1. PURPOSE

The purpose of this procedure is to describe the audit process in detail to carry out the audits of the certification programmes within the scope of the relevant scheme, such as i-CAS Halal by TIC QC. These audits are carried out by TIC QC auditors who meet the qualification requirements.

2. SCOPE

The procedure includes planning, conducting, and reporting on audits of relevant programmes that TIC QC undertakes.

3. RESPONSIBILITY

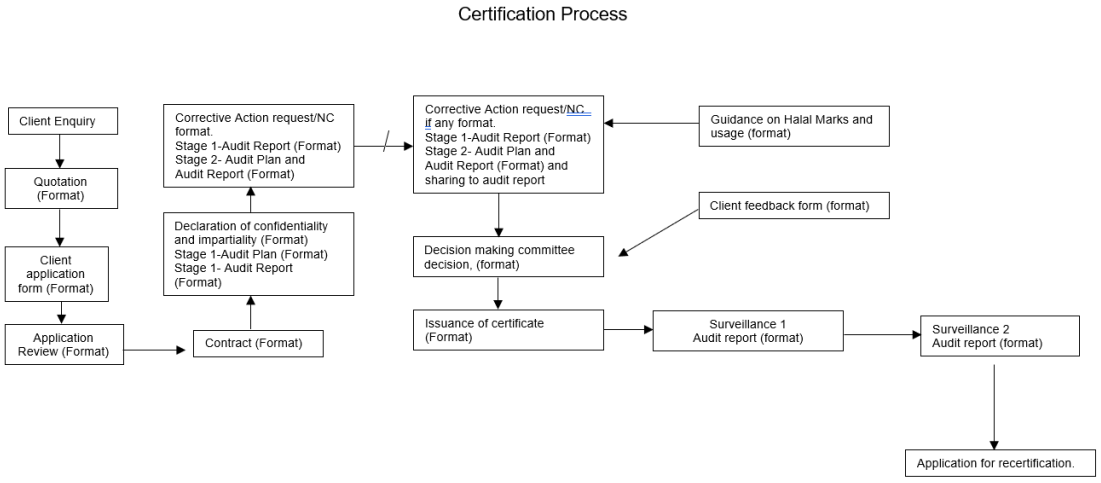
3.1. This process is implemented by the product/scheme manager; contract reviewer; application reviewer; internal technical expert/auditor; trainee auditor; technical reviewer; certifiers/decision-making committee.

3.2. If more than one auditor is appointed, one of them will be designated as the lead auditor. The lead auditor is responsible for planning the audit, managing the audit team, and submitting the audit reports and related audit documents within the specified periods.

3.3. The trainee auditors are appointed to attend the audits to gain practical experience. The trainee auditor participates in the audit with the lead auditor / auditor and monitors every stage of the audit. Trainee auditors do not play any role during the audit. The audit report specifies the name and title of the trainee auditor in the audit team as 'Trainee Auditor'.

4. PROCEDURE

4.1. Certification process flow.



4.2. Audit

The audit assesses whether a company's activities and operations, which are subject to certification, are conducted in accordance with the objectives and rules established for the relevant standard, as outlined in the current audit checklist for respective schemes. Upon the completion of the audit and the preparation of the audit report, the auditor identifies the non-conformities that were detected and recorded in accordance with the audit checklist as findings.

4.1.1. Audit Variations

a. **Stage 1 Audit:** This is a document review conducted by a technical reviewer or contract reviewer in accordance with the requirements of the relevant scheme to examine and decide on the combination of control measures and good practices, as well as the organisation's initial readiness to comply with the corresponding scheme requirements.

b. **On-Site Audit/Stage 2 Audit:** It is the on-site assessment of whether the activities subject to certification are carried out by the objectives and rules set for the relevant standard.

c. **Remote Audit:** It is a method of evaluating an organization's compliance, processes, and systems virtually, without the physical presence of an auditor on-site. It uses technologies like video conferencing, screen sharing, and secure cloud storage to exchange information and perform interviews. It offers increased flexibility and reduced costs, though it requires meticulous planning, high-quality internet connectivity, and robust data security. This type of audit is conducted under the guidelines released from the schemes.

