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Audit Requirements for Accredited Certification Bodies for the SA8000 Program

1. Revision History

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Version 4	Issued May 9, 2019	Annual Update to include minor clarifications and NEW Annual Surveillance, Working Hours, & Living Wage Criteria.	John Brookes and Jane Hwang
Version 4.1	Issued June 30, 2019	Clarifications after feedback comments to Version 4.0.	John Brookes and Jane Hwang
Version 4.2	Issued March 6, 2020	Feedback from Initial use of v4.1 and 2019 CB calibration meetings	John Brookes and Rochelle Zaid

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 2

Contents

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

2. Contents

- 1. Revision History 1
- 2. Contents 3
- 3. List of Tables & Figures 7
- 4. Foreword 9
- 5. Purpose 11
- 6. Scope Guidance 13
- 7. Acronyms and Definitions..... 15
 - 7.1 Acronyms..... 15
 - 7.2 Definitions 15
- 8. Reference Documents 22
 - 8.1 The Certification Standard & PIA 22
 - 8.2 Mandatory SAAS Procedures To Be Used By All CBs 22
 - 8.3 Mandatory Certification Guidance Documents 22
 - 8.4 Guidance For Management System Maturity 22
 - 8.5 Bibliography 22
- 9. General Principles..... 25
 - 9.1 Requirements..... 25
- 10. Scope of SA8000 Certification..... 28
 - 10.1 Requirements..... 28
- 11. SA8000 Certification Process Requirements 32
 - 11.1 General – (ISO/IEC 17021-1:2015 Clauses 9.1 – 9.9)..... 32
 - 11.2 Audit Disruptions 36
- 12. General Audit Planning (Excluding Audit Effort – See Sections 20 & 21 below)..... 38
 - 12.1 Audit Plans – (ISO/IEC 17021-1:2015 Clause 9.2)..... 38
- 13. Pre-Assessment and Initial Research 41
 - 13.1 Pre-Assessment Audit..... 41
 - 13.2 Initial Research 41
- 14. Stage 1 Audits 44
 - 14.1 Stage 1 Assessment 44
 - 14.2 Stage 1 Audit Preparation..... 46
 - 14.3 Stage 1 Audit Outcomes..... 46
- 15. Stage 2 Audits 49
 - 15.1 General Requirements – (ISO/IEC 17021-1:2015 Clauses 9.3.1.3)..... 49
 - 15.2 General Audit Steps 50
 - 15.3 Opening Meeting – (ISO/IEC 17021-1:2015 Clauses 9.4.2) 50
 - 15.4 Organisation Overview Tour 51
 - 15.5 Organisation Health & Safety & Working Conditions Tour (OHS) 52
 - 15.6 Confirmation of Documents & Records for Review..... 52

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 15.7 Management System Review 53
- 15.8 Interviews..... 55
- 15.9 Closing Meeting – (ISO/IEC 17021-1:2015 Clauses 9.4.7)..... 58
- 16. Surveillance Audits..... 61
 - 16.1 General – (ISO/IEC 17021-1:2015 Clauses 9.6.2) 61
 - 16.2 Surveillance Audits – Single Site 65
 - 16.3 Monitoring Certified Organisation Performance and Non-Conformity Trends..... 67
 - 16.4 Surveillance Audit Worker Interview and Record Review 67
- 17. Recertification Audits 70
 - 17.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.6.3) 70
- 18. Transfer Audits (ISO/IEC 17021-1:2015 Clauses 9.5.3.3) 73
 - 18.1 General Requirements 73
 - 18.2 Transfer requested when a CB is no longer accredited to perform SA8000 audits..... 74
- 19. Special Audits 77
 - 19.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.6.4) 77
- 20. Audit Days – Single Site..... 79
 - 20.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.1.4)..... 79
 - 20.2 Single Site Initial Certification Audit Effort 79
 - 20.3 INTENTIONALLY LEFT BLANK 83
 - 20.4 Initial Audit Days for CB’s First Certification in a New Country..... 83
 - 20.5 Single Site Surveillance Audit Effort..... 83
- 21. Multi-site Certification Audits 86
 - 21.1 Background and Context..... 86
 - 21.2 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.1.5) 86
 - 21.3 Applicability of SA8000 Multiple-Site Certification 89
 - 21.4 Manufacturing Multi-site Stage 1 and 2 Audit Effort – Head Office Audit 91
 - 21.5 Manufacturing Multi-site Stage 2 Audit Effort – Other Factories/Sites..... 91
 - 21.6 Manufacturing Multi-site Surveillance Effort – Head Office..... 92
 - 21.7 Manufacturing Multi-site Surveillance Effort – Other Factories/Sites..... 92
 - 21.8 Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Head Office Audit 94
 - 21.9 Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Sites..... 94
 - 21.10 Service, Farms and Plantations Multi-site Surveillance Audit Effort. 96
 - 21.11 Multi-site Recertification Audits – All Sectors 96
- 22. Non-Conformity Classification 98
 - 22.1 General - (ISO/IEC 17021-1:2015 Clauses 9.4.5; 9.4.9; 9.4.10) 98
 - 22.2 Non-Conformity Findings Classification 99
 - 22.3 Non-conformity Definitions..... 99
 - 22.4 Non-conformity Format..... 102
 - 22.5 Closure of Non-Conformities during Audits 103

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 22.6 Closure of Non-Conformities – Critical, Major and Minor N/C's..... 103
- 22.7 Closure of Time-Bound Non-Conformities..... 103
- 22.8 Nonconformities That Also Contravene Legal or Regulatory Requirements..... 104
- 23. Audit Reporting 107
 - 23.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.4.8)..... 107
 - 23.2 Audit Report Content..... 107
 - 23.3 Audit Report Review..... 108
- 24. Audit Records 111
 - 24.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.9.2)..... 111

Annexures

- Annex A - SA8000 Certificate Template 112
- Annex B - Working Hours 114
- Annex C - Living Wage 117

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 3

List of Tables & Figures

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

3. List of Tables & Figures

Table 1 – Mandatory Shift Pattern Audit Effort 34

Table 2 – Audit Plan Details..... 39

Table 3 – Objectives of a Stage 1 Audit 44

Table 4 – SA8000 Stage 1 Audit Steps 46

Table 5 – SA8000 Stage 2 Audit Steps 49

Table 6 – Initial (Stage 2) Audit – No. Of Records to Be Reviewed 53

Table 7 – Management System Elements..... 54

Table 8 – Photographs Required 54

Table 9 – Initial (Stage 2) Audit Number of Workers To Be Interviewed 57

Table 10 - Mandatory Items to Be Audited During Surveillance Audits..... 64

Table 11 – Targets & Objectives to Be Audited Each Surveillance Audit 65

Table 12 - Required Minimum Number of Worker Files to Be Reviewed Per Surveillance Audit..... 67

Table 13 - Surveillance Audit Minimum Number of Workers to Be Interviewed 68

Table 14 - Single Site Initial Certification Audit Effort in Days 80

Table 15 - Single Site Annual Surveillance On Site Audit Effort..... 84

Table 16 - Multi-Site Other Factories/Sites Minimum On-Site Initial Audit Effort..... 92

Table 17 - Multi-Site Other Factories/Sites Minimum On-Site Surveillance Audit Effort 93

Table 18 - Manufacturing Group Audit Effort Example..... 93

Table 19 - Manufacturing Group Records & Worker Interview Example..... 94

Table 20 - Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Sites..... 95

Table 21 - Example Of Service, Farms and Plantations Stage 2 Audit Effort..... 96

Table 22 - List Of The Only Allowable Time Bound N/C's 101

Table 23 - NC Response & Close-Out Timescale..... 102

Table 23a - Examples of Identified Legal or Regulatory Issues and Classifications of NC 104

Table 24 - Audit Report Content..... 108

Table 25 - Audit Records 111

Table 26 - Working Hours Levels Categorization..... 115

Figure 1 – Initial Audit Process 32

Figure 2 – Surveillance during the SA8000 Certification Cycle 61

Figure 3 – Annual Surveillance and Re-certification Audit Planning 62

Figure 4 – Multi-Site Surveillance and Re-certification Audit Planning 88

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 4

Foreword

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

4. Foreword

SA8000 is an international standard for improving working conditions around the world. It is based on the principles of thirteen international human rights conventions and is intended to help apply these norms to practical work-life situations and expands on the conventions of the ILO’s Declaration of Fundamental Principles of Rights at Work. The management system requirements of SA8000 move beyond a checklist approach, encouraging sustainable systemic changes in how a workplace is managed.

Once an organisation has implemented the necessary improvements and systemic changes, it can earn an accredited SA8000 certificate attesting to its conformance with SA8000. Accredited certification demonstrates good practice to consumers, buyers, companies, and other stakeholders interested in working conditions within that organisation. Maintaining and improving the systems put in place to achieve SA8000 certification is an ongoing continuous process and substantive and meaningful worker participation in this process is the best means to ensuring systemic change.

The SA8000 Standard was last revised and published in 2014. The contents of this audit requirements document is based upon input from Social Accountability International (SAI), and feedback from Certification Bodies (CBs), non-governmental organisations (NGOs), employers, buyers, Trade Unions, and other stakeholders as well as informed by SA8000 certification audits conducted by SAAS-accredited CBs and SAAS accreditation audits.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 5

Purpose

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

5. Purpose

This requirements document has been written collaboratively with SAI, at the request of SAI, and has been created for use by SAAS applicant and accredited Certification Bodies to reliably assure consistent application of the SA8000 audit requirements by its audit team members. These specifications have been created in order to:

- Establish SA8000 scheme-specific requirements that build upon the general accredited conformity assessment requirements found in implementation of ISO/IEC 17021-1:2015;
- Provide documentation to assure continuity and consistency of the SA8000 audit process and resulting certification; and
- Establish consistent and reliable SA8000 audit process requirements for accredited Certification Bodies to deliver SA8000 assessment activities in a robust and replicable manner.

Its primary purpose is to provide an infrastructure for consistent delivery of SA8000 certification audits and is used, along with Procedure 201A, Procedure 201B, and ISO/IEC 17021-1:2015, to provide criteria against which SAAS may evaluate and measure an applicant or accredited CB in delivering SA8000 assessment services.

SAAS has promulgated separate documents, Procedure 201A and 201B, which outline the structure, competence and certification process requirements for the management of SA8000 activities within the CB, as well as detailing the accreditation process and oversight by SAAS.

The term “SHALL” is used throughout this document to indicate those provisions that are mandatory. Requirements stated in this document SHALL be integrated into the procedures and processes of the CBs. This document SHALL be updated from time to time by SAAS after consultation with appropriate stakeholders and at the request of SAI and is subject to regular review by SAI and its Board. Additional requirements may be promulgated in the form of “Notifications” or “Advisories.” Those documents SHALL be considered requirements for implementation by CBs and SHALL be integrated into the procedures and processes of the accredited CBs.

SAAS Procedure 200 is subject to Regular Annual Review. The last review was performed in February 2017 (Version 3.1).

