



Accreditation Program Guide

TPS: 2023 – a visionary creation
based on ISO/IEC 17011: 2017 to
Elevate Training Standards



Accreditation
PROGRAM Standardizing food & beverage
training programs across Canada





ABOUT US

Food Processing Skills Canada (FPSC) is the food and beverage manufacturing industry's workforce development organization. As a non-profit, located in Ottawa with representatives across Canada, we support food and beverage manufacturing businesses from coast to coast in developing skilled and professional employees and workplace environments. Our work directly and positively impacts industry talent attraction, workforce retention and employment culture. We care about assisting the industry in finding, training and retaining the very best people for the job. Through our partnerships with industry, associations, educators and all levels of governments in Canada, FPSC has developed valuable resources for the sector including the **Food Skills Library™**, **Canadian Food Processors Institute™**, **FoodCert™** and **Labour Market Information Reports**.



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Terms and definitions

This document follows the terms and definitions given in ISO/IEC 17011:2017.

Academic program means a combination of courses and related activities organized for the achievement of specific learning outcomes as defined by an educational/training institution.

Accreditation means the independent formal attestation of a Conformity Assessment Body's (CAB) competence to carry out specific conformity assessment tasks.

Accreditation Body means the authoritative body that performs Accreditation in accordance with the requirements of the ISO Standard.

Accreditation Certification means the formal document or a set of documents confirming that Accreditation has been granted to a CAB for the defined scope.

Accreditation Committee means a committee of Food Processing Skills Canada (FPSC) employees, consisting of five (5) individuals who are not Assessors.

Accreditation Agreement means the written agreement between the Applicant and FPSC, to be executed at the time that an Accreditation Decision to Grant Accreditation is provided. The Accreditation Agreement will set out the terms and conditions that must be met by the Applicant on an ongoing basis in order for the Accreditation to continue, including restrictions on the use of the Accreditation Symbol. Breach of the Accreditation Agreement may lead to the Reduction, Suspension, or Withdrawal of Accreditation, at the sole discretion of FPSC.

Accreditation Decision means a decision resulting from completion of an Assessment. There are eight (8) types of Accreditation Decisions: Deny Accreditation, Extend Accreditation, Grant Accreditation, Maintain Accreditation, Reduce Accreditation, Renew Accreditation, Suspend Accreditation, and Withdraw Accreditation. This Agreement relates to the Assessment Process undertaken by FPSC with regard to the Applicant, leading to an Accreditation Decision to either Grant Accreditation or to Deny Accreditation. Execution of an Accreditation Agreement will be required if Accreditation is Granted. And, if, in the future, the Applicant is interested in Extending Accreditation or Renewing Accreditation, a new, separate Accreditation Agreement will be required.

Accreditation Package means the package of documents received by the Applicant if the Accreditation Decision is to Grant Accreditation. The Accreditation Package will consist of a letter confirming the Accreditation, the Scope of Accreditation, the Accreditation Symbol and terms and conditions relating to the use of the Accreditation symbols and other claims of Accreditation, and the draft Accreditation Agreement to be executed by the Applicant and FPSC

Accreditation Program means the program developed by FPSC through which FPSC conducts Assessments in order to make Accreditation Decisions.

Accreditation Scheme means the collective rules and processes governing the Accreditation Body (FPSC).

Accreditation Symbol means a symbol issued by FPSC to indicate Accredited status. The Accreditation Symbol may be used by the Applicant to indicate the Accreditation of the Materials but cannot be used by the Applicant on any certificates or diplomas awarded to trainees, participants, students or employees (as applicable) of the Applicant. The Accreditation Symbol relates to the Accreditation of the Materials, not of any individual who is trained by the Applicant.

Appeal means a request by the Applicant for reconsideration of any adverse Accreditation Decision related to its desired Accreditation status.

Applicant Is a CAB / a training provider.

Assessment means the process undertaken by FPSC to assess the competence of a CAB, based on standard(s) and/or other normative documents and/or the expertise and competences of the Assessors, within a defined Scope of Accreditation, as part of the Accreditation Program.

Assessment Fee means the amount set out in Schedule “B” of the assessment agreement.

Assessor means the individual assigned by FPSC to perform, alone or as part of an Assessment team, an Assessment of the Applicant’s Materials, as part of the Accreditation Program.

Claim means any actual or threatened claim, demand, grievance, action, suit, or proceeding.

Complaint means an expression of dissatisfaction, other than an Appeal, by the Applicant to FPSC relating to the activities of FPSC during the Assessment, or during the term of an Accreditation Agreement, where a response to the expression of dissatisfaction is expected.

Conformity Assessment Body or **CAB** means a Training Provider that performs conformity assessment services and that can be the object of an Assessment.

Curriculum means the subjects comprising a course of study in a training or educational institute.

Deny Accreditation means the refusal to grant Accreditation based on a completed Assessment.

Grant Accreditation means awarding Accreditation for a defined Scope of Accreditation.

Impartial means having the presence of objectivity, including ensuring that no conflicts of interest exist or existing conflicts of interest are resolved so as not to adversely influence subsequent activities of FPSC.

ISO Standard means the International Standards Organization’s ISO/IEC 17011:2017 standard.

Lead Assessor means the Assessor who is given the overall responsibility for the management of the Assessment. Also referred to as the “Team Leader” in the ISO Standard.

Learning Recognition Framework or **LRF** means the initiative developed by FPSC to provide a standardized and comprehensive approach to recognize learning in the food processing industry based on the National Occupational Standards (NOS).

Maintaining Accreditation means confirming the continuance of Accreditation for a defined Scope of Accreditation.

Materials means the training materials of the topic, course, or module of a CAB being Assessed for Accreditation as part of the Accreditation Program. Materials shall include, but not be limited to, application materials, policies, records, standard operation procedures, academic curriculum, samples of courses, course materials, assignments, evaluation feedback module materials, and topic descriptions.

National Occupational Standard or **NOS** means a detailed description of the competencies required for each occupation within the food and beverage industry, including but not limited to, food production manager, food safety supervisor, quality assurance technicians, production supervisors, machine operators, and maintenance personnel.

NC means the non-conformities found by Assessors during an Assessment.

Reducing the Scope of Accreditation means cancelling part of the Scope of Accreditation.

Renewing Accreditation means extending the term of the originally granted Accreditation to a new validity period.

Sources of Risks to Impartiality includes FPSC's ownership, governance, management, personnel, shared resources, finances, contracts, outsourcing, training, marketing and payment of a sales commission or other inducement for the referral of new clients.

Scheme or **Training Provider Scheme** or **TPS:2023** means FPSC's set of rules, processes, and procedures that must be completed by the Applicant in order to be Granted Accreditation. The Scheme is set out in the Accreditation Program Guide and consists of seven (7) sections: (1) senior management commitment and continuous improvement, (2) management requirements, (3) finance, (4) academic program requirements, (5) courses materials requirements, (6) equipment and instructional design, and (7) evaluation requirements. The Scheme describes the objects of CAB, identifies the specified requirements for training materials to be met, and provides the methodology for managing training programs, and training materials, rules and processes relating to the accreditation of conformity assessment bodies to which the same requirements apply.

Scope of Accreditation means specific conformity assessment services for which Accreditation is being sought by the Applicant.

Suspending Accreditation means putting temporary restrictions in place for all or part of the Scope of Accreditation.

Training Provider means an organization offering training to potential or existing food and beverage workforce. Training Providers may include internal training departments of food related businesses, private trainer (including non-provincially chartered private career training organizations), or private or public post-secondary educational institutions chartered by a provincial Ministry of Education.

Withdrawing Accreditation means the process of cancelling Accreditation in full.



1. Introduction to Accreditation program

Welcome to the Food Processing Skills Canada (FPSC) Accreditation Program and Training Provider Scheme TPS:2023 (referred to as the Scheme). This inaugural publication unveils the dynamic FPSC Accreditation Program, meticulously crafted in alignment with ISO/IEC 17011:2017 requirements. Tailored for Conformity Assessment Bodies (CABs), Applicants, aspiring for program accreditation, the Scheme, comprising seven sections, serves as an empowering framework. It not only sets a gold standard for excellence but also acts as a guiding light, supporting CABs and Training Providers in shaping curricula that seamlessly meet the Food and Beverage Industry's competency requisites.

Are you ready to shape the future of training? The journey for accrediting your training services begins now!

