Supplier Documentation and Release Policy

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1. Purpose

This policy sets out the documentation a supplier must hold before material they supply may be released into production, and how that documentation is assessed. It exists so that the same submission reaches the same outcome whoever assesses it, and so that the reason for an outcome can be produced afterwards.

No lot of material may be released into production unless a valid certificate for that supplier and that material is held and recorded at the time of release.

2. Scope and application

This policy applies to every material received at every site, and to the certificate a supplier holds for its own operation.

It does not cover the certificate of analysis issued against an individual batch, the supplier's insurance documentation, or any declaration a supplier provides about the composition or origin of a material. Section 13 explains how those are treated, because they arrive through the same mailbox and are regularly mistaken for the document this policy governs.

3. Relationship to other procedures

The analytical release procedure governs certificates of analysis. Those documents also name an issuing laboratory, also carry dates, and also expire, but they speak for one batch rather than for the supplier's operation, and they are assessed against specification limits rather than against this policy. A submission containing only a certificate of analysis has not satisfied this policy.

The supplier approval procedure governs whether a supplier may be used at all. A supplier can be approved and still submit a document this policy refuses, and a refusal under this policy is not a withdrawal of approval.

The analytical release procedure and the supplier approval procedure are maintained separately and neither is reproduced here.

4. Roles and responsibilities

Operators assess submissions, record the outcome, and chase suppliers when a document is refused. Most assessments begin and end with them.

The quality specialist decides whether held material is released. Every referral under this policy reaches them, and the decision is theirs and is recorded in their name.

The quality manager owns this policy, approves each revision, and reviews the exception rate at the management review.

Goods receipt holds material for which no valid certificate is recorded and releases it only on a recorded outcome.

5. Document control

This policy is reviewed at least annually and on any change to an accepted scheme. A revision takes effect on the date it is issued and the version it replaces is withdrawn on the same day. Withdrawn versions are retained for records purposes and carry no authority, whatever is written in them.

Assessments are made against the version in force on the date of assessment. A change to this policy does not require earlier assessments to be revisited unless the quality manager directs it.

Version	Issued	Change
3.0	13 August 2022	First controlled issue. No scheme accepted in place of another.
4.0	29 June 2023	FSSC 22000 and BRCGS Food Safety accepted in place of ISO 22000.
5.0	14 May 2024	IFS Food added to the accepted schemes.
6.0	19 April 2025	Accreditation by an IAF MLA signatory made a requirement.
7.0	23 February 2026	Sections 11 and 12 revised. See those sections.

6. Which standard a material requires

The required standard is a property of the material, not of the supplier, and the ERP is the authoritative record of it. The requirement is read from the ERP for each material at the time of assessment. No other list of requirements may be maintained and no local copy may be relied on, including the reference table at Annex B.

The same certificate may therefore be the correct document for one material and the wrong document for another. Nothing about the certificate itself decides this. The requirement does.

7. Accepted schemes

Where a supplier holds a scheme other than the one the ERP requires, it may be accepted only where this policy lists it as accepted in place of the required standard. The table below is the complete list and is reproduced at Annex A.

Required standard	Accepted in place of it	Not accepted
ISO 22000	FSSC 22000 BRCGS Food Safety IFS Food	Any scheme not listed here, including packaging and primary production schemes
BRCGS Packaging Materials	Nothing. The required scheme must be held.	Food safety management schemes, including ISO 22000 and FSSC 22000
GLOBALG.A.P.	Nothing. The required scheme must be held.	Processing and manufacturing schemes

A scheme that is not listed as accepted is refused, whatever its standing elsewhere. In particular a food safety management scheme does not satisfy a packaging materials requirement, and a primary production scheme does not satisfy a manufacturing requirement. The two are not interchangeable in either direction.

Acceptance under this section is not a judgement that two schemes are equivalent. It records that the organisation has decided to accept one in place of the other for this purpose.

8. The issuing body and its accreditation

A certificate is acceptable only where it names the body that issued it and that body holds accreditation from an accreditation body that is a signatory to the IAF Multilateral Recognition Arrangement. The accreditation must be stated on the certificate itself.

A certificate that names no issuing body is incomplete and is refused. A certificate whose issuing body states no accreditation, or states that it issues under its own verification programme, is refused. In both cases the supplier is asked for a certificate issued by an accredited body.

The statement printed on the certificate is taken at face value. Where the certificate states that the accreditation body is a signatory to the IAF Multilateral Recognition Arrangement, the assessment accepts that statement as it stands. An assessment is not refused and is not referred for the single reason that the accreditation body named on the certificate is one the assessor does not recognise.