The changes from Version 4.1 to 4.2 are shown as green highlights.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 6

Scope of Procedure 200

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

6. Scope Guidance

6.1 This document provides a framework for assurance of the SA8000 audit system and sets out minimum audit criteria for assessing organisations seeking SA8000 certification by accredited and applicant Certification Bodies. Conformance to the requirements in this document, as well as Procedure 201A and Procedure 201B, provides greater assurance that accredited CBs are performing SA8000 audit process requirements in a consistent and effective way.

6.2 Together, the principles found in Procedures 200 and 201 specify requirements for the SA8000 audit, which is an input to the certification process. These documents specify requirements for personnel competence, audit process, systemic impartiality and transparency. The assurance and oversight process defined by SAI and monitored by SAAS are expected to lead to consistent audit outcomes and performance by audit personnel.

6.3 This document supersedes all previous versions of Procedure 200 and related Advisories (including Advisory 18 references which should be removed from all CB procedures and reports.) and prescribes the requirements that a CB must include in carrying out assessment of a client organisation that submits itself for verification of conformance with the SA8000 certification standard. The assessment of such an organisation is purely voluntary. It is the responsibility of any such organisation to provide adequate evidence that SA8000 certification is justified.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 7

Acronyms and Definitions

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

7. Acronyms and Definitions

The following acronyms and definitions are used within this document. *Note: all definitions found in the SA8000:2014 Standard apply to this document and, where they differ, supersede the definitions in ISO/IEC 17021-1:2015 and ISO/IEC 17011:2017.*

7.1 Acronyms

- 7.1.1 CB = SAAS Accredited Certification Body (or applicant Certification Body); equivalent to CAB
- 7.1.2 CBA = Collective Bargaining Agreement
- 7.1.3 IAF = International Accreditation Forum (www.iaf.nu)
- 7.1.4 IEC = International Electrotechnical Commission
- 7.1.5 ISO = International Organisation for Standardisation (www.iso.org)
- 7.1.6 ISO 17021 = ISO/IEC 17021-1:2015
- 7.1.7 ISO 19011 = ISO 19011:2018
- 7.1.8 ISO 17011 = ISO/IEC 17011:2017
- 7.1.9 NGOs = Non-Governmental Organisations
- 7.1.10 SA = Social Accountability
- 7.1.11 SAI = Social Accountability International (www.sa-intl.org)
- 7.1.12 SAAS = Social Accountability Accreditation Services (www.saasaccreditation.org)
- 7.1.13 SPT = Social Performance Team

7.2 Definitions

- 7.2.1 **Breach of Ethical Standards** = Verified intentional attempts to corrupt or defraud the SA8000 audit process. See also the definition of Critical Non-conformity and the section in this document for Audit Disruptions.
- 7.2.2 **Certification Cycle** = The certification cycle for the SA8000 client begins with the certification or recertification decision. The length of the cycle is limited to three years. The audit program for the SA8000 client SHALL be determined for the full three year certification cycle.
- 7.2.3 **Certification Country Risk Assessment Process** = SAAS coupled the risk ranking of the Worldwide Governance Indicators (WGI) with strategies to provide a greater level of assurance as part of the SA8000 certification process. The application of certification process requirements vary based on the country risk assessment and affect the frequency of SA8000 surveillance audits, special audits, application of multi-site certificates and worker interviews, as identified in this document.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

7.2.4 **Company** = SA8000:2008 referred to “Company” throughout the text of the Standard. SA8000:2014 refers to “Organisation” throughout the text of the Standard. In this procedure, the term “organisation” is synonymous with “company” as defined in SA8000:2008. “Facility” and “workplace” SHALL refer specifically to a physical site, location or building in which the company resides. The term Company and Organisation are interchangeable as far as this Procedure 200 is concerned.

7.2.5 **Consortium** = An association of two or more companies with the objective of participating in a common activity.

7.2.6 **Contractor** = An organisation or person that enters into a contract. *Note: commonly a CONTRACTOR is a person or entity that agrees to provide services (example: The party responsible for the overall job is a “general contractor,” and those he/she/it hires to undertake specific jobs on behalf of the contractor are “subcontractors,” who are responsible to the general contractor.)*

7.2.7 **Corrective action** = Action taken to eliminate the cause of a non-conformity upon undertaking a root cause analysis. It includes the action taken to prevent recurrence of a non-conformity whereas preventive action is taken to prevent initial occurrence of a non-conformity. In the SAAS-accredited system, corrective action is undertaken to impact the entirety of the CB’s accredited management system for performing SA8000 audits. *Note: There is a distinction between correction and corrective action. Correction is action undertaken immediately to eliminate the detected non-conformity but not necessarily the cause.*

7.2.8 **Critical Non-Conformity (CNC)** = A grievous breach of the SA8000 Standard that results in severe impact to individual rights, life, safety and/or SA8000, SAAS or SAI’s reputation. SA8000 certificates may be denied, cancelled or suspended when CNCs are confirmed. For example: Flagrant, egregious or persistent violations of the law SHALL usually be raised as a Critical N/C against the CB Client’s “Management’s failure to demonstrate commitment to the law.” See Clause 22.8.

7.2.9 **Exclusive supplier** = In the context of this document, ‘exclusive supplier’ refers to a supplier organisation (or a part thereof), on- or off-site, that supplies exclusively to the SA8000 certified entity (or applicant). i.e. The workers of ‘exclusive suppliers’ are considered an integral component of the certified entity’s scope of operation.

Unless an ‘exclusive supplier’ is SA8000 certified in its own right, the operations and personnel of the ‘exclusive supplier’ SHALL be addressed directly within of the scope of SA8000 certification and surveillance audits, rather than being managed through SA8000 Clause 9.10 - Management of Suppliers and Contractors. For CB audit effort calculations, the employees of the ‘exclusive supplier’ SHALL be added to those of their customer.

If the ‘exclusive supplier’ does not have an office on the certified entity’s premises, an ‘exclusive supplier’ management representative would typically be required to attend CB audit(s) to provide any requested personnel files, remuneration data, working hours records, etc.

An ‘exclusive supplier’ SHALL NOT be named or referenced on their customer’s SA8000 Certificate.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

For Example: Common examples of 'exclusive suppliers' include: a textile dyeing house; an independently-owned farm that is part of a contracted consortium; a labor agency providing contract labor to a factory.

- 7.2.10 **Full-Time Equivalent (FTE)** = Full-time equivalent employees equal the number of employees on full-time work plus the number of employees on part-time work converted to a full-time basis. FTE is sometimes referred to as Effective Number of Personnel. The use of FTE for audit effort calculations is not permitted for SA8000 certification e.g. if a labor agency has employees that work only 2 hours a day then these are still considered as 1 person for the calculation of audit effort.
- 7.2.11 **Grievous and Intentional Violations of Human Rights** = Intentional egregious violations of human rights. See also Critical Non-Conformity.
- a) As the aim of the audit process is to evaluate conformity with the SA8000 Standard, efforts SHALL be made by the applicant or certified organisation to rapidly bring about the necessary changes to address these violations.
- b) If there is a clear determination shown by management and immediate action is taken to remediate the violations, this will be considered as an acceptable corrective action.
- 7.2.12 **Immediate Threats to Worker Lives** = Verified immediate threats to worker lives or safety. See also Critical Non-Conformity.
- a) New certificates may be issued and suspensions may be lifted when the threat(s) is remedied.
- b) The organisation may apply for certification when they have: 1) received sign-off by a CB on a corrective and preventive action plan; and 2) completed all required actions in the corrective and preventive action plan according to their proposed timeframe.
- c) Certificates SHALL be withdrawn if the organisation is unable to meet the proposed timeframe in their remediation/corrective and preventive action plan.
- 7.2.13 **Indirect Workers** = Workers of a subcontractor working on-site of the applicant or certified organisation and/or off-site but under direct control of the certified organisation, such as security guards, canteen staff, cleaners and gardeners.
- 7.2.14 **Maritime Activities** = Those involving seafarers, i.e. any persons employed or engaged or working in any capacity on board a ship. See also SAI's SA8000:2014 Certification Exclusion List.
- a) Maritime Activities are further broken down into those excluded from SA8000 certification and those that are not.
- b) Maritime Activities excluded from certification are those covered by the *ILO Maritime Labour Convention, 2006 (NO. 186), (MLC)*.
- c) Maritime Activities that may be eligible for certification are those that relate to seafarers on vessels that navigate exclusively in inland waters or waters within, or closely adjacent to, sheltered waters or areas where port regulations apply.
- d) The determination as to whether a ship is a certifiable workplace will depend on several factors, including definitions supplied by local regulations.
- 7.2.15 **Micro-enterprises** = In the context of this document, a micro-enterprise SHALL be defined as having 10 or fewer personnel.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 7.2.16 **Multi-Site organisation** = An organisation with an identified central management function (central office or headquarters or head office) at which organisational activities are planned, controlled, and/or managed with a network of offices, branches or sites at which activities are carried out. A multi-site organisation need not be a unique legal entity, but all sites shall have a legal or contractual link with the central office and be subject to a common management system. See also Site.
- 7.2.17 **Multi-Site documentation review audit** = A review of randomly chosen time and attendance, payroll, internal audit results and employee complaints records at a Multi-Site Head Office Audit.
- 7.2.18 **Multi-Site Limited Audit** = A reduced audit effort audit at a location(s) chosen at random and performed unannounced on-site. See multi-site audits, Section 21, for additional details.
- 7.2.19 **Non-Conformity (NC)** = If fulfilment of a specified requirement **has** not been demonstrated, a finding of non-conformity SHALL be reported. In the SAAS-accredited system, identification of NCs initiate a corrective action request (CAR). A CAR is the initial stage in the corrective action process. A corrective action SHALL be initiated as a result of a non-conformity. This process includes containment/correction, root cause analysis, corrective action and follow-up. NCs SHALL be logged using a nonconformance report (NCR) to log and track occurrence and reoccurrence of NCs.
- 7.2.20 **On-Site Supplier/Sub-supplier** = Organisation or person that provides a product or a service produced on one (or more) sites of the client/certified organisation. Such as IT support, embroidery services.
- 7.2.21 **Organisation headquarters** = The controlling location (central office or headquarters or head office) of the management system, as utilized in defining a multi-site audit scheme. See also Multi-Site organisation.
- 7.2.22 **Risk Assessment** = Process to identify potential hazards and analyze what could happen if a hazard occurs.
- 7.2.23 **Risk Management Approach** = The process of identifying risk, assessing risk, and taking steps to reduce risk to an acceptable level. The risk management approach determines the processes, techniques, tools, and team roles and responsibilities for a specific activity.
- 7.2.24 **Root Cause Analysis** = Application of a problem solving methodology such as “5 Whys” or “Pareto Analysis” which is used for identifying the root causes of faults or problems. Certified organisations are expected to use Root Cause Analysis to address NCs to look deeper into problems and find out why they’re happening.
- 7.2.25 **Service Sector** = Sector of business that is made up of companies that primarily earn revenue through providing intangible products and services. Service industry companies are involved in retail, transport, distribution, food services, cleaning, banking, education, as well as other service-dominated businesses.
- 7.2.26 **Shell Company or Shell Organisation** = In the context of this document, “shell” companies subcontract the vast majority of the end product or service. These companies often seek certification as a means of obtaining contracts through government tenders but do not perform the service for

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

which the tender has been created. A shell company SHALL not be approved for SA8000 certification. Shell Companies may or may not also be known as a Consortium.