2. FPSC – About US

Food Processing Skills Canada (FPSC) is the food and beverage manufacturing industry's workforce development organization. As a national, non-profit organization, located in Ottawa with representatives across Canada, we support food and beverage businesses from coast to coast in developing skilled and professional employees and workplace environments. Our work directly and positively impacts industry talent attraction, workforce retention and employment culture. We care about assisting industry in training and retaining the very best people for the job. Through partnerships with industry associations, educators, and all levels of governments in Canada, FPSC has developed valuable resources for the sector including the Food Skills Library™, Canadian Food Processors Institute™, FoodCert™ and Labour Market Information Reports.

FPSC is dedicated to delivering the most up-to-date human resource information and industry-driven training tools to develop competences in the food sector.

FPSC has identified a need in the Food Processing industry for an Accreditation Program to ensure that training delivered by private trainers, or internally by staff, or by secondary educational institutes is meeting the industry standards. The Scheme has been set by the industry through the National Occupational Standard and the Learning Recognition Framework.

- **National Occupational Standard (NOS)** provides a detailed description of the competencies required for each occupation within the food and beverage industry, including but not limited to, food production manager, food safety supervisor, quality assurance technicians, production supervisors, machine operators, and maintenance personnel. The NOS covers a wide range of topics, including food safety and sanitation, product development, quality control, packaging, and labeling. It also provides information on the use of equipment and machinery as well as knowledge of relevant regulations and laws. The FPSC NOS is the result of the extensive Trans Canada research work undertaken by FPSC. It is an important tool for employers, employees and training providers as it helps ensure that the workers have the necessary skills and knowledge to perform their jobs safely and efficiently and provides a framework for the development of training programs and career pathways within the food processing industry.

- **Learning Recognition Framework (LRF)** is an initiative developed by FPSC to provide a standardized, and comprehensive approach to recognize learning in the food processing industry based on the NOS. The LRF aims to bridge the gap between formal education and informal learning, recognizing that individuals may acquire knowledge and skills through a variety of experiences, including on-the-job training, work-based learning, and self-directed study. The LRF consists of a set of competencies and associated learning objectives that are aligned with the NOS for the food and beverage industry. It provides a flexible and adaptable framework that can be customized to meet the needs of individual learners and organizations.

What triggered the accreditation program?

Over the years, FPSC has positioned itself to set the national standard for skills and knowledge requirements in the industry. In a recent feasibility study, FPSC found the need for Accreditation Program which is triggered by the following:

- The current graduate and postgraduates' programs at the universities and colleges are growing but failing to meet the industry demands both in terms of the number of students completing these programs and in terms of the type of training they are offering in a short period of time.
- Changes to and advancing technologies have resulted in a need to train current and future employees on how to utilize new advanced technology and operate advanced systems for maximized productivity and related Quality Assurance and maintenance procedures.
- Aging employees and the difficulty of hiring "job-ready" workers to replace the high rate of retirement in the industry.
- Stagnated knowledge level of the workforce does not keep pace with new information. Due to the fast pace of the industry and the constant never-ending discovery of new information for continuous improvement, it is fundamental that production workers have the education necessary to keep up with emerging discoveries, technologies, and trends.

3. Who can apply?

The FPSC Accreditation Program sets out the requirements for training materials provided to the Canadian food and beverage industry. FPSC is targeting three types of training providers (CABs): Post-Secondary Institutions, 3rd Party Training Centers / Private Trainers, and Training Department of Food Organizations, referred to as employers. The Accreditation Program benefits all the stakeholders as it assists in benchmarking the courses provided with industry standards and ensures that the programs offered are beneficial to both individuals and the industry.

4. Why to apply – Benefits of the Program

Adoption and use of the Training Provider Scheme, along with the Accreditation Certificate, provides several benefits to CABs, these include but are not limited to:

- Confirm that the training materials meet the industry standards set through NOS and LRF.
- Demonstrate commitment to meeting the national industry standards.
- Provide a comprehensive scope, covering curriculum, authenticity, legality, and quality of the CAB.
- Provide a single Scheme and protocol that governs an Accredited Program allowing a credible, independent assessment of a CAB's training services and quality management systems.
- Enhance reputation of the CAB by meeting the “due diligence” requirements for providing services to the industry and to participants/students.
- Provide reassurance as to the quality of the program.
- Ensure current and future employees have the right skills and knowledge to perform their job.
- Increase the employability of participants/students.
- Facilitate greater collaboration between industry and training providers to ensure that courses meet industry needs.
- Enable CAB/Training Providers to ensure that their governance structure follows good management practices.
- Demonstrate commitment by the completion of corrective actions, root cause analysis and preventive actions on any non-conformities to the Scheme.
- Demonstrate continuous improvement in the training services provided.

The CAB who are granted accreditation for their programs will publicly use the FPSC Accreditation Program Logo as a recognition of their hard work and achievements and can use the logo for marketing purposes. Other terms and conditions apply.



5. Accreditation Program Impartiality Policy and Code of Conduct

The FPSC accreditation program is impartial and has taken the following actions to ensure its impartiality:

1. FPSC is responsible for the impartiality of its accreditation activities as a non-governmental and non-profit organization funded by government grants. FPSC does not allow any commercial, financial, or other pressures from any of the Conformity Assessment Bodies (CAB) to compromise impartiality.
2. FPSC's top management is committed to maintaining impartiality in all accreditation activities. The accreditation program personnel do not participate in the development of CAB training materials that FPSC accredits.
3. All individuals involved with the program must adhere to high ethical standards and remain free from any undue commercial, financial, or other pressures that could compromise impartiality.
4. FPSC committee members require FPSC members working in the accreditation program to disclose any potential conflict of interest whenever it may arise and to inform the head of the committee or head of the program of any possible conflict of interest for example serving as consultant of the training program or delivering the training program.
5. All program personnel will receive period training on impartiality, including the Code of Conduct, Conflict of Interest, and Confidentiality. The Program Manager will maintain records of the program personnel training and their compliance.
6. The accreditation program is represented by various interested parties, including private trainers, post-secondary institutions, and food businesses. These entities are equally represented in the accreditation committee, ensuring no dominant representation.
7. FPSC has an impartiality committee that monitors accreditation impartiality. The committee meets as needed to identify, analyze, evaluate, treat, monitor, and document risks to impartiality. Risks can arise from ownership, governance, management, personnel, shared resources, finances, contracts, outsourcing, training, marketing and payment of a sales commission or other inducement for the referral of new clients, etc. Risks are logged into the impartiality risk form and preventive actions are taken until they are eliminated.
8. The FPSC Accreditation Program's impartiality committee documents and demonstrates the elimination or minimization of identified risks, including residual risk. This includes risks arising from FPSC or from other entities involved.
9. The program manager or designate from the FPSC reviews residual risks to determine their acceptability.

10. If an unacceptable risk to impartiality is identified and cannot be mitigated to an acceptable level, then accreditation will not be granted.
11. FPSC Accreditation Program prohibits discriminatory processes or services related to accreditation.
12. FPSC ensures that its services are accessible to CABs within the scope of its accreditation activities, regardless of size, association membership, or the number of existing accredited CABs. Preliminary conditions are not imposed.
13. FPSC reserves the right to refuse an application if the applicant has a history of fraudulent behavior, falsification of information, or deliberate violation of accreditation requirements.
14. FPSC and any member of the same legal entity will not offer or provide services to CABs, including certifications, training services or consultancy that would compromise impartiality.
15. FPSC's Accreditation Program activities are independent of consultancy or other services that pose an unacceptable risk to impartiality. No claims should be made or implied that using specific individuals or consultancies would make accreditation simpler, easier, faster, or cheaper.
16. FPSC Accreditation Program requires that each staff member, volunteer, and contractor exhibit the highest levels of professionalism, honesty, and integrity. Accreditation Program services require impartiality, fairness, and equity. All persons involved with the Program activities must perform their duties under the highest standards of ethical behavior.



17. All the Program personnel will be trained in the policies covering impartiality, including Code of Conduct, conflict of Interest, Confidentiality. The Program Manager will maintain records of the Program personnel training along with their consent to comply.

