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## 1. OBJECTIVE AND SCOPE

The objective of this guidance document is to present the halal accreditation application procedures for the Halal Conformity Assessment Bodies (HCAB) and the conditions by which Halal Accreditation Agency (HAK) evaluates these applications.

This Guideline aims to inform HCABs about the principles of HAK in managing the processes such as field assessment, renewal of halal accreditation, suspension, scope change, withdrawal and clarify their obligations.

## 2. NORMATIVE REFERENCES

- OIC/SMIIC Halal Standard Series

## 3. TERMS, DESCRIPTIONS AND DEFINITIONS

**Activity Affecting Certification Competency:** Processes which affect HCAB's competency including but not limited to policy formulation, process and/or procedure development, review of certification contract, planning of halal conformity assessments activities [such as calculating audit time, forming an audit team], reviewing, approving and decision making on the results of halal conformity assessment activity.

**Appeal:** HCAB's request for re-evaluation of the decision on halal accreditation

**Assessment:** Determination of whether the activities, systems and personnel of a HCAB comply with national and internationally accepted technical criteria, standards and related legislation by means of document review, office visit, witnessing the halal conformity assessment activity etc.

**Assessor:** Person assigned by HAK to perform, alone or as a part of an assessment team, an assessment of a HCAB

**Board of Directors (BoD):** Decision-making body of the HAK, consisting of a total of five members, which are the Chairman and four members as defined in the relevant legislation


**Complaint and Appeal Committee:** Committee in which the chairman is the Secretary General naturally and which takes decisions unanimously, evaluates and concludes complaints and appeals

**Complaint:** The application that expresses dissatisfaction to be answered of real persons or legal entities regarding the procedures, policies, temporary or permanent personnel related to the accreditation activities of HAK, the activities performed by an accredited institution within the scope of the accreditation or any activities of HAK

**Corrective Action:** An activity related to the measures taken to resolve the causes to prevent the re-occurrence of existing nonconformity, defect or other unwanted situations

**Decision on Halal Accreditation:** Holding HAK BoD meeting regarding the applications made for halal accreditation and providing halal accreditation status to the HCABs or rejecting the halal accreditation application as a result of the decision taken in this meeting

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**Department of Halal Accreditation (DHA):** Department that performs the processing and finalization of the halal accreditation applications of organizations performing halal conformity assessment activities, and monitoring and assessing accredited organizations

**Document:** Information prepared and/or used to regulate the principles and accreditation activities carried out by HAK and stored in all kinds of physical, electronic, magnetic, etc. mediums and is reproducible

**Documented Information:** It is the sustainable recording, preservation and acceptance as a basis for performance monitoring criteria of halal accreditation certificates issued, decision meeting minutes, and the rules regarding basic operation and procedures of halal accreditation processes by HAK

**Expertise Committee:** Committee formed by HAK Board of Directors (BoD) and composed of people who use their expertise in the provision of the halal accreditation service, use their knowledge and experience for the benefit of the administration, have no relationship based on self-interest with the contractors of the service in which they use their expertise, and who do not make any profit from the administration except his/her expertise service.

**Extending Scope:** Addition of new activities to the current accreditation scope

**External Source:** The third parties whose service is consulted by HAK for the purpose of carrying out the halal accreditation process

**General Secretariat (GS):** The body responsible for ensuring and monitoring the implementation of the basic policies defined by the HAK BoD for halal accreditation and other administrative activities defined in the relevant legislation

**Halal Accreditation Contract:** Contract in which the conditions that HCAB declares to comply during the accreditation process and after accredited

**Halal Accreditation:** Regular assessment and monitoring, approval of the competence and evaluation according to the national and internationally accepted technical criteria of the organizations operating in the field of halal conformity assessment


**Halal Conformity Assessment Body (HCAB):** An organization that performs halal conformity assessment activities according to the the relevant normative framework

**HCAB's Authorised Person:** Personnel authorized by HCAB to convey any information/document to be sent to HAK and provides the communication between HAK and HCAB

**Islamic Affairs Expert:** A Muslim with profound and comprehensive knowledge and competence of Islamic rules in the subject of halal and non-halal whose competency has been approved by the relevant authority and appointed by HAK

**Location:** Addresses in which halal conformity assessment activities, as well as other related activities, are carried out (branch, addresses where key activities are conducted, mobile facility, travelling facility, virtual site, remote personnel's location, representative office, liaison office etc.)