- 7.2.27 **Should** = The term “should” is used in this document to indicate recognized means of meeting the requirements. A CB can meet these in an equivalent way if it can be demonstrated to SAAS. The term “SHALL” is used to indicate those requirements that are mandatory.
- 7.2.28 **Site** = Location where an organisation carries out work or a service. Sites are defined as either **temporary** or **permanent** as described below: These definitions **are not relevant to the length of the contract for the service being provided**. See also Multi-Site organisation.
- a) A **temporary site** is one set up in order to perform specific work or service for a finite and limited period of time for example: Construction Sites, Temporary Exhibitions, Outdoor events and concerts, Event caterers, One off customer call-out to repair items (e.g. photocopier repair or fire/security alarm installations).
 - b) A **permanent site** is one where a CB’s client performs work or provides workers to perform a service on a continuing basis. These are usually an operating unit owned or leased by the parent organisation to carry out mostly similar kind of activities. The location is permanent and is usually a building or piece of land/garden where the SA8000 certified organisation permanently places their workforce to perform tasks on a fulltime or part time basis every working day.
Note: Usually the organisation placing its workers on these sites has little control over these sites with respect to first aid provision, positioning/type of fire exits, fire and evacuation drills etc.
 - c) **Additional sites** to include a new site or group of sites that are to be added to an existing multi-site organisation.
 - d) **Temporary Contracts** – **For Example - Work** such as cleaning, gardening, building maintenance. These are carried out on a Permanent Site albeit for a limited time period.
- 7.2.29 **Stage 1 Audit** = The first of two audits that a CB conducts for an organisation’s SA8000 management systems certification. The Stage 1 SA8000 audit includes a document review to confirm that the organisation has established procedures and processes, is knowledgeable of legal requirements, and is ready for a Stage 2 SA8000 certification audit. It also involves a Social Fingerprint Independent Evaluation conducted by the SA8000 Audit Team Leader.
- 7.2.30 **Stage 2 Audit** = the second of two audits that a CB conducts of an organisation’s SA8000 management system during the initial certification process. The Stage 2 SA8000 audit confirms that the organisation is effectively implementing a management system and conforming to the requirements of the SA8000 Standard. It also involves a Social Fingerprint Independent Evaluation of the organisation’s Social Fingerprint Self-Assessment, conducted by the SA8000 Audit Team Leader.
- 7.2.31 **Sub-supplier** = Organisation or person that provides a product or a service to a supplier.
- 7.2.32 **Subcontractor** = Organisation or person who takes a portion of a contract from the principal contractor or from another subcontractor.
- 7.2.33 **Supplier** = Organisation or person that provides a product or a service.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

7.2.34 **Zero Tolerance** = Violations observed during an SA8000 audit that, in the opinion of the CB’s audit team, require immediate action by the CB’s client which SHALL require the CB’s SA8000 auditor to raise a Critical Non-Conformity at the time of observing the violation. This kind of violation observed during an SA8000 audit requires the CB’s SA8000 auditor to immediately contact their CB to seek advice as to whether the audit **should** be aborted. Zero Tolerance may also be known as a Critical or immediately reportable issue.

7.2.35 **Semi- Announced Audit** = An on-site surveillance audit that is delivered on any day(s) in the usual manner, during a pre-advised 8-week window. The SA8000 Certified Client **SHALL be advised 8 weeks** before the first day of the 6-week audit window of the start and finish dates of that window. Without previously advising the chosen audit date(s), the audit team visits the certified company’s premises to perform the audit on a date within that window.

7.2.36 **Follow-up Review** = A certification body monitoring activity performed in between on-site Surveillance Audits in order to monitor the ongoing commitment and performance of a certified organisation. A Follow-up Review may be undertaken at any time, but is always routinely conducted approximately six months after each on-site audit visit. While a Follow-up Review is typically conducted via remote electronic communication with the certified organisation’s representatives over a minimum of two hours, a Follow-up Review ought to be conducted on-site and/or over a longer period when review of evidence demands it.

Note: For additional terms and definitions, please refer to SA8000:2014, Procedure 201A, ISO/IEC 17021-1:2015 and ISO/IEC 17000:2004. For terms and definitions specific to the Social Fingerprint process, please refer to SAI’s SA8000:2014 Social Fingerprint Glossary.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 8

Reference Documents

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

8. Reference Documents

In all cases, the current edition of a certification standard, normative document or guidance SHALL be the reference document in this procedure, per the standard's published rollout schedule. The latest and up to date versions of SAI's documents can be found on their website at: www.sa-intl.org. The latest and up to date versions of SAAS documents can be found at: www.saasaccreditation.org/document-library.

8.1 The Certification Standard & PIA

- 8.1.1 SA8000:2014 (Normative Reference*)
- 8.1.2 SA8000:2014 Performance Indicator Annex (Secondary Reference**)

* Each non-conformity raised by a CB SHALL be cited primarily against the appropriate clause(s) of the SA8000 Standard.

**The CB SHALL use the performance indicators contained in the PIA as a means of evaluating the extent to which an organisation's activities/controls and social performance conform to each of the SA8000 Standard requirements. The extent of this conformity SHALL be generally documented as an overview in every SA8000 Audit Report.

8.2 Mandatory SAAS Procedures To Be Used By All CBs

The following SAAS Procedures SHALL be used by all CB's to facilitate the SA8000:2014 Certification Process

- 8.2.1 SAAS Procedure 200 (this procedure)
- 8.2.2 SAAS Procedure 200A
- 8.2.3 SAAS Procedure 201A
- 8.2.4 SAAS Procedure 201B

8.3 Mandatory Certification Guidance Documents

The following documents are the only approved guidance documents for SA8000:2014

- 8.3.1 SA8000:2014 Certification Exclusion List
- 8.3.2 SA8000:2014 Drafters' Notes

8.4 Guidance For Management System Maturity

The following documents are to be used by CB's as applicable.

- 8.4.1 SA8000:2014 Social Fingerprint Glossary
- 8.4.2 SA8000:2014 Social Fingerprint Rating Chart

8.5 Bibliography

- 8.5.1 ISO/IEC 17011:2017, Conformity assessment – General requirements for accreditation bodies accrediting conformity assessment bodies.
- 8.5.2 ISO/IEC 17021-1:2015, Conformity assessment – Requirements for bodies providing audit and certification of management systems – Part 1: Requirements.
- 8.5.3 ISO 10018:2012 – Quality management – Guidelines on people involvement and competence
- 8.5.4 ISO 19011:2018 Guidelines for auditing management systems

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 8.5.5 ISO 31000:2018 Risk management — Principles and guidelines
- 8.5.6 ISO 37500:2014 Guidance on outsourcing
- 8.5.7 IAF MD 1:2018 IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organisation
- 8.5.8 IAF MD 2:2017 IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
- 8.5.9 IAF MD 5:2019 Determination of Audit Time of Quality, Environmental, and Occupational Health & Safety Management Systems
- 8.5.10 IAF MD 23:2018 Control of Entities Operating on Behalf of Accredited Management Systems Certification Bodies

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 9

General Principles

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

9. General Principles

9.1 Requirements

9.1.1 This document specifies procedures and CB audit process requirements with regard to the assessment of organisations to SA8000.

a) These requirements are binding for CBs accredited for SA8000 by SAAS. Breach of these requirements in any part by an accredited CB SHALL initiate the issuance of non-conformities potentially leading to suspension and the de-accreditation process. Cancellation of SAAS accreditation may result if the breach is not resolved in a timely manner.

b) An accredited CB may exceptionally deviate from the requirements in this document under the condition that it is able to produce relevant and documented justifications. These justifications shall, under evaluation by SAAS, demonstrate confidence in the accredited CB's management system and delivery of accredited SA8000 certification services.

c) Only clients certified to SA8000 by organisations accredited by SAAS have valid certificates. Any other SA8000 certificates are considered unaccredited and not recognized by SAI and other stakeholders in the process.

d) All SA8000 certificates issued by accredited CBs shall contain the following disclaimer:
"Social Accountability International and other stakeholders in the SA8000 process only recognize SA8000 certificates issued by qualified CBs granted accreditation by SAAS and do not recognize the validity of SA8000 certificates issued by unaccredited organisations or organisations accredited by any entity other than SAAS."

Additionally, all SA8000 certificates shall contain the address of the SAAS website (www.saasaccreditation.org/certification) where stakeholders can confirm the validity of an accredited SA8000 certificate.

9.1.2 SAAS requires accredited and applicant CBs to conform to ISO/IEC 17021 requirements. These requirements form the basis for the accredited certification process. SAAS assesses CB's conformance to ISO/IEC 17021 requirements as part of the accreditation and surveillance process, in addition to conformance to requirements within this document.

a) This SA8000 audit requirements document builds upon the basic requirements found in ISO/IEC 17021 to make them specific to the SA8000 scheme.

b) In general, this document focuses solely on the SA8000 audit process requirements and in particular expands on the Clause 9.1 to 9.9 requirements of ISO/IEC 17021-1:2015. The other requirements of ISO/IEC 17021-1:2015 that SHALL be met by SAAS-accredited CBs are described further in other SAAS procedures, specifically SAAS Procedure 201A and 201B.

c) If there is any conflict between SAAS requirements and ISO/IEC 17021 requirements, SAAS requirements SHALL take precedence over ISO/IEC 17021. For further clarification, the CB SHALL

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

contact SAAS when needed.

- 9.1.3 Accredited CBs SHALL have a documented, structured management system defining the CB's SA8000 certification processes. Such systems SHALL conform to the requirements in ISO/IEC 17021, SAAS Procedure 200, SAAS Procedure 201A and Procedure 201B and any other requirements disseminated by SAAS.
- 9.1.4 The CB's SA8000 certification assessment process SHALL address all SA8000 elements according to the requirements described in this procedure.
- 9.1.5 All requirements in this procedure which relate to SA8000 clients SHALL be written into the contract with the SA8000 client so that the client clearly understands what is required and accepts those terms upon signing the client contract. For additional details, reference Procedure 201A.
- 9.1.6 SAAS Advice and Interpretation: SAAS maintains regular contact with CBs and their SA8000 Program Managers. CBs SHALL have designated one staff person (the SA8000 Program Manager, as defined in Procedure 201A and 201B) and a Deputy to interface with SAAS.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 10

Scope of SA8000 Certification

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

10. Scope of SA8000 Certification

It is known that defining scope within the SA8000 certification process can be a complicated issue – the SA8000 Guidance document provides detailed direction for auditors, clarifying that the overall intent of SA8000 is to avoid certifying a facility which has adopted a social initiative but doesn't apply it evenly or completely throughout its operation. Specifically, SA8000 certificates SHALL cover the complete premises and operations, including remote sites and home workers operating under a common management system.