A refusal under this section is recorded against the document and not against the supplier's food safety performance. Annex C sets out what has to appear and why.

9. Second-party audits

Where the supplier approval procedure calls for an audit by this organisation or by an agent acting for it, the auditor must hold a recognised food safety auditor qualification and be listed on the approved auditor register. That qualification is personal to the auditor and is not accreditation, and an audit conducted under it does not produce a certificate this policy can accept.

A second-party audit report is therefore never a substitute for a certificate under section 7, however recently it was conducted.

10. Certified scope

The scope printed on the certificate must cover the category of the material being supplied. The category is held in the ERP against the material.

Scope wording is written by the certification body and will rarely match the category word for word. The test is whether the activity and the product described by the scope include the material in question, not whether the words are identical. A scope covering the manufacture and packing of dairy powders covers a dairy protein powder. A scope covering bakery mixes does not, even where the same site holds both activities, because the certificate speaks only for the scope it names.

Where the scope is drawn so broadly that it cannot be told whether the material falls inside it, the assessment is referred under section 14 rather than resolved by assumption in either direction.

11. Group, multi-site and head office certificates

Where a certificate is issued in the name of a group, a parent company or a head office, it covers a supplying site or subsidiary only where that site or subsidiary is named on the certificate, or on a site schedule attached to it and issued by the same body.

A certificate naming only the parent is refused, and the supplier is asked either for a certificate naming the supplying entity or for the site schedule that names it. A shared trading name, a shared address or a shared registration number is not sufficient.

12. Validity, expiry and the delivery date

A certificate must be in date on the day the assessment is made and on the day the material is delivered. A certificate that is in date on the day of assessment and expires before the delivery date is not refused on that ground. It is referred to the quality specialist, as the third paragraph of this section sets out.

A certificate that has already expired is refused and the supplier is asked for the current one. An expired certificate is refused on its dates alone and no further assessment of it is required.

A certificate that is in date on the day of assessment but expires before the delivery date recorded on the order is not refused automatically. It is referred to the quality specialist, who decides whether the material is held pending the reissued certificate or released against the certificate in force at the time of delivery. The decision and the person who made it are recorded.

A surveillance date printed on a certificate is not an expiry date. A certificate is in force until the date it states it expires, whether or not a surveillance audit has fallen due in the meantime.

13. Documents that are not certificates

Suppliers regularly send something other than the certificate. The following do not satisfy this policy and are not assessed under it, whatever they contain.

A letter from the certification body confirming that a certificate exists. It names an issuing body and carries a date, and it is not a certificate.

A screenshot or printout of an entry in a certification body's online register. The register is the right place to confirm a certificate the organisation already holds, and an entry in it is not the document.

A self-declaration of conformity, however formally set out, and a certificate of analysis for a batch, which is governed by the analytical release procedure.

In each case the supplier is asked for the certificate itself. Where one of these arrives instead, the submission is recorded as incomplete under section 15 rather than refused on its content.

14. Where a judgement cannot be made

Where the evidence does not settle the question, the assessment is recorded as unable to determine and the case is referred to the quality specialist.

Referral is a normal outcome of this policy and not an exception to it. An assessment that reaches a conclusion the evidence does not support is a more serious failure than one that declines to conclude, and is treated as such at review.

15. Incomplete and illegible documents

A document that cannot be read, or from which a value this policy depends on cannot be established, is not assessed. It is returned to the supplier with a request for a legible copy.

An unreadable document is never recorded as compliant and is never recorded as a food safety failure by the supplier. The fault is in the copy, not in the operation it describes.

16. The assessment sequence

An assessment establishes, in this order: which supplier and material the submission concerns; what the ERP records that material as requiring; what the document says; whether its dates are in order; whether its issuing body and accreditation satisfy section 8; whether its scheme is the required one or one accepted in its place; and whether its certified scope covers the material category.

An assessment stops at the first point that refuses the document. There is no requirement to complete the remaining checks on a document already refused, and the recorded reason is the check that refused it.

The supplier the submission was filed against is the supplier on the order. Where the name on the certificate belongs to a different supplier, or to no supplier the ERP holds, the document is refused and the two cases are recorded separately, because they are different conversations with different people.

17. Exceptions and who owns them

A refused or referred submission is one of four things, and the distinction decides who picks it up.

Expired. The operator asks the supplier for the current certificate. Routine, and the most common.