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**Office Visit:** An assessment activity aiming to determine whether the management system and technical competence of the the HCAB meet the requirements of both the international standards and the complementary criteria (e.g., national legislation, HAK Guidelines) as well as to test the sustainability of the management system, for the requested scope of halal accreditation

**Project Coordinator:** The technical staff working in HAK and assigned by Department of Halal Accreditation, who is responsible for any technical and administrative contact, coordination and secretariat procedures with the body accredited (or applied for halal accreditation) at every stage of the halal accreditation activities

**Project File:** Application file of an HCAB officially applied to HAK for halal accreditation

**Reducing Scope:** Cancellation of part of the current accreditation scope

**Relevant Parties:** The group including public institutions and organizations related with accreditation and halal certification, HCABs, companies that will receive halal conformity assessment services from accredited bodies and final consumers, and end consumers

**Report Evaluation Committee:** Committee consisting of a total of 3 people who are the Secretary General as the chairman and 2 members that are not involved in the assessment processes

**Scope of Halal Accreditation:** Specific conformity assessment activities for which halal accreditation has been granted

**Surveillance:** A series of assessment activities to regularly monitor the accredited HCAB for continuous conformity with the accreditation requirements

**Suspending Halal Accreditation:** Putting temporary restrictions in place for all or part of the scope of halal accreditation

**Team Leader:** Assessor who is given overall responsibility for assigned halal accreditation assessment activities and HAK assessment team

**Technical Assessor:** Assessor assigned by HAK who conducts the assessment of the halal technical competence of the HCAB for specific area(s) of the desired scope of accreditation


**Technical Expert:** A person assigned by HAK which has technical competence regarding a specific area or technology.

**Third Party:** Produce, service provider or person certified by the HCAB

**Withdrawing Accreditation:** Cancellation of the halal accreditation for the full scope

**Witness Assessment:** HAK's observation of halal conformity assessment activities carried out by the HCAB within the scope of accreditation in the premises of third party.

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## 4. IMPLEMENTATION

### 4.1 Information and Documentation Control

Halal accreditation application and initial control processes are composed of two (2) main stages mentioned below:

- Receiving Application
- Document Control and Review

### 4.2 Receiving Halal Accreditation Application

“Application Form (AKR-Fo-001)” and “Authorised Person Declaration Form (AKR-Fo-002)” are essential for accreditation application to HAK. These two forms need to be properly filled and signed by a person authorised for representing and legally binding the HCAB. Then, these forms are submitted to HAK by post or through digital means, as deemed suitable by HAK.

HCAB shall determine and clearly define the halal accreditation scope for application at this phase in order not to face any problem. HCAB shall determine its application scope considering its current certified clients, valid certification schemes and Guideline on Witness Assessment Planning for Halal Conformity Assessment Bodies (AKR-Pr01-Rh-007).

Following the receipt of the forms, a temporary project file shall be formed by HAK.

HCABs applying for halal accreditation shall establish a management system as per the related international standard(s) concerned and operate this system at least for six (6) months. In addition to this, the HCAB needs to have at least one client (third party) ready for audit by the time HAK’s witness assessment takes place.

In other words, as per the requirements laid in “Guideline on Witness Assessment Planning for Halal Conformity Assessment Bodies (AKR-Pr01-Rh-007)”, HCABs must organize witness assessments for the sub-categories accreditation is demanded for and HAK Assessment Team shall participate in these assessments.


Following the submission of application forms and full payment of the mandatory application fee, DHA assigns a Project Coordinator who will be responsible from the entirety of halal accreditation application and follow the administrative transactions.

