

Procedure No.	TP-02-CA
Created:	June 2009
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## Corrective Actions Follow-up Procedures for Auditors and Certification Bodies

### Audit Failures and Corrective Actions

Please see the process below for follow-up on Corrective Action Requests after failed audits. A failed audit means the program participant:

- Autofailed, or
- For program participants enrolled in CanadaGAP certification options B, C, or D: did not achieve a score of 100% on the audit, or
- For program participants enrolled in CanadaGAP certification options E or F: did not achieve a score of at least 95% on the audit, or
- For program participants enrolled in CanadaGAP certification options A1 or A2: did not achieve a score of at least 85% on the audit.

#### 1. **Timeline:**

- a. For certification options B, C, D, E and F: Auditees who fail the audit have 60 days from receipt of the audit report to close out Corrective Action Requests. For certain non-conformities, a corrective action plan may be acceptable, since it may not be possible for the operation to address certain issues during the current year/season. The program participant may be able to present a reasonable plan to implement corrective actions in the following year/season. The Certification Body/auditor will be responsible to make the determination in each case, and the program participant's effective implementation of the proposed corrective actions must be verified during the next audit. Those who have not implemented corrective actions by the deadline, or who have not received approval from the Certification Body/auditor on their proposed corrective action plan for the following year/season, will not be certified, or will have certification withdrawn.
- b. For certification options A1 and A2: Auditees who fail the audit have 60 days from receipt of the audit report to close out Corrective Action Requests, or the end of the season, whichever is sooner. Those who have not implemented corrective actions by the deadline will either not be certified, or will have certification withdrawn, and will need another full audit.
- c. For all certification options: The close-out period **INCLUDES** the review and approval of corrective actions by the Certification Body. The auditor or Certification Body may require additional objective, documentary evidence (records, photos, etc.), or a follow-up visit to the operation, or both. The auditee must allow enough time (minimum 2-3 weeks) for the auditor and Certification Body to review and approve the corrective actions implemented. As determined by the Certification Body, provisions can be made for a longer timeframe than 60 days to deal with exceptional circumstances (e.g., if needed for major capital investments).

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2. Some customers have set out expected timeframes for their suppliers regarding audit failures and corrective actions follow-up, which may differ from the base requirements of the program. If the customer's deadline is shorter than the close-out period required by the program, the auditee is responsible to respond to Corrective Action Requests in a timeframe appropriate to meet his customer's expectations.
3. A certificate will not be issued until the auditee has:
  - a. corrected any autofail items, if applicable
  - b. implemented corrective actions sufficient to bring the operation up to a passing score on the audit, and/or
  - c. for options B, C, D, E and F: received approval from the Certification Body for a proposed corrective action plan to be implemented the following year/season.
4. The process for auditors and auditees is as follows:
  - 4.1 The auditor completes the audit report and sends to the Certification Body. In some cases and only as appropriate, the auditor may await receipt of further information from the auditee before finalizing the audit report (e.g., additional records that were not available on-site during the audit but that can be sent to the auditor within a reasonable time delay). For further guidance in specific situations, please contact the program lead for CanadaGAP at your Certification Body.
  - 4.2 As per CanadaGAP auditor training, the auditor must complete the Executive Summary in the Audit Checklist, identifying audit findings. These include any autofails and other findings, along with target timeframes for completion (see Section C – Summary of Audit Findings). This is not meant to be an exhaustive list of corrective actions requests (the auditee must refer to the final copy of the audit report once it is received to see all items that require corrective action). The auditor leaves a copy of the Executive Summary with the auditee. Only in special circumstances should a copy of the executive summary not be left with the auditee during the closing meeting of the audit. In these cases it should be faxed or emailed the next day. The auditor informs the auditee that audit findings are subject to review by the Certification Body (CB), and the final copy of the audit report will be sent to the auditee by the CB.
  - 4.3 The Certification Body will receive the audit report from the auditor, review it and provide a final copy to the auditee to inform him of the failed audit.
  - 4.4 The audit report is not shared automatically with the auditee's customer(s), although some customers require this. Regardless, the auditee must pre-authorize release of the report by the Certification Body. The auditee may otherwise have the option of providing his customer(s) with a copy directly. In the case of an audit failure, if the auditee has not pre-authorized release, the report can be retained by the auditee until such time as corrective actions are taken, and certification granted. At that point, the auditee can share the audit results with his customer(s) – i.e., both the original audit report and the completed *Corrective Actions Report*.

