IRF TRUSTED MARK

THE INTERNATIONAL RETAIL FORUM SETTING **'CUSTOMER CENTRIC'** STANDARDS IN RETAIL

TRUSTED MARK® SCHEME

Trust 200 - Certification Process

In accordance with

ISO/IEC 17065:2012

1. Introduction

This document describes the certification process for retailers and shopping centres applying for certification under the **IRF Trusted Mark Certification Scheme**. It defines the responsibilities of the Scheme Owner, Certification Bodies (CBs), auditors and applicants, and establishes a transparent, impartial and consistent certification methodology in accordance with **ISO/IEC 17065:2012**.

The certification process is designed to ensure that all certified organisations demonstrate sustained customer-centric practices and achieve the performance standards prescribed under the Trusted Mark Scheme.

The certification process broadly consists of the following stages:

1. Qualification and approval of Certification Bodies.
2. Registration of the applicant with the IRF Trusted Mark Secretariat.
3. Selection and appointment of an approved Certification Body.
4. Contract between the applicant and the Certification Body.
5. Off-site document review.
6. Mystery Audit by the Scheme Owner.
7. On-site certification audit.
8. Corrective actions and closure of non-conformities.
9. Certification recommendation by the Audit Team.
10. Certification decision by the Certification Committee.
11. Certificate issuance.
12. Surveillance audits and recertification.

Detailed requirements for each stage are described in this document.

Guiding Principles: The Scheme is based on:

- impartiality;
- transparency;
- risk-based auditing;
- customer-centric evaluation;
- objective evidence;
- competence of auditors;
- independent certification decisions.

2. Qualification of Certification Bodies (CBs)

Only Certification Bodies approved by the **IRF Trusted Mark Secretariat** shall be authorised to conduct certification audits under this Scheme.

To qualify for registration, a Certification Body shall:

a. Be a legally registered certification body capable of accepting legal responsibility for its certification activities.

b. Have a minimum of five years' experience in third-party certification.

c. Be accredited to **ISO/IEC 17065** by the National Accreditation Board of the respective country, which shall be a member of the International Accreditation Forum (IAF).

d. Demonstrate competence of its auditors for conducting audits under the IRF Trusted Mark Scheme. Auditor competency requirements shall be defined separately by the Scheme Owner.

e. Retain full authority and responsibility for all certification decisions, including granting, maintaining, extending, reducing, suspending and withdrawing certification.

f. Maintain impartiality and shall not provide consultancy relating to implementation of the Trusted Mark Scheme to any applicant.

g. Possess adequate financial, technical and human resources to operate the certification programme effectively.

h. Obtain accreditation from the National Accreditation Board for Certification Bodies (NABCB) for the IRF Trusted Mark Scheme within the timeframe prescribed by the Scheme Owner. Pending such accreditation, the Scheme Owner may grant provisional approval where appropriate.

i. Comply with all Scheme documents, including Trust 100, Trust 150, Trust 200 and other applicable procedures issued by the Scheme Owner.

The Scheme Owner shall maintain and publish the current list of approved Certification Bodies on its website.

3. Registration by Applicant

Any retailer or shopping centre wishing to obtain certification shall first register with the **IRF Trusted Mark Secretariat**.

The applicant shall submit:

- Completed Application Form (Trust 201)
- Registration fee
- Organisation profile and supporting information
- Any additional information requested by the Secretariat

Upon acceptance of the application, the Secretariat shall provide:

- Confirmation of registration
- List of approved Certification Bodies
- Self-Evaluation Checklist
- Mystery Audit requirements
- Applicable fee schedule
- Relevant Scheme documents

Registration with the Scheme Owner does not constitute certification.

4. Selection of Certification Body

The applicant may select any Certification Body from the list of approved Certification Bodies published by the Scheme Owner.

The applicant may:

- evaluate their technical competence, geographical presence and proposed audit arrangements; and
- appoint the Certification Body of its choice.

The Scheme Owner shall not influence or interfere with the applicant's selection of Certification Body.