Project Coordinator officially forms the project file after the assignment.

Afterwards, the Project Coordinator controls the submitted information whether it meets the required criteria. If it is determined that the information given in the application is not at will, the situation is notified to the HCAB and at most ten (10) working days are given for correction of the related information. Extra five (5) working days are given to the HCAB that cannot finish corrections because of force majeure.

By the same time, the Project Coordinator performs resource evaluation for the application. While resource evaluation is performed, below criteria shall be taken into consideration by Project Coordinator:

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- Whether HAK provides accreditation service in the area that HCAB requests halal accreditation for,
- Whether HAK has sufficient number of technical experts and assessors,
- Whether there is a need for a separate ‘Expertise Committee’ to evaluate the technical adequacy of the applicant,
- Whether the status and operational structure of the applicant comply with the principles and policies that HAK adopt.

Project Coordinator prepares “Information Review Report” and “Resource Adequacy (Competence) Evaluation Report” according to these evaluations.

If the result of the review process is positive, the “Document Control and Review” stage begins and HCAB is informed about the development.

### 4.3. Document Control and Review

HCAB’s authorised person conveys all the requested documents (as noted in the Document Submission Information Form: AKR-Fo-003) to HAK.

The application is considered invalid if two (2) copies of duly signed versions of the Halal Accreditation Agreement (AKR-PvT-001) are not amongst the submitted documents.

HCAB has fifteen (15) working days to submit the required documents to HAK after the notification regarding the beginning of “Document Control and Review” stage. Depending on the document compiling performance of the HCAB, an additional fifteen (15) working days can be given.

HCAB is responsible for keeping the document updated and informing HAK about any change in each document without delay.

### 4.4 Halal Accreditation Assessment

Halal accreditation assessment is composed of the below basic procedures:


#### 4.4.1 Establishment of the Assessment Team

Once the result of evaluation/verification of information is positive, following the approval for “Document Control and Review” stage, arrangements for forming an assessment team are made by DHA.

In this manner, it is envisaged that the team is composed of assessor, technical assessor, technical expert (and HAK observers) provided that at least one (1) Team Leader and one (1) Islamic affairs expert are included. As per the HCAB’s activities and technical scope for which halal accreditation is demanded, the team may consist of more than one assessor and/or technical expert.

The HCAB shall be notified about the Assessment Team by the “Assessment Team Offer Form (AKR-Pr01-Fo-001)”. The HCAB is obliged to give approval within the period specified in the Form. If not, one additional offer can be made by HAK. For forces majeure, HAK may renew the Offer Form.

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HCAB can convey its complaint regarding the Team in maximum fifteen (15) working days to HAK, based on reasonable ground. If HAK deems it necessary, related Team member can be replaced, and a new notification can be made toward the HCAB.

Following the HCAB's approval of the Assessment Team, the next stage starts.

#### **4.4.2 Control for the Content and Adequacy of the Documents**

The documents and records that were submitted to HAK are examined and reviewed by the Team Leader any other related Team member(s) before the on-site assessment.

After the examination of the adequacy and accuracy of the documents and records, "Document Control and Conformity Report" shall be prepared by the Assessment Team.

While checking the adequacy of documents and accuracy of content, the Assessment Team may need to resort to confirmative information from an external source. In this case, related HAK procedures are followed by the Assessment Team. The evaluations received from external sources are added to the "Document Control and Conformity Report".

Where the Assessment Team detects non-conformities during the adequacy control that deemed to hinder the accreditation assessment, the applicant HCAB shall be notified about them. The HCAB needs to eliminate these specific non-conformities in six (6) months days at most, following the notification. If the HCAB fails to do so, the application shall be refused and the HCAB may re-apply by paying the mandatory application fees. In this case, the halal accreditation procedure shall be operated from the beginning.