Note: Scopes accepted for ISO 9001, ISO 14001, ISO 45001 or other ISO system certifications may not be appropriate or acceptable as a Social Accountability Management System Scope.

10.1 Requirements

10.1.1 SA8000 certification is generally permitted in all countries and is applicable in all industries except as designated in the exclusions below and/or as described in other SAI/SAAS documents. SAI has developed an SA8000:2014 Certification Exclusion List which can be found on their website at www.sa-intl.org.

10.1.2 The People's Republic of China and its Special Administrative Regions of Macau and Hong Kong, as well as Taiwan, SHALL be treated as separate countries for the purposes of SA8000 Certification.

10.1.3 Excluded Countries: None. Reference SAI's SA8000:2014 Certification Exclusion List for the most up to date exclusions.

Note: Care should be taken when granting SA8000 certification where certain issues are illegal under national law e.g. LGBTQ Rights. See also SAAS Procedure 201A Annex E: "Application or Expansion of Geographical Areas: Special Considerations" (issued in June 2018).

10.1.4 Excluded Activities: Reference SAI's SA8000:2014 Certification Exclusion List for the most up to date exclusions. SA8000 certification SHALL not be permitted in Maritime Activities covered by the MLC sector. See the definition for Maritime Activities.

10.1.5 Organisations without active operations [i.e. Shell Companies] are prohibited from being certified to SA8000. Companies that seek certification as a means of obtaining contracts, essentially "shell" companies created for this unique situation, while subcontracting the majority of the end product or service, may not be approved.

a) Therefore any organisation that applies for SA8000 certification SHALL have been engaged in its stated business for at least 6 months prior to its application for SA8000 and have active contracts.

b) The organisation that is to be certified SHALL have active contracts with its customer(s) at the time of its application for SA8000 Certification.

c) The CB SHALL maintain evidence in the client file to demonstrate that the client organisation is still active.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

10.1.6 SA8000 certification SHALL be valid for a single organisation within a single site or location, or a commonly owned and managed (multi-site) group of facilities at multiple locations. SA8000 Certification across multiple countries IS permitted ONLY if the CB has received SAAS Accreditation for EACH of the Countries concerned through the formal SAAS expansion to scope process.

10.1.7 The CB's stage 1 audit SHALL identify all parts and boundaries of the organisation, so that the CB understands the structure of the organisation to be able to determine the scope of the certificate. CB SHALL continuously review the size and scope of the organisation at each semi-announced surveillance audit and follow-up review to ensure proper audit days throughout the certification and surveillance cycle. The CB SHALL maintain appropriate audit records of operational and (where appropriate) geographic boundaries of the scope of the organisation and any changes thereto. The CB SHALL, where appropriate, record justification of the chosen scope for review by those responsible for the certification decision.

10.1.8 The scope of certification SHALL be clearly identified on the CB's SA8000 certificate, which SHALL include the nature of the business in terms of the products and/or services the company provides as well as the physical address(es) of the business. If the certificate refers to a multi-site organisation, then all addresses SHALL be defined on the certificate and its annexes, be publicly available, and be reported to SAAS. See Annex A for a SA8000 Certificate Template.

a) the CB SHALL ensure that the scope of a single SA8000 certificate covers all processes, properties and operations related to the organisation. For example, if an organization has several assembly lines and products, all must be incorporated within the scope certification.

c) The CB SHALL ensure that all components of typically contiguous (closely related) processes, and the entities performing them, are appropriately understood and considered when defining an SA8000 certification scope and when planning the associated certification cycle and audit-effort required. Typically contiguous processes SHALL be truthfully and unambiguously represented within an organisation's SA8000 certification scope. For example, the following SHALL be considered as 'typically contiguous processes':

- i. Agricultural harvesting, sorting and packing.
- ii. Hardware design, fabrication, finishing and packing.
- iii. Garment cutting, sewing, washing/dyeing, finishing, packing, distribution.

If any components of such 'typically contiguous processes' are outsourced, the company shall be required to:

- EITHER demonstrate detailed and effective management control and monitoring of all SA8000-related aspects those outsourced process components,
- OR treat the outsourced process component(s) under its SA8000 subcontractor processes, in which case company SHALL explicitly state the exclusion of such typically contiguous process component(s) from its certification scope.

d) An organisation's certification scope SHALL include the entire legal entity's structure and processes. In cases where an off-site subcontractor is used by the certified organisation to deliver parts of its activities, the scope statement shall clearly specify that some processes are delivered by

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

subcontractors and those parts are excluded from the scope. Suppliers operating on-site at the certified location SHALL be treated as part of the company's operation as they are a captive supplier. As such their workers are under the umbrella of the certification and SHALL be included as part of the oversight process. They would also be included the calculation of the number of workers at the certified company.

e) Public information regarding the certification of an organisation SHALL be clear and understandable and specific as it relates to the scope of the certificate. This public information by the SA8000 client SHALL be audited by the CB at every SA8000 audit and will be subject to review by the SAAS auditor during a witness audit and during the review of client packages during each office audit.

f) The CB SHALL certify an entire organisation and SHALL NOT certify personnel in only one department of a multi-department organisation and not the other(s). Departments are interrelated and personnel might move from one department to another.

g) On-site and off-site exclusive suppliers SHALL be treated as part of the organisation's operation and included in the scope of the audit and audit day calculation. See definition of Exclusive Supplier.

h) With respect to SA8000 certification, working conditions for all personnel working on behalf of the organisation seeking certification (including those employed by supplier organisations) are required to also comply with the requirements of SA8000.

Note: This includes ancillary workers such as security staff, labour agency temporary personnel, catering staff, cleaning staff, etc.

i) Employment agencies and workers cooperatives seeking certification SHALL include their contracted workers in their scope of certification. All workers, irrespective of their working hours, SHALL be counted as a worker and not added to others to make a 'Full Time Equivalent'.

j) Companies and CBs that wish to make a strong case for certifying less than the entire organisation SHALL comply with the following rules and restrictions:

- Top management of the organisation SHALL be included in the scope, regardless of how the scope is restricted.
- The boundaries of the scope shall be clearly defined.
- Any exclusions shall be clearly defined (to the extent that potential customer or other interested party might assume their inclusion if not explicitly excluded).
- The organisation shall not limit certification to a unique department, or operation within the company, e.g., human resources or purchasing.
- Where deemed appropriate, the CB and its client may agree a plan to expand the organisation's SA8000 certification scope over time. In such cases, the implementation of such a plan would become a condition of continued certification.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 11

SA8000 Certification Requirements

11. SA8000 Certification Process Requirements

11.1 General – (ISO/IEC 17021-1:2015 Clauses 9.1 – 9.9)

11.1.1 The initial certification audit SHALL generally be conducted in three stages, as described in Figure 1.

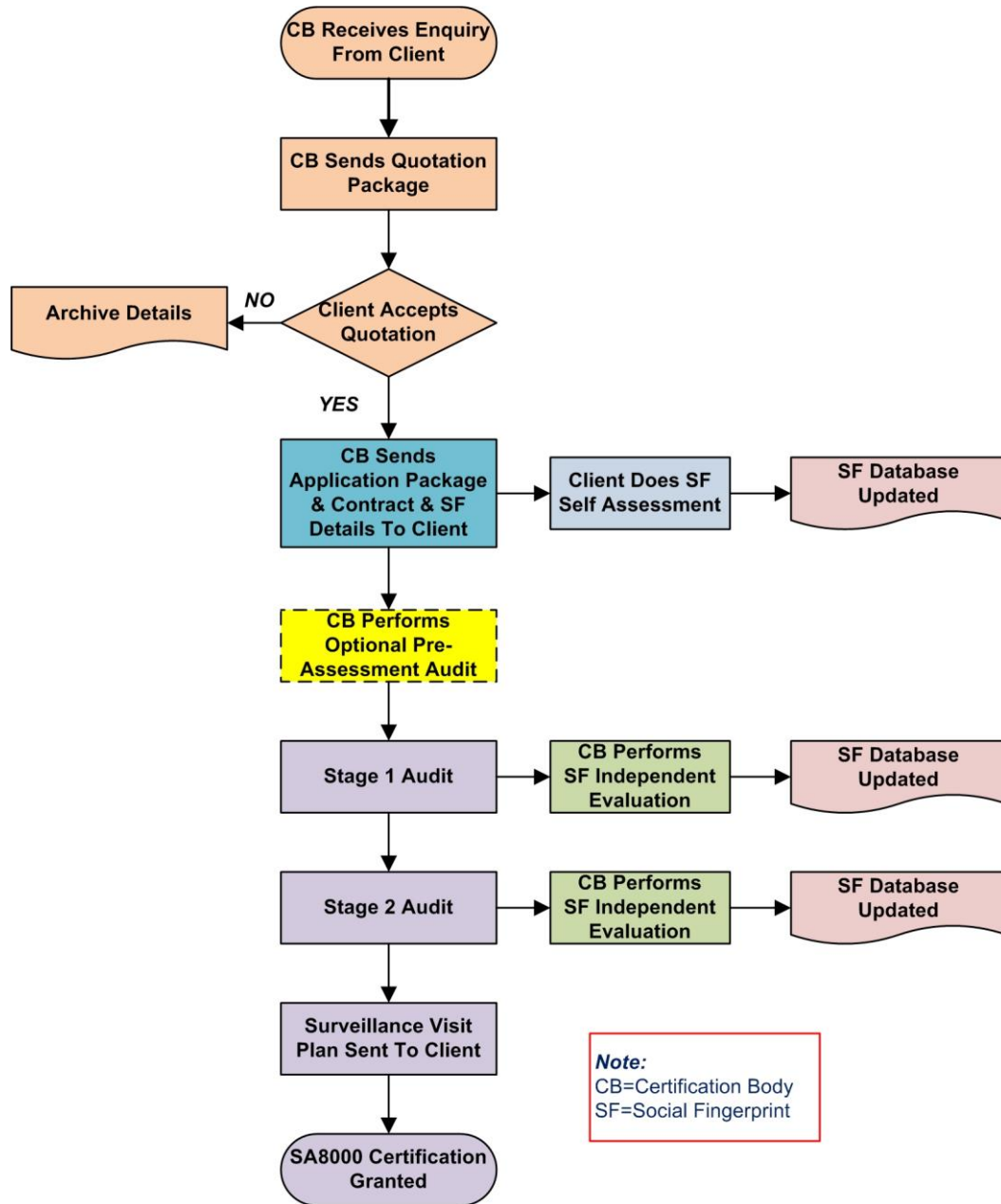


Figure 1 – Initial Audit Process

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

11.1.2 Audit planning and execution SHALL take into account all personnel both on-site and off-site, including temporary and contract labor and homeworkers.

a) The CB audit program SHALL address all elements of the standard at each location. Operations of all shifts (crews) covered by the scope of the SA8000 certificate SHALL BE audited during the Stage 2, Recertification and during at least one surveillance audit during the certification cycle.

b) The rounding down to full-time equivalents is not permitted for SA8000 Certification. Every individual SHALL be taken as one person for audit effort planning irrespective of what hours they work per week and whether full or part-time.

c) If a large number of agency workers or workers-cooperative workers (i.e. >5%) are employed by a company, then the management of the labor agency and/or workers-cooperative SHALL attend the audit and be interviewed by the CB Audit Team. The labor agency /workers-cooperative management SHALL ensure that human resources, attendance and remuneration records are available for all their personnel at the time of at least every Stage 2 or Recertification Audit and upon the request of the CB.