4.1.2. Audit Categories

a. **Initial** Audit: This type of audit is conducted for organisations that are applying for TIC QC for the first time and do not have a certificate from the reference/relevant standard, as well as for organisations that hold a certificate from TIC QC or other certification bodies but whose certificate has expired.
b. **Recertification/Renewal Audit:** This is a type of audit performed on organisations whose certifications were created by TIC QC or the clients transferring from another certification bodies to ensure their validity before and after expiration.
c. **Announced and Unannounced Audits:** In certification activities, audits that can be performed without notice, depending on the relevant standard/scheme, are defined as unannounced audits. A semi-announced audit is conducted according to the standard; it is done by giving notice up to 48 hours before the audit. In a semi-announced or unannounced audit, the certification body shall, at minimum, evaluate the following as applicable to the site:
   - Purchasing documentation
   - Physical handling and inventory of claimed materials (inputs, processing, and outputs)
   - Transport and sale
   - On-product claims relating to the standards which are present on-site, including when labelling is done on behalf of a customer;
   - Other relevant criteria from the relevant standard that forms the basis of these types of audits
   - Any areas where a non-conformity was issued during the previous full audit;
   - Any areas where the certification body has identified additional risks for the specific site, including risks that have been identified through complaints or which have been noted to the certification body by the corresponding accreditation body
   - The certification body shall check financial records of certified input and output materials.
   - multi-site and group certification

- Unannounced audits do not replace field audits and do not affect the Certificate of Scope validity date.

d. **Additional Audit/Follow-up:** This type of audit is conducted to eliminate detected non-conformities and to verify the effectiveness of related corrective actions in cases where non-conformities requiring follow-up are identified during the audits. The auditor decides to conduct a follow-up audit of the company on-site.
   - The Follow-up Audit does not adhere to the preliminary processes requested in the first audit. The coordinator initiates the follow-up audit process. The audit plan is sent to the company by the lead auditor, and the details of the submitted audit plan are prepared according to the company's non-compliance. The report is not rewritten. The findings and documents that provide evidence for the closure of NCs are included in the existing audit report and are submitted for certification.

e. **Additional Audit/Scope Extension**: This audit adds a process not included in the previously published scope certificate after initial certification or recertification audits.

f. **Special Audits/Surveillance Audits:** These are conducted as periodic assessments conducted by a certification body after the initial certification is granted. These audits ensure that the certified organization continues to comply with the requirements of the relevant product, process, or service certification scheme.

4.3. Audit Preparation

4.2.1. Auditor Assignment

a. The coordinator selects the optimal auditor from qualified candidates based on the audit criteria (location, transportation, and availability) and assigns them to the audit. The audit team is selected as per the scheme/standard requirements.
(For the i-CAS halal scheme of i-CAS Halal, there shall be a **two-member audit** team: one technical auditor and one Sharia / Halal expert having ISO 22000 / applicable Halal standard).

b. The coordinator may also assign a trainee auditor along with the lead auditor if there is a need or a new recruitment takes place for a specific scheme. The trainee auditor shall observe one audit and one witness audit under the lead auditor before he/she is approved as a lead auditor.

c. The auditor's assignment form and the declaration of impartiality (as auditors' risk assessment) are verified by the product/scheme manager, who then approves the auditor for assignment.

d.

4.2.2. Pre-audit activities

a. Before sending the audit pack of the customer to the stage 1 auditor for stage 1/document review. The coordinator needs to ensure that all the relevant documents pertaining to stage 1 are fulfilled for the document review.

b. The lead auditor/auditor examines the details of the information provided, such as the product list and other relevant information mentioned in the stage 1 audit checklist, to evaluate the current situation of the company and to make the audit planning more efficient according to the relevant standard/scheme requirements.

c. If the auditor found any missing documents or required any other additional documents, the leads auditor inform the coordinator and contacts the customer and requests the customer for missing documents or required any other additional documents. The selected auditor's risk assessment is reviewed in terms of conflict of interest and the planning phase begins.
d. In case of surveillance/recertification audit, Verification is conducted to ensure that corrective actions for non-conformities have been implemented, particularly focusing on those closed by the auditor since the last audit; if the previous audit was carried out by a different certification body, a comprehensive assessment of all nonconformities listed in the prior audit report, regardless of their closure status, is performed, considering the two years leading up to the current audit.

