

CERTIFICATE OF COMPLIANCE

(Scope Certificate)

Nº LETIS- 1662

LETIS declares that

Keya Cosmetics Ltd. (Knit Composite Division)

Jarun, Konabari, Gazipur, Bangladesh

has been inspected and assessed according to the

Global Organic Textile Standard (GOTS)
-Version 5.0

and that products of the categories as mentioned below (and further specified in the annex)
comply with this standard:

Product categories: **Apparels**

Processing steps/activities carried out under responsibility of the above mentioned company (by the
operations as detailed in the annex) for the certified products:

Knitting, Pretreatment, Dyeing, Finishing, Printing, Manufacturing and Packing

This Certificate is valid until: **27/08/2020**
Version: **07**

Original certification date: **04/10/2016**

Place and Date of current issue: **Rosario October 2nd, 2019**




Juan Gilardoni
GOTS / OCS Responsible
LETIS S.A.
Name and signature of the authorized person

This Certificate of Compliance provides no proof that any goods delivered by its holder are GOTS certified. Proof of GOTS certification of goods delivered is provided by a valid Transaction Certificate (TC) covering them.
The issuing body can withdraw this certificate before it expires if the declared compliance is no longer guaranteed.

Accredited by IOAS for product certification. Registration Number 51

Annex to certificate Nº LETIS- 1662

Keya Cosmetics Ltd. (Knit Composite Division)**Global Organic Textile Standard (GOTS)**

In specific the certificate covers the following products:

Name of product	Material composition	Product code
T-Shirt, Polo Shirt, Sweat Shirt, Night Wear, Turtle Neck, Tank Top, Romper, Short Pant, Long Pant, Skirt, Dress, Pyjama Set and Vest	100% Organic Cotton 99.5% Organic Cotton + 0.5% Viscose/Modal/Elastane-Lycra/Tencel-Lyocell/Linen/Recycled Polyester 95-99% Organic Cotton + 5-1% Modal/Viscose/Elastane-Lycra/ Tencel-Lyocell/Linen/Recycled Polyester 95%-96% Organic Cotton + 3%-2% Viscose + 2% Elastane 97% Organic Cotton+ 2% Viscose + 1% Elastane 95%-96% Organic Cotton + 3%-2% Recycled Polyester + 2% Elastane 97% Organic Cotton + 2% Recycled Polyester + 1% Elastane	GOTS V.5.0
	90-94% Organic Cotton + 10-6% Viscose/Modal/Elastane-Lycra /Linen/Tencel-Lyocell 70-94% Organic Cotton + 30-6% Recycled Polyester 90% Organic Cotton + 5% Viscose + 5% Lycra 91% Organic Cotton + 8% Recycled Polyester + 1% Viscose 91% Organic Cotton + 4% Viscose + 5% Elastane	Made With Organic Cotton V 5.0

Place and Date of issue: **Rosario October 2nd, 2019**

Annex to certificate Nº LETIS- 1662

Keya Cosmetics Ltd.(Knit Composite Division)**Global Organic Textile Standard (GOTS)**

Under the scope of this certificate the following facilities / subcontractors have been inspected and assessed. The listed processing steps/activities comply with the corresponding criteria of the Global Organic Textile Standard (GOTS) for the certified products:

Name and address of operation	Processing steps/activities
Keya Cosmetics Ltd. (Knit Composite Division). Jarun, Konabari, Gazipur, Bangladesh	Knitting, Pre-treatment, Dyeing, Finishing, Printing, Manufacturing and Packing

(End of document)

Place and Date of issue: **Rosario October 2nd, 2019**

CERTIFICATE OF COMPLIANCE

(Scope Certificate)

Nº LETIS- 1662

LETIS declares that

Keya Cosmetics Ltd. (Knit Composite Division)

Jarun, Konabari, Gazipur, Bangladesh

has been inspected and assessed according to the

ORGANIC CONTENT STANDARD 2.0

and that products of the categories as mentioned below (and further specified in the annex)
comply with this standard:

Product categories: **Apparels**

Processing steps/activities carried out under responsibility of the above mentioned company (by the operations as detailed in the annex) for the certified products:

Knitting, Pretreatment, Dyeing, Finishing, Printing, Manufacturing and Packing

This Certificate is valid until: **10/11/2020**

Original certification date: **11/11/2019**

Version: **01**

Place and Date of current issue: **Rosario November 11th, 2019**




Juan Gilardoni
 GOTS / OCS Responsible
 LETIS S.A.
 Name and signature of the authorized person

This Certificate of Compliance provides no proof that any goods delivered by its holder are certified to the listed standard. Proof of certification of goods delivered is provided by a valid Transaction Certificate (TC) covering them. The issuing body can withdraw this certificate before it expires if the declared compliance is no longer guaranteed.

Accredited by IOAS for product certification. Registration Number 51

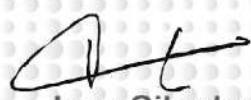
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Annex to certificate Nº LETIS- 1662/OCS V 2.0/2019

Keya Cosmetics Ltd. (Knit Composite Division)**ORGANIC CONTENT STANDARD 2.0**


In specific the certificate covers the following products:

Name of product	Material composition	Product code
T-Shirt, Polo Shirt, Sweat Shirt, Night Wear, Turtle Neck, Tank Top, Romper, Short Pant, Long Pant, Skirt, Dress, Pyjama Set and Vest	100 % Organically Grown Cotton 95-99% Organically Grown Cotton + 5-1% Viscose/Elastane- Lycra/Polyester/Modal/Tencel- Lyocell/Linen/Conventional Cotton 95% Organically Grown Cotton + 3% Viscose/Polyester + 2% Elastane 96% Organically Grown Cotton + 2% Viscose/Polyester + 2% Elastane 97% Organically Grown Cotton + 2% Polyester + 1% Elastane	OCS 100 V 2.0

Place and Date of issue: **Rosario November 11th, 2019**

Juan Gilardoni
 GOTS / OCS Responsible
 LETIS S.A.
Name and signature of the authorized person

T-Shirt, Polo Shirt, Sweat Shirt, Night Wear, Turtle Neck, Tank Top, Romper, Short Pant, Long Pant, Skirt, Dress, Pyjama Set and Vest	6-94% Organically Grown Cotton+ 94-6% Viscose/Elastane-Lycra/Polyester/Modal/Tencel-Lyocell/Linen/Conventional Cotton	OCS Blended V 2.0
	70% Organically Grown Cotton + 20% Conventional Cotton + 10% Elastane/Polyester/Viscose	
	75% Organically Grown Cotton + 20% Conventional Cotton + 5% Elastane/Polyester/Viscose	
	80% Organically Grown Cotton + 10% Conventional Cotton + 10% Elastane/Polyester/Viscose	
	91% Organically Grown Cotton + 8% Polyester + 1% Viscose	
	91% Organically Grown Cotton + 4% Viscose + 5% Elastane	
	50% Organically Grown Cotton + 45% Conventional Cotton + 5% Elastane	
	35% Organically Grown Cotton + 60% Polyester + 5% Elastane	
	65% Organically Grown Cotton + 30% Polyester/Viscose + 5% Elastane	
	65% Organically Grown Cotton + 32% Modal + 3% Elastane	
	70% Organically Grown Cotton + 25% Polyester/Viscose + 5% Elastane	
	80% Organically Grown Cotton + 15% Polyester/Viscose + 5% Elastane	
	85% Organically Grown Cotton + 10% Polyester/Viscose + 5% Elastane	
	90% Organically Grown Cotton + 5% Polyester+5% Elastane	
	75% Organically Grown Cotton + 20% Viscose + 5% Elastane	
	57% Organically Grown Cotton + 39% Tencel + 4% Elastane	
	74% Organically Grown Cotton + 24% Polyester + 2% Elastane	
	74% Organically Grown Cotton + 26% Linen	

 Place and Date of issue: **Rosario November 11th, 2019**


Juan Gilardoni
 GOTS / OCS Responsible
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Name and signature of the authorized person

Annex to certificate Nº LETIS- 1662/OCS V 2.0/2019

Keya Cosmetics Ltd. (Knit Composite Division)**ORGANIC CONTENT STANDARD 2.0**

Under the scope of this certificate the following facilities / subcontractors have been inspected and assessed. The listed processing steps/activities comply with the corresponding criteria of the Organic Content Standard 2016 (OCS) for the certified products:

Name and address of operation	Processing steps/activities
Keya Cosmetics Ltd. (Knit Composite Division) -Jarun, Konabari, Gazipur, Bangladesh	Knitting, Pretreatment, Dyeing, Finishing, Printing, Manufacturing and Packing
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(End of document)

Place and Date of issue: **Rosario November 11th, 2019**


Juan Gilardoni
 GOTS / OCS Responsible
 LETIS S.A.