11.1.3 Stakeholder engagement SHALL be performed as part of the SA8000 certification process. See Section 20 of this document to determine the calculation of audit days and inclusion of stakeholder engagement in the audit day calculation.

a) Stakeholder engagement provides guidance, informed decision-making and a way to engage in meaningful dialogue with those parties with the most knowledge and stake in SA8000 activities. Stakeholder engagement allows auditors to engage with the community prior to the audit to do fact finding and assist in the assessment of the organisation. Formal and informal consultations are an effective means of both gathering information on possible problem areas and also encouraging local organisations to monitor an SA8000-certified organisation's continual compliance. Such consultations reduce the risk that auditors will overlook a nonconformity, help encourage a constructive feedback loop and build confidence in the reliability of certification.

b) The CB SHALL have a documented and implemented process to effectively obtain and maintain information about working conditions regularly gathered from regional interested parties, NGOs, trade unions, community organisations and workers. This information SHALL be used in audit planning and throughout the audit process.

c) The steps in stakeholder engagement SHALL include: defining stakeholders, interacting with stakeholders, performing consultations, developing profiles, and ongoing and regular updates.

d) Stakeholder engagement SHALL be conducted in a common sense approach for auditors to understand common concerns in a given geographic region. At minimum, annual consultation with stakeholders SHALL be conducted, with evidence of information collected.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- e) Auditors SHALL conduct local intelligence gathering while on-site or in a specific area for audits. This may include checking with the local community in the early morning of the Stage 1 audit and/or in the evening between audit days and at the time of an audit.
- f) CBs SHALL maintain records including notes and minutes from stakeholder consultations and other pre-audit research. Client files SHALL NOT contain a generic boiler plate statement about stakeholder consultation but SHALL include actual recorded evidence of stakeholder consultation.
- 11.1.4 To ensure compliance with 11.1.2a) above, it is important that all shifts SHALL be audited during each Initial and Recertification Audit as described below.
- a) Table 1 indicates the time of day and audit effort when at least one member of the audit team SHALL audit the appropriate shift. Audits of night shifts SHALL mainly focus on worker interviews and health and safety issues. A minimum of 1 hour SHALL be spent performing a shift audit.
- b) The basis of this table is to permit the audit day to be split to ensure that night and other shifts are audited at the appropriate time when problems if they exist might occur i.e. poor lighting levels; lack of access to first aid and medical assistance; lack of a fully functioning emergency response team; workers locked into work areas or dormitories.
- c) To enable an efficient audit at a site with multiple shifts, CB auditors are permitted to shorten the daytime hours in an audit in order to perform the remaining hours for the audit during the night shift. The auditor SHALL NOT be required to audit eight hours during the day and also audit during the night shift.

Shift Type	Nominal Working Hours	When To Audit
Morning	06.00 to 14.00	During Normal Audit Day Of 09.00-17.00
Afternoon	14.00 to 22.00	During Shortened Audit Day & 3 Hours of 19.00-22.00
Night	22.00 to 06.00	During Shortened Day & 3 Hours of 00.00-03.00
Twilight	17.00 to 21.00	During Shortened Audit Day & 3 Hours of 18.00-21.00
Day 1	06.00-16.00	During Normal Audit Day Of 09.00-17.00
Day 2	08.00-18.00	During Normal Audit Day Of 09.00-17.00
Day 3	09.00-17.00	During Normal Audit Day Of 09.00-17.00

Table 1 – Mandatory Shift Pattern Audit Effort

- 11.1.5 The entire management system and associated performance elements for SA8000 SHALL be assessed at every certification (Stage 2 site audit) and recertification audit. The entirety of the management system SHALL also be assessed throughout the certification cycle through the use of surveillance audits.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 11.1.6 The certification cycle SHALL be based upon the dates of the initial certification decision. The time interval between initial certification and recertification or between two recertification audits SHALL NOT exceed three years from issue of the certification decision. There SHALL be no gaps before the new certification cycle (recertification) commences.
- 11.1.7 Through the use of surveillance audits and follow-up reviews, the SAAS-accredited CB SHALL monitor the ongoing performance of its SA8000 Certified Clients against the requirements of SA8000 as per Section 16 of this document.
- 11.1.8 Each CB SHALL have documented procedures for selecting and appointing the audit team for each audit, including the requirements and attributes of the audit team leader and the overall competence needed to achieve the objectives of the audit. If there is only one auditor, the auditor shall have the competence to perform the duties of an audit team leader applicable for that audit.

Note: In addition to SA8000 certification, there are numerous commercial social accountability /labor and ethics auditor recognition /training /competence programs (mainly applicable to second party Code of Conduct Audits) in the marketplace. If, due to client or other external party demand, a CB wishes its SA8000 report to be accepted by a particular party (typically in lieu of that party's own audits) it is the responsibility of the CB to ensure that the requirements of that program (including the content of reports and the demonstrated qualifications /competence of auditors utilized) are met in addition to the requirements of this procedure and SAAS Procedure 201B.

- 11.1.9 SA8000 auditor and allied expert personnel appointed to audit teams, between them, SHALL reflect the totality of competencies, location-specific knowledge, language skills and cultural knowledge required to conduct all SA8000 audits performed by the CB (see Procedure 201B for explicit requirements, details and team composition). These skills SHALL include:
- a) knowledge of issues applicable to the location (laws/regulation and other demands/norms applicable to a specific location – including industry rules or norms);
 - b) knowledge of applicable language(s)/dialect(s) – written and spoken;
 - c) knowledge of prevailing cultural norm(s) of management and workers - this would include gender (as a subset of culture) and other potential differences (such as caste, immigrant workers and many other broadly or narrowly applicable issues).

11.1.10 Social Fingerprint SHALL be fully integrated into the SA8000 audit process.

11.1.11 SA8000 certification SHALL ONLY be offered to organisations that can demonstrate that they subject their organisation to on-site internal auditing at least on a biennial basis. Formal internal audit reports and findings raised SHALL be available at each CB audit of the Client's head office.

11.1.12 The CB Client's Internal Auditor Team SHALL demonstrate their individual social auditing competency and qualifications. There SHALL be no exceptions to these requirements.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

11.2 Audit Disruptions

- 11.2.1 Each CB SHALL develop and maintain a general procedure that addresses issues that can occur during an audit such as, but not limited to: attempted bribery; power outage; fire; serious accident; denied access to any part of the premises; denied access to records; denied access during a semi-announced audit; and other such matters. This procedure SHALL address auditor process and the circumstances under which an audit SHALL be terminated.
- 11.2.2 This procedure SHALL delineate the action that the CB auditor(s) SHALL be required to take if such a disruption occurs. All disruptions and/or disturbances during audits SHALL be documented and records kept in the client file.
- 11.2.3 This procedure SHALL detail the steps to report, investigate and address situations of attempted bribery. Please also see the definition of Breach of Ethical Standards in this document and additional CB process requirements found in Procedure 201A.
- a) Process requirements: If the attempt occurs during an SA8000 audit, SA8000 auditors SHALL follow the CB's policies and issue a Critical Non-Conformity to the organisation.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 12

General Audit Planning (Excluding Audit Effort)

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

12. General Audit Planning (Excluding Audit Effort – See Sections 20 & 21 below)

12.1 Audit Plans – (ISO/IEC 17021-1:2015 Clause 9.2)

12.1.1 Every audit SHALL have an audit plan.

a) For announced audits i.e. Stage 1, Stage 2, Recertification and Special Audits, the audit plan SHALL be sent to the client at least 2 weeks prior to the audit and SHALL include the name of and summary of background information on each member of the audit team.

b) For semi-announced audits, the CB SHALL develop an audit plan and send this to the client at the same time as the announcement of the semi-announced audit and SHALL include the name of and summary of background information on each member of the audit team.

c) The audit SHALL be planned to fully evaluate the effectiveness of the SA8000 management system and related performance criteria through evidence-based assessment.

d) The audit plan SHALL ensure for all Stage 2 and Recertification audits, that the composition of the audit team reflects the gender balance of the employees and industry sector of the client unless justified and authorized by CB management.

Note: This effectively means that (other than under exceptional circumstances) audit team needs to include at least one male and one female auditor (and/or interview specialists) so that, wherever practicable, one-on-one interviews may be performed by a CB Auditor of the same gender.

e) To prevent familiarity with a client, CB Audit Team Leaders SHALL not perform this role for more than 1 certification cycle as an Audit Team Leader without a break of 1 cycle in between.

Note: This requirement also applies to CB Subcontract Audit Team Leaders that have worked for a previous CB when the Client transfers from one CB to another.

12.1.2 The audit plan SHALL be adapted to the processes and working environment of the organisation being assessed and SHALL include all requirements of the organisation's social management system (for initial and recertification audits) and associated performance elements and cover all shifts within the audit cycle.

12.1.3 The plan SHALL be developed considering information gathered from local and regional experts, stakeholders, community members, NGOs and Trade Unions, information which SHALL be gathered and recorded in advance of the audit.

12.1.4 The audit plan SHALL indicate the need for the certified organisation to provide their calculations of living wage and the lowest wage paid to any employee in the organisation, adjusted to gross or net. The certified organisation shall also supply evidence of the legally required minimum wage (that is the lowest wage permitted by law or by a special agreement such as one with a labor union).

12.1.5 Relevant records of internal communication of audit team members, the client and external stakeholders related to the individual client and audit SHALL be maintained.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

12.1.6 Audit records SHALL contain a copy of the AS AUDITED plan that confirms the paths and sequence of each audit. This can be a hand-marked copy of the audited plan as presented at the opening meeting.

Note: Re-labeling the audit plan soft copy as “Issue 2” is not acceptable evidence of the ‘as audited’ plan.

12.1.7 The CB SHALL ensure that the client is informed (for every type of audit) of their right to object to any member of the audit team as required by ISO 17021-1:2015, 9.2.3.5. Records of this communication SHALL be maintained by the CB.