4.2.3. Audit Planning

- **Scheduling of Audit**: The coordinator determines weekly/monthly the audit plans in the audit calendar and travels accordingly and notifies the lead auditor.

- **Preparation of Audit Plan**

a. The lead auditor creates the detailed audit plan that includes the opening meeting, field tour/audit, document review, staff interviews (if included in the standard), lunch/break, reporting, and closing meeting and obtains approval by sharing it with the company via email. Once the company approves the audit plan, it becomes ready for implementation.
b. During the actual audit, as deemed necessary, the lead auditor may amend the original version of the audit plan to reflect the real timing and sequence of the audit events.
c. Three-Year Audit Programme: -
    - The Lead Auditor shall prepare or update the 3-Year Audit Programme: -
    - At initial certification, the lead auditor shall populate the document. The programme shall include a Stage 1 and stage 2 audit plan. At recertification, the lead auditor shall create a new version of the programme to cover the new cycle. Any subsequent revisions are to be documented as appropriate by the auditor.
    - The audit programme shall include the initial certification or re-certification audit, the surveillance visits and the re-certification audit at the end of the current certification cycle.
    - The lead auditor, for the determination of the audit programme and for any subsequent adjustments, shall consider the size of the client organisation, the scope and complexity of its management system, products and processes; as well as the demonstrated level of management system effectiveness and the results of any previous audits.
    - Any changes to Audit Programme need to be clearly identified to in the Audit Report.
    - The three years certification cycle begins with the certification or recertification decision.

- If the company requests for a change in the audit date of the approved audit plan, the lead auditor will inform the coordinator. The coordinator prepares a new schedule of audits and shares it with the lead auditor for the company's approval.
- In case there is a difference in the language and nationality of the auditors or staff, it is necessary to use a interpreter to ensure the interviews are in the local language of the relevant country. In the audit planning phase, this issue is considered and included in the planning period.

- If an interpreter conducts the audit, the translator involved must possess the following features:
- There should not be any active and/or business relationships in the audited company in the last 2 years.
- Employees of the company being audited should not have any business or kinship relationships.

4.2.4. Audit hours

The audit planning process takes into account the time allocated according to the audit calculation procedure and relevant standard/scheme requirements.

4.2.5. Audit Methodology

- During the audit, the team members shall collect and record objective evidence to demonstrate that the client's system is both implemented and effective. Information relevant to the audit objectives, scope and criteria (including information relating to interfaces between functions, activities and processes) shall be collected by appropriate sampling and verified to become audit evidence.

- The audit is carried out according to the relevant standard/scheme requirements. For example, to i-CAS halal...process requirements / evaluation / audit protocol and relevant guidelines on raw material procurement, processing, packaging, storage, and transportation to ensure compliance with Islamic Shariah law

- An audit is conducted in two stages: stage 1 (document review) and stage 2 (onsite).
- After Stage 1 and subsequent review, stage 2 audit is scheduled.
- The auditor starts the audit by verifying the processes in the company and supports this verification with a site tour. Evidence shall be obtained from interviews, review of documentation and records, observation of processes and activities and conditions in the processes audited. Records shall identify personnel interviewed.
- The draft audit report records the processes verified during the field tour in the General Questions checklist The conditions of the field tour may vary according to the size and physical conditions of the enterprise.

a. Opening Meeting

The opening meeting is the first implementation of the audit, and it should include the following items:

- Introduction of TICQC and its audit team
- Greet and thank participants for their time and collaboration
- Explain the standards and modules of the audit
- Confirm the scope of the audit, the category of products within the scope, and any products or areas to be excluded from the audit
- Confirmation of the language to be used during the audit and channels of communication to be used between the parties
- Explain minor, major, and critical non-conformities.
- Explain the auditing process, what happens when nonconformity is identified, and the follow-up process until the report is finalised.