The following is the Code of Conduct to which all FPSC Accreditation program personnel, employees, volunteers, and committees and contractors must agree and comply with:

- 1) To accept responsibility in making accreditation decisions consistent with approved criteria of the safety, health, and welfare of the public, and to disclose promptly, factors that might endanger the public.
- 2) To perform services only in areas of their competence.
- 3) To act objectively and be free from any undue commercial, financial, and other pressures that could compromise impartiality.
- 4) To act as faithful agents or trustees of the Program, avoiding real or perceived conflicts of interest whenever possible, disclosing them to affected parties when they do exist.
- 5) To keep confidential all matters relating to accreditation decisions unless required by law to disclose information with the consent of the CAB, or unless the public is endangered by doing so.
- 6) To make or issue either public or internal statements only in an objective and truthful manner.
- 7) To conduct the program elements honorably, responsibly, ethically, and lawfully to enhance the reputation and effectiveness of the Program.
- 8) To report concerns regarding accounting, internal accounting controls, or auditing matters without fear of retaliation.
- 9) To treat all persons involved in accreditation activities with fairness and justice.
- 10) To assist colleagues and co-workers in their professional development and to support them in following this code of conduct.
- 11) To support a mechanism for the prompt and fair adjudication of alleged violations of this Code.
- 12) Not to offer or provide any service that affects the impartiality of the program such as those conformity assessment services that CABs perform, or consultancy. Nothing should be said or implied that would suggest that accreditation would be simpler, easier, faster, or less expensive if any specified person(s) or consultancy were used.

6. Introduction to the Training Provider Scheme TPS:2023 – a visionary creation based on ISO/IEC 17011:2017 to Elevate Training Standards

Step into the future of training services within the dynamic food and beverage industry sector with TPS:2023, a visionary creation by Food Processing Skills Canada (FPSC). Built on the foundation of ISO/IEC 17011:2017 requirements, this groundbreaking scheme is meticulously crafted to transform learning experiences, fostering growth, and recognition.

Unveiling the Core Pillars of the TPS:2023

At the heart of TPS:2023 lies the illustrious Plan Do Check Act (PDCA) cycle concept with the principles of leadership, continuous improvement, engagement, learning design, and evidence-driven decision-making. These fundamental pillars, intricately aligned with the pioneering “Learning Recognition Framework” (LRF) developed by FPSC, establish a standardized and comprehensive method to identify competencies and skills vital and required by the food and beverage industry, all harmonized with National Occupational Standards.

Unlocking the TPS Advantage for All

Designed to accommodate organizations of all shapes and sizes, TPS:2023 is a versatile scheme applicable across the board. Regardless of your industry, or education role as colleges, universities, or private training provider, the transformative power of TPS is at your fingertips. The scheme’s framework comprises seven pivotal sections, with each section’s relevance tailored to your specific accreditation needs, seamlessly integrated into your application form.

Redefining Compliance and Growth

Dedicated to setting an unmatched standard of excellence, TPS:2023 highlights select sections in yellow – these sections are the keystones of compliance. Emphasizing their significance, the scheme designates these sections as major non-compliances if not met in entirety. This approach ensures a commitment to elevating industry standards and ensuring optimal outcomes for all.

Your pathway to Accreditation and success

TPS:2023 marks a new era of opportunity. Embrace the evolution of food and beverage training services with FPSC’s visionary scheme. Ignite innovation, drive progress, and embark on your journey to excellence.

Are you ready to shape the future of training? The journey for accrediting your training services begins now!

7. FPSC Training Provider Scheme (TPS:2023)

7.1. Section One – Senior management commitment and continuous improvement

In this initial section, Conformity Assessment Body (CAB) or applicants are required to demonstrate their dedication to excellence by formulating and communicating their mission statement, goals, and the implementation of the Plan Do Check Act (PDCA) cycle and their commitment to continuous improvement. This part consists of six distinct clauses, summarized as follows: C.1.1 mission statement and goals, C.1.2 continuous improvement, C.1.3 to C.1.6 PDCA concepts.

| Clause | Requirements |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.1.1. | <p>Mission Statement: The CAB shall have a mission which provides a definitive basis to deliver and assess the education and training programs in an ethical, quality management-based environment. The reasons for offering the education and training are consistent with the CAB's mission and shall be documented. Mission statements are used to share the purpose of the organization, core values and broad strategies.</p> <p>Goals: The CAB shall have broad institutional goals that are clearly stated and communicated, support the mission statement, and are understood by all levels of the organization.</p> <p>The CAB goals/objectives/ targets shall have Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART) goals.</p> |
| C.1.2. | <p>The mission statement shall be:</p> <ul style="list-style-type: none"> ● Signed by the senior management. ● Communicated to all staff. ● It should include the CAB's commitment to continuously improve the quality of training. |
| C.1.3. | <p>CAB shall use the Plan Do Check Act (PDCA) cycle as a continuous improvement model that provides a framework to improve the effectiveness and efficiency of their provided training services.</p> <p>Plan (P): The CAB shall define the objectives and develop a plan to achieve them. This includes identification of resources required, potential risks and their mitigation strategies, the timeline for completion and the key performance indicators that will be used to measure progress.</p> <p>The plans shall include clearly defined specific objectives and operational strategies with time frames, resources, and measurable results identified for subsequent evaluation.</p> <p>The plans shall be reviewed and updated at least annually.</p> <p>The CAB shall have sound, written one-year and longer- term plans that encompass both the educational and business objectives of the CAB. The plans support accomplishment of the CAB goals & the mission statement.</p> |

| Clause | Requirements |
|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.1.4. | <p>CAB shall use the PDCA cycle as a continuous improvement model that provides a framework to improve the effectiveness and efficiency of their provided training services.</p> <p>Do (D): The CAB shall develop and implement a plan and ensure all the resources required are available, potential risks are mitigated, and that the plan is being executed as intended.</p> |
| C.1.5. | <p>CAB shall use the PDCA cycle as a continuous improvement model that provides a framework to improve the effectiveness and efficiency of their provided training services.</p> <p>Check (C): The CAB shall monitor the results of the implementation. The CAB shall compare the actual results with the objectives defined in the plan and the key performance indicators, and shall identify any non-conformances, deviations, or opportunities for improvement.</p> |
| C.1.6. | <p>CAB shall use the PDCA cycle as a continuous improvement model that provides a framework to improve the effectiveness and efficiency of their provided training services.</p> <p>Act (A): The CAB shall act based on the results of the monitoring and measurement in the check step. The CAB shall evaluate the results, identify the root causes of any non-conformances or deviations, and take corrective actions to address them. The CAB shall take preventive actions to avoid the recurrence of future non-conformances or deviations.</p> <p>The CAB shall update the plan and adjust it based on the lessons learned during the PDCA cycle.</p> |



7.2. Section Two – Management

In this section, the Conformity Assessment Body (CAB)/applicant is guided through a comprehensive approach to effective governance and quality assurance. These clauses cover various critical aspects of the CAB's operations: C.2.1 Governance and structure, C.2.2 Role and communication, C.2.3 Quality improvement which employ root cause analysis and quality management tools for problem solving and continuous improvement, C.2.4 Review management system, C.2.5 Standard Operating Procedures (SOPs) covering daily operations, C.2.6 Policy and SOP management, C.2.7 and C.2.8 Human Resources management and employee development, C.2.9 and C.2.10 Record management and communication, C.2.11 complaint handling, and finally, C.2.12 building professional relationships.

| Clause | Requirements |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.2.1. | Governance: The CAB shall have an organization chart demonstrating the management structure of the company (or department within the company or within the post-secondary institution). |
| C.2.2. | The CAB shall have well-defined roles and responsibilities that include a senior management team responsible for developing and maintaining written policies and clearly communicating them. |
| C.2.3. | The managers shall demonstrate that they are using root causes analysis and quality management tools in addressing problems, solving nonconformities, and preventing recurrence of the same problem to ensure continuous improvement. |
| C.2.4. | Management System and Governance review: The CAB shall establish documented procedures to review its management system and governance on a pre-determined frequency. |
| C.2.5. | The CAB shall have written Standard Operation Procedures (SOPs) that guide the day-to-day operations, including customer complaints, teaching academic quality assurance, curriculum review procedure, performance appraisal policy, code of conduct, health, and safety policy, etc. |
| C.2.6. | The Management team shall ensure that these policies and SOPs are communicated to all relevant personnel and are regularly reviewed, updated, and improved to ensure their continued effectiveness. |
| C.2.7. | Human Resources/ Personnel Management: The CAB shall have systems that include developing, implementing, and maintaining overall policies and procedures for the systematic and effective recruitment, selection, hiring, and retention of all personnel, including instructional personnel. |
| C.2.8. | Management of the CAB shall provide orientation, supervision, evaluation as well as training and development opportunities for its employees to ensure that competent and capable personnel are placed and utilized effectively, with appropriate staffing levels. |

| Clause | Requirements |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.2.9. | <p>Records: The CAB shall maintain an organized and effective record-keeping system that ensures accessibility, accuracy, orderliness, and up-to-date records. The system shall enable timely and convenient review of records by authorized parties and protect the records from unauthorized access and loss. The records must be retained for a period consistent with the CAB's contractual obligations.</p> <p>The Record control procedure must be regularly evaluated and improved to ensure its ongoing effectiveness.</p> |
| C.2.10. | <p>Communication: The CAB shall ensure regular and effective communication among all relevant parties, including employees, participants/ students, and external stakeholders. This communication shall include pertinent aspects of its operations such as the delivery of quality education and training services, changes in policies and procedures, and feedback received from stakeholders.</p> |
| C.2.11. | <p>The CAB shall have documented complaint procedures to address and resolve learners/participants as well as stakeholder complaints and concerns.</p> |
| C.2.12. | <p>Professional relationships: The CAB shall proactively establish and maintain relationships with other organizations within the education/training and employer/industry network to enhance the quality of education and training services.</p> <p>The CAB shall document these relationships and monitor their effectiveness in achieving mutually beneficial outcomes. The CAB shall also seek opportunities to collaborate and share best practices with relevant industry and professional organizations.</p> |