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5. Certification Agreement

Following selection of the Certification Body, the applicant shall enter into a Certification Agreement with the selected CB.

The agreement shall, at a minimum, address:

- scope of certification;
- audit methodology;
- confidentiality;
- impartiality;
- obligations of both parties;
- dispute resolution;
- suspension and withdrawal of certification;
- use of certification marks; and
- contract termination.

The Certification Agreement shall comply with the requirements of **ISO/IEC 17065**.

Where the Scheme Owner has separately established commercial arrangements with the Certification Body, the Certification Agreement with the applicant may be restricted to audit and certification-related matters only.

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6. Audit Planning

Upon execution of the Certification Agreement:

a. The Certification Body shall appoint competent auditor(s).

b. Audit dates shall be mutually agreed between the applicant and the Certification Body.

c. The audit team shall review the applicant's business profile, scope of certification, locations and operational complexity before finalising the audit programme.

d. The Scheme Owner may nominate observers to witness the audit where considered necessary.

e. Audits conducted by unapproved or unqualified auditors shall be considered invalid.

f. Any deviation from Scheme requirements shall be referred to the IRF Trusted Mark Certification Committee for appropriate action.

7. Off-site Review (Document Review)

Following execution of the Certification Agreement, the applicant shall submit the completed Self-Evaluation Checklist together with supporting documents and records to the Certification Body.

The assigned auditor shall conduct an off-site review to:

- verify completeness of documentation;
- assess the applicant's preparedness for certification;
- identify any gaps requiring clarification before the onsite audit;
- review statutory and regulatory documentation applicable to the applicant.

Where deficiencies are identified during the document review, the auditor may raise observations or non-conformities requiring corrective action before the onsite audit.

The Certification Body shall communicate the findings together with the proposed audit plan.

The onsite audit should normally be completed within **90 days** of completion of the document review. If this period is exceeded without valid justification, the Certification Body may require a fresh document review.

8. Mystery Audit

The IRF Trusted Mark Secretariat shall conduct, or arrange to conduct, Mystery Audits in accordance with the applicable Scheme requirements.

The Mystery Audit shall:

- evaluate the actual customer experience;
- verify implementation of customer-centric practices;
- assess service quality and operational consistency;
- provide independent inputs to the Certification Body.

The Mystery Audit report shall be shared simultaneously with:

- the Certification Body; and
- the applicant,

to enable corrective action before completion of certification.

The Certification Body shall consider the Mystery Audit findings while conducting the certification audit and determining the overall audit outcome.

9. On-site Certification Audit

The Certification Body shall conduct the onsite certification audit using competent auditor(s) approved for the Scheme.

The audit shall include:

- Opening Meeting;
- verification of management systems;
- verification of operational controls;
- interviews with relevant personnel;
- review of statutory and regulatory compliance;
- review of Self-Evaluation;
- review of Mystery Audit findings;
- review of internal audit records;
- verification of customer-centric practices;
- Closing Meeting.

The audit team shall collect sufficient objective evidence to determine conformity with all applicable requirements of Trust 150 and other Scheme documents.

Audit findings shall be classified as:

- Conformity
- Observation
- Opportunity for Improvement (OFI)
- Minor Non-conformity
- Major Non-conformity

The auditor shall explain every non-conformity to the applicant during the Closing Meeting.

10. Certification Criteria

Certification under the IRF Trusted Mark Scheme shall be based primarily on the applicant achieving the prescribed minimum score of **70 out of 100**, as defined in **Trust 150**.

Achievement of the minimum score demonstrates that the applicant has satisfied the overall performance requirements of the Scheme.

Non-conformities identified during the audit shall be addressed in accordance with the Scheme requirements.

Minor non-conformities shall normally be closed through submission of satisfactory objective evidence. **This can be closed based on documentary evidence.**

Major non-conformities shall require verification by the Certification Body before certification can be recommended. **This will require onsite verification.**

Where the Certification Committee is satisfied that:

- the applicant has achieved the prescribed minimum score of **70**;

- objective evidence supports conformity with the Scheme requirements; and
- any remaining issues do not compromise certification,

the Certification Committee may approve certification.