- Explain the audit sampling method
- Agreement on the schedule for the assessment, including breaks, any meetings needed, and the availability of senior management.
- Audit the workplace to verify compliance according to local laws and relevant standards and requirements.
- Review of documentation to assess compliance according to local laws and relevant standards' requirements
- Confidential interviews with employees to corroborate the information gathered
- State the number of employees to be interviewed
- Check health and safety requirements for the site audit.
- Confirm the availability of documentation and key personnel required for the assessment.
- Confirmation of the confidentiality of the information and code of conduct
- Take permission to take photographs and conduct worker interviews.
- At the end of the audit, the findings from the closing meeting and the need for any corrective actions will be discussed, particularly if there are non-conformities.
- Mention that it is advisable that individuals present in the Opening Meeting also attend the Closing Meeting.
- Mention unannounced audits
- Explain the proper use and application of the logos
- Mention that the findings and documentation (reports) are shared only with the company's representative.
- Ask attendees if they have any questions.

b. On-site field Tour

- This verification process can be conducted from a high vantage point that provides an overview of the entire business or by quickly visiting all the individual processes.
- The on-site field tour aims to identify differences that might be present between the processes mentioned in stage 1 documentation for certification and the processes implemented on site. That is a brief glance for verification and therefore isn't included in the Stage 2 audit plan.
- The lead auditor shall visually inspect the raw materials to ensure that they match the purchasing documentation and have not yet been blended, mixed, or processed, nor labelled with assured claims.

c. Audit Progress Assessment and Exchange of Information:

a. The lead auditor will ensure that there are regular meetings with the team throughout the course of the audit to ensure that issues identified are discussed and, if necessary, the course of the audit is modified to accommodate any changes necessary. These issues should be brought to the attention of the client's representative at the time that they are identified.

b. Where the available audit evidence indicates that the audit objectives are unattainable or suggests the presence of an immediate and significant risk (e.g., safety), the lead auditor shall report this to the client and to the TIC QC head office to determine appropriate action. Such action may include reconfirmation or modification of the audit plan (as mentioned in latter section), changes to the audit objectives or audit scope, or termination of the audit. The lead auditor shall also:

- Maintain the information collected to this point in time;

- Provide the client with a report and the non-conformity(ies) leading to the interruption of the audit, if applicable.
- Indicate in the audit report the reason for the interruption of the audit.
- The lead auditor shall conduct a daily debrief meeting as necessary to discuss the progress of the audit and the concerns with the client. As a result of the meeting, the audit plan may be modified.
- The Lead Auditor shall review with the client any need for changes to the audit scope which becomes apparent as on-site auditing activities progress and report this to the TIC QC office.

d. Document Review

Documents determined by TIC QC and relevant standard/scheme requirements that needs to be reviewed during the audit are specified in the audit checklist to be reviewed in the Audit.

- The document review examines the verification of the documents by considering the sections in the relevant standard/scheme requirements.
- The document number, date, and by whom it was published are checked and recorded in the objective evidence/evidence section.
- If necessary, the image of the document is taken and added to the audit report. In cases where the document to be examined needs to be assessed in more technical terms, the auditor contacts the technical / halal expert in the relevant area within the audit period.
- In case the technical/halal expert conducts an assessment and evaluation, the expert's assessment notes are recorded with the draft audit report.
- If, as a result of the document review, there are deficiencies and errors in the documents, the auditor assesses the nonconformities according to the relevant standard sections and reports the nonconformities and presents them at the closing meeting.

e. Traceability

- It is recorded in the Traceability tab in the audit checklist.
- If certified production has not started yet, process evaluation is made on comparable products. Going back from the last process to the beginning, it is checked whether the comparable product process is traceable and recorded in draft audit records.
- For traceability, production files are also examined in addition to shipment and stock information. (Accompanying cards, work orders, capacity information, etc.)
- If a nonconformity is to be raised by the auditor due to findings based on this exercise, the lead auditor/auditor should start a deeper investigation to determine the severity of the nonconformity.
- Relevant standard/scheme requirements stage 2 checklist shall be mentioned

f. Lunch/Break

Lunch/lunch break is scheduled according to the audit plan schedule and audit flow. The lunch/break is not included in the audit/day period. It is more appropriate to have lunch in the company's cafeteria in terms of checking the appropriateness of social compliance.

g. Personnel Interviews

- According to the audit flow, employee interviews may be conducted during the onsite audit, during the worker's break, or in a distinct room. Interviews should be conducted in multiple regions.