Section Three – Finances

This section highlights the CAB's commitment to fiscal stability and ethical financial norms. Clause C.3.1 speaks of adhering to federal and provincial financial laws and regulations.

| Clause | Requirements |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.3.1. | <p>The CAB shall be committed to adhering to all applicable provincial and federal laws and regulations. The CAB shall not violate any financial practices.</p> |

7.3. Section Four – Academic Program / Curriculum

Within this section’s requirements, the CAB is entrusted with the pivotal task of ensuring the integrity and relevance of the academic program. The clause requirements are summarized as follows:

- C.4.1: Program Description: This clause underscores the importance of a clear program description, ensuring coherence.
- C.4.2: Course Alignment: The focus here is on course titles aligning with their content, ensuring consistency.
- C.4.3: Learning Objectives: emphasizes on Learning Objectives being current and relevant to the industry practices, challenges, and regulations.
- C.4.4: Alignment of LOs: This clause introduces alignment between LOs of the CAB’s curriculum and those of LRF and NOS.
- C.4.5: Comprehensive Program Elements: The emphasis is on a curriculum that covers a broad spectrum of relevant knowledge and skills, encompassing technical, professional, and soft skills.
- C.4.6: Learning Experiences: This clause outlines the necessity for policies and procedures to oversee and assess learning experiences, ensuring consistency and effectiveness.
- C.4.7: Curriculum Design: Here, systematic instructional design methods are emphasized, spanning analysis, objective definition, strategy development, implementation, and evaluation.
- C.4.8: Ongoing Evaluation and Enhancement: The focus shifts to systematic curriculum review and updates, including soliciting feedback from stakeholders and comprehensive evaluation against projected learning objectives.

Collectively, these requirements propel the development, maintenance, and enhancement of the academic program, ensuring its alignment with industry needs, learner outcomes, and educational excellence.

| Clause | Requirements |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.4.1. | The CAB’s academic program (referred to as curriculum, program as well) shall have an appropriate program description. |
| C.4.2. | The courses titles shall be aligned with the contents. |
| C.4.3. | The Learning Objectives (LOs) shall be relevant to the academic program description of the CAB. The academic program’s materials and content shall be up to date with the current industry’s practices/standard as well as regulatory needs and requirements. |
| C.4.4. | The LOs shall be aligned with the learning objectives set in LRF and NOS. (Mapping to LRF LOs) Note: <i>When LRF doesn’t cover LOs for specific topics that exist in the CAB’s curriculum, the Accreditation Program shall rely on Assessors’ expertise and the existing LOs data bank to cover the gap during assessment.</i> |

| Clause | Requirements |
|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.4.5. | The academic program/curriculum shall cover sufficient relevant knowledge and skill elements (technical, professional, and soft skills) needed to achieve performance outcomes. |
| C.4.6. | If applicable, learning experiences (such as Externships/Internships/shadowing/ coaching/ mentoring): The CAB shall establish written policies and procedures for the supervision and evaluation of learning experiences to ensure consistency and effectiveness. |
| C.4.7. | Curriculum and instructional design: The CAB shall prepare the curriculum/program materials based on systematic instructional design method. This involves (1) analyzing learning needs and characteristics, (2) analyzing labor market and food industry needs, (3) defining learning objectives, (4) developing instructional strategies and materials, (5) implementing the instruction, (6) and evaluating its effectiveness. |
| C.4.8. | <p>Curriculum evaluation, review, and update:</p> <p>The CAB shall employ systematic and effective review procedures, which include evaluating completion and, if applicable, the placement results, to continuously monitor and improve the academic program/curriculum.</p> <p>These written procedures entail soliciting feedback from relevant stakeholders, such as faculty, students, graduates, employers, and advisory/certification boards as well as regulatory bodies involved.</p> <p>The procedures concentrate on a thorough review of the curriculum in relation to the anticipated learning objectives.</p> |

7.5. Section Five – Courses/Related Topics

This section assists the CAB in establishing a comprehensive framework to ensure the excellence and effectiveness of courses within the academic curriculum/program. These clauses encompass various critical aspects:

- C.5.1 Course description: identifies the course description, bloom taxonomy level, duration, and time.
- C.5.2 Course materials: pertains to course materials: focusing on learning objectives, accommodating diverse learning styles, reflecting cultural diversity, adhering to standards, and providing self-assessment tools when needed.
- C.5.3 Hands on practical training materials emphasizes that hands-on practical training must align with the program’s goals, offering both knowledge-based understanding and skill-based application while fostering participant interaction.
- C.5.4 Performance measurements outlines an effective assessment system, including rubrics, grading scales, and evaluation methods that cater to diverse participant needs.
- C.5.5 Readability and compliance underscores the necessity for compliance and clarity in all materials.

- C.5.6 Course evaluation and feedback introduces course evaluation and feedback mechanisms, which highlight completion rates, participant performance, and overall satisfaction.
- C.5.7 Qualifications of instructional personnel requirements which are essential for maintaining course quality and standard.

Collectively, these requirements lay the foundation for a robust framework to develop, implement, and evaluate courses, ensuring they adhere to high standards of quality, relevance, and learner engagement.

| Clause | Requirements |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.5.1. | <p>The course (referred to as course or topic) description, title, bloom taxonomy, duration/time, learning objectives, content, list of references shall be aligned.</p> <p>The learning objectives shall match the LRF/NOS learning objectives of similar topics.</p> |
| C.5.2. | <p>The course materials, which include learning objectives, syllabi, modules, lesson plans, instructional guides, and texts, shall demonstrate an appropriate scope, sequence, and depth of each program or course in relation to the stated goals and objectives.</p> <p>The course materials shall:</p> <ul style="list-style-type: none"> - address the differences in individual learning styles' evaluations such as providing lots of examples, quizzes, as well as encouraging context analysis, problem solving, critical thinking, modelling and prototyping. - reflect multicultural education, be accurate and be free of bias. - inspire continuous learning mindset. - be aligned with national and/or international standards and regulations. <p>The online courses material shall provide self-assessments, auto-reflection, and auto-evaluation means.</p> |
| C.5.3. | <p>Hands on practical training materials:</p> <p>Hands on practical training materials, such as exercises, case studies, laboratory experimentations, supplementary textbooks, software, learning activities, visual aids, electronic links, and other teaching tools shall:</p> <ul style="list-style-type: none"> - support the goals and objectives of the CAB. - be up-to-date, readily available and structured to facilitate positive learning outcomes. - be designed to provide knowledge-based elements to facilitate the understanding of the learning objectives. - be designed to provide skill-based elements to facilitate the application of skills. - promote participant-to-participant communication as part of lesson activities, forms, chat, teamwork, discussions, polls, etc. <p>For online courses, the CAB shall have a feedback mechanisms tool built into the system to allow the participant to continuously self-monitor their progress.</p> |



| Clause | Requirements |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.5.4. | <p>Performance Measurements (exams/assignments): A written exam/assessment system shall be in place and regularly reviewed to ensure instructional effectiveness. The assessment system shall contain defined set of elements of performance, such as rubric, grading scale, weighting factors, tests, quizzes, reports, projects, attendance, and participation, which are relevant to the performance objectives of the course or program and consistently utilized.</p> <p>The exams and assignments system shall accommodate the special needs and education requirements of participants, if needed.</p> |
| C.5.5. | <p>The course materials, hands-on practical training materials and performance measurements system shall:</p> <ul style="list-style-type: none"> - be written appropriately and clearly for the right readability levels of participants. - be easily readable, free of grammatical, spelling, and typographical errors and comply with the copyright regulations. - provide guidelines for participants on the use of copyrights, intellectual property (IT), proprietorial materials, materials available |
| C.5.6. | <p>Course evaluation/participant feedback:</p> <p>The CAB shall use effective methods to assess and record the course completion rate, participant performance, feedback of participants, which includes regular feedback and evaluation.</p> |
| C.5.7. | <p>Qualifications of Instructional Personnel:</p> <p>The instructional personnel of CAB shall possess a suitable combination of educational credentials, specialized training, certification, relevant work experience, and demonstrated teaching and classroom management skills, which qualify them for their respective training assignments.</p> <p>For online course, qualification of the writer or developer or designer of the course to comply with the above paragraph on qualifications of instructional personnel.</p> |