Name and signature of the authorized person

Auditee :	Keya Cosmetics Ltd. (Knit Composite Division)
Audit Date From :	30/07/2019
Audit Date To :	30/07/2019
Expiry Date of the Audit :	Please refer to the producer profile in the amfori BSCI platform
Auditing Company :	Intertek
Auditor's Name(s) :	Mamonur Rahman Khan, Sanzida Sultana Rasna(Lead)
Auditing Branch (if applicable) :	Intertek Bangladesh



This is an extract of the on line Audit Report. The complete report is available in the amfori BSCI Platform.
Access www.bsciplatform.org, for entitled users only.

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This is an extract of the amfori BSCI Audit Report, which is available in the amfori BSCI Platform. © amfori, 2018 - The English version is the legally binding One.

Rating Definitions



Rating	A combination of ratings per Performance Area where:	Consequence																																							
A Very Good	<ul style="list-style-type: none">Minimum 7 Performance Areas rated ANo Performance Areas rated C, D or E These are three examples: <table><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td></tr><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td></tr><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td></tr></table>	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	B	B	B	A	A	A	A	A	A	A	B	B	B	B	B	B	The auditee has the level of maturity to maintain its improvement process without the need for a follow-up audit.
A	A	A	A	A	A	A	A	A	A	A	A	A																													
A	A	A	A	A	A	A	A	A	A	B	B	B																													
A	A	A	A	A	A	A	B	B	B	B	B	B																													
B Good	<ul style="list-style-type: none">Maximum 3 Performance Areas rated CNo Performance Areas rated D or E These are three examples: <table><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td></tr><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>C</td></tr><tr><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>C</td></tr></table>	A	A	A	A	A	A	B	B	B	B	B	B	B	A	A	A	A	A	B	B	B	B	B	B	B	C	B	B	B	B	B	B	B	B	B	B	C	C	C	The auditee has the level of maturity to maintain its improvement process without the need for a follow-up audit.
A	A	A	A	A	A	B	B	B	B	B	B	B																													
A	A	A	A	A	B	B	B	B	B	B	B	C																													
B	B	B	B	B	B	B	B	B	B	C	C	C																													
C Acceptable	<ul style="list-style-type: none">Maximum 2 Performance Areas rated DNo Performance Areas rated E These are three examples: <table><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>C</td><td>C</td><td>C</td><td>C</td></tr><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>C</td><td>D</td></tr><tr><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>C</td><td>D</td><td>D</td></tr></table>	A	A	A	A	A	A	A	A	A	C	C	C	C	A	A	A	A	A	B	B	B	B	C	C	C	D	C	C	C	C	C	C	C	C	C	C	C	D	D	The auditee needs follow up to support its progress. Following the completion of the audit, the auditee develops a Remediation Plan within 60 days.
A	A	A	A	A	A	A	A	A	C	C	C	C																													
A	A	A	A	A	B	B	B	B	C	C	C	D																													
C	C	C	C	C	C	C	C	C	C	C	D	D																													
D Insufficient	<ul style="list-style-type: none">Maximum 6 Performance Areas rated E These are three examples: <table><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>D</td><td>D</td><td>D</td></tr><tr><td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>C</td><td>D</td><td>D</td><td>D</td><td>E</td></tr><tr><td>D</td><td>D</td><td>D</td><td>D</td><td>D</td><td>D</td><td>D</td><td>D</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td></tr></table>	A	A	A	A	A	A	A	A	A	A	D	D	D	A	A	A	B	B	B	C	C	C	D	D	D	E	D	D	D	D	D	D	D	D	E	E	E	E	E	The auditee needs follow up to support its progress. Following the completion of the audit, the auditee develops a Remediation Plan within 60 days.
A	A	A	A	A	A	A	A	A	A	D	D	D																													
A	A	A	B	B	B	C	C	C	D	D	D	E																													
D	D	D	D	D	D	D	D	E	E	E	E	E																													
E Unacceptable	<ul style="list-style-type: none">Minimum 7 Performance Areas rated E These are three examples: <table><tr><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>A</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td></tr><tr><td>A</td><td>A</td><td>B</td><td>B</td><td>C</td><td>D</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td></tr><tr><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td><td>E</td></tr></table>	A	A	A	A	A	A	E	E	E	E	E	E	E	A	A	B	B	C	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	amfori BSCI Participants shall closely oversee the auditee's progress as the producer may represent a higher risk than other business partners.
A	A	A	A	A	A	E	E	E	E	E	E	E																													
A	A	B	B	C	D	E	E	E	E	E	E	E																													
E	E	E	E	E	E	E	E	E	E	E	E	E																													
Zero Tolerance	A Zero Tolerance Issue was identified (see amfori BSCI System Manual Part V – Annex 5: amfori BSCI Zero Tolerance Protocol)	Immediate actions are required. The amfori BSCI Zero Tolerance Protocol is to be followed.																																							

Main Auditee Information



Name of producer :	Keya Cosmetics Ltd. (Knit Composite Division)		
DBID number :	8787		
Audit ID :	158599		
Address :	Jarun, Nil Nagar, Konabari, Gazipur		
Province :	Dhaka	Country :	Bangladesh
Management Representative :	Mr. Md. Zahangir Alam		
Contact person:	Mr. Md. Zahangir Alam	Sector :	Non-Food
Industry Type :	Textiles, clothing, leather	Product group :	Apparel
Product Type :	All kinds of knit item		

Audit Details



Audit Range :	<input type="checkbox"/> Full Audit	<input checked="" type="checkbox"/> Follow-up Audit
Audit Scope :	<input checked="" type="checkbox"/> Main Auditee	<input type="checkbox"/> Main Auditee & Farms
Audit Environment :	<input checked="" type="checkbox"/> Industrial	<input type="checkbox"/> Agricultural <input type="checkbox"/> Small Producer
Audit Announcement :	<input type="checkbox"/> Fully-Announced	<input type="checkbox"/> Fully-Unannounced <input checked="" type="checkbox"/> Semi-Announced
Random Unannounced Check (RUC) :	No	
Audit extent (if applicable) :	Limited extent (follow-up on a few Performance Areas only)	
Audit interferences or contingencies (if applicable) :	none	
Overall rating :	B	
Need of follow-up :		If YES, by :

Rating per Performance Area (PA)

PA 1	PA 2	PA 3	PA 4	PA 5	PA 6	PA 7	PA 8	PA 9	PA 10	PA 11	PA 12	PA 13
C	B	A	C	A	A	A	A	A	A	A	A	A

Executive summary of audit report

Keya Cosmetics Ltd. (Knit Composite Division) is a 100% export oriented knit garment manufacturer located at Jarun, Nil Nagar, Konabari, Gazipur, Bangladesh. Total land area was about 32,60,370 square feet, production area was about 3,32,340 square feet and warehouse area was approximate 2,16,000 square feet.

This amfori BSCI Limited Extent Follow-up Audit (PA 1 & PA 7) was conducted by ITS Labtest Bangladesh Ltd. Two auditors (Sanzida Sultana Rasna-APSCA 21702985 and Mamonur Rahman Khan- APSCA 21700982) in one day (30 July 2019) assessed and verified the facility's operations against the amfori BSCI Code of Conduct and local legislation. Facility management was positive towards this audit and provided full access to the auditors.

General working hour was from 08:00 am to 05:00 pm. Facility had 3 shifts (Shift-A 6:00 am to 2:00 pm, Shift-B 2:00 pm to 10:00 pm and shift C 10:00 pm to 6.00 am) for all sections except sales and Human Resource. Workers took one-hour lunch/dinner break by rotation. Weekly holiday is taken by the workers by rotation. All employees were recruited permanently and receive wages by monthly basis in local currency within 7th working day of the following month.

Auditors conducted opening meeting, site observation, workers, worker representatives, management interview, document review and closing meeting. Mr. Md. Zahangir Alam - Assistant Manager (Compliance) was responsible for implementation of social compliance system in the facility. Facility had appointed two medical officer, five medical assistant and one nurse for continuous medical services to the workers.

Main product of the facility was knit garments and production capacity was 1,50,00,000 pieces per month. Facility started operation in this location since 2003. Main production processes were knitting, dyeing, dyeing finishing, cutting, printing, sewing, finishing and packing. Based on management interview, their major clients were from Europe and North America. On the audit day, total workforce strength was 7261 in the facility.