- As a matter of priority, personnel with special conditions, pregnant employees, disabled and juvenile employees, and employee representatives should be selected for personnel interviews. Personnel are selected from multiple shifts when feasible. Personnel are selected uniformly in all organisations.
- Names, departments, shifts, and any special circumstances (e.g., pregnancy, disability) of personnel interviewed are not documented in the draft audit report. The audit report does not provide the identities of the personnel interviewed.

h. Reporting

- The objective of reporting is to prepare an audit report from the observations, findings present in draft audit report and is shared with the company during the close meeting. This report is delivered to the company as a printout or via email.
- The audit report includes the company's title, address, contact information, processing steps, products, legitimate certification number, and all nonconformities.
- The report contains all objective evidence and findings that were gathered during the audit.
- If a nonconformity is detected, the audited company proceeds to the nonconformity stage; otherwise, it proceeds to the review step.
- The reports in general include audit scope information; audit team information; production and product information; details of nonconformities, if any; general evaluations of the auditor; and opening and closing meeting information are recorded.
- The report is submitted to the company for approval during the closing meeting and is received from the company as stamped and signed

- **Preparation of Audit Report**
  - The lead auditor is responsible for the preparation of its content as per the requirements. The audit report shall provide an accurate, concise and clear record of the audit to enable an informed certification decision to be made.
  - The audit report shall be prepared and issued by auditors during the meeting; if no internet connection is available, the report shall be prepared and issued off-line. The audit team may identify observations but shall not recommend specific solutions.

4.2.6. Nonconformities

- The company is notified of the nonconformities identified by the lead auditor during the closing meeting. Proof of any nonconformity found during the audit is requested from the company. The auditor reviews the records within a day to make sure the evidence is enough.
- The lead auditor/auditor informs the company during the closing meeting whether they will close the nonconformity using managerial evidence or a follow-up audit. If a follow-up audit is required, the auditor/lead chooses the day. It informs the company of its chosen day. The date of the inspection is sent to the coordinator via email.
- The lead auditor/auditor gives evidence to support the reason of the nonconformity and marks the Major/Minor status of the nonconformity in draft audit report.
- Auditors analyse the effectiveness of nonconformity closures in the previous audits of the client. Nonconformities defined as minor in the previous audit are classified as major in the current audit, and nonconformities labelled as major in the previous audit

are still classified as major in the current audit if the effectiveness of nonconformity closures is determined to be insufficient.

- On-site closure is requested based on the size and scope of the nonconformity identified during the audit.
- During a surveillance/recertification audit, the auditor immediately informs the technical reviewer/decision-making committee/certification committee/certifier if the company has more than five major nonconformities. Until the nonconformities are resolved/addressed/closed, the company's scope certificate is suspended. If suspended, then follow termination...
- The decision-making committee/certification committee/certifier assesses the company's corrective steps to close the non-conformities.
- A favourable decision is made if the auditor's certification committee or decision-making committee determines that the corrective action plans are adequate to remedy the nonconformity and are backed by documentation. The evidence is sent back to the company for revision or improvement if it is determined that the proof is insufficient.
- The company claims that if it receives a nonconformity that cannot be rectified within the limitations of the certificate renewal process, it will withhold production and shipping until the certificate is issued.
- If the company does not close its nonconformities within the specified time frames, the certification committee or decision-making committee will make a negative certification judgement in accordance with the certification procedure. The decision to not provide the certificate due to the non-conformities is communicated to the company, and the decision letter is recorded in the TIC QC certification database.
- The decision-making committee or certification committee/certifier renders a favourable certification decision in accordance with the Certification Procedure. The decision letter is kept in TIC QC database, informs the company that the Certificate cannot be granted due to non-compliance.

- **For each nonconformity, the author shall identify the following**:

Finding: a clear description of the nature of the nonconformity; it could be in terms of insufficient implementation, unsuitability, inadequacy, ineffectiveness, etc. or in terms of lack of identification of the evidence which conflicts with the requirement.
Requirement: The quote of the requirement of the audit criteria against which the nonconformity is being reported. This may include a reference to the audit criteria and/or the client's documentation. In the case of an Integrated Management System audit, it may refer to more than one audit criteria and/or other normative document
Objective Evidence: The objective evidence observed that supports the statement of nonconformity: the specific occurrence, supported by the identification of the evidence collected (e.g. - direct reference to the document being reviewed, the work station, etc.)