7.6. Section Six – Equipment and Instructional Methodology

This section outlines the requirements for the CAB to meet equipment needs, implement learner-centered instructional methods, ensure instructor orientation and training, and manage instructional personnel performance. It encompasses clauses C.6.1 concerning equipment/supplies, C.6.2 focused on learner-centered instructional methods, C.6.3 addressing instructor orientation and training, and C.6.4 pertaining to instructional personnel performance.

| Clause | Requirements |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.6.1. | Equipment/Supplies: The CAB shall ensure that all necessary equipment, supplies, and furnishings are available and in good working condition to provide effective education and training services. |
| C.6.2. | <p>Learner centered Instructional Methods:</p> <p>The CAB employees' instructional methods shall encourage active and motivated participation from participants. Policies and procedures shall be in place to ensure that the curriculum is followed consistently by all instructional staff. The methodology used shall align with contemporary training industry schemes, support the educational goals and curricular objectives, facilitate learning, and meet the individual learning needs and objectives of each participant.</p> <p>Instructional methods shall provide encouragement, challenges, and diverse learning opportunities for all enrolled participants, taking into consideration their varying backgrounds, learning abilities and styles and prior levels of achievement.</p> |
| C.6.3. | Instructor Orientation and Training: The CAB shall have a written policy for the effective orientation and training of instructional personnel to ensure a consistent, high level of instruction. The policy shall include the development and implementation of an orientation program that addresses instructional methods, classroom management and program policies and procedures. Additionally, the CAB shall have an ongoing development program for instructional personnel that is systematically implemented, monitored, and documented to ensure that instructors remain up to date with industry standards and best practices in instructional delivery. |
| C.6.4. | Instructional Personnel Performance: The CAB shall ensure that instructional personnel are effectively supervised by individuals with relevant education and experience in instructional delivery and management. The supervisors of instructional personnel shall demonstrate expertise in evaluating and providing direction to instructors. Classroom observations and feedback from participants, peers, and supervisors shall be effectively utilized to enhance instructional quality. |

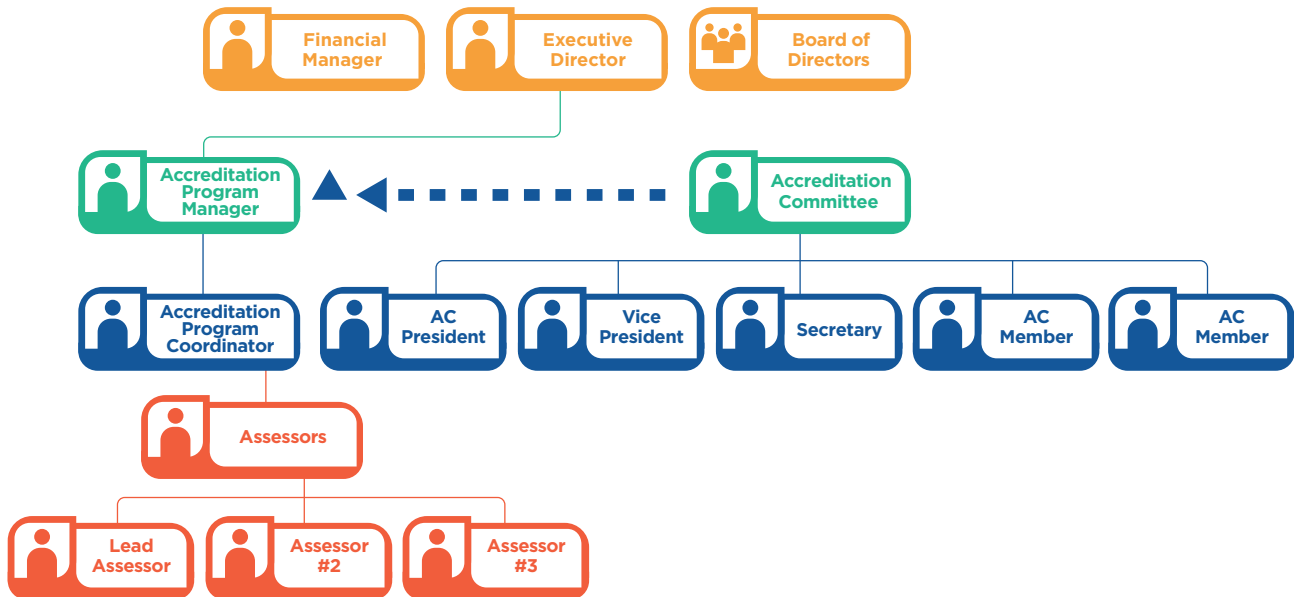
7.7. Section Seven – Evaluation

This section emphasizes the CAB’s utilization of appropriate evaluation methods to align outcomes with the organization’s mission and goals, alongside the maintenance of necessary documentation. This includes clause C.7.1 for participant progress assessment, C.7.2 for attendance policies, C.7.3 for a comprehensive evaluation model based on the Kirkpatrick model, and C.7.4 for relevant completion and placement assessment policies. It further ensures the appropriateness of curriculum / program completion and successful vocational program participants’ integration into the workforce.

| Clause | Requirements |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.7.1. | <p>Participant Progress: The CAB shall use effective methods to assess and record the progress of participants, which include regular feedback and evaluation. The measurement criteria for successful completion of education and training services shall be clearly communicated to participants and be in accordance with established performance outcomes.</p> <p>The progress of participants shall be documented consistently, and participants shall be informed of their progress on a regular and timely basis.</p> |
| C.7.2. | <p>If applicable, Attendance: written policies and procedures shall be established and followed to ensure that participants’ participation and preparation are consistent with the expected performance outcomes of the course or academic program.</p> |
| C.7.3. | <p>Evaluation model (refer to Kirkpatrick model): the CAB shall demonstrate the model used to evaluate training including measuring: (1) reaction – what did learners feel about the learning experience? This can be covered by participant satisfaction survey (2) learning – did their knowledge and skills improve? This can be captured by assessments at the end of the training, comparing differences in knowledge between before and after the training; (3) behavior – did learners do anything different as a result of the training? Implement the new skills in the workplace; (4) results – what was the effect of the training on the business as a whole – return on investments (ROI) - demonstrate the impact of the learning experience on career development or business opportunities.</p> |
| C.7.4. | <p>If applicable, Completion and Placement: The CAB shall follow written policies and procedures that enable regular assessment, documentation of the quality of education and services provided with respect to completion and placement rates, as applicable.</p> <ul style="list-style-type: none"> ● Completion: The CAB shall ensure an appropriate number of participants who enroll complete their programs and courses. ● Placement: For vocational programs offered by the CAB, the success rates of graduates in the workforce shall be tracked and documented. |

8. Program's structure

The following sections present a governance structure and outline the structure needed to effectively operate the accreditation program.



To ensure compliance with the ISO/IEC 17011:2017 requirements and impartiality, the Accreditation Program relies on assessors, who conduct the assessment, and the Accreditation Committee, who make the final decision. FPSC has trained both assessors and accreditation committee members on their roles in the program. The training included (a) Introduction to ISO/IEC 17011:2017 requirements, (b) Introduction to FPSC Accreditation Program Manual, Impartiality policy and related SOPs/and validation of all the policies and procedures, (c) Introduction to FPSC-Training Provider Scheme (TPS) requirements/validation of the TPS, and (d) Accreditation assessment process as well as ISO 19011:2018 requirements for auditing, (e) Accreditation Decision Making process and (f) case studies.