Wrong supplier or material. The operator establishes what was actually sent and why before asking again, because a second request for the same document usually produces the same document.

Unreadable. The operator asks for a legible copy and does not attempt to interpret the values.

Incomplete. The operator asks for what is missing, naming it. A request for a better certificate without naming the deficiency is not a chase.

Where a chase produces nothing and the material is needed, the case is escalated to the quality specialist under section 14.

18. Records and retention

Every assessment is recorded, whatever its outcome, including assessments that refused a document and assessments that could not be completed. A record of the successes alone cannot show how the process is behaving and cannot answer a question about a supplier's history.

The record holds the supplier, the material, the document assessed, the outcome, the reason for it, and the clause of this policy the outcome rests on. An outcome recorded without the clause it rests on is not a complete record.

Records are retained for five years from the date of assessment, or for the shelf life of the material plus one year, whichever is longer.

19. Assessing a certified scope by material category

The notes below record how scope has been assessed against each category in practice. They are guidance on applying section 10 and do not extend it. The category is the test, not the individual material: a category holds several materials and a scope that covers the category covers all of them. Where a submission does not resemble any of the notes below, section 14 applies.

Dairy protein powders

A scope naming the manufacture, production, processing or packing of dairy powders covers this category. Whey protein concentrate, whey protein isolate, milk protein concentrate, caseinate and skimmed milk powder are all dairy protein powders, and a scope naming dairy powders or milk protein fractions covers them whether or not it names the individual product. A scope naming only liquid dairy, only cheese, or only bakery products does not cover this category, even where the site clearly holds the equipment to do both.

Cereal and grain ingredients

A scope naming the milling, blending, flaking or packing of cereals covers this category, including wheat flour and rolled oats. A scope naming only the growing of cereals is a primary production scope and does

not cover a milled or flaked product.

Sweeteners and syrups

A scope naming the production, refining, storage or bulk dispatch of glucose, sugar or syrups covers this category, including glucose syrup and invert sugar syrup delivered as bulk liquid. A scope limited to dry sugar does not cover a syrup.

Flexible packaging films

A scope naming the printing, lamination, coating, slitting or converting of films covers this category, including printed laminate film. The scope must name food contact. A packaging scope that covers only industrial or non-food applications does not satisfy a food contact requirement, however the material is subsequently used.

Rigid packaging containers

A scope naming the injection moulding, blow moulding, thermoforming or compression moulding of preforms, bottles, closures or containers covers this category, including PET preforms. The scope must name food contact, and the same restriction applies as for films. Printing, lamination, moulding and slitting are distinct activities and a scope covers the ones it names.

Fresh produce

A scope naming growing, harvesting and packing covers produce delivered unprocessed, including apples and pears, which a certificate may describe as top fruit. Washing, grading and cold storage are handling activities and do not take the material out of this category.

Tree nuts

A scope naming the receipt, grading, packing or storage of tree nuts covers this category, including almond kernels delivered raw. Shelling, grading and sorting are handling activities and do not change what the material is. Once a nut has been roasted, blanched, milled or otherwise processed it is a manufactured ingredient, the required standard changes with it, and a primary production scope no longer covers it.

20. Recording the outcome

An assessment closes on one of three outcomes and nothing else. Compliant, where every check in section 16 passed. Not compliant, where a check refused the document. Unable to determine, where the evidence did not settle it and the case was referred under section 14.

The reason recorded is written so that the supplier could act on it without further explanation. Not compliant on its own is not a reason. The clause the outcome rests on is recorded alongside it.

Where a document is refused on one check, later checks that were not reached are recorded as not assessed rather than as passed.

21. Chasing a supplier

A chase names the deficiency and says what would fix it. A request for a better certificate, or for the correct certificate, without naming what is wrong, produces the same document a second time and wastes a cycle for both parties.

The first chase is sent on the day of the assessment. Where no usable document has arrived within ten working days the case is escalated to the quality specialist whether or not the material is yet needed, so that a decision is taken before the delivery rather than at it.

The number of attempts is recorded against the submission. A supplier requiring repeated chases is a supplier performance matter and is raised through the supplier approval procedure rather than resolved case by case.

22. Repeat failures

Where the same supplier submits a document refused for the same reason three times in twelve months, the quality manager raises it with the supplier directly and records the outcome on the supplier file. The pattern matters more than any individual refusal and is not visible from a single case.

23. Competence of assessors

An operator may assess submissions under this policy once they have completed the documentation assessment training and had ten assessments reviewed by the quality specialist. Competence is recorded on the training file and reviewed annually.