- **Major Non-Conformity:-**

Major non-conformity: failure to fulfil one or more requirements of the management system that raises doubt about the capability of the management system to achieve the expected outcomes or to effectively control the process for which it was intended.

Characteristics of a major non-conformity are:-

- An extensive breakdown or the absence of evidence of effective implementation of a process and/or documented procedure required by the applicable audit criteria and expected outcome.
- Probable shipment of non-conforming product to the client
- The absence of, or total systemic breakdown of, a management system process specified in the applicable audit criteria or any nonconformity where the effect is judged to be detrimental to the integrity of the product, processes, or service.
- The absence of, or failure to implement and maintain, one or more management system requirements; or a situation that, based on objective evidence, raises significant doubt about the management system's capability to achieve its policy and objectives.
- If there is a significant doubt that effective process control is in place or that products or services will meet specified requirements;
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.
- A situation that is a significant real or imminent threat to the environment
- A situation that is a significant real or imminent threat to human health and safety
- A situation that could lead to a major compliance issue (compliance processes compromised, resulting in fines and/or sanctions from regulatory agencies)

Note: A major nonconformity usually represents a material risk to product quality, human health and safety, or impact to the environment and raises doubt about the capability of the management system to achieve its policy and objectives.

- **Minor Non-Conformity: -**

Minor Non-Conformity: Failure which does not impact the capability of the management system to achieve the expected outcomes.

Characteristics of a minor non-conformity are:-

- A failure to fully satisfy a requirement of the audit criteria with a documented procedure, when required.
- a situation that is a minor real or potential threat to the environment
- a situation that is a minor real or potential threat to the to human health and safety
- a situation that could lead to a minor compliance issue (minor issues not compromising overall compliance processes and resulting in no significant fines and/or sanctions from regulatory agencies)
- A breakdown in the effective implementation of a documented procedure in isolated incidents.

Notes:

- A minor non-conformity usually does not represent a material risk to product quality, human health and safety, or impact to environment, and does not raise doubt about the capability of the management system to achieve its policy and objectives.
- A number of minor non conformities associated with the same requirement or issue could demonstrate a systematic failure and thus constitute a major non conformity.

- **Observation :**

Definition: an opportunity to enhance the existing work process/practice/method that conforms to the requirement of the audit criteria and/or of the organization, but may not represent the current state-of-the-art approach, or best practice, but may represent a potential for a non-conformity.

- The auditor should identify the area for improvement but cannot offer a specific solution.
- Audit findings, however, which are non-conformities, shall not be recorded as Observation.

- **Areas of Concern for Stage II:**

  - Definition: Findings identified during the Stage I audit that could be classified as nonconformity during the Stage II audit. The classification for areas of concern is as follows.
  - Area of concern – minor: This would be a concern that potentially at the stage 2 audit could result in non-conformity.
  - Area of concern-major: This would be defined as if not addressed by the client prior to stage 2 this would result in non-certification recommendation at stage 2.

4.2.7. Situation where the client terminates audit midway

- In circumstances where the company is not ready to audit and noticed by the auditor during the audit, the nonconformities are determined and reported by the auditor, and the audit is finished. Unless the company desires it, the auditor cannot end the audit. In case the audit is ended, a signed record outlining the reason for ending the audit is received from the company.
- The auditor communicates the complete audit process to the scheme manager by e-mail.

4.2.8. Time line for submission of corrective action plans & implementation of corrective actions:

- **Corrective Action Plans**:
  All corrective action plans, including evidence of correction shall be submitted within 30 calendar days from the last day of the activity unless the client's certificate expires prior to that date; in such case the corrective action plan shall be submitted prior to the certificate expiring.
- **Minor Non-Conformities**:
  For minor non-conformities, all corrective actions shall be implemented (including verification of effectiveness) within 90 calendar days from the last day of the activity. Effective implementation of corrections and corrective actions will take place at the next visit.
- **Major Non-Conformities:** For major non-conformities, all corrective actions shall be implemented (including verification of effectiveness) within 60 calendar days from the last day of the activity unless the client's certificate expires prior. In such a case the client's due date should be not less than 30 calendar days before the expiry date of the certificate.
- An onsite special visit to close out majors will always be scheduled unless certificate authority has approved it to be offsite. The date for scheduling the special visit shall

be within 90 days following the audit or prior to certificate expiry, whichever comes first.