9. Accreditation Roadmap – how it works

Step 1: Embark on Your Accreditation Journey

Begin your journey towards accreditation by submitting your application. Share crucial details about your organization, including its legal identity, address, and available resources. Highlight your unique goals and plans that resonate with the dynamic plan-do-check-act approach. Define the scope of your accreditation, provide your program description and the training materials for assessment. Complete the process by paying the registration fee.

Step 2: Sign the Assessment Agreement

Once your application is received, it's time to sign the "Assessment Agreement." This document outlines the terms, conditions, and pricing related to the FPSC Accreditation program. It also covers the assessment plan, timeline, and the appointed assessors who will guide you through the process.

Step 3: Undergo the Assessment Process

The assessment phase kicks off, during which Assessors meticulously evaluate your organization's procedures and policies, referring to the 7 sections outlined in the TPS:2023 Scheme. This evaluation extends to your training materials, ensuring alignment with Learning Recognition Framework (LRF) competencies. Course details and instructor qualifications are also thoroughly examined. As needed, Assessors may conduct interviews with staff, participants, and instructors. The Lead Assessor, certified in ISO 19011, compiles the findings into a comprehensive report that includes recommendations, identified nonconformities (NCs), and the necessary corrective actions.

Step 4: Addressing Nonconformities

Following the receipt of the assessment report, you'll be informed of any nonconformities. For each NC identified, a root cause analysis is requested along with a robust Corrective Action Plan to address the issues promptly. This plan undergoes evaluation and approval by Assessors. Once the issues are successfully resolved, Assessors finalize the assessment report, submit their recommendations to the Accreditation Committee, and formally close the nonconformities.

Step 5: Decision and Consensus

The Accreditation Committee comes together to deliberate on the Assessors' recommendations and achieve consensus on the accreditation decision. Once agreement is reached, the committee formally endorses the decision by signing it. This decision is then communicated to the Program Manager and the Executive Director for appropriate action.

Step 6: Receive Your Accreditation Package

Upon approval, you'll receive the coveted Accreditation Package. This comprehensive package includes an official accreditation letter, contractual agreement, terms, and conditions for the usage of symbols and logos, as well as your commitment to maintaining your accredited status. This package is a testament to your achievement and dedication to excellence.

10. Guide for assessment procedure and report

This procedure defines the Assessors Team structure, Assessment plan and timeline, the use of checklist and assessment report. The Assessors are trained on ISO 19011:2018 standard as required by ISO/IEC 17011:2017. The assessment procedure includes the following steps:

Step 1: Plan the Assessment

The Accreditation Program Manager prepares the assessment plan and timeline, appoints the assessment team which consists of team leader and a suitable number of Assessors for the scope to be assessed; gets the consent of the Assessors after clearing risks of conflict of interest and agreeing on the timeline set in the assessment plan; gets the approval of the CAB on the appointment of the assessor's team. If the CAB has an objection to the appointment of any Assessor, the CAB must submit the written objection, along with supporting justification, to the Accreditation Program Manager who will reevaluate and appoint a new assessor as needed.

Step 2: Conduct the Assessment

The Assessors will evaluate the Applicant's Materials, map the Applicant's learning objectives to the LRF competencies, evaluate course details, and evaluate the qualifications of the Applicant's instructor(s). The Assessors have the right, at their sole discretion, to determine whether to interview (by phone or by video call) one or more of the Applicant's staff, participants, students, and instructors as part of the Assessment. The Assessors will complete the assessment checklist by meeting criteria (Yes / Number 1) for conformities or does not meet criteria (No / Zero) for nonconformities.



Step 3: Assessment Report

Once the Assessment has been completed, the Lead Assessor will create the Assessors' report and recommendations, as well as a list of NC (if any) and Corrective Action Requests (CARs). The Assessors will specify the nature of each nonconformity (major, minor, or Opportunity for Improvement (OFI)). The Lead Assessor must submit the report to the Program Manager by the timeline set in the assessment plan. Refer to Appendix A for a sample of the assessment report.

Step 4: Follow-up and Corrective Action

The Program Manager sends a copy to the applicant/CAB. The CAB must comply with the followings: (1) To sign and acknowledge receiving the report, (2) Accept the non-conformances, (3) To identify the cause of the nonconformities and (4) Complete a Corrective Action Plan with timescales to resolve the NCs within a reasonable timeframe to be set based on the findings.

Step 5: Close the Assessment

The Assessors review the steps taken by the CAB and evaluate the efficiency of the corrective actions taken to address any non-conformities identified during the assessment. This can include assessing new evidence which addresses a nonconformity such as updated procedures, records, photos, documents, or invoices for work undertaken. Assessors undertake a further online or on-site visit to assess the close of the corrective actions. Once the Assessors are satisfied with the CAB's corrective actions taken, they close the non-conformity and finalize the assessment by providing the conclusion and recommendations to the Accreditation Committee. The Program Manager communicates the above-mentioned documents and reports to the Accreditation Committee to reach a final accreditation decision within a timeline of 30 working days.

If the Accreditation Decision is to Grant Accreditation, the Accreditation Program management team will prepare the Accreditation Package which includes the Accreditation Agreement, terms and conditions of the use of the Accreditation Symbols and other claims.

Note: FPSC reserves the right to Suspend or Withdraw Accreditation, in its sole discretion, as a result of breach or potential breach of the Accreditation Agreement.

11. Guide for handling non-conformities and corrective action.

The goal of the accreditation assessment is to accurately reflect the training program's alignment with the Scheme and its adherence to the LRF and NOS requirements. A non-conformity is when something doesn't match the Scheme's requirements. Certain sections highlighted in yellow hold particular importance; they're considered **major non-compliances** if not fully met. A **minor nonconformity** arises when an organization doesn't fully meet a specific clause or sub-clause of the Scheme. An **Opportunity for Improvement (OFI)** is when the assessor suggests improvements even if the CAB is generally meeting the Scheme's requirements.

Procedure for handling nonconformities and corrective action:

- 1. Determine the root cause of the nonconformity.** This can be done using various tools for root causes analysis such as fishbone diagrams, Pareto, and 5 whys. The objective is to identify the underlying cause of the nonconformity and to correct and to prevent it from recurring.
- 2. Develop an action plan** which includes the corrective and preventive actions that need to be taken, who will be responsible for implementing them, and the timeline for completion.
- 3. Implement corrective actions identified.** This may include changes to procedures, providing additional training for employees and staff, or correcting errors in documentation.
- 4. Verify effectiveness of corrective plan** to ensure that the nonconformity has been addressed. This can be done through a follow-up assessment or review of the corrective actions taken.
- 5. Close out the nonconformity.** The top management should review the nonconformity and the actions taken to address it to identify opportunities for implementation in the system. This may include making changes to procedures, providing additional resources, training, or implementing new controls to prevent similar nonconformities from occurring in the future.

12. Accreditation Decision - Making Procedure

The Accreditation Committee is the decision-making body that reviews the Assessors reports and recommendations for the purposes of reaching accreditation decisions. The Accreditation Committee includes a president, a vice president, a secretary and two other members. All the members of the committee must have at least 20 years of experience in the food industry, post-secondary professors, or regulatory background.

12.1. Possible decisions for Conformity Assessment Bodies seeking Initial Accreditation

12.1.1. Granting Accreditation

- The Accreditation Committee grants accreditation after assessors close the assessment report, and all nonconformities are addressed by the CAB. The assessors then recommend granting accreditation, and the Accreditation Committee makes the final decision.
- Once granted accreditation, the Program Manager approves the CAB's accreditation, and a three-year accreditation cycle starts as part of the Accreditation Package agreement.
- A CAB will not receive formal written notification of its achievement of accreditation until all accreditation-related and post-accreditation fees have been fully paid to FPSC.

12.1.2. Denial Accreditation

Reasons for denial:

- The assessors recommend not granting accreditation due to unaddressed nonconformities.
- Accreditation Committee members are unconvinced and believe additional corrections are necessary.
- The Accreditation Committee will provide the Program Manager with a full report, including explanations, findings, and the committee's decision. The Program Manager will communicate the decision to the applicant. At this stage, the applicant can activate the appeal process/submit an appeal.
- The CAB fails to disclose information during the accreditation process that is or would have been germane to an accreditation decision.
- The CAB holds itself out as accredited before formal notification by FPSC.
- The CAB fails to respond to requests for information or documentation by FPSC Accreditation Program personnel by the deadline.
- The CAB fails to pay any amounts owed for incurred accreditation or other fees.