12.1.8 In addition to the requirements in ISO 17021-1:2015, 9.2.3.2: Audit plans SHALL include the following information in Table 2, as applicable, as a minimum:

a) Auditors Names and Sector Competence Code.	b) Experts Names.
c) Translators Names.	d) Other persons attending the audit, e.g. CB, SAAS, or others.
e) Client contact details including organisation name; address; main contact.	f) SA8000 management representative; SA8000 workers representative; Trade Union representative; Social Performance Team Member(s).
g) Other reps as appropriate (such as OHS rep; HR manager; Payroll manager).	h) Locations to be audited (except in the case of multi-site sampling).
i) Shifts operated and to be audited.	j) Approximate time of each audit activity and date. This SHALL also include the time allocated to perform the SF IE.
k) Audit site demographics related to number, gender and language spoken for: workers and managers, contract services suppliers and direct and indirect labor.	l) Travel time to sites as appropriate.
m) Indication of the expected number of worker and manager interviews.	n) Language of audit.
o) Statements on bribery policy, confidentiality and impartiality, both general statements and policies specific to the audit and audit team.	p) List of documents to prepare for the audit.
q) Statement on the need for senior management, workers representatives, SPT Team to be present at the opening and closing meetings.	r) A simple audit and career profile of each member of the audit team.

Table 2 – Audit Plan Details

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 13

Pre-Assessment and Initial Research

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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13. Pre-Assessment and Initial Research

13.1 Pre-Assessment Audit

- 13.1.1 Pre-Assessment audits are an optional service that can be provided by a CB. The CB SHALL have procedures for managing the pre-assessment process so as to reduce conflicts of interest and so as not to provide consulting during the pre-assessment audit.
- 13.1.2 Pre-assessment audits can be performed at the request of the client by the contracted CB. This request SHALL be documented in the client audit file.
- 13.1.3 A pre-assessment audit SHALL ONLY be performed prior to the initial Stage 1 audit and SHALL NOT be performed in lieu of a Stage 1 audit. The pre-assessment SHALL be formally documented in an audit report and SHALL consist of non-binding findings with no recommended solutions. The time spent on a pre-assessment audit SHALL NOT be considered part of the Stage 1 and/or Stage 2 process.
- 13.1.4 Arranging training and participating as a trainer at a client's organisation SHALL NOT be considered consultancy provided that, where the course relates to management systems or auditing, it is confined to the provision of generic information that is freely available in the public domain; i.e. the trainer SHALL NOT provide organisation-specific solutions.

13.2 Initial Research

- 13.2.1 All CB's SHALL have a documented procedure that describes the criteria for accepting a client based on various risk factors including any geographical, ethical, and/or commercial basis. These criteria may include countries and business sectors from which they may choose to refuse applications.
- 13.2.2 Prior to accepting a client organisation for SA8000 certification, the CB SHALL check that the applicant does not have a recent or pervasive history of major unaddressed violations in any element of the SA8000 standard (including freedom of association) for at least six months before the Stage 1 audit.
- a) The process to obtain this information can include web-based research.
- b) The CB SHALL search diligently for local intelligence from within the CB and from external bodies such as regulatory agencies, trade unions, local stakeholders and community members.
- c) The results of this research process SHALL be documented and maintained in the client file and include justification as to why clients were taken on if they have a previous pervasive history of major unaddressed violations in any elements of the SA8000 standard.
- 13.2.3 The research process by the CB SHALL include, at a minimum:
- a) A determination of sufficient wage levels for the client location, as defined by SA8000 Element 8.1.
- b) A determination of present or past legal actions against the organisation.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- c) Consultation to gather information about working conditions gathered from regional and local interested parties, NGOs, trade unions and workers. This process SHALL be included in the calculation of audit days as part of the preparation of the Stage 1 and Stage 2 audit for initial and recertification audits and, at minimum, 1 time per year for surveillance audits. See also section 11.1 in this document.
 - d) A determination of the languages spoken by personnel at the organisation, and the proportion speaking each. The CB SHALL record this information before accepting a client organisation for SA8000 Certification to ensure it has the capacity to communicate effectively with the majority of personnel.
 - e) A determination as to whether or not the client is currently or previously has been certified to SA8000 and, if so, reviews of those SA8000 audit and non-conformity reports. If the CB cannot make this determination, they SHALL confer directly with SAAS.
 - f) A determination as to whether or not the client organisation has had audits against other social codes of conduct and, if so, reviews of those audit reports.
 - g) An investigation of grievances, legal proceedings and other complaints for a period of time of at least six months before the Stage 1 Audit.
 - h) A determination that all persons performing internal audits of the organisations SA8000 management system are formally trained in social accountability management systems internal auditing and are competent to perform such audits.
- 13.2.4 The CB SHALL have a documented procedure that describes how it undertakes the initial research process as described above.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 14

Stage 1 Audit

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

14. Stage 1 Audits

14.1 Stage 1 Assessment

14.1.1 The objective of a Stage 1 audit is as described below in Table 3.

a) Review accuracy of the pre-audit questionnaire returned by the client organisation.	b) Familiarize the CB Audit Team Leader with the issues pertinent to the client organisation.
c) Gain an understanding of the client's SA system and its state of development.	d) Determine client's awareness and recognition of the local norms, regulatory and legal requirements.
e) Review the client organisation's method of determining a local Living Wage and the wages paid to workers.	f) Review and assess the client's SA8000 management system documentation.
g) Agree to the list of documentation that must be made available by the client organisation for the Stage 2 Audit.	h) Evaluate the client's location and site-specific conditions.
i) Undertake discussions with the client's personnel to determine the preparedness for the Stage 2 audit.	j) Identify all parts of the organisation so the CB understands the structure of the organisation for proper determination of scope of the certificate.
k) Review the proposed allocation of resources for the Stage 2 audit against the draft audit plan and agree with the client on the details of the Stage 2 audit.	l) Evaluate if internal audits and management review are being planned and performed and to ascertain the organisation's general conformity with the SA8000 Standard and Performance Indicator Annex.
m) Review previous labor, ethics, and other similar second and third party audit reports that are in the possession of the SA8000 certified or applicant organisation. The client SHALL make available any such audit reports within the previous three years and all SA8000 audit reports, if ever previously certified.	n) To confirm the date when the client declares that their SA8000 management system was fully operational. This date SHALL be recorded in the Stage 1 Audit Report.
o) Review of the competence of the Organisation's Internal Auditors.	p) Evidence that ISO/IEC 17021-1:2015 Clauses 9.3.1.2.2 e) & f) have been performed and the determination of the need to produce a new Stage 2 Audit Plan by the Audit Team Leader

Table 3 – Objectives of a Stage 1 Audit

14.1.2 CBs SHALL have a documented procedure that describes how they perform an SA8000 certification Stage 1 audit that generally follows the steps as outlined in above and ISO 17021-1:2015 Clause 9.3.1.2 and includes the Social Fingerprint Independent Evaluation.

14.1.3 The Stage 1 audit SHALL be conducted during an on-site visit to the organisation. In the case of micro-enterprises (as defined in this document), an on-site Stage 1 audit may not be necessary. In such cases, the justification for not doing an on-site visit SHALL be recorded in the client file. Details SHALL be recorded describing the conduct of the off-site Stage 1 audit.

14.1.4 The Stage 1 audit SHALL be normally of one to two audit day duration. If a Stage 1 audit goes beyond the maximum identified in the audit days table found in this document, the CB SHALL justify and

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

record why the additional days for Stage 1 audit were found to be necessary. See Section 20 for audit day calculation.

- 14.1.5 It is unlikely that a client following a Stage 1 audit would be ready for a Stage 2 Audit within 4 weeks of that Stage 1 Audit as the reporting process and approval of any RCA/CAP (to address any potential N/C's) takes several weeks. The CB SHALL therefore justify in writing any Stage 2 audit being performed within 4 weeks of the performance of the Stage 1 Audit.

- 14.1.5 The category of findings raised during a Stage 1 audit SHALL only be:
- Risk of non-conformance.
 - Observations.

14.2 Stage 1 Audit Preparation

- 14.2.1 Prior to the Stage 1 audit being performed, a pre-audit questionnaire SHALL be sent to the client organisation for completion. The questionnaire SHALL be returned to the CB and reviewed prior to the Stage 1 Audit taking place.
- 14.2.2 For all Stage 1 audits, an audit plan SHALL be developed and sent to the client at least 2 weeks prior to the audit. The client’s Social Fingerprint Self-Assessment Score SHALL be factored into the Stage 1 audit planning process.
- 14.2.3 The Stage 1 audit SHALL be performed by the proposed Stage 2 Audit Team Leader.
- 14.2.4 The Stage 1 audit steps SHALL generally be as described in Table 4 .

Audit Step	Audit Activity
1	Opening Meeting
2	Overview Tour (Including Canteen, Dormitory, Clinic, and Crèche, as appropriate)
3	Meeting with Workers Representative(s) and Social Performance Team (SPT) Members.
4	Meeting with Management to Confirm Understanding of SA8000, Confirm scope, Review Answers to SAAS Pre-Audit Questionnaire
5	Confirmation of Subcontract Labor on Site (Such As Cleaners, Canteen Staff, Refuse Collectors, Clinic Nurses And Doctors, Dormitory And Security Guards)
6	Availability of Documents
7	Review of Management System Documentation Including Management Review And Internal Audits
8	Confirm Stage 2 Audit Plan And Logistics for Audit
9	Closing Meeting

Table 4 – SA8000 Stage 1 Audit Steps

14.3 Stage 1 Audit Outcomes

- 14.3.1 Stage 1 audit findings SHALL be documented.
- 14.3.2 In determining the interval between Stage 1 and Stage 2 audits, consideration SHALL be given to the need for the client organisation to resolve areas of concern identified during the Stage 1 audit.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

14.3.3 The CB SHALL justify the time period between the Stage 1 and Stage 2 audits with a documented explanation of how the client can move from Stage 1 to Stage 2.

14.3.4 No more than 6 months SHALL be allowed to pass between the end of the Stage 1 audit and the first day of the Stage 2 audit. If more time is required, the CB SHALL conduct an additional Stage 1 audit.

14.3.5 The Stage 1 Social Fingerprint IE score SHALL be factored into the Stage 2 audit planning process by the Stage 2 nominated Audit Team Leader.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 15

Stage 2 Audits

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

15. Stage 2 Audits

15.1 General Requirements – (ISO/IEC 17021-1:2015 Clauses 9.3.1.3)

- 15.1.1 The evaluation of the effectiveness of the SA8000 management system and associated performance elements SHALL include an assessment of how effectively the management system(s) is deployed, as evidenced by workplace policies and supporting evidence, including whether or not it is implemented within the organisation’s overall objectives.
- 15.1.2 An important part of the Stage 2 audit process is the conduct of interviews with workers and other personnel, as detailed in the Interview (15.8) section of this document.
- 15.1.3 CBs SHALL have a documented procedure that describes how it performs an SA8000 Certification (Stage 2) Audit that SHALL follow ISO/IEC 17021 clause 9.3.1.3 and generally follow the guidelines as outlined in Table 5, below. Please see Procedure 200A for integration of Social Fingerprint (Audit Requirements for Accredited Certification Bodies For Social Fingerprint) into the Stage 2 audit process.