The facility premises consist of total 14 sheds. Detail description is given below:

Main Shed-01 (With basement & 02 Mezzanine Floor):

Basement: Finished Carton, Raw Carton, Dyeing Finished Fabrics, Gray fabrics Store.

Ground Floor: Finishing, Packing, Printing, Sewing, Cutting, Dyeing, Dyeing Finishing, & Knitting.

Mezzanine 1st: Printing Area, Accessories store, Dyeing Store, General Store, Admin Office, Production Office, Reporting Office, Reject Area & Sample section.

Mezzanine 2nd: Human Resource, Compliance, Accounts, Commercial, Conference, Marketing, Merchandising & Buyers Inspection Room.

Shed-02: Finished Goods area.

Shed-03: Wastage area.

Shed-04: Loading & Unloading Area.

Shed-05: Dinning & Toilet area.

Shed-06: Sub-Station.

Shed-07: Medical & Child Care room.

Shed-08: Compressor.

Shed-09: Workshop.

Shed-10: Boiler.

Shed-11: Yarn & Dyeing Chemical store.

Shed-12: Security Post, Fire Control Room.

Shed-13: Fire Control Room.

Shed-14. ETP.

In opening meeting Mr. Md. Zahangir Alam - Assistant Manager (Compliance), Mr. Md. Altab Hossain - Manager (Admin), Ms. Nazma Khatun- Manager (Human Resource) Mr. Rocky Parvez- Senior Officer (Payroll) and Mst. Akhi Akter- Vice President of Participating Committee were present. Auditor described the whole audit process, standards, scope, and explained the BSCI code of conduct and local laws to what extent these are related to this audit in the opening meeting. Meanwhile, management assured the auditors to help throughout the audit. Required documents were provided in time, photocopy of the required documents was also given in time. Facility management provided a separate room for conducting employee's interview. Besides, at the time of facility visit attitude of the facility management was good.

During site tour all areas of the facility such as knitting, dyeing, dyeing finishing, cutting, printing, sewing, finishing & packing etc. were covered during the audit.

All employees are permanent. 10 permanent employees were selected for interviews from different production processes. Among them 06 were female and 04 were male. On sample basis, payroll records and time cards for the month of June 2019 (current paid month) and May 2019 (random paid month) were reviewed. Moreover, attendance register, production records, garments inspection report, broken needle register and many other documents relevant to this audit were reviewed by the auditors. Note that the facility did not have any specific peak or off-peak season for its production. The production volume remains same around the year. Highest overtime hour found 30 hours per month in the Month of June 2019 and 48 hours per month in the Month of May 2019.

Improvement areas were identified in Social Management System and Cascade Effect (PA 1) and Occupational Health and Safety (PA 7).

Details of the findings are listed in respective section.

As this is a Limited Extent Follow-up Audit (PA 1 & PA 7), so the rest performance areas answer of questions kept the same as previous.

A closing meeting was conducted at the end of the audit. All the attendees of opening meeting were also present in closing meeting. Auditors communicated all the findings in detail and discussed on the area of improvements to the auditees. The auditee was positive on the discussion and agreed on the area of improvements.

Ratings Summary



Auditee's background information			
Auditee's name :	Keya Cosmetics Ltd. (Knit Composite Division)	Legal status :	Private Limited Company
Local Name :	কেয়া কসমেটিক্স লিঃ (কীট কম্পোজিট ডিভিশন)	Year in which the auditee was founded :	2003
Address :	Jarun, Nil Nagar, Konabari,	Contact person (please select) :	Mr. Md. Zahangir Alam
Province :	Dhaka	Contact's Email :	zahangir.comp@keya-bd.com
City :	Gazipur	Auditee's official language(s) for written communications :	Bangla
Region :	South Asia	Other relevant languages for the auditee :	English
Country :	Bangladesh	Website of auditee (if applicable) :	www.keyagroupbd.com
GPS coordinates :	23.9986733, 90.3156028	Total turnover (in Euros) :	116564500.00
Sector :	Non-Food	Of which exports % :	100.00
Industry :	Textiles, clothing, leather	Of which domestic market % :	0.00
If other, please specify :	None	Production volume :	1,50,00,000 pieces per month
Product Group :	Apparel	Production cost calculation :	Yes
If other, please specify :	None	Lost time injury calculation cost :	Yes
Product Type :	All kinds of knit item		

Auditee's employment structure at the time of the audit		
Total number of workers :	7261	Total number of workers in the production unit to be monitored (if applicable) :
		0
	MALE WORKERS	FEMALE WORKERS
Permanent workers	3413	3848
Temporary workers	0	0
In management positions	28	7
Apprentices	0	0
On probation	83	167
With disabilities	451	509
Migrants (national citizens)	0	0
Migrants (foreign citizens)	0	0
Workers on the permanent payroll	3413	3848
Production based workers	0	0
With shifts at night	1128	1272
Unionised	0	0
Pregnant	-	90
On maternity leave	-	19

Finding Report



Performance Area 1 : Social Management System and Cascade Effect

1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: C

Deadline date:30/09/2019

GOOD PRACTICES:

None Observed

AREAS OF IMPROVEMENT:

Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-

- 1.1 -** Follow-up audit was conducted on 30 July 2019. Status: Partially Corrected. In accordance with BSCI Performance Area (Social Management System and Cascade Effect) No. 1.1 (Is there satisfactory evidence that the auditee has set up an effective management system to implement the BSCI Code of Conduct): Findings: Still the established management system of the facility needs some improvement in implementing BSCI Code of Conduct in their business practice. As, facility needs to implement the BSCI system manual for producers properly where improvement areas are identified. Note: The facility has other effective system, policies and procedures in place to implement the BSCI COC in their business practice, so partial rating is given for this questionnaire.
- সুনির্দিষ্ট ব্যবস্থাপনার পদ্ধতি তাদের ব্যবসা অনুশীলনে বিএসসিআই কোড অফ কন্ডাক্ট বাস্তবায়নের কিছু উন্নতি প্রয়োজন। বিএসসিআই সিস্টেমে ম্যানুয়াল আরো ভালভাবে বাস্তবায়নের প্রয়োজন রয়েছে কিছু পারফরমেন্স এরিয়ায়।
- 1.2 -** Follow-up audit was conducted on 30 July 2019. Status: Corrected. During this follow-up audit it was noted that, the amfori BSCI representative of the facility has been given budgeting power and decision-making capability to implement BSCI code of conduct in this facility. Besides, he has attended 02 online training on amfori BSCI new requirements and during interview he was found aware about the requirements of BSCI system manual.
- 1.3 -** Follow-up audit was conducted on 30 July 2019. Status: Partially Corrected. In accordance with BSCI Performance Area (Social Management System and Cascade Effect) No. 1.3 (Is there satisfactory evidence that the auditee has a good overview of the significant business partners and their level of alignment with the BSCI Code of Conduct?): Finding: During this follow-up audit it was noted that, Facility management has not been prepared supply chain mapping for all sub-suppliers and sub-contractors yet. Besides, facility management has not monitored social performance their 09 out of 11 listed suppliers. Moreover, they did not update all suppliers of the facility in the platform yet. Corrected: BSCI Code of Conduct and Terms of Implementation has been acknowledged with all the 11 listed sub-suppliers. Besides, facility management has developed a proper procedure to handle the complaint raised by the business partners. Note: Facility has documented partial information for business partners and has a policy and procedure for supplier selection, so partial rating is given in this section.
- কারখানার কর্তৃপক্ষ সব সাপ্লাইয়ারের কে উক্ত ম্যাপিং এর আওতায় আনা হয় নি। কারখানা কর্তৃপক্ষ সব সাপ্লাইয়ারদের উপর তদারকি করা হয় নি। ম্যাপিং অনুযায়ী সাপ্লাইয়ারদের প্ল্যাটফর্ম এ আপডেট করে নাই।

Remarks from Auditee:

Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: D

Deadline date:30/04/2020

Good practices

None Observed

Areas of improvement

Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-

- 1.1 -** In accordance with BSCI Performance Area (Social Management System and Cascade Effect) No. 1.1 (Is there satisfactory evidence that the auditee has set up an effective management system to implement the BSCI Code of Conduct): It was noted that the established management system of the facility needs some improvement in implementing BSCI Code of Conduct in their business practice in few performance areas. Facility needs to implement the BSCI system manual for producers properly where improvement areas are identified. Note: The facility has other effective system, policies and procedures in place to implement the BSCI COC in their business practice, so partial rating is given in this section.
- কয়েকটি পারফরম্যান্স এলাকায় সুনির্দিষ্ট ব্যবস্থাপনার পদ্ধতি তাদের ব্যবসা অনুশীলনে বিএসসিআই কোড অফ কন্ডাক্ট বাস্তবায়নের কিছু উন্নতি প্রয়োজন। বিএসসিআই সিস্টেমে ম্যানুয়াল আরো ভালভাবে বাস্তবায়নের প্রয়োজন রয়েছে কিছু পারফরমেন্স এরিয়ায়।
- 1.2 -** In accordance with BSCI Performance Area (Social Management System) No. 1.2 (Is there satisfactory evidence that a senior manager has been appointed to ensure that the BSCI values and principles are followed in a satisfactory manner):
- Finding: It was noted that factory management has assigned Md. Zahangir Alam – Assistant Manager of Compliance as amfori BSCI representative. Facility management has not given to him budgeting power and decision-making capability to implement BSCI code of conduct in this facility. Moreover, he didn't receive training on amfori BSCI new requirements and yet to go through the BSCI system manual to have comprehensive knowledge of BSCI expectation and proper implementation. Note: As the facility management has appointed a person to ensure monitor BSCI values and principles are followed, so partial rating is given in this section.
- একজন ম্যানেজমেন্ট প্রতিনিধি কারখানা কর্তৃক নিযুক্ত করা হয়েছে কিন্তু অফিস অর্ডার এ বাজেটের পাসের ক্ষমতার কথা পরিস্কারভাবে বলা নাই এবং তার বি এস সি আই সম্পর্কে ধারণা ভালো ছিল ছিল না।
- 1.3 -** In accordance with BSCI Performance Area (Social Management System and Cascade Effect) No. 1.3 (Is there satisfactory evidence that the auditee has a good overview of the significant business partners and their level of alignment with the BSCI Code of Conduct?): Finding (a) Facility management has not been prepared supply chain mapping for all sub-suppliers and sub-contractors so auditor could not identify factories in listed all sub-suppliers and sub-contractors. Finding (b): BSCI Code of Conduct and Terms of Implementation has not communicated with all the sub-suppliers. Finding (c): Facility management has not monitored social performance their suppliers as per BSCI code of conduct. Finding (d): There is no proper procedure to handle the complaint raised by the business partners. Finding (e): Facility management was not updated all suppliers of the facility. Note: Facility has documented partial information for business partners and has a policy and procedure for supplier selection, so partial rating is given in this section.
- কারখানার কর্তৃপক্ষ সব সাপ্লাইয়ারের কে উক্ত ম্যাপিং এর আওতায় আনা হয় নি। বিএস সি আই কোড অফ কন্ডাক্ট ও এর চাহিদা সমূহ কারখানার ঠিকাদার দের সাথে যোগাযোগ করা হয়না। কারখানা কর্তৃপক্ষ সব সাপ্লাইয়ারদের উপর তদারকি করা হয় নি। কারখানা কর্তৃপক্ষ ব্যবসায়ী সহযোগীদের অভিযুক্ত পদ্ধতি করে নি। ম্যাপিং অনুযায়ী সাপ্লাইয়ারদের প্ল্যাটফর্ম এ আপডেট করে নাই।

<u>Remarks from Auditee</u>	
Performance Area 2 : Workers Involvement and Protection	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: B	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: B	Deadline date:30/04/2020
<u>Good practices</u>	
None Observed	
<u>Areas of improvement</u>	
<p>Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-</p> <p>2.2 - In accordance with BSCI Performance Area (Workers Involvement and Protection) No. 2.2: (Is there satisfactory evidence that the auditee defines long-term goals for protecting workers in line with the aspirations of the BSCI Code of Conduct?): Finding: It was noted that facility has established vision, mission and long-term goal but it was not step-by-step approach toward sustainable improvement according to BSCI code of conduct. Note: The facility has own vision, mission and long-term goal, so the answer of this question has been given as partially. কারণনা কর্তৃপক্ষ বিএস সি আই কোড অফ কন্ডাক্ট এর উপর ভিত্তি করে কোনো ভিশন, মিশন এবং দীর্ঘ মেয়াদি পরিকল্পনা করে নি।</p> <p>2.5 - In accordance with BSCI Performance Area (Workers Involvement and Protection) No. 2.5: (Is there satisfactory evidence that the auditee has established, or participates in, an effective operational-level grievance mechanism for individuals and communities?): Finding: The facility has mechanism to handle employee's grievance. But grievance mechanism of the facility was not including responsible person, potential conflict of interest defines, timeline to address, process of Appeal, regular survey, etc. অভিযোগ এর পদ্ধতিতে কিছু বিষয় যুক্ত করতে হবে।</p>	
<u>Remarks from Auditee</u>	
Performance Area 3 : The rights of Freedom of Association and Collective Bargaining	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:
<u>Good practices</u>	
<u>Areas of improvement</u>	
None Observed	
<u>Remarks from Auditee</u>	

Performance Area 4 : No Discrimination	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: C	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: C	
Deadline date:30/04/2020	
<u>Good practices</u>	
<u>Areas of improvement</u>	
Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-	
<p>4.1 - In accordance with BSCI Performance Area (No Discrimination) No. 4.1: (Is there satisfactory evidence that the auditee takes the necessary measures to avoid or eradicate discrimination in the workplace?) Finding: It was noted that facility did not conduct any internal assessment on the most frequent areas used for discrimination as well as the most common activities through which discrimination may occur and did not identify the root cause of discriminatory behaviors. Note, as facility has a discrimination policy, so partial rating has been given on this section.</p> <p>কারখানা কর্তৃপক্ষ শ্রমিকদের জন্য বৈষম্যমূলক নীতি তৈরি করেছে কিন্তু বৈষম্যের জন্য ব্যবহৃত সবচেয়ে ঘন ঘন ভিত্তি হিসেবে অভ্যন্তরীণ মূল্যায়নের পাশাপাশি সর্বাধিক প্রচলিত কার্যকলাপগুলি যার মাধ্যমে বৈষম্য ঘটতে পারে এবং বৈষম্যমূলক আচরণগুলির মূল কারণকে সনাক্ত করে নি</p> <p>4.2 - In accordance with BSCI Performance Area (No Discrimination) No. 4.2: (Is there satisfactory evidence that the auditee takes the necessary preventative and/or remedial measures to ensure workers are not disciplined, dismissed or otherwise discriminated against because of their complaints against infringements of their rights?) Finding: It was noted that the facility management did not conduct periodic satisfaction surveys on the grievance mechanism, harassment, discrimination etc. to their workers. Note: Facility has a grievance policy and procedure, so partial rating is given in this section.</p> <p>কারখানার শ্রমিকদের অভিযোগ পদ্ধতি, বৈষম্য ও হয়রানি বন্ধের পদ্ধতির উপর শ্রমিকরা সন্তুষ্ট কি না, সেটার উপর কোনো জরিপ করা হয় নাই।</p>	
Remarks from Auditee	
Performance Area 5 : Fair Remuneration	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	
Deadline date:	
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	
Deadline date:30/04/2020	
<u>Good practices</u>	
<u>Areas of improvement</u>	
The main auditee exceeds expectations with respect to this principle because; • Working facility for any disable person as currently nearly 1000 disable persons working in the facility. • Monthly donation (TK. 4000.00) paid without work to 123 disable persons. • Monthly allowance TK. 1077.00 to 2971.00 for all disable workers. • Full treatment cost with salary pay for Cancer patient. (Without work). • Monthly salary paid for his/her nominees those employees died during employment. (Normal death)	
Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-	
<p>5.4 - In accordance with BSCI Performance Area (Fair Remuneration) No. 5.4: (Is there satisfactory evidence that the auditee provides sufficient remuneration that allows workers to meet a decent standard of living?) Finding: It was noted that still the facility did not estimate the living standard in the region calculating their living wage to determine a potential gap between present local minimum wage and living wage and so no action plan is in place to fill the gaps. Note: As only 60% of the workforces meet their decent standard of living, so partial rating is given in this section.</p> <p>কারখানার অঞ্চলের জন্য জীবন ধারণের মজুরি কারখানা ব্যবস্থাপক দ্বারা নির্ণিত না এবং ন্যূনতম মজুরি ও জীবন ধারণের মজুরির মধ্যে পার্থক্য কমানো নিয়ে কোন উদ্যোগ নেই।</p>	
Remarks from Auditee	

Performance Area 6 : Decent Working Hours	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:
<u>Good practices</u>	
<u>Areas of improvement</u> None Observed	
<u>Remarks from Auditee</u>	

Performance Area 7 : Occupational Health and Safety

1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A

Deadline date:30/09/2019

GOOD PRACTICES:

None Observed

AREAS OF IMPROVEMENT:

Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-

- 7.6 -** Follow-up audit was conducted on 30 July 2019. Status: Partially Corrected. Finding: During this follow-up audit, it was noted that; 1) face mask was using by all workers of knitting section about still approximately 40% overlock machine operators of sewing section, all printing section and gray fabric workers were not using face mask during working time. 2) Required hand glove was using by all workers in cutting section and but all workers in dyeing and printing section workers were not using hand gloves. 3) Still foot protective shoe was not using by all workers in dyeing section. 4) Still ear plug was not using by all the workers in knitting section. Note: As other workers were found used Personal Protective Equipment during work in different section and facility has given PPE to all employees that's why partial rating has been chosen for this question.