For all cases, there the on-site assessment is failed to commence following the end of the Document Control Stage, then the application shall be turned down. In this case, the HCAB can re-apply in two (2) months by paying the mandatory application fees. The application procedure shall be operated from where it is left if the re-application is made within two (2) months. Otherwise, the application procedures shall be operated from the beginning.


#### **4.4.3 Pre-assessment (Voluntary)**

After "Document Control and Conformity Report" is prepared, the Project Coordinator communicates with HCAB and ask if a pre-assessment is requested or not. If HCAB's request is positive, the pre-assessment time is determined according to the proper schedule developed by the Team Leader and the Project Coordinator.

Pre-assessment is a narrow-scoped assessment in which the halal certification system of HCAB is analysed and some basic information about halal accreditation process is given. No solution is offered to the non-conformities identified in the pre-assessment. The pre-assessment duration cannot exceed two (2) man/days.

Pre-assessment is performed by one (1) Team Leader and one (1) Assessor and with the presence of HAK observer and Technical Expert if needed.

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During the pre-assessment, the HCAB's code of practices for its management system is examined. If appropriate, HCAB's relevant departments or other managerial elements can be examined as well. At the end of the pre-assessment, a closing meeting takes place and the non-conformities identified are shared with the HCAB.

From the date that pre-assessment report is submitted, HCAB shall convey its decision to HAK in writing regarding whether it will continue its halal accreditation process or not by not more than fifteen (15) working days.

#### **4.4.4. Accreditation Assessment**

In case of not having a pre-assessment request, "Assessment Request Form (AKR-Pr01-Fo-002)" is conveyed to the HCAB after the approval of "Document Control and Conformity Report" to begin the on-site assessment.

HCAB shall either consent the request *or* propose a new period in five (5) working days after the offer of HAK is conveyed, where the latter requires a reasonable ground. Once the date was set, HCAB shall make the necessary arrangements for assessment activities on time and keep in touch with the Assessment Team and Project Coordinator in order to organise the assessment at the soonest possible date.

If the result of the Document Control stage is positive, the on-site assessment for the related HCAB shall begin at most two (2) months. Otherwise, the application shall be refused. After the application file is closed because of this reason, HCAB can re-apply in two (2) months provided that mandatory application fees are paid. For those that applied after three (3) months, the process shall be operated from the beginning.


#### **4.4.5 Corrective Action Follow-up**

After the non-conformities are identified during the assessment, the HCAB is informed about them by the "Non-Conformity and Corrective Action Notification Form (AKR-Pr01-Fo-003)". Then, the HCAB shall submit its root-cause analyses and corrective action schedule to the Assessment Team through same Notification Form in ten (10) working days at most.

The Assessment Team evaluates the root-cause analyses and the schedule submitted by HCAB and approves it. Based on the approval, HCAB starts to implement corrective actions proposed in the schedule. If the Team does not approve the schedule, HCAB prepares a new one and submits it to HAK for re-evaluation of the Team.

Records of the corrective actions, which shall be implemented at most three (3) months, shall be evaluated by the Assessment Team. An additional period of three (3) months can be defined for the corrective actions deemed insufficient by the Team. This period [3+3 months] is the maximum period for fully resolving the non-conformities. If a follow-up assessment is performed in order to monitor the effectiveness of the corrective action, the time spent for this assessment is included within this maximum period.

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#### **4.4.5.1 Follow-up Assessment (If needed)**

Corrective actions are monitored basically in two ways: namely evidence evaluation and follow-up assessment. In evidence evaluation, the HCAB conveys the evidence (information, documents etc.) to the Assessment Team as a result of the corrective actions performed for the aforementioned non-conformities. The Team members involved in the initial assessment shall evaluate the evidence. If the Assessment Team consider it necessary, following the completion of all corrective actions, there can be an on-site follow-up assessment toward HCAB in order to control that the non-conformities are fully eliminated.

Follow-up assessment is planned in line with the general HAK principles on accreditation assessment, yet its scope is solely limited with the subjects related with the non-conformities in question.