11. Corrective Actions

The applicant shall investigate every non-conformity to determine:

- root cause;
- correction;
- corrective action;
- preventive action.

Supporting evidence shall be submitted to the Certification Body within the period specified in the audit report.

The auditor shall evaluate the adequacy and effectiveness of the corrective actions.

Minor non-conformities may normally be verified remotely.

Major non-conformities **shall** require an additional onsite verification before closure.

Failure to close major non-conformities within **90 days** may require a repeat certification audit.

12. Audit Recommendation

Following completion of the audit and review of corrective actions, the Lead Auditor shall prepare the final audit report.

The report shall include:

- audit scope;
- audit methodology;
- audit findings;
- overall score;
- summary of non-conformities;
- status of corrective actions;
- recommendation for certification.

Only reports supported by sufficient objective evidence shall be recommended for certification.

13. Certification Review

The Certification Body shall review every audit report before making a certification decision.

The review shall be carried out by **competent reviewer** who has not participated in the audit.

The reviewer shall verify:

- competence of the audit team;
- adequacy of audit duration;
- completeness of the audit;
- appropriateness of findings;
- effectiveness of corrective actions;
- achievement of the required minimum score;
- compliance with Scheme requirements.

Where clarification is required, the reviewer may seek additional information from the Lead Auditor or the applicant before making a recommendation.

14. Certification Decision

Certification shall be granted only following a positive certification decision by the Certification Body.

The Certification Body shall satisfy itself that:

- the audit has been conducted in accordance with the Scheme;
- the applicant has achieved the prescribed minimum score of **70 out of 100**;
- all major non-conformities have been satisfactorily resolved;
- any remaining minor non-conformities do not adversely affect certification.

The certification decision shall remain the sole responsibility of the Certification Body.

15. Certificate Issuance

Following a positive certification decision, the Certification Body shall issue the certificate.

The certificate shall include, as a minimum:

- name of the certified organisation;
- certified locations;
- scope of certification;
- certificate number;
- issue date;
- expiry date;
- name and address of the Certification Body;
- authorised signature.

A copy of the certificate shall simultaneously be forwarded electronically to the IRF Trusted Mark Secretariat.

The Secretariat shall thereafter:

- register the certificate;
- upload the certification details on the IRF Trusted Mark website;

- arrange issue of decorative certificates, plaques and marketing material to the certified organisation.

16. Registration of Certified Organisations

Following issuance of the certificate by the Certification Body, the certified organisation shall complete all applicable administrative formalities with the **IRF Trusted Mark Secretariat**.

The Secretariat shall:

- verify receipt of the certification details from the Certification Body;
- complete Scheme administration requirements;
- register the certified organisation under the IRF Trusted Mark Scheme;
- upload the certification details on the official IRF Trusted Mark website;
- issue decorative certificates, plaques, logo usage guidelines, marketing toolkit and other promotional material, where applicable.

Only organisations whose certification details are published on the official IRF Trusted Mark website shall be recognised as certified under the Scheme.

17. Use of the IRF Trusted Mark

Certified organisations shall use the IRF Trusted Mark strictly in accordance with the **IRF Trusted Mark Logo Usage Guidelines**.

The certification mark:

- shall be used only during the validity of certification;
- shall not be used in any misleading manner;
- shall not imply certification of products unless specifically permitted;
- shall be withdrawn immediately upon suspension, expiry or withdrawal of certification.

The Scheme Owner reserves the right to suspend or withdraw permission for use of the mark in cases of misuse.

18. Surveillance Audits

Certification shall remain valid for **three (3) years**, subject to successful surveillance audits.

The Certification Body shall conduct surveillance audits at least:

- once during the first surveillance cycle (normally within 12 months); and
- once during the second surveillance cycle (normally within 24 months).

The surveillance audit shall verify continued compliance with:

- Trust 150 requirements;
- applicable statutory and regulatory requirements;
- customer-centric practices;
- effectiveness of corrective actions;
- continued achievement of the prescribed minimum score of **70 out of 100**.