এখনো বিভিন্ন সেকশনের কিছু শ্রমিক কাজের সময় ব্যক্তিগত প্রতিরক্ষামূলক সরঞ্জাম ব্যবহার করছিলেন না।

- 7.11 -** Follow-up audit was conducted on 30 July 2019. Status: Partially Corrected. During this follow-up audit, it was noted that still approved layout plan was found mismatched with actual floor layout in shed-1 as follows: - At ground floor in finishing section, the approved layout plan shows finishing section but in actual floor layout it was found printing area at North-East side. - At mezzanine-1 (middle of the shed) floor, the approved layout plan shows dyeing finishing area but in actual floor layout it was found printing area. However, facility has applied for updated layout on 7 July 2019 to concern authority. New finding: In accordance with City Corporation Taxation Rules, 1983, Section: 44 (1): No person shall carry on or maintain within the local limits of the City Corporation, either by himself or by agent, any such profession, trade or calling as specified in the Model Tax Schedules, without taking out a license from the City Corporation which shall be renewable annually. It was noted that trade license of the factory was found expired from 01 July 2019. Note: As the actual floor layout of other areas in the factory was found matched with the approved layout plan and other licenses and building approval were found valid, so partial rating has been given in this section.

এখনো ফ্লোর লেআউট এ কিছুটা অমিল পাওয়া গিয়েছে। ট্রেড লাইসেন্স এর মেয়াদ শেষ হয়ে গিয়েছে।

- 7.13 -** Follow-up audit was conducted on 30 July 2019. Status: Corrected. During this follow-up audit; 1) It was noted that no bare electrical cable was found in the facility. 2) Facility has arranged electrical lock out device for all types of circuit breakers in substation.

- 7.16 -** Follow-up audit was conducted on 30 July 2019. Status: Corrected. During this follow-up audit, it was noted that all posted evacuation plan was found updated with actual floor layout in all areas of the facility.

- 7.17 -** Follow-up audit was conducted on 30 July 2019. Status: Partially Corrected. During this follow-up audit, it was noted that; 1) Still eye guard was found displaced from its position with approximately 50% of over lock and flat lock machine; needle guard was found displaced from its position with approximately 20% of sewing machine in sewing section located ground floor of facility building. 2) Facility does not have 1st class boiler operator as facility's boilers heating capacity was found more than 1000 square feet. However, facility has 06 boiler operators those were license as 2nd class operator. Note: As the facility had other machine guards in place and facility has 06 number of 2nd class licensed boiler operators to operate boilers, so partial rating is given in this section.

এখনো কিছু সেলাই মেশিনের সাথে নিউল গার্ড এবং আই গার্ড সঠিক জায়গায় পাওয়া যায়নি। কারখানাতে কোনো প্রথম শ্রেণীর বয়লার অপারেটর নেই।

- 7.19 -** Follow-up audit was conducted on 30 July 2019. Status: Corrected. During this follow-up audit, it was noted facility management has given training to the respective employees regarding trauma or serious illness procedure. Last training has been given on 18 July 2019 and participated 20 employees.

- 7.20 -** Follow-up audit was conducted on 30 July 2019. Status: Corrected. During this follow-up audit, it was noted that facility has installed six drinking water point beside the entrance of production floor of main shed 01 which is easily accessible and suitable place for the employees and all workers were collecting their drinking water from newly installed drinking water point.

Remarks from Auditee:

Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: D

Deadline date:30/04/2020

Good practices

None Observed

Areas of improvement

Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-

- 7.6 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No. 7.6: Is there satisfactory evidence that the auditee enforces the use of Personal Protective Equipment in conjunction with other facility controls and safety systems? And in Bangladesh Labour Rules 2015, Rule 67(2): (In addition to the arrangement of safety and health protection measures mentioned in Sub-section (1), the concerned manufacturing institute must provide necessary equipments, including safety shoes, helmets, goggles, masks, hand gloves, ear muffs, ear plugs, waist belts, aprons etc. and arrange training programs for the workers in using these materials and ensure their usage.)

Findings: It was noted that, 1) Face mask was not used by approximately 80% workers in knitting and printing sections and approximately 60% workers in gray fabric area. 2) Required hand gloves was not used by 01 out of 05 workers in cutting section and approximately 60% workers in dyeing and printing section. 3) Required foot protective shoe was not used by approximately 60% workers in dyeing section. 4) Required ear plug was not used by all the workers in knitting section. Note: As other workers was found used Personal Protective Equipment during work in different section and facility has given PPE to all employees that's why partial rating has been chosen for this question.

বিভিন্ন সেকশনের কিছু শ্রমিক কাজের সময় ব্যক্তিগত প্রতিরক্ষামূলক সরঞ্জাম ব্যবহার করছিলেন না।

- 7.11 -** In accordance with BSCI Performance Area (Occupational Health & Safety) No. 7.11 (Is there satisfactory evidence that the auditee confirms that the equipment and buildings used for production are stable and safe?) and Bangladesh Labour Rules 2015, no. 353 (Without written permission of the inspector general, no change in any approved layout plan may be brought) Findings: It was noted that, approved layout plan was found

mismatched with actual floor layout in shed-1 as follows: - At ground floor in finishing section, the approved layout plan shows finishing section but in actual floor layout it was found printing area at North-East side. - At mezzanine-1 (middle of the shed) floor, the approved layout plan shows dyeing finishing area but in actual floor layout it was found printing area. Note: As the actual floor layout of other areas in the factory was found matched with the approved layout plan, so partial rating has been given in this section.

ক্লোর লেআউট এ কিছুটা অমিল পাওয়া গিয়েছে।

- 7.13 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No. 7.08 (Is there satisfactory evidence that the auditee has developed and implemented accident and emergency procedures?) and Bangladesh electricity rules 1937, rule 49 (No live part of the machine/ equipment shall be exposed): Findings: It was noted that, 1)One pair bare electrical cable was inserted into one socket observed in dyeing section located at ground floor of facility building and another was found connected with electrical distribution board located at 1st mezzanine floor of facility building (beside CAD room). These cables were laid on the floor area. 2)Electrical lock out device was not available for all types of circuit breakers in substation. Note: As no bared / loose electrical wiring was found in other areas at the factory premises, so partial rating has been given in this section.

ক্লোর এ আগল্য ইলেকট্রিক তার পাওয়া গিয়েছে। সার্কিট ব্রেকার এর জন্য ইলেক্ট্রিক্যাল লক আউট ডিভাইস পাওয়া যায়নি।

- 7.16 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No.7.16(Is there satisfactory evidence that the auditee ensures evacuations plans meet legal requirements and that these plans are posted in relevant places so workers can see and understand them? and Bangladesh Labor Rules 2015 ,55 (8): (The arrangement should be made to show evacuation plan of exit in one or more places easily visible in each floor of each floor of the factory.)

Findings: It was noted that, evacuation plan was found mismatched with actual floor layout as follows: - At finishing section, the posted evacuation plan shows 06 and 03 aisles way by East-West and South-East direction respectively but in actual floor layout it was found 07 and 02 respectively. - At sewing section, the posted evacuation plan shows 16 aisles way but in actual floor layout it was found 14. - At cutting section, the posted evacuation plan shows 16 aisles way but in actual floor layout it was found 12. - 01 aisles way located at North side of knitting section was not included on the posted evacuation plan. Note: As facility has posted evacuation plan, employees were know their way out in case of emergency and the plan for other areas in the facility was found correct, so partial rating has been given in this section.