If it is convinced that the non-conformities are still present at the end of the follow-up assessment, in accordance with the opinion of the Assessment Team, the assessment shall be finalised negatively (either as a whole or only for the scope related with non-conformities).

As a result of the follow-up assessment, the Assessment Team prepares “Corrective Actions and Follow-up Assessment Report” that includes the findings and evaluations and presents it to HAK together with the main Accreditation Assessment Report.

#### **4.4.6 Evaluation of Assessment Report**

HAK General Secretariat shall establish a ‘Report Evaluation Committee’ for evaluating the main “Accreditation Assessment Report (AKR-Pr01-Ra-002)” and its annexes, finalized by the Team Leader.

Members of the Committee receives the reports via Project Coordinator and begins to evaluate them.

After the evaluation process is complete, the Committee prepares a “Final Evaluation Report (AKR-Pr01-Ra-005)”. The application file for the HCAB, consisting of the Final Evaluation Report, formed by the Committee and all other assessment reports, shall then be conveyed to the Board of Directors (BoD) for decision.

### **4.5 Halal Accreditation Decision**

#### **4.5.1 Preparation Phase for Decision**


The members of the BoD evaluate the file presented. The decision is made at the meeting of BoD following the end of the evaluation.

#### **4.5.2 Halal Accreditation Decision**

The members of the BoD who examined the HCAB file gather to decide about the halal accreditation application. The BoD is the only body authorized for making accreditation decision.

If the BoD accepts the halal accreditation, synchronously with the positive decision, related HCAB is added to the accredited HCABs list at the web site of HAK, clearly noting the scopes and the validity period of the halal accreditation.

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Similarly, the BoD can make a negative decision. Any negative decision regarding the accreditation application is notified to the HCAB.

HCAB can make its possible appeal to the accreditation decision pursuant to predetermined terms.

#### **4.5.3 Decision Notification**

If the BoD makes positive decision, HAK halal accreditation certificate is sent to the HCAB's address declared in the application form. In this certificate, the halal accreditation scope and all the addresses of the locations covered under halal accreditation are visibly noted.

On the halal accreditation certificate, the effective starting date of halal accreditation is the date BoD makes the decision. The validity period of the certificate is sixty (60) months beginning from the decision date (as long as the surveillance activities are successful).

HAK halal accreditation certificate is prepared both in Turkish and English and then published in the HAK website. When there is a change in HAK halal accreditation certificate, the necessary updates are made, the relevant parties are informed, updated certificate is re-published on the HAK website.

#### **4.6 Post-Decision Processes**

##### **4.6.1 Surveillance Activities**


Surveillance activities basically involves office visits and witness assessments dispersed throughout the halal accreditation cycle that lasts for sixty (60) months. The office visits involve the following subjects:

- Documentation & performance control and review under the management system scope of the HCAB,
- Management review meetings and internal audits of HCAB,
- Review of the general performance and competence of accredited activities of the HCAB's,
- The HCAB's capability to handle the complaints,
- Management of impartiality,
- Risk analyses regarding the situations that can create conflict of interest and the effectiveness of HCAB's policies developed for this subject,
- Corrective action records regarding the non-conformities (and observations) found at the previous accreditation assessments or at the HCAB's own internal audit
- Competence of the HCAB's personnel,
- The HCAB's legal entity and/or organizational structure (including any possible changes took place)

In witness assessment, in addition to the subjects mentioned above, conformity assessment activities of the HCAB shall be witnessed by HAK on-site.

For every year within the sixty (60) month halal accreditation period cycle, at least one (1) office visit or witness assessment is performed by HAK. HAK can perform these office visits and witness assessment without notice as stipulated in its implementation documents/guidelines.

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First surveillance shall be performed within the first twelve (12) months' time following the halal accreditation decision, except forces majeure.

The centre and accredited branches/locations/representative offices/agencies in which activities affecting the competence of the HCAB are included within the scope of surveillance. The centre office shall be included in all surveillance assessments. On the other hand, HAK can make a risk-based sampling for the surveillance of branches/locations/representative offices/agencies and spread their monitoring throughout the accreditation cycle. Accredited shall be visited/monitored on-site at least one (1) time during the entire cycle.