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- 4.5 The auditee is responsible to implement corrective actions to the best of his ability, within the timeframe indicated by the program and/or his customer, whichever is more stringent. Customer requirements may be very short [e.g., immediately (1 week), 1 month, etc.] depending on the nature and severity of the non-conformance(s).
- 4.6 It is in the auditee’s best interest to avoid delays since they increase the likelihood of not being certified in the current year, or could entail a shorter certification period (e.g., regardless of when a certificate is issued, it could expire close to the anniversary of the original audit date).
- 4.7 The auditee is responsible to implement corrective actions and contact his **auditor** to provide objective evidence of action(s) taken. This could include sending missing records, digital photos, etc. In some cases a return visit on-site may be required. The auditee should contact the auditor/Certification Body for guidance as required in specific cases.
- 4.8 If it is determined by the Certification Body that a return on-site visit is required, the participant is responsible for costs (i.e., auditor time and travel).
- 4.9 Regardless of whether an on-site visit is required **the auditee is responsible to pay the Certification Body fees for follow-up on corrective actions.** Charges also apply to desk review of evidence even when a return visit is unnecessary.
- 4.10 Auto failure items **must** be corrected.
- 4.10.1 Program participants enrolled in certification option B, C or D must close out all other CARs to achieve a score of 100% on the audit, or must receive approval by the Certification Body/auditor on a proposed corrective action plan for the following year/season if certain non-conformities cannot be corrected during the current year/season. Implementation of effective corrective actions must be verified by the Certification Body/auditor at the subsequent audit.
- 4.10.2 Program participants enrolled in certification option E or F must close out the CARs necessary to achieve a score of 95% on the audit, or must receive approval by the Certification Body/auditor on a proposed corrective action plan for the following year/season if certain non-conformities cannot be corrected during the current year/season. Implementation of effective corrective actions must be verified by the Certification Body/auditor at the subsequent audit.
- 4.10.3 For program participants enrolled in certification options A1 or A2, higher priority items that may have been identified in the Executive Summary under “Other Findings” should be corrected after autofails have been addressed. The auditee should refer to the full audit report for all findings and has some choice as to which items to correct to bring them up to a passing score of at least 85%.
- 4.11 It may not always be possible to correct autofail items or lost points after the audit within the required timeframe. It might be too late or not possible to take appropriate action until the next season (e.g., if the production season is already over). If in doubt, it is advisable for the auditee to contact the auditor or Certification Body to ensure that enough time

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remains to take and close out corrective actions. Program participants enrolled in certification options B, C, D, E and F have the option to propose a corrective actions plan for the following year/season, but for certification to proceed, the plan must be approved by the Certification Body/auditor and implementation of the proposed corrective actions verified during the audit the following year/season.

- 4.12 All Corrective Actions activity will be recorded in a **separate document** from the Audit Checklist. The blank template of this document, the *Corrective Actions Report*, is publicly available on the CanadaGAP website: [www.canadagap.ca](http://www.canadagap.ca). The auditee initiates the follow-up by using this form to indicate what action has been taken. The auditor completes the rest of the *Corrective Actions Report* as per the instructions within the form. The auditor/CB must **use only this Corrective Actions Report document**; do not add information to the original audit report. Do not revise original scoring or auditor's comments/observations within the audit report in any way.
- 4.13 The auditor reviews objective evidence of corrective actions for completeness, and forwards for review and decision by the Certification Body. It is in the auditee's best interest to provide the auditor with complete information to minimize follow-up time.
- 4.14 The auditor sends the completed *Corrective Actions Report* and objective evidence to support closure of corrective actions (records, digital photos, etc.) to the Certification Body.
- 4.15 The Certification Body will review the *Corrective Actions Report* and available evidence to determine whether to certify the operation.
- 4.16 The final result (Pass/Fail result) after closure of CARs will be recorded on the *Corrective Actions Report*, and a copy of the finalized *Corrective Actions Report* transmitted to the auditee (and, if authorized, to the customer).
- 4.17 The final audit result consists of the two reports: 1) the original audit report, which reflects the audit findings and original score, and 2) the completed *Corrective Actions Report*.

Auditors are expected to direct all inquiries regarding the Certification Body's processes for receiving and reviewing reports, corrective actions follow-up, etc. to the program lead for CanadaGAP at their certification body.

### **Corrective Actions to Increase Audit Score**

The CARs procedure can also be used if the auditee wants to increase their audit score. Some auditees may need to take corrective action(s) to satisfy a minimum scoring requirement from a buyer, retailer, etc.

The same procedures (above) apply when corrective actions are taken by the auditee to increase their audit score, except that there is no step of withdrawing certification if the auditee does not close out corrective actions within the required 60-day timeframe.

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### **Other types of Corrective Actions**

Corrective actions may be needed after a Certification Body review of the CanadaGAP self-declaration and self-assessment checklist, or when corrective actions are issued in conjunction with a Group Management System (GMS) audit, or a Management System Audit for multi-site operations.

In these cases, operations should use the *Corrective Actions Report* to respond to any non-conformities that have been found by the auditor or Certification Body.

The procedures for these checklists differ from the procedures listed above (e.g., operations must close out all CARS before certification can be granted, the timelines for closing CARS differ, etc.). These procedures are found in the CanadaGAP Program Management Manual.

The use of the scoring page by the Certification Body also differs in this context. There is no adjustment to a score per se; rather, the Certification Body will indicate whether the corrective actions taken result in a Pass or Fail on the audit.

### **Option B: Group Certification CARs Closeout Timelines**

Refer to Appendix III.1 of the *CanadaGAP Program Management Manual* for details on CARs closeout timelines in the context of Group Certification under Option B.