কিছু এলাকায় ইভাকুয়েশন প্ল্যান মিচ-ম্যাচড পাওয়া যায়।

- 7.17 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No. 7.17 (Is there satisfactory evidence that the auditee ensures adequate safeguards for any machine part, function, or process which may cause injury to workers?); Bangladesh Labor Law 2006, Section 63(d) (3): (d) unless the following machinery are in such position or of such construction as to be safe to every person employed in the establishment as they would be if they were securely fenced (3) every dangerous part of any machinery) and Boiler attendant rules 1953, Section 8: (First class certificate holder can attend any sorts of boiler of any capacity. 2nd class boiler operator can attend the boiler whose boiler rating/heating capacity is less than 1000 square feet). Findings: It was noted that, 1) eye guard was found displaced from its position with approximately 30% of over lock and flat lock machine; needle guard was found displaced from its position with approximately 30% of sewing machine in sewing section located ground floor of facility building. 2) Facility does not have 1st class boiler operator as facility's boilers heating capacity was found more than 1000 square feet. However, facility has 06 boiler operators those were license as 2nd class operator. Note: As the facility had other machine guards in place and facility has 06 number of 2nd class licensed boiler operators to operate boilers, so partial rating is given in this section.

কিছু সেলাই মেশিনের সাথে নিউল গার্ড এবং আই গার্ড সঠিক জায়গায় পাওয়া যায়নি। কারখানাতে কোনো প্রথম শ্রেণীর বয়লার অপারেটর নেই।

- 7.19 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No. 7.17 (Is there satisfactory evidence that the auditee has emergency procedures, in writing, to deal with cases of trauma or serious illness including for when the patient has to be transferred to an appropriate medical facility?) Finding: It was noted that facility management has not given training to the respective employees regarding trauma or serious illness procedure. Note: As facility has developed trauma or serious illness procedure, so partial rating has been given on this section.

ট্রমা নিয়ে কর্মীদের প্রশিক্ষণ দেয়া হয় নি।

- 7.20 -** In accordance with BSCI Performance Area (Occupational Health and Safety) No. 7.20: (Is there satisfactory evidence that the auditee provides workers with potable water at all times) and Bangladesh Labour Rules 2015, Rule 50(1): (1. As per the section 58, there will be provision of pure drinking water in easily accessible and suitable place for all workers in each firm and the water should be stored in a hygienic way). Finding: It was noted that, facility has not given drinking water point inside the production floor. Noted that approximately 2250 workers were working in the areas during audit day. Workers are collecting their drinking water from the canteen and dining shed located beside the production building which was not easily accessible and suitable place. Moreover, it was observed that few of workers were collecting their drinking water from the water tap of washing adjacent to toilet area where there was no sign to identify which is not potable water. Note: As facility has given drinking water point for the workers in canteen area, so partial rating is given in this section.

পান করার জন্য বিশুদ্ধ পানি সরবরাহের ব্যবস্থা সহজগম্য এবং সুবিধাজনক স্থানে ছিলোনা। কিছু শ্রমিককে টয়লেট এর পাশের ওয়াশিং ট্যাপ থেকে পান করার জন্য পানি সংগ্রহ করতে দেখা যায়।

Remarks from Auditee

Performance Area 8 : No Child Labour	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:30/04/2020
<u>Good practices</u>	
None Observed	
<u>Areas of improvement</u>	
<p>Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-</p> <p>8.4 - In accordance with BSCI Performance Area (No Child Labour) No. 8.4 (Is there satisfactory evidence that the auditee has adequate and remedial policies and procedures to provide for further protection in case children are found to be working?):</p> <p>Finding: It was noted that facility management has developed child labour remediation policy which are not appropriate as these are conflicting with young worker policy. In the child remediation policy they included young labour policy so that it is confusing whether it was child remediation policy or young labour policy. Note: As the facility has developed and maintains policies and procedures for child labour and young labour, so partial rating is given in this section.</p> <p>কারখানা কর্তৃপক্ষ শিশু নির্বাসন নীতিমালা কিশোর নীতিমালার সাথে কনফ্লিক্ট করে।</p>	
<u>Remarks from Auditee</u>	
Performance Area 9 : Special protection for young workers	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:
<u>Good practices</u>	
<u>Areas of improvement</u>	
None Observed	
<u>Remarks from Auditee</u>	

Performance Area 10 : No Precarious Employment	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:30/04/2020
<u>Good practices</u>	
None Observed	
<u>Areas of improvement</u>	
<p>Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-</p> <p>10.2 - In accordance with BSCI Performance Area (No Precarious Employment) No. 10.2: (Is there satisfactory evidence that the auditee engages workers based on recognized and documented employment relationships?). Bangladesh Labor Rules 2015, Section 19(5): (Each owner will provide identity card with the photograph to each worker working in the firm at the costs of the owner as per Form-6.) and Bangladesh Labor Rules-2015, Rule-118: (Following the description of Form-41, every worker must nominate a person who can receive undisbursed payment and other dues in the absence of him/her, at the time of his/her employment in the workforce). Finding: It was noted that, 1) Few required information was not updated in the employees Identity Card e.g. Blood group, Nature of work, Expiry date of Identity card, Emergency contact number, National ID number, Permanent address and Sign of worker. 2) Few required information was not updated in the employee's nominee form e.g. Signature of the nominated person with date, Photograph of nominated person was not attested by the worker, Portion payable to the nominee, Age of nominated person. Note: As the facility management has provided identity card to all their employees therefore this question has been answered as partial.</p> <p>শ্রমিকদের আইডি কার্ড ও নমিনী ফর্ম আইন অনুযায়ী হালনাগাদ ছিল না।</p>	
Remarks from Auditee	
Performance Area 11 : No Bonded Labour	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:
<u>Good practices</u>	
<u>Areas of improvement</u>	
None Observed	
Remarks from Auditee	

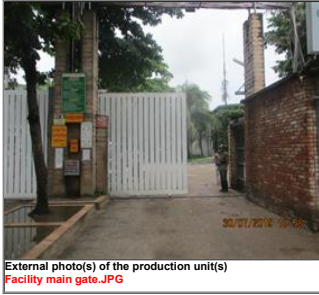
Performance Area 12 : Protection of the Environment	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:30/04/2020
<u>Good practices</u>	
None Observed	
<u>Areas of improvement</u>	
<p>Based on satisfactory evidence it was noted that the main auditee partially respects this principle as-</p> <p>12.5 - In accordance with BSCI Performance Area (Protection of the Environment) No. 12.5: (Is there satisfactory evidence that water is managed in a way that respects the environment, particularly but not limited to preserving local water sources?). It was noted that; Findings (a): There is no monitoring system to the use of water quantity. Finding (b): It was noted that no risk assessment conducted on water waste reduction. Finding (c): It was noted that no awareness training conducted to the employees for water waste reduction. Finding (d): It was noted that facility did not have any procedure to prevent water lose and have a system to preserve natural water resource (recycling practices, preserve rain water etc.) to ensure better environment in the premises. However, facility management is planning to do so. Note: As facility has environment protection policy, so partial rating is given in this section.</p> <p>ক) পানির ব্যবহার পরিমাপ করার কোন পদ্ধতি অবলম্বন করে নাই। খ) কারখানা কর্তৃপক্ষ পানির অপচয় রোধে রিস্ক এসেসমেন্ট করে নাই। গ) কারখানা কর্তৃপক্ষ শ্রমিকদের পানি বেবহার এবং এর অপচয় রোধের জন্য কোনো প্রশিক্ষণ দেয় না ঘ) কারখানা কর্তৃপক্ষ বৃষ্টির পানি সংরক্ষণের কোনো ব্যবস্থা করে নাই।</p>	
Remarks from Auditee	
Performance Area 13 : Ethical Business Behaviour	
1- Followup Audit [Audit Id - 158599] Audit Date: 30/07/2019 PA Score: A	Deadline date:
GOOD PRACTICES: None Observed	
AREAS OF IMPROVEMENT: As per BSCI Member's instruction, only on PA 1 and PA 7 is audited in this follow-up audit. So, kept the answer of questions same as previous.	
Remarks from Auditee:	
Full Audit [Audit Id - 152141] Audit Date: 22/05/2019 PA Score: A	Deadline date:
<u>Good practices</u>	
<u>Areas of improvement</u>	
None Observed	
Remarks from Auditee	