If there are any complaints about activities of the accredited HCAB, certified third parties, members of audit team etc. HAK may perform extraordinary assessment processes (such as additional surveillance or complaint-verification assessments). These extraordinary assessments may be in the form of office visit or witness assessment.

HAK may combine the scope extension assessments with surveillance where it deemed appropriate.

#### 4.6.1.a Surveillance with Notice

If the surveillance (which is conducted once a year) is performed with notice, it begins with usual assessment scheduling procedures. In assessment with notice, the durations defined for the corrective actions and reporting are as same as in the first conformity assessment.

#### 4.6.1.b Surveillance without Notice

For the surveillance without notice, the visit is conducted without any notice to HCAB about the Assessment Team and date.

Assessments without notice begin with usual assessment scheduling procedures but, any approval form is not sent to HCAB.

### **4.6.2 Suspension**

The suspension of halal accreditation can be discussed in two ways; either suspension directly by HAK or suspension upon a request of the HCAB.


The implementation rules related with this process and all other procedures are addressed in "Guideline on Suspension, Withdrawal and Reduction of the Scope of Halal Accreditation (AKR-Pr02-Rh-001)" and related legislation.

### **4.6.3 Scope Change**

In halal accreditation scope, two basic changes can take place: namely reduction or extension.

Reducing the scope can happen either directly by HAK or upon a request of the HCAB. Extending the scope is based on the application of HCAB to add new scope(s) to the present halal accreditation scope. Halal accreditation number noted on the halal accreditation certificate shall not alter in case of a scope extension.

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The implementation rules related with this process and all other procedures are addressed in “Guideline on Halal Accreditation Scope Change (AKR-Pr03-Rh-001)” and related legislation.

#### **4.6.4 Withdrawal**

The withdrawal of halal accreditation can be discussed in two ways; either withdrawal directly by HAK or withdrawal upon a request of the HCAB.

The implementation rules related with this process and all other procedures are addressed in “Guideline on Suspension, Withdrawal and Reduction of the Scope of Halal Accreditation (AKR-Pr02-Rh-001)” and related legislation.

#### **4.6.5 Renewal**

If the HCAB requests a renewal of HAK halal accreditation certificate, it shall convey the “Renewal Request Form” at least six (6) months before the end of the sixty (60) month validity period. The HCAB is expected to fill in this form accurately.

Upon an appropriate application, a file is prepared regarding the renewal of HAK halal accreditation certificate by a Project Coordinator.

If HCAB does not submit the request of halal accreditation renewal six (6) months before the end of sixty (60) months’ time, the Project Coordinator gets a confirmation from the HCAB that it has no renewal application. The Project Coordinator then closes the HCAB’s file at the end of the halal accreditation period.

Renewal assessment is expected to be conducted at the fifty seventh (57th) month of the cycle. The HCAB loses its halal accreditation status in case a late renewal application takes place or conducting a renewal assessment before the end of the cycle becomes impossible because of any HCAB-originated reason, except forces majeure.

Renewal assessment is planned, performed, and reported like first halal accreditation assessment in principle. The corrective action durations valid for first halal accreditation assessment are valid for the renewal assessments as well.

As the findings obtained/experiences gained through the surveillance assessments are taken into consideration, the content of renewal assessment and the number of branches/locations that is supposed to be visited in this content can be reduced to its one forth (1/4) at most.


When the halal accreditation is ended for any reason, the name and accreditation information of the HCAB are removed from the HAK website and all relevant parties are informed. In this situation, the HCAB make its application like a new halal accreditation application if it wants to be re-accredited.

### **4.7 Complaints and Appeals**

#### **4.7.1 Handling of Complaints**

The processes of the accredited HCABs or the services given by the accredited HCABs (ones related with the scope accredited) can be subject to complaints.