This competence is internal and is neither certification nor accreditation. It authorises a person to apply this policy and says nothing about any supplier or any certificate.

24. Internal audit and review of this process

The application of this policy is audited internally at least annually. The audit samples closed assessments and checks that the outcome follows from the clause recorded against it, that refusals were chased, and that referrals reached the quality specialist.

The exception rate, the proportion of assessments closed without human intervention, and the time from receipt to outcome are reported at the management review. A rising exception rate is treated as a question about the process before it is treated as a question about suppliers.

25. Certificates in a language other than English

A certificate in another language is assessed as it stands. Values are read as printed and are not translated, because a translated value is no longer the value on the document. Where a certificate is bilingual, the two halves are read as one document and any disagreement between them is referred under section 14.

A statement of accreditation printed in another language is read as it stands and satisfies section 8 where it says what section 8 requires. A certificate is not refused, and is not referred, only because a statement on it is in another language.

A translation supplied by the supplier is not the certificate and does not replace it. Where the assessor cannot read the language and the values cannot be established, the submission is recorded as unable to determine rather than refused, because the fault is ours.

26. Editions of a standard

Certification schemes publish new editions of their standards and allow a transition period during which certificates against the previous edition stay in force. This policy does not assess the edition. A certificate stating the scheme named in section 7 satisfies that section whichever edition it certifies against, and a certificate is never refused for naming an older edition.

The edition is a matter for the certification body and the scheme owner. The distinction that matters here is between schemes, not between editions of one scheme, and the two are easily confused because both appear on the certificate as a number.

27. Suspended and withdrawn certificates

A certification body may suspend or withdraw a certificate before its expiry date. A suspended certificate is not in force, and a withdrawn one has ceased to exist, in both cases while the document itself still shows a future expiry date.

This is not established by looking at the document, because a suspension leaves no mark on it. An assessment under this policy is made on the face of the certificate and does not confirm that it remains in force. Where the organisation has reason to believe a certificate has been suspended, the issuing body's register is consulted and the case is referred under section 14 rather than closed on the dates.

Nothing in this section requires the register to be consulted routinely.

28. Subcontracted and co-manufactured supply

Where a supplier has the material made or packed by somebody else, the certificate must cover the site where the work is done. A certificate covering the supplier's own site does not cover a co-manufacturer's site, and a supplier naming a subcontractor is asked for the subcontractor's certificate.

This is the same rule as section 11 reached from the other direction, and the test is the same: the document must name the place the material came from.

29. Handling supplier documents

Certificates are commercial documents belonging to the supplier. They are stored in the systems the organisation uses for the process and are not forwarded outside it, including to other suppliers, without the issuing supplier's agreement.

30. Glossary

Term	Meaning
Accreditation	Formal recognition by an accreditation body that a certification body is competent to certify against a given standard. Not the same thing as certification.
Accreditation body	The national or regional body that accredits certification bodies. Signatories to the IAF arrangement recognise each other's accreditations.
Assessment	The act of deciding whether a document satisfies this policy for a named supplier and material.
Certificate of analysis	A document reporting test results for one batch of material. Governed by the analytical release procedure, not by this policy.
Certification body	The organisation that audits a supplier and issues its certificate. Referred to on the certificate as the issuing body.
Certified scope	The activities and products the certificate states it covers, in the certification body's own wording.
Delivery date	The date the material is due to arrive, as recorded on the purchase order.
ERP	The system of record for suppliers, materials and what each material requires. Authoritative for all three.
Exception	A submission that leaves the routine path. One of expired, wrong supplier or material, unreadable, or incomplete.

Term	Meaning
IAF MLA	The International Accreditation Forum Multilateral Recognition Arrangement. The agreement under which accreditation bodies recognise each other.
Lot	A quantity of material received under one delivery and treated as one unit for release.
Material category	The grouping the ERP holds against a material, used to decide whether a certified scope covers it.
Operator	A member of the quality team who assesses submissions and chases suppliers.
Quality specialist	The person accountable for deciding whether held material is released. Referrals under this policy go to them.
Reissue	A new certificate issued by the same body, usually following a surveillance or recertification audit.
Required standard	The scheme the ERP records against a material as the one its supplier must hold.
Submission	A message from a supplier that carries a certificate for assessment.
Superseded	A version of this policy that has been replaced. Superseded versions carry no authority.
Surveillance audit	An audit during the life of a certificate, usually annual, that keeps it in force.
Unable to determine	The outcome recorded where the evidence does not settle the question. Referred, not refused.