information regarding audit closing meeting.	Governing Body Committee
29/01/2024	4.0	Further update to the close out of NCs for initial audits.	Governing Body Committee
29/01/2024	4.0	Inclusion of steps to take upon receiving an application from a withdrawn certificate holder particularly when the withdrawal is due to critical NC.	Governing Body Committee
22/08/2024	4.0	All references to ISO 17021 and IS0 17065 removed throughout	Governing Body Committee
22/08/2024	4.0	Changed from 'derogation clauses' to 'time bound clauses'	Governing Body Committee
January 2025	5.0	Updates to guidance regarding production requirements at the time of audit and subcontractor needs in section 2.1 – general requirements for evaluation activities	Governing Body Committee
January 2025	5.0	Updates to section 2.2.3 – identifying and recording audit findings, for alignment with nonconformance outlined in appendix 1	Governing Body Committee
January 2025	5.0	Removal of time bound clause guidance from 2.2.3 – identifying and recording audit findings	Governing Body Committee
January 2025	5.0	Updated guidance to align wording with ISO/17021 for closing meetings	Governing Body Committee

January 2025	5.0	Updates to text regarding extent of nonconformity and removal of reference of extensions to validity in section 2.2.6 Nonconformity follow up	Governing Body Committee
January 2025	5.0	General wording adjustments for increased clarity, unchanged intent.	Governing Body Committee
January 2025	5.0	Change of working days to calendar days throughout	Governing Body Committee
January 2025	5.0	Update to formatting of table 1, and updates of timescales and follow-up requirements for nonconformities in table 2, Appendix 1	Governing Body Committee
November 2025	5.0	Update of terminology from 'audit' to 'evaluation' in alignment with ISO/IEC 17065. Reference to audit within this document is as an evaluation tool.	Governing Body Committee
December 2025	5.0	2.2.5.3, further guidance to note on handling of nonconformance and resulting certification decision	Governing Body Committee
December 2025	5.0	Addition of reference to guidance for auditors to conduct audit duration time	Governing Body Committee
December 2025	5.0	Addition of further clarification that evaluation activities shall be conducted in accordance with 17065 and list of key supportive guidance standard to section 2.2. evaluation	Governing Body Committee
December 2025	5.0	Numbering correction and consolidation of texts from section 2 and section 3. Section 2 retitled to 'Evaluation process', and subsection 2.1. to 'General requirements for evaluation activities',	Governing Body Committee