Summary



Audit Type	Date	Audit Id	PA1	PA2	PA3	PA4	PA5	PA6	PA7	PA8	PA9	PA10	PA11	PA12	PA13	Overall Rating
Follow-up Audit	30/07/2019	158599	C	B	A	C	A	A	A	A	A	A	A	A	A	B
Full Audit	22/05/2019	152141	D	B	A	C	A	A	D	A	A	A	A	A	A	C

Producer Photos



External photo(s) of the production unit(s)
Facility main gate.JPG



Photo of the canteen (if applicable)
Canteen.JPG



Photo of the sanitary facilities
Grievance box.JPG



External photo(s) of the production unit(s)
Facility name plate.JPG



Photo of the canteen (if applicable)
Workers dining area.JPG



Photo of the sanitary facilities
Toilet area.JPG



External photo(s) of the production unit(s)
Production shed.JPG



Photo of the code of conduct on display
amfori BSCI CoC posted.JPG



Photo of the inside of the main production hall
Boiler room.JPG



External photo(s) of the production unit(s)
Security post.JPG

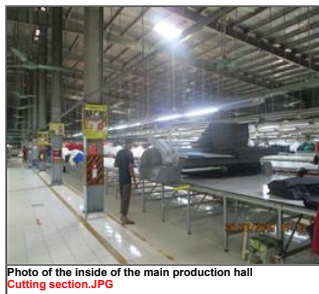


Photo of the inside of the main production hall
Cutting section.JPG



Photo of the inside of the main production hall
Generator room.JPG



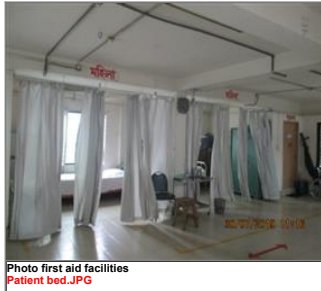
Photo first aid facilities
Doctor room.JPG



Photo of the inside of the main production hall
Dyeing finishing section.JPG



Photo of the inside of the main production hall
Notice board.JPG







SMETA Corrective Action Plan Report (CAPR)

Version 6.1



Audit Details

Sedex Company Reference: (only available on Sedex System)	ZC: 405690911	Sedex Site Reference: (only available on Sedex System)	ZS: 405695135
Business name (Company name):	Keya Cosmetics Ltd (Knit Composite Division)		
Site name:	Keya Cosmetics Ltd (Knit Composite Division)		
Site address: (Please include full address)	Jarun, Konabari, Gazipur Sadar, Gazipur	Country:	Bangladesh
Site contact and job title:	Md. Zahangir Alam- Asst. Manager (Compliance)		
Site phone:	+88029297779	Site e-mail:	compliance@key-bd.com
SMETA Audit Pillars:	<input checked="" type="checkbox"/> Labour Standards	<input checked="" type="checkbox"/> Health & Safety (plus Environment 2-Pillar)	<input checked="" type="checkbox"/> Environment 4-pillar <input checked="" type="checkbox"/> Business Ethics
Date of Audit:	August 27-28, 2019		

Audit Company Name & Logo:

CSR Solutions Limited



Report Owner (payer):

Keya Cosmetics Ltd.(Knit Composite Division)

Audit Conducted By

Affiliate Audit Company	<input checked="" type="checkbox"/>	Purchaser	<input type="checkbox"/>	Retailer	<input type="checkbox"/>
Brand owner	<input type="checkbox"/>	NGO	<input type="checkbox"/>	Trade Union	<input type="checkbox"/>
Multi-stakeholder	<input type="checkbox"/>	Combined Audit (select all that apply)			

Audit Content:

(1) A SMETA audit was conducted which included some or all of Labour Standards, Health & Safety, Environment and Business Ethics. The SMETA Best Practice Version 6.1 (March 2019) was applied. The scope of workers included all types at the site e.g. direct employees, agency workers, workers employed by service providers and workers provided by other contractors. Any deviations from the SMETA Methodology are stated (with reasons for deviation) in the SMETA Declaration.

(2) The audit scope was against the following reference documents

2-Pillar SMETA Audit

- ETI Base Code
- SMETA Additions
 - Universal rights covering UNGP
 - Management systems and code implementation,
 - Responsible Recruitment
 - Entitlement to Work & Immigration,
 - Sub-Contracting and Home working,

4-Pillar SMETA

- 2-Pillar requirements plus
- Additional Pillar assessment of Environment
- Additional Pillar assessment of Business Ethics
- The Customer's Supplier Code (Appendix 1)

(3) Where appropriate non-compliances were raised against the ETI code / SMETA Additions & local law and recorded as non-compliances on both the audit report, CAPR and on Sedex.

(4) Any Non-Compliance against customer code shall not be uploaded to Sedex. However, in the CAPR these 'Variances in compliance between ETI code / SMETA Additions/ local law and customer code' shall be noted in the observations section of the CAPR.

SMETA Declaration

I declare that the audit underpinning the following report was conducted in accordance with SMETA Best Practice Guidance and SMETA Measurement Criteria.

- (1) Where appropriate non-compliances were raised against the ETI code / SMETA Additions & local law and recorded as non-compliances on both the audit report, CAPR and on Sedex.
- (2) Any Non-Compliance against customer code alone shall not be uploaded to Sedex. However, in the CAPR these 'Variances in compliance between ETI code / SMETA Additions/ local law and customer code' shall be noted in the observations section of the CAPR.

Any exceptions to this must be recorded here (e.g. different sample size):

Auditor Team (s) (please list all including all interviewers): ATM Anisuzzaman, Kabirul Alam & Jahangir Alam

Lead auditor: ATM Anisuzzaman

APSCA number: 21703461

Lead auditor APSCA status:

Team auditor: Kabirul Alam & Jahangir Alam APSCA number: 21703462 & 21701353

Interviewers: ATM Anisuzzaman, Kabirul Alam & Jahangir Alam APSCA number: 21703461, 21703462 & 21701353

Report writer: ATM Anisuzzaman

Report reviewer:

Date of declaration: August 28, 2019

Note: The focus of this ethical audit is on the ETI Base Code and local law. The additional elements will not be audited in such depth or scope, but the audit process will still highlight any specific issues.

This report provides a summary of the findings and other applicable information found/gathered during the social audit conducted on the above date only and does not officially confirm or certify compliance with any legal regulations or industry standards. The social audit process requires that information be gathered and considered from records review, worker interviews, management interviews and visual observation. More information is gathered during the social audit process than is provided here. The audit process is a sampling exercise only and does not guarantee that the audited site prior, during or post-audit, are in full compliance with the Code being audited against. The provisions of this Code constitute minimum and not maximum standards and this Code should not be used to prevent companies from exceeding these standards. Companies applying this Code are expected to comply with national and other applicable laws and where the provisions of law and this Code address the same subject, to apply that provision which affords the greater protection. The ownership of this report remains with the party who has paid for the audit. Release permission must be provided by the owner prior to release to any third parties.

Audit Parameters

Audit Parameters			
A: Time in and time out	A1: Day 1 Time in: 09:00 AM A2: Day 1 Time out: 06:00 PM	A3: Day 2 Time in: 09:00 AM A4: Day 2 Time out: 05:30 PM	Day 3 Time in: Day 3 Time out:
B: Number of auditor days used:	5 man days (3 auditors* 1 day + 2 auditors* 1 day)		
C: Audit type:	<input checked="" type="checkbox"/> Full Initial <input type="checkbox"/> Periodic <input type="checkbox"/> Full Follow-up <input type="checkbox"/> Partial Follow-Up <input type="checkbox"/> Partial Other If other, please define:		
D: Was the audit announced?	<input type="checkbox"/> Announced <input checked="" type="checkbox"/> Semi – announced: Window detail: 4 weeks <input type="checkbox"/> Unannounced		
E: Was the Sedex SAQ available for review?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, why not		
F: Any conflicting information SAQ/Pre-Audit Info to Audit findings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes , please capture detail in appropriate audit by clause		
G: Who signed and agreed CAPR (Name and job title)	Md. Zahangir Alam- Asst. Manager(Compliance)		
H: Is further information available (if yes, please contact audit company for details)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
I: Previous audit date:	8 th January, 2019		
J: Previous audit type:	Periodic		
K: Were any previous audits reviewed for this audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

Audit attendance	Management	Worker Representatives	
	Senior management	Worker Committee representatives	Union representatives
A: Present at the opening meeting?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

B: Present at the audit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C: Present at the closing meeting?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
D: If Worker Representatives were not present please explain reasons why (only complete if no worker reps present)	N/A		
E: If Union Representatives were not present please explain reasons why: (only complete if no union reps present)	No union was formed by the factory. Union formation is not mandatory by local law.		