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Complaints can be made by accredited HCABs, organizations that use accredited services (third parties) or real persons.

In principle, it is essential that the complaints about the HCABs are directed to the related HCABs initially. Yet if there is no result, complaints can be made to HAK.

Nevertheless, complaints regarding the HCAB's activities in which HAK's halal accreditation rules are violated can be received by HAK directly.

In complaints, the following two points are essential:

- The HCAB processes that is subject to complaint must be based upon evidence
- Complaint subject and concerned evidence must be related with the accredited scope

No action is taken against the HCAB if the complaint is made against non-validated information.

The implementation rules related with this process and all other procedures are addressed in "Guideline on the Handling Process for Complaints and Appeals (AKR-Pr04-Rh-001)".

#### **4.7.2 Handling of Appeals**


Appeal can only be made to halal accreditation decision made by HAK.

In other words, no other issue except the halal accreditation decision made by HAK BoD can be subject to an appeal.

The appeal that will be made to the HAK's halal accreditation decision shall be made in thirty (30) working days' time starting from the decision notification date.

The implementation rules related with this process and all other procedures are addressed in "Guideline on the Handling Process for Complaints and Appeals (AKR-Pr04-Rh-001)".

<b>Prepared by:</b> <i>Department of Halal Accreditation</i>	<b>Approved by:</b> <i>HAK Board of Directors</i>
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	<b>GUIDELINE</b>	Document No:	AKR-Rh-03-Rv02
	<b>General Guideline for Halal Conformity Assessment Bodies</b>	Date of Issue:	22.10.2019
		Revision Date/No:	02.09.2022/Rv02
		Page No:	13/13

### Document History:

Page #:	Revision #:	Revision:
All	01	Terminological changes are made.
4-5	01	The basic requirements for HCAB's halal accreditation application are stated more clearly (e.g., submission of application forms to HAK, minimum number of halal certified customers etc.)
5	01	Rules on the documents to be submitted by HCAB are clarified.
6	01	The 15 working days requirement for elimination of non-conformities detected during document control is removed. The condition is defined that HCAB's application will be refused in case of the non-conformities preventing the assessment cannot be resolved within nine (9) months following the notification date.
6	01	The scope of application for pre-assessment activities is revised.
9	01	A rule is defined that for scope-extension, the relevant assessment can be combined with surveillance assessment.
10	01	A rule is defined that expiry date of the existing certificate will not change as a result of the scope extension. Likewise, the details of suspension and withdrawal procedures are referred on the related national legislation.
11	01	Terminological changes are made regarding the parties that may file a complaint.
All	02	Definition of “key activity” is altered as “Activity Affecting Certification Competency”.
All	02	The binding periods in the guideline are revised.
01-02	02	Referenced normative documents are revised, the definition for “Quality Management System” is removed.
04	03	The definition of “Third Party” is revised.
04	02	In Article 4.2, application pre-requisites are revised.
05	02	In Article 4.3, the principles of ‘Document Control and Review’ stage are revised.
05-06	02	In Article 4.4.1, rules for forming an assessment team and the rights and obligations of HCABs in that regard are revised.
06	02	In Article 4.4.2, situations that may arise as a result of document evaluation are defined and the rights of the HCABs are determined for each of these situations.
07	02	One (1) year duration for ending the accreditation process, in case of a failure to begin the assessments, is removed. Different binding periods and procedures are defined for such cases.
07	02	In Article 4.4.5, binding periods for the evaluation of corrective action records are revised.
08	02	In Article 4.4.6, the process of evaluating the assessment reports is revised.
09	02	In Article 4.6.1, the issues to be considered by the HAK in surveillance assessments are revised.
10	02	The rules regarding the surveillance processes toward HCABs with multiple branches and/or more than one representative office/location/agency are elaborated.
11	02	In Article 4.6.5, force majeure situations are defined regarding the binding periods of renewal assessments.
12	02	References are made to HAK’s implementation documents that form the basis for the complaints and appeal procedures.

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