Appeal of Denial:

- An initial applicant for accreditation wishing to challenge a decision to deny accreditation must follow the appeal procedure as set in FPSC Accreditation Manual ISO 17011:2017 and communicated with the CAB in this program guide and at the program's website.
- A written appeal request must be received by FPSC Accreditation Program within fifteen (15) business days of the organization's receipt of the denial decision.

12.1.3. Reapplication after denial

- An initial applicant for accreditation that is denied accreditation may reapply for accreditation after denial.
- FPSC Accreditation Program Manager has the discretion to require the CAB to wait for a period of time before recommencing the accreditation process.

12.1.4. Deferral of an Accreditation Decision

- The Accreditation Committee holds the authority to postpone an accreditation decision if there's a conflict with assessors' recommendations, awaiting additional details or clarification. This deferment can be applied to give the CAB time for clarifications, corrective actions, and showcasing good practices.
- The applicant can respond to assessors' findings within a timeframe specified by the Accreditation Committee. In cases of deferred decisions, assessors reevaluate new materials, generate an updated report and recommendation, which the Accreditation Committee uses to make the ultimate determination.

12.2. Possible decisions for Conformity Assessment Bodies seeking reaccreditation

12.2.1. Maintaining Accreditation = Granting reaccreditation

- If there are no changes in any of the scope, materials, learning objectives etc., the Program Manager can renew the accreditation for the exact scope and materials without going back to the Accreditation Committee.
- The beginning of an organization's accreditation cycle length following a reaccreditation decision dates to the previous accreditation cycle expiry date.
- A new cycle of 3 years will start.
- A CAB will not receive formal written notification from FPSC of its achievement of accreditation until all accreditation-related and post-accreditation fees have been paid to FPSC.

12.2.2. Extending or reducing accreditation

- The scope of accreditation has been changed either by adding modules or training materials or reducing or cancelling part of the scope or training materials, modules etc.
- The Applicant must submit a new application with the new scope and materials.
- The Assessors assess the materials and provide the recommendations to the Accreditation Committee
- The Accreditation Committee either grant accreditation to the new scope or denies it. The decision must mention extending accreditation or reducing accreditation to indicate the change in the scope.
- The accreditation cycle of 3 years starts as soon as the decision is made, and fees are paid.
- A CAB will not receive formal written notification from FPSC of its achievement of accreditation until all accreditation-related and post-accreditation fees have been paid.

12.2.3. Suspending of Accreditation

- The Accreditation Committee suspends an accreditation certificate of a CAB if the program becomes aware of reliable information that raises a serious concern about the performance of the organization or if the organization has voluntarily requested a suspension or withdrawal.
- The suspension period shall not exceed three months. As part of notifying the organization of its suspension decision, the Accreditation Program sets forth in writing “**Letter of Suspension**” which includes the accreditation maintenance concerns and identifies the standards with which the organization must demonstrate improved implementation and performance. A copy of the records is kept in the HRLR organization’s account.
- The organization will be required to submit a written response and a written corrective action plan within 15 working days. The CAP can include recent feedback for training materials and actions that prove correction of performance. For any system nonconformity and operational issues on or before the indicated due date on the suspension letter, the Program Manager and a Lead Assessor shall follow up with the client to verify complete and effective corrective action to address the reason for suspension. For financial issues, no follow up is required – the suspension and withdrawal are final.
- An organization whose accreditation is suspended is not considered accredited during the suspension period and while on suspension is prohibited from holding itself out as accredited, whether orally or in writing (e.g., on stationery, a certificate or by other display indicating accreditations).

12.2.4. Lifting suspension of accreditation

- After three months of the suspension period, the organization must submit a Corrective Action Plan (CAP) to address non-conformities, correct the performance and demonstrate compliance with the requirements of the accreditation program.
- Assessors must evaluate the documents and write their reports and with recommendations to the Accreditation Committee. The assessor’s report must clearly recommend either lifting the suspension or withdrawing the certificate. Appropriate supporting documentation (for example nonconformity response and evidence) shall accompany the report.
- The Accreditation Committee can decide to lift suspension of accreditation if they are satisfied with the new reports and recommendation.
- Accreditation Program Manager must communicate the decision to the organization. A “lifting of the suspension” letter will be sent to the client and uploaded to HRLR for records.
- When corrective action taken by the CAB fails to resolve the suspension issue in a time established by the program up to a maximum of 6 months, the accreditation certificate shall be withdrawn, or scope of accreditation reduced.
- A CAB will not receive formal written notification from FPSC of its achievement of accreditation until all accreditation-related and post-accreditation fees have been paid.

12.2.5. Withdrawing accreditation = revocation = canceling accreditation

- The Accreditation Committee withdraws or revokes or cancels an accreditation certificate if the organization fails to demonstrate sufficient implementation of the performance

requirements during the training sessions or receive poor feedback or complaints from third parties or if the organization has voluntarily requested a withdrawal of accreditation. In most cases, withdrawal will be preceded by a suspension of the accreditation certificate due to severe nonconformity or failure of the CAB to cooperate.

- The accreditation certificate can also be withdrawn or canceled or revoked if the organization fails to respond to requests for information or documentation by FPSC Accreditation Program personnel.
- The organization has the right to appeal for a revocation, cancellation, or withdrawal of accreditation. An appeal for a revocation must be received by the FPSC Accreditation Program within **fifteen (15) business days** of the organization's receipt of the revocation decision.

12.2.6. Denial of reaccreditation

- The CAB fails to respond to requests for information or documentation by FPSC Accreditation Program personnel by the deadline set.
- The CAB received complaints and did not address them correctly.
- The CAB fails to pay any amounts owed for incurred accreditation or other fees.
- Appeal of Denial: An initial applicant for accreditation wishing to challenge a decision to deny reaccreditation must follow the appeal procedure as set in FPSC Accreditation Manual ISO/IEC 17011:2017.
- A written appeal request must be received by the FPSC Accreditation Program within **fifteen (15) business days** of the organization's receipt of the denial decision.

12.2.7. Reapplication after denial

- An initial applicant for accreditation that is denied accreditation may reapply for accreditation after denial.
- FPSC Accreditation Program Manager has the discretion to require the CAB to wait for a period up to one year before recommencing the accreditation process.



13. Accreditation Appeal Procedure

This procedure provides a transparent and fair process for handling appeals of decisions made by the FPSC Accreditation Program in accordance with the requirements of ISO/IEC 17011:2017 standard. This SOP applies to all appeals received by FPSC from training providers / applicant / CAB who are affected by the accreditation decisions.

Step 1: Notification of Right of Appeal

- FPSC Accreditation Program provides information on the right of appeal, along with the procedure on how to submit an appeal including the appeals process and the relevant deadlines.
- When the FPSC Accreditation Program issues an accreditation decision, the applicant receives the decision notice which includes the reference for right of appeal. The notice describes the appeal process and the right of the applicant/ CAB to appeal the decision if they disagree with it within the next 15 business days.

Step 2: Submission of Appeal (within 15 business days)

- If the applicant or accreditation certificate holder wishes to appeal a decision, they must complete and submit the appeal form (refer to Appendix B) to the accreditation Program Manager within 15 business days of receiving the decision.
- The appeal form must include the following:
 - a clear and concise statement of the grounds for the appeal.
 - any relevant documents or evidence to support the appeal.
 - a request for the desired outcome of the appeal.

Step 3: Acknowledgment of Appeal (within 5 business days)

- The Accreditation Program Manager must acknowledge receipt of the appeal in writing within 5 business days of receiving it and assign a unique reference number.
- The acknowledgement will include the expected timeline for handling the appeal (refer to appendix B appeal acknowledgement letter).
- The Accreditation Program Manager must inform the Executive Director and the Accreditation Committee in writing within 5 business days of receiving the appeal.

Step 4: Appeal Committee

- The Accreditation Program Manager will establish an appeal committee consisting of at least three members, one of whom will be appointed as the chairperson. The appeal committee members will be independent of the initial decision-making process and have the necessary expertise to review and decide on appeals.

Step 5: Review of Appeal (within 15 business days)

- The Appeal Committee will review the appeal and any relevant documentation or evidence within 15 business days.
- The Committee may seek additional information or clarification from the appellant or from the Accreditation Program Personnel (management team, Assessors, or accreditation committee).
- The Committee must provide a decision / recommendation on the appeal based on the evidence presented and in accordance with the FPSC Accreditation Program policies and procedures. The decision must include the following:
 - an assessment of the validity of the grounds for the appeals; and
 - a proposed outcome/recommendation for the appeal.