Audit Step	Stage 2 Audit Activity
1	Opening Meeting
2	Quick Overview Tour – including canteen, dormitory, clinic and crèche as appropriate
3	Confirmation of records availability
4	Management Interviews
5	Health & Safety & Working Conditions Tour – including in situ worker interviews and selection of production records. In the case of small companies this tour may be combined with that of 2) above.
6	Worker Interviews
7	Management System Elements Review (including: Policies, Procedures and Records, Social Performance Team, Identification and Assessment of Risks, Monitoring, Internal Involvement and Communication, Complaints Management and Resolution, External Verification and Stakeholder Engagement, Corrective and Preventive Actions, Training and Capacity Building, Management of Suppliers and Contractors.)
8	Workers Representative Interview & Social Performance Team Interviews
9	Subcontractor Interviews such as – cleaners, canteen staff, clinic nurses, doctors, dormitory managers and security guards
10	Employee Interviews – including staff, junior managers, first aiders, emergency response team members
11	Document & Record Review – Working Hours, Payroll, Living Wage, Cost Accounting
12	Pre-Closing Meeting (Optional)
13	Closing Meeting

Table 5 – SA8000 Stage 2 Audit Steps

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

15.1.4 CBs SHALL undertake a full and fair evaluation of the client’s management system and its performance by determining the effectiveness of the client’s policies and procedures to demonstrate conformance to SA8000 requirements. The CB SHALL document evidence to show conformance to the elements beyond the policies and procedures created.

15.1.5 In extreme circumstances, an audit SHALL be terminated for lack of proper or adequate system implementation. In this case, a report SHALL be produced that covers the activities performed until the audit was terminated. If a Stage 2 audit is terminated, the audit SHALL be repeated from the very beginning of the Stage 2 process, if the applicant continues to seek certification.

15.2 General Audit Steps

15.2.1 General – (ISO/IEC 17021-1:2015 Clauses 9.4.) – The processes described in ISO/IEC 17021-1:2015 Clauses 9.4. SHALL be followed. The following offers some guidance on the audit steps of an SA8000 Stage 2 audit and also contains some mandatory requirements that all CBs SHALL follow.

15.3 Opening Meeting – (ISO/IEC 17021-1:2015 Clauses 9.4.2)

15.3.1 See below for guidelines on managing the opening and closing meetings.

15.3.2 Senior Management of the client organisation SHALL be requested to attend the Opening Meeting. As applicable, this SHALL include management representatives for health and safety; payroll; production schedules; time and attendance monitoring and labor & ethics/social accountability compliance.

15.3.3 At least one management and one worker SPT Representative SHALL be requested to attend the Opening Meeting.

15.3.4 An attendance sheet SHALL be completed by all those who attend the Opening Meeting.

15.3.5 The CB’s Code of Ethics/Anti-bribery Statement SHALL be signed at the Opening Meeting by the organisation’s senior management.

15.3.6 The list of documents that are required to be submitted by the organisation for review by the CB SHALL be tabled.

15.3.7 The client SHALL be reminded of the need of the CB Auditors to take photographs and copies of documents for evidence of conformance but that the company can view all such photographs that the auditor may take at the end of the audit. The auditor SHALL also mention that photographs will not be taken of proprietary processes.

15.3.8 It SHALL be stated that workers will be selected at random to be interviewed and those who are SHALL be compensated in the same manner as if working at their regular job and will not be otherwise disadvantaged by being chosen for interview.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- a) It is best practice that all those interviewed will be given a contact card with contact details for the CB and SAAS. The client organisation SHALL not require the interviewee to return the contact details to the organisation. Contact information SHALL also be available on all SA8000 information boards accessible to workers.
 - b) It SHALL be explained that the aim of distributing any contact cards is to provide additional assurance and communication means for the workers.
 - c) Cards may also be distributed randomly to workers during the organisation walkthrough.
- 15.3.9 It SHALL be stated that the CB team will choose an area during the overview tour where they will undertake confidential interviews of workers and no management SHALL be present at the time of the interview.
- 15.3.10 If the organisation has retained a consultant to help it achieve SA8000 certification, the consultant may attend the Opening and Closing Meetings but may not represent the management of the organisation during the audit. If in attendance, they SHALL be silent observers.
- 15.3.11 During an announced audit, the Opening Meeting is conducted with the auditee management team immediately after the audit team arrives on site. During a semi-announced audit, the Opening Meeting is conducted only AFTER a preliminary walk-through visual inspection of the facility has been performed.

Note: Opening Meeting Elements – Good Practice

- a) Review the confidentiality agreement and anti-bribery policy and to have these signed by the CB Audit Team and Client and retained as an audit record.
- b) Establish official communication links between the audit team and company.
- c) Clarify and confirm or amend the scope of audit.
- d) Conduct an overview of the audit program and how the audit will be undertaken.
- e) Explain the significance and reporting of critical, major and minor non-compliances.
- f) Invite questions from the organisation's representatives.
- g) Invite questions from the SA8000 worker representative(s).

15.4 Organisation Overview Tour

- 15.4.1 Auditors SHALL have access to all parts of the facility and SHALL confirm all buildings and locations that the organisation operates.
- 15.4.2 All areas of the organisation are to be briefly toured (including canteen, dormitory, clinic and crèche and all other employer-provided worker service facilities as appropriate). This SHALL include any areas under construction or renovation and any temporary work areas to verify:
- a) Any changes from the Stage 1 Audit
 - b) Identification of potentially Hazardous Areas of Work

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

c) Identification of any major structural problems that are clearly evident

d) Potential Candidates for Interview.

15.4.3 The organisation SHALL provide a simple layout drawing/plan of their premises that includes all buildings and floors and canteen, dormitory, clinic and crèche and all other employer-provided worker service facilities as appropriate, including any areas under construction or renovation. This plan SHALL be filed as a hard or soft copy in the client file.

15.4.4 The CB's SA8000 Audit Team Leader SHALL identify and note the location of the posted copies of the SA8000 Standard during this tour to demonstrate that the organisation has openly displayed the SA8000 Standard.

15.4.5 The CB's SA8000 Audit Team Leader SHALL identify and record the location(s) where their and SAAS' contact information is/are displayed around the company. A photograph of the same shall be taken and maintained as an audit record.

15.5 Organisation Health & Safety & Working Conditions Tour (OHS)

15.5.1 This SHALL be the detailed tour where ALL areas of the organisation are viewed, particularly with respect to the need to comply with the SA8000:2014 Performance Indicator Annex.

15.5.2 In order for an organisation to be certified to SA8000, all facility and building areas SHALL be accessed by auditors. This includes any areas under construction or renovation, in which case auditors SHALL be provided with protective equipment as necessary.

15.5.3 During the OHS tour, it is expected that some workers will be chosen for a brief interview about general issues. The interviewees SHALL be taken to an area out of earshot of others but preferably still near to their workstation.

15.5.4 It is recommended that notes not be taken during these interviews but be made immediately after each interview. If notes are taken during the interview, the auditor SHALL explain to the worker the purpose of the notes, assure confidentiality to the interviewee and get their permission to take notes before the interview commences.

15.5.5 Production/process documents SHALL be copied for further review (a digital picture of the document is an acceptable alternative) for issues such as rest day working, overtime, etc.

15.5.6 Interviews of subcontractors may also be performed during the OHS tour.

15.5.7 In the case of smaller organisations, the brief initial tour and OHS tour may be combined.

Note: The term "Smaller organisation" refers to the physical area of the organisation's operations. A combined tour may be conducted if the audit team is able to access all operational areas to conduct its OHS physical review within approximately 30 minutes (for example, where all operations occur on one floor of a building).

15.6 Confirmation of Documents & Records for Review

- 15.6.1 The CB’s SA8000 audit team SHALL review the list of required documents and records given to the organisation and ascertain when they can expect to receive these to be of maximum use during the audit. The CB SHALL use their own Standard Documentation Template for this purpose.
- 15.6.2 The personnel files, time and attendance and remuneration records SHALL be checked for all the interviewees chosen, as well as additional personnel as indicated in column 2 and 3 of Table 6, below.
- 15.6.3 The minimum number of personnel/worker records to be reviewed at Initial (Stage 2) and Recertification Audits SHALL be at least as per Table 6, below.

Initial (Stage 2) & Recertification Audit - No. of Worker Records To be Reviewed			
Column 1	Column 2	Column 3	Column 4
Number Of Employees	Total Individual Employees Interviewed	**Additional Worker Files To Be Reviewed	Total Worker Files & Wage Records Reviewed
1-10	*	*	*
11-25	2	3	5
26-100	3	5	8
101-250	6	7	13
251-500	10	9	19
501-800	15	12	27
801-1200	15	15	30
1201-2000	20	17	37
2001-3000	20	20	40
3001-6000	25	25	50
6001-10000	25	30	55
10000-15000	30	35	65
15001-20000	30	40	70

** Note:*
** As decided appropriate by the CB Lead Auditor.*
*** The files of the all the workers interviewed SHALL be reviewed in detail. The other files SHALL be skimmed to look for any obvious anomalies that if found SHALL be investigated further.*

Table 6 – Initial (Stage 2) Audit – No. Of Records to Be Reviewed

- 15.6.4 The CB’s SA8000 audit team SHALL review records for at least the last twelve months prior to the audit date but, for initial certification, records completed by the company before the declared initial start date of the CB Client Company’s SA8000 Management System implementation date SHALL not be cited as evidence of a Non-conformity.

15.7 Management System Review

- 15.7.1 SA8000 requires a management system approach to implementing social accountability with performance indicators to show the organisation meets the SA8000 standard consistently and that non-conformities are identified internally and corrected effectively.
- 15.7.2 The management system established by the organisation must follow the classic Plan-Do-Check-Act [PDCA] principle. The PDCA approach is relevant and applies to social, environmental, health and safety management systems.
- 15.7.3 If non-conformities are found through evaluation of performance criteria, those CARs SHALL be issued relative to gaps in the organisation’s management system.

15.7.4 An SA8000 Stage 2 certification audit SHALL fully evaluate the implementation and effectiveness of the SA8000 management system, its linkages, its requirements and its performance. This is facilitated through the use of the Social Fingerprint Independent Evaluation.

15.7.5 The review of the management system of the client organisation SHALL be based on a process and risk management approach and include a review of the items in Table 7, below.

a) Policies, Procedures and Records	b) Social Performance Team
c) Identification and Assessment of Risks	d) Monitoring
e) Internal Involvement and Communication	f) Effectiveness of Complaint Management and Resolution
g) External Verification and Stakeholder Engagement	h) Root Cause Analysis, Corrective and Preventive Actions
i) Training and Capacity Building	j) Management of Suppliers and Contractors

Table 7 – Management System Elements

15.7.6 Photographs

- a) To provide supporting evidence of audit outcomes, photographs SHALL be taken as a record of the audit.
- b) The photographs SHALL provide positive reporting showing conformance (or non-conformance) to the elements of the Standard.
- c) Photographs SHALL be taken of the following, as applicable and described in Table 8.
- d) An initial set of Photographs SHALL be taken at each Stage 2 and Recertification Audit. Only changes to this set of Photographs SHALL be taken at subsequent surveillance audits as applicable.
- e) If an organisation refuses to permit the taking of photographs they SHALL NOT be allowed to be certified to SA8000.