Where significant non-conformities are identified, the Certification Body may suspend certification until satisfactory corrective actions have been verified.

The Certification Body shall communicate surveillance audit outcomes to the IRF Trusted Mark Secretariat.

19. Surprise Audits

The Scheme Owner and/or the Certification Body may conduct surprise audits whenever considered necessary.

Surprise audits may be initiated due to:

- customer complaints;
- regulatory concerns;
- significant operational changes;
- misuse of the certification mark;
- adverse media reports;
- any other matter affecting confidence in certification.

The findings of surprise audits may result in:

- continuation of certification;
- issuance of non-conformities;
- suspension;
- withdrawal of certification;
- additional surveillance audits.

20. Recertification

Before expiry of the three-year certification cycle, the certified organisation shall undergo recertification.

The recertification audit shall evaluate:

- continued conformity with Scheme requirements;
- effectiveness of the management system;
- improvements implemented during the certification cycle;
- customer experience;
- continued achievement of the prescribed minimum score.

Successful completion of the recertification process shall result in issuance of a new certificate valid for a further three-year period.

21. Changes Affecting Certification

The certified organisation shall promptly notify the Certification Body of any significant changes, including:

- ownership;
- legal status;
- organisation name;
- scope of certification;
- addition or deletion of sites;
- relocation;
- significant operational changes.

The Certification Body shall determine whether additional evaluation or a special audit is required.

22. Transfer of Certification Body

A certified organisation may transfer certification from one approved Certification Body to another.

The incoming Certification Body shall review:

- previous certification records;
- surveillance history;
- outstanding non-conformities;
- complaints;
- certification validity.

The transfer shall be carried out in accordance with the applicable accreditation requirements and Scheme procedures, ensuring continuity of certification.

23. Suspension and Withdrawal of Certification

Certification may be suspended or withdrawn where:

- major non-conformities remain unresolved;
- surveillance audits are not completed within the prescribed period;
- false or misleading information has been provided;
- certification marks are misused;
- statutory or regulatory violations materially affect compliance;
- the certified organisation fails to comply with Scheme requirements.

The Certification Body shall inform the IRF Trusted Mark Secretariat immediately of any suspension or withdrawal.

The Secretariat shall update the public register accordingly.

24. Appeals and Complaints

Applicants and certified organisations shall have the right to submit appeals against certification decisions or lodge complaints regarding the certification process.

Appeals relating to certification decisions shall be handled by the Certification Body in accordance with its documented procedures.

Complaints relating to the operation of the IRF Trusted Mark Scheme may be submitted to the IRF Trusted Mark Secretariat.

25. Confidentiality

The Certification Body, the Scheme Owner and all persons involved in the certification process shall maintain confidentiality of all information obtained during certification activities, except where disclosure is required by law or accreditation requirements.

26. Records

The Certification Body and the Scheme Owner shall maintain records relating to:

- applications;
- audit reports;
- certification decisions;
- certificates;
- surveillance audits;
- complaints;
- appeals;
- corrective actions;
- certification status.

Records shall be retained in accordance with applicable legal, contractual and accreditation requirements.

27. Scheme Amendments

The IRF Trusted Mark Secretariat may amend Scheme requirements, certification criteria or associated documents whenever necessary.

Certification Bodies and certified organisations shall be informed of such changes and shall implement them within the prescribed timeframe.

Annexure – Certification Workflow

The certification process shall normally follow the sequence below:

1. Registration with IRF Trusted Mark Secretariat.
2. Submission of Application (Trust 201).
3. Self-Evaluation by the applicant.
4. Selection of an approved Certification Body.
5. Certification Agreement.
6. Off-site Document Review.
7. Mystery Audit.
8. On-site Certification Audit.
9. Corrective Actions (where applicable).
10. Audit Report and Recommendation.
11. Certification Review.
12. Certification Decision.
13. Certificate Issuance.
14. Registration on the IRF Trusted Mark website.
15. Surveillance Audits.
16. Recertification after three years.