Guidance

The Corrective Action Plan Report summarises the site audit findings and a corrective, and preventative action plan that both the auditor and the site manager believe is reasonable to ensure conformity with the ETI Base Code, Local Laws and additional audited requirements. After the initial audit, the form is used to re-record actions taken and to categorise the status of the non-compliances.

N.B. observations and good practice examples should be pointed out at the closing meeting as well as discussing non-compliances and corrective actions.

To ensure that good practice examples are highlighted to the supplier and to give a more 'balanced' audit a section to record these has been provided on the CAPR document (see following pages) which will remain with the supplier. They will be further confirmed on receipt of the audit report.

Root cause (see column 4)

Root cause refers to the specific procedure or lack of procedure which caused the issue to arise. Before a corrective action can sustainably rectify the situation, it is important to find out the real cause of the non-compliance and whether a system change is necessary to ensure the issue will not arise again in the future.

See SMETA BPG Chapter 7 'Audit Execution' for more explanation of "root cause".

Next Steps:

1. The site shall request, via Sedex, that the audit body upload the audit report, non-compliances, observations and good examples. If you have not already received instructions on how to do this then please visit the web site www.sedexglobal.com.
2. Sites shall action its non-compliances and document its progress via Sedex.
3. Once the site has effectively progressed through its actions then it shall request via Sedex that the audit body verify its actions. Please visit www.sedexglobal.com web site for information on how to do this.
4. The audit body shall verify corrective actions taken by the site by either a "Desk-Top" review process via Sedex or by Follow-up Audit (see point 5).
5. Some non-compliances that cannot be closed off by "Desk-Top" review may need to be closed off via a "1 Day Follow Up Audit" charged at normal fee rates. If this is the case, then the site will be notified after its submission of documentary evidence relating to that non-compliance. Any follow-up audit must take place within twelve months of the initial audit and the information from the initial audit must be available for sign off of corrective action.
6. For changes to wages and hours to be correctly verified it will normally require a follow up site visit. Auditors will generally require to see a minimum of two months wages and hours records, showing new rates in order to confirm changes (note some clients may ask for a longer period, if in doubt please check with the client).

Corrective Action Plan

Corrective Action Plan – non-compliances									
Non-Compliance Number The reference number of the non-compliance from the Audit Report, for example, Discrimination No.7	New or Carried Over Is this a new non-compliance identified at the follow-up or one carried over (C) that is still outstanding	Details of Non-Compliance Details of Non-Compliance	Root cause (completed by the site)	Preventative and Corrective Actions Details of actions to be taken to clear non-compliance, and the system change to prevent re-occurrence (agreed between site and auditor)	Timescale (Immediate, 30, 60, 90, 180, 365)	Verification Method Desktop / Follow-Up [D/F]	Agreed by Management and Name of Responsible Person: Note if management agree to the non-compliance, and document name of responsible person	Verification Evidence and Comments Details on corrective action evidence	Status Open/Closed or comment
01. <u>Safety and Hygienic Conditions</u>	New	Noted during facility visit that 30% workers of cutting section were not using face mask and 20% workers of dyeing section were not using hand gloves and boots while working in production floor.	<input checked="" type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> Lack of workers <input type="checkbox"/> Other – please give details:	It is agreed by the facility management that they would confirm using of personal protective equipments by all workers.	30 days	Desk top	Yes- Md. Zahangir Alam-Asst. Manager(Compliance)		
02. <u>Safety and Hygienic Conditions</u>	New	Noted during facility visit that several over lock machines were found without eye protection guard.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> Lack of workers <input checked="" type="checkbox"/> Other – please give details: Lack of monitoring	It is agreed by the facility management that they would install machine guards in all machines.	30 days	Desk top	Yes- Md. Zahangir Alam-Asst. Manager(Compliance)		
03. <u>Safety and Hygienic Conditions</u>	New	Noted during facility visit that 2 out of 05 first aid boxes were found with insufficient first aid kits in production floor.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> Lack of workers <input checked="" type="checkbox"/> Other – please give details: Lack of	It is agreed by the facility management that they would keep sufficient first aid kits in first aid box.	30 days	Desk top	Yes- Md. Zahangir Alam-Asst. Manager(Compliance)		

			monitoring							
04. <u>Safety and Hygienic Conditions</u>	New	Noted during facility visit that several aisles marks were found faded in production floor.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Lack of initiative	It is agreed by the facility management that they would mark all aisles properly to use in case of emergency.	30 days	Desk top	Yes- Md. Zahangir Alam-Asst. Manager(Compliance)			


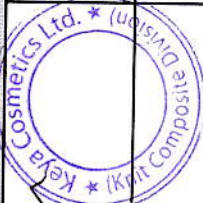

Corrective Action Plan – Observations									
Observation Number The reference number of the observation from the Audit Report, for example, Discrimination No.7	New or Carried Over Is this a new observation identified at the follow-up or one carried over (C) that is still outstanding	Details of Observation Details of Observation	Root cause (completed by the site)	Any improvement actions discussed (Not uploaded on to SEDEX)					
N/A	N/A	None observed	N/A	N/A					

Good examples	
Good example Number The reference number of the good example from the Audit Report, for example, Discrimination No.7	Any relevant Evidence and Comments
Details of good example noted	

01. <u>Living Wages and Benefits</u>	Facility is providing attendance bonus to their workers. All operators are getting BDT 1000 and helpers are getting BDT 200 as attendance bonus.	Salary sheet review
02. <u>Living Wages and Benefits</u>	Facility is providing free medical treatment to their workers. Facility has agreement with local medical centre. Workers can get free treatment from that medical centre if referred by factory management.	Documents review, worker and management interview

Confirmation

Please sign this document confirming that the above findings have been discussed with and understood by you: (site management)
If actual signatures are not possible in electronic versions, please state the name of the signatory in applicable boxes, as indicating the signature.

A: Site Representative Signature:	Md. Zahangir Alam	 	Title: Asst. Manager (Compliance)
B: Auditor Signature:	ATM Anisuzzaman		Date: 27-28/08/2019 Title: Lead Auditor Date: 27-28/08/2019
C: Please indicate below if you, the site management, dispute any of the findings. No need to complete D-E, if no disputes.			
D: I dispute the following numbered non-compliances:			
E: Signed: (If any entry in box D, please complete a signature on this line)			Title Date
F: Any other site Comments:			

Guidance on Root Cause

Explanation of the Root Cause Column

If a non-compliance is to be rectified by a corrective action which will also prevent the non-compliance re-occurring, it is necessary to consider whether a system change is required.

Understanding the root cause of the non-compliance is essential if a site is to prevent the issue re-occurring.

The root cause refers to the specific activity/ procedure or lack of activity /procedure which caused the non-compliance to arise. Before a corrective action can rectify the situation, it is important to find out the real cause of the non-compliance and whether a system change is necessary to ensure the issue will not arise again in the future.

Since this is a new addition, it is not a mandatory requirement to complete this column at this time. We hope to encourage auditors and sites to think about Root Causes and where they are able to agree, this column may be used to describe their discussion.

Some examples of finding a "root cause"

Example 1

Where excessive hours have been noted the real reason for these needs to be understood, whether due to production planning, bottle necks in the operation, insufficient training of operators, delays in receiving trims, etc.

Example 2

A non-compliance may be found where workers are not using PPE that has been provided to them. This could be the result of insufficient training for workers to understand the need for its use; a lack of follow-up by supervisors aligned to a proper set of factory rules or the fact that workers feel their productivity (and thus potential earnings) is affected by use of items such as metal gloves.

Example 3

A site uses fines to control unacceptable behaviour of workers.

International standards (and often local laws) may require that workers should not be fined for disciplinary reasons.

It may be difficult to stop fines immediately as the site rules may have been in place for some time, but to prevent the non-compliance re-occurring it will be necessary to make a system change.

The symptom is fines, but the root cause is a management system which may break the law. To prevent the problem re-occurring it will be necessary to make a system change for example the site could consider a system which rewards for good behaviour

Only by understanding the underlying cause can effective corrective actions be taken to ensure continuous compliance.

The site is encouraged to complete this section so as to indicate their understanding of the issues raised and the actions to be taken.



For more information visit: Sedexglobal.com

Your feedback on your experience of the SMETA audit you have observed is extremely valuable. It will help to make improvements to future versions.

You can leave feedback by following the appropriate link to our questionnaire:

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Click here for Auditors:

<https://www.surveymonkey.co.uk/r/BRTVCKP>