Step 6: Communication of Decision (within 30 days of receiving the appeal)

- The Accreditation Program Manager will communicate the decision of the Appeal Committee to the appellant in writing within 30 business days of receiving the appeal.
- The communication will include the reasons for the decision and any actions required from the appellant and or FPSC Accreditation Program to resolve the appeal.

Step 7: Escalation of Appeal (within 5 business days)

- If the appellant is not satisfied with the decision made by the Appeal Committee, they may escalate the appeal to a higher authority, such as the FPSC board of directors, within the next 5 business days.

Step 8: Confidentiality

- All information related to the appeal shall be kept confidential by the FPSC Accreditation Program and the Appeal Committee, except where disclosure is necessary for the proper handling of the appeal.

Step 9: Records and Continuous Improvement

- All appeals and related documentation shall be recorded and maintained in HRLR and in the applicant profile.
- As part of management review and continuous improvement, the Executive Director will periodically, with a minimum once per year, review and update this SOP to ensure it remains effective in achieving its purpose and remains compliant with ISO/IEC 17011:2017 requirements.

14. Handling Complaint Procedure

This procedure provides guidance on the process of handling complaints in accordance with ISO/IEC 17011:2017 standard. The SOP outlines the steps to be followed by the Program Manager and Executive Director when receiving, recording, investigating, and resolving complaints.

Step 1: Receiving a complaint

- Complaints can be received through various channels, such as phone, email, social media, or in person. When a complaint is received, the employee should:
 - Listen to the complaint with empathy and understanding.
 - Complete the Complaint Form (refer to Appendix C) and record the complaint in HRLR under the name of the organization.
 - Confirm the complainant's details and the nature of the complaint.
- Upon receipt of a complaint, the Accreditation Program Manager must confirm whether the complaint relates to accreditation activities that it is responsible for and if so, shall deal with it.
- Accreditation Program Manager shall respond to the complaint within 5 business days, acknowledging receipt and confirming that investigation will be made or provide a justification why complaint procedure does not apply.
- The Accreditation Program Manager is responsible for immediately informing the Executive Director and the Accreditation Committee with the details of the complaint.
- Anonymous information and expressions of dissatisfaction that are not substantiated do not need to be registered and processed as complaints. These should be recorded as stakeholder comments and considered during the next ISO/IEC 17011:2017 audits.
- The FPSC shall retain the anonymity of the complainant in relation to the CAB, if this is requested by the complainant.

Step 2: Complaint investigation

- The complaint is identified with a unique identifier made up of 2 digits/ sequence number followed by 2 digits of the year for example 01:23 represent the first complaint received in 2023.
- Investigation of the complaint shall commence within 10 business days of receipt.
- The Executive Director may appoint other individuals within the FPSC Accreditation Program to investigate and address the complaint.
- The complainant may be contacted to determine the full nature and extent of the complaint, and any additional information that may help in the investigation.
- If after the initial contact, no response is received from the complainant, a follow-up request must be sent within 10 business days of the first request.

- The Program Manager or the investigator must:
 - identify the root cause of the complaint,
 - collect any relevant information, such as records, documents, or witness statements,
 - analyze the information to determine the cause of the complaint, and
 - evaluate the potential impact of the complaint on the business, other customers, or interested parties.

Step 3: Complaint resolution

- The Accreditation Program Manager should determine the appropriate corrective action(s) to address the root cause(s) of the complaint. The corrective action(s) should be designed to prevent the same or similar complaints from occurring in the future.
- The resolution process should include:
 - Communicating the resolution to the complainant
 - Documenting the corrective action(s) taken in the complaint handling system
 - Monitoring the effectiveness of the corrective action(s) and taking additional action if necessary.

Step 4: Complaint closure

- The Accreditation Program Manager should ensure that the complaint is closed within 3 months of receipt and documented in the complaint handling system.
- The Accreditation Program Manager should ensure that the decision to be communicated to the complainant shall be made by, reviewed, and approved by individuals not involved in the activities in question.
- The closure process should include:
 - Verifying that the corrective action(s) have been completed and are effective.
 - Confirming that the complainant is satisfied with the resolution.
 - Closing the complaint in the complaint handling system (HRLR)
 - All complaints and their resolution should be recorded in the complaint handling system (HRLR). The records should include the complainant's details, the nature of the complaint, the investigation process, the corrective action(s) taken, and the resolution of the complaint. The records should be kept confidential and secure.

Step 5 Continuous Improvement

- The Executive Director should monitor the complaint handling process regularly and evaluate its effectiveness. The Executive Director should identify opportunities for improvement and implement appropriate corrective actions.
- Employees who handle complaints should receive training on this SOP and the complaint handling process. The training should include the importance of customer satisfaction, effective communication skills, and problem-solving techniques.

15. Appendix A – Sample of an Assessment Report

| | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------|------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------|-----------------------|
| Organization Name: | | Application ID | | Date | | | | |
| Scope of accreditation: | | | | | | | | |
| | | | | Meets criteria (YES) | Does not meet criteria (NO) | | Comments | |
| C.1. Section One – Senior management | | | | | | | | |
| C.2 Section Two – Management | | | | | | | | |
| C.3 Section Three – Finances | | | | | | | | |
| C.4 Section Four – Academic Curriculum / Program | | | | | | | | |
| C.5 Section Five – Courses | | | | | | | | |
| C.6 Section Six – Equipment & instructional design | | | | | | | | |
| C.7 Section Seven – Evaluation | | | | | | | | |
| Total | | | | | | | | |
| <p>Lead Assessor prepares the Assessment report and Corrective Action Required (CARs). MA: Stands for Majors, MI Stands for Minor, OFI Stands for Opportunity for Improvement (Majors will be written first and sequence of the TPS 2023 Clauses) Non-conformities Summary Report</p> | | | | | | | | |
| Reserved to the lead assessor | | | | Reserved to the CAB | | | Reserved to the lead assessor | Reserved to AC |
| Response is due by [date] | | | | | | | | |
| # | Clause # | NC details | Major/Minor/OFI | Corrective Actions | CAB - Root cause analysis | Evidence provided by CAB | Assessors verify the evidence and close the NC | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| CAB / applicant | | | | | | | | |
| <ul style="list-style-type: none"> Date: Acknowledgement | | | | | <ul style="list-style-type: none"> Complete the table for CAB part (root cause analysis and provide new materials) Upload new documents as needed | | | |
| Closure of the Assessment Report and recommendations to the Accreditation Committee | | | | | | | | |
| [...] | | | | | | | | |
| Lead Assessor #1 | | | Assessor #2 | | | Assessor #3 | | |
| Name | | | Name | | | Name | | |
| Signature | | | Signature | | | Signature | | |

16. Appendix B – Sample of Appeal Form

Date: [Insert Date]

Appellant Information:

Name: [Insert Name]

Address: [Insert Address]

Phone Number: [Insert Phone Number]

Email Address: [Insert Email Address]

Appeal Details: [Insert Nature of Appeal]

- 1) **[Please provide a clear and concise statement of the grounds for the appeal.**
- 2) any relevant documents or evidence to support the appeal.
- 3) and a request for the desired outcome of the appeal]

Preferred Method of Contact: [Insert preferred method of contact – phone, email, in person]

Signature: [Insert Signature]

Please return this form to the following email address: [Insert Email Address]

Thank you for taking the time to fill out this form. We will investigate your appeal and get back to you as soon as possible.

17. Appendix C - Sample of Complaint Form

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Date: [Insert Date] | Complaint No 01/23 |
| Appellant Information: | |
| Name: [Insert Name] | |
| Address: [Insert Address] | |
| Phone Number: [Insert Phone Number] | |
| Email Address: [Insert Email Address] | |
| Complaint Details: | |
| Nature of Complaint: [Insert Nature of Complaint] | |
| Description of Complaint: [Please provide a detailed description of the complaint including the specifics of the issue, how it has affected you, and any other relevant details. Please use additional sheets if necessary.] | |
| Root Cause Analysis: | |
| Action Required: [Insert what actions you would like the company to take to resolve the issue.] | |
| Preferred Method of Contact: [Insert preferred method of contact – phone, email, in person] | |
| Signature: [Insert Signature] | |
| Please return this form to the following email address: [Insert Email Address] | |
| Thank you for taking the time to fill out this form. | |
| We will investigate your complaint and get back to you as soon as possible. | |



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