- The findings of non-conformities are addressed (Audit Findings Non-Compliance) and send to client for corrective action.

4.2.9. Closing Meeting

The closing meeting is the last implementation of the audit. At the end of each audit, a closing meeting should be held to present the audit findings and conclusions. The closing meeting should be chaired by the lead auditor and attended by the management of the auditee/client.

As appropriate, the following should be explained to the client in the closing meeting:

- Advising that audit evidence collected was based on a sample of the information available and is not necessarily fully representative of the overall effectiveness of the client's processes
- Present strengths, positives of the process, and noncompliance observed
- The method of reporting
- The time frame to complete the nonconformities, in case any follow-up audit is needed, and an agreement for a suitable date.
- Possible consequences of not adequately addressing the audit findings
- Presentation of the audit findings and conclusions in such a manner that they are understood and acknowledged by the client/management

- Any related post-audit activities (e.g., implementation and review of corrective actions, addressing audit complaints, and the appeal process)

- The closing meeting concludes with the signature of the client's responsible person on the audit report and nonconformity report.

- The client is advised that they are not certified and must refrain from making any claims regarding chemical inputs approval until they receive written confirmation of a positive letter of approval decision.

5. SURVEILLANCE ACTIVITIES

Surveillance activities shall include section 7.4 evaluation and 7.5 review and 7.6 certification decision of Quality manual and periodic monitoring of continuing use of certification marks shall be carried out.

6. MANAGEMENT OF CHANGES

- If the company proposes a change request that impacts the offer during the audit, the scheme manager and coordinator are notified by the auditor who is conducting the audit. The new application review procedure is initiated while the audit is ongoing.
- If the application review, proposal, and addendum processes are finalised prior to the conclusion of the audit, the audit includes the proposed change . In the event that the application review, proposal, and addendum processes are unable to be

finalised prior to the conclusion of the audit, the audit is concluded using the existing information.

- A re-audit is subsequently scheduled for the processes that involve the change at a different date.

7. QUALITY CONTROL: AUDITORS

- Quality control auditors (Note: senior or lead auditors are chosen as auditors) carry out the audit. The control procedure may cover the complete audit or concentrate on specific audit components, depending on the type of quality control.
- The audit manager uses the 'Auditor Quality Control' to plan quality controls. The quality control form is used to build a personalised checklist for scheduled controls.
- Quality control: Auditors The following are some ways that auditors' quality control is incorporated:
  a. Internal and External Audits: This type of control ensures that nonconformities resulting from an auditor's performance are not repeated.
  b. Version Changes and Standard Updates: This type of quality control, whether intended or not, is carried out to ensure that the audit processes in the field accurately reflect the standard and procedure updates that are deemed required outside of the mandatory certification criteria.
  c. Periodic: Annually, on a needs basis
  d. Complaints and Feedback: When thought necessary, the auditor's performance is assessed based on input provided by internal and external stakeholders regarding the audit performance.

8. FORCE MAJEURE SITUATIONS

a. In the event of force majeure, the auditor is obligated to retain the latest version of the standard and other related documentation either in physical form or electronically with him/her.
b. The document, such as the checklist, Audit procedure and implementation, and the latest version of the standard during the audit are mandatory during the audits.
c. The auditor is accountable for performing all processes of TICQC and guidelines provided by the relevant scheme for such scenarios.
d. In the event of a possible force majeure, at minimum, the scheme manager should be informed by the auditor for approval to finish the audit with the excel format of the audit checklist

References

- Client information and application form
- Opening closing meeting
- Document Review Report
- Stage 02 – Checklist
- Audit Findings Observations
- Audit Findings: Non-compliance
- Application review form
- Audit plan
- Auditor Quality Control

Revision History

The following is a summary of the recent revisions to this document.

Date	Revision No.	Amended By	Description of Changes