1. Location(s) of the displayed SA8000 Standard	2. Location of Clients SA8000 Policy
3. Location(s) of displayed CB & SAAS Contact Information	4. Evacuation Exits
5. Organisation Building/ Premises	6. Evacuation Drills
7. Evacuation Location and signage	8. Evidence of the "posted" requirements of the Performance Indicator Annex. e.g. First Aiders, ERT Members.
9. Work/Production Area(s)	10. Warehouse(s)
11. Dormitory	12. Supporting Facilities (e.g. sewage treatment, boiler, generator)
13. Canteen	14. Attendance Record System
15. Chemical Storage Area	16. Work-In-Progress
17. Personal Protective Equipment	18. H&S Non-compliances
19. Fire Fighting Equipment	20. Best Practice
21. All Organisation's documents reviewed as a part of the management systems	

Table 8 – Photographs Required

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Note: Other than identified above, the number of photographs taken should be kept to a minimum and not include those of proprietary processes, individual worker's faces or children in crèches. A client organisation cannot refuse permission to take photographs as this requirement shall be clearly stated in the CB's Contract with their Client (See Clause 9.1.5 above). They can, though, review each Photograph taken by the CB Audit Team before the team leaves the company.

15.8 Interviews

15.8.1 Management interviews

- a) Discussions will be held to establish the general thoughts of the management of the organisation with respect to the implementation by the organisation of their SA8000 management system.
- b) The Pre-Audit Questionnaire will be reviewed with the management of the organisation to ensure that all information is current and accurate.
- c) The CB SHALL use their own Standard Interview Template for this purpose.

15.8.2 General personnel interviews (including staff and junior managers, first aiders, firemen and members of the Social Performance Team)

- a) Discussions will be held to establish the general thoughts and awareness of the personnel of the organisation with respect to the implementation by the organisation of their SA8000 management system.
- b) Interviews with the members of the SPT shall focus on the effectiveness of the SPT (noting that records of periodic SPT meetings alone are NOT considered adequate to demonstrate effectiveness), overall knowledge/competence of SPT members, implementation of the SPT's responsibilities, risk assessment, ongoing monitoring (especially of Health and Safety Issues), monitoring of workplace activities, communication, complaint management and resolution, and commitment by Senior Management to the SA8000 Standard.
- c) A representative number of personnel will be chosen by the CB Audit Team.
- d) The CB SHALL use their own Standard Interview Template for this purpose.

15.8.3 Workers representative(s) interview

- a) Discussions will be held to establish the thoughts of the Workers representative(s) with respect to the implementation by the organisation of its SA8000 management system, general working conditions, Freedom of Association (FOA), and other elements of the Standard within the organisation.
- b) The Workers representative(s) SHALL be asked to describe any Collective Bargaining Agreement (CBA) in place in the organisation.
- c) The Worker Representative(s) SHALL be asked to describe the election process followed when electing such representative(s).
- d) The CB SHALL use their own Standard Interview Template for this purpose.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

15.8.4 Confidential Worker Interviews – it SHALL be remembered at all times that the purpose of worker interviews is to obtain information that may act as a signpost to issues that require further examination by the SA8000 auditor.

- a) The results of discussions from worker interviews are generally anecdotal. Information obtained from worker interviews SHALL be noted and brought forward for further investigation throughout the current and future audits. If significant corroborating testimony or other evidence does not support information obtained during worker interviews, the CB SHALL institute off-site worker interviews and/or a special audit to identify further evidence to see if a non-conformity exists.
- b) No Manager or supervisor SHALL be present during worker interviews. If a trade union exists, the trade union representative shall be permitted to attend the interview at the request/agreement of the interviewee.
- c) The CB SHALL maintain a list of interviewees. This list SHALL NOT be shared with the client organisation/management. This list SHALL be used to ensure that different individuals are interviewed during subsequent audits or to do follow-up interviews at future audits, and the list of those interviewed SHALL be provided to the auditor prior to each audit.
- d) All interviews conducted by the SA8000 auditor SHALL include a verification of information regarding how the workers can communicate with the CB and SAAS regarding their concerns, or any additional information related to the audit. The auditor SHALL provide workers with the necessary contact information or alternatively, ensure that such information is made available to the workers by the CB's client through appropriate methods. Auditors shall ensure that CB contact information is available and listed in a prominent place such as the time and attendance recording location, dormitory or canteen at the certified organisation. Contact information SHALL also be given out by CB Auditors to workers chosen at random during the factory tour.
- e) The MINIMUM number of workers interviewed is as per Table 9 – Initial (Stage 2) Audit Number of Workers To Be Interviewed.
- f) In addition to the requirements of Table 9, members of the SPT SHALL be interviewed to ascertain the effectiveness of the SPT's activities.

Initial (Stage2) & ReCertification Audit - Workers To Be Interviewed & Hours To Be Spent On Interviews				
Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Employees	No. Of Individual Interviews	No. Of Group Interviews	Total Employees Interviewed	**Effective Time Spent On Interviews In Hours
1-10	*	*	*	40 mins
11-25	2	1 Group of 3	5	1
26-100	3	[2 Groups of 2] & [1 Group of 3]	10	3
101-250	6	[3 Groups of 3]	15	4
251-500	10	[2 Groups of 3] & [1 Group of 4]	20	5
501-800	15	[2 Groups of 3] & [1 Group 4]	25	7
801-1200	15	[1 Group of 3] & [3 Groups of 4]	30	7
1201-2000	20	[2 Groups of 3] & [1 Group 4] & [1 Group of 5]	35	9
2001-3000	20	[2 Groups of 3] & [1 Group of 4] & [2 Groups of 5]	40	9
3001-6000	25	[2 Groups of 3] & [1 Group of 4] & [2 Groups of 5]	45	11
6001-10000	25	[2 Groups of 3] & [2 Groups of 4] & [1 Group of 5] & [1 Group of 6]	50	11
10000-15000	30	[2 Groups of 3] & [2 Groups of 4] & [1 Group of 5] & [1 Group of 6]	55	13
15001-20000	30	[2 Groups of 3] & [2 Groups of 4] & [2 Groups of 5] & [1 Groups of 6]	60	14
<p>* Note: * As decided appropriate by the CB Lead Auditor. ** Approximate time.</p>				

Table 9 – Initial (Stage 2) Audit Number of Workers To Be Interviewed

- g) The format for the number of workers interviewed is, at minimum, as per Table 9 – Initial (Stage 2) Audit Number of Workers To Be Interviewed below. If the auditor has reason to vary from the table provided, this SHALL be documented in the client file.
- h) The total of personnel interviewed should be by a mixture of off and on-site interviews.
- i) Off-site interviews SHALL be undertaken, at minimum, for clients based in highest risk countries. In this case, at least a minimum of 2 workers to a maximum of 10 workers SHALL be interviewed off-site. Off-site interviews should be at a location where workers feel comfortable to share their opinions about work conditions. Dormitories without security guards present, apartments shared by workers, and entertainment facilities can be good places to conduct interviews. Auditors can consult with local organisations trusted by workers for good locations.
- j) The total of personnel interviewed as described above SHALL be understood to be absolute minimums and in many cases more interviews will have to be performed

15.8.5 Interview of on-site subcontract labour and suppliers

- a) During the stage 2 audit, in addition to the above, interviews SHALL be held to establish the general thoughts and SA8000 awareness of the personnel of on-site subcontractors and suppliers (such as cleaners, canteen staff, construction crews, clinic nurses and doctors, dormitory and security guards).
- b) Auditors SHALL identify the existence of migrant, temporary, contract and homemaker labourers and maintain interview questions particular to those labour situations.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- c) A confirmation of understanding of their own employer's SA8000 management system SHALL be confirmed.
- d) Subcontract labour personnel and suppliers SHALL also be asked about the organisation's working hours. Corroborating evidence can be obtained from canteen, clinic and security guard logs.
- e) Every Audit, A representative number of personnel SHALL be chosen by the CB Audit Team from each subcontractor; working hours, remuneration, discrimination, and employment contracts SHALL be examined.
- f) The CB SHALL use their own Standard Interview Template for this purpose.

15.9 Closing Meeting – (ISO/IEC 17021-1:2015 Clauses 9.4.7)

15.9.1 Pre-Closing Meeting

- a) The CB Audit Team Leader may decide, at their discretion, to hold a pre-closing meeting with the client organisation's SA8000 Management Representative and Social Performance Team so as to ensure the client has a clear understanding of the outcome of the audit.
- b) The purpose of such a meeting is to confirm the SF IE score and audit findings (NC's) by the audit team prior to the formal Closing Meeting.
- c) At the end of the pre-closing meeting the audit findings may be discussed in detail and AGREED with the company management representatives and other persons that the CB Audit Team Leader believes ought to attend. This is to save time at the Closing Meeting where any findings can just be summarized.
- d) If the auditor chooses to not hold a pre-closing meeting, the auditor shall ensure that SF IE score and audit findings have been communicated prior to the closing meeting

15.9.2 Closing meeting.

- a) Senior Management SHALL be requested to attend the Closing Meeting. This SHALL include those responsible for health and safety; payroll; production schedules; time and attendance monitoring and Labor & Ethics/Social Accountability compliance.
- b) Workers Representatives and Representatives of the Social Performance Team SHALL be requested to attend the Closing Meeting. If the Workers Representative is not in attendance, this SHALL be noted in the audit report.
- c) An attendance sheet SHALL be completed by all those that attend the Closing Meeting. For those attending virtually, the auditor SHALL record their names.
- d) If a consultant has been retained to help the organisation achieve SA8000 certification, the consultant may attend the Closing Meeting as an observer only.
- e) The audit conclusions, including the outcome of the Social Fingerprint Independent Evaluation (as applicable), SHALL be verbally summarized with translation into the language(s) of the workers representative(s) present if different from the language used.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

f) The client shall be informed if an additional full audit or limited audit (on-site) or documented evidence (to be confirmed during future audits) will be needed to verify effective correction and corrective actions of any Critical or Major Non-Conformity raised

g) To verify on-site, the effectiveness of a CAP produced by the CB Client Organisation as response to the raising of a Major nonconformity.

h) Best practice demonstrated by the organisation SHALL be highlighted by the auditor.

i) The auditor SHALL leave a copy of any NC reports raised during the audit with the organisation.

NOTE: Closing Meeting Elements – Good Practice.

a) Thank the company for their hospitality and for their assistance and co-operation.

b) Provide an overall summary of audit, non-compliances and comments found during the audit.

c) Present the audit team's recommendation for or against certification or its continuance.

d) Explain the procedure for submitting Corrective Action and Objective Evidence, where required, noting that the CB personnel may not assist a client to specify any corrective action response on the day of the audit (that is: prior to a thorough RCA being performed by the client).

e) Explain the continual (surveillance) audit cycle.

f) Invite questions from the organisation's representatives including comments on the expected report.

g) Leave a record of all non-conformities raised with the organisation.

h) Review the confidentiality agreement and anti-bribery policy. The CB Audit Team and Client Representative(s) may re-sign for retention as an audit record.

i) Advise company of arrangements and expectations for follow-up review activity.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 16

Surveillance Audits

16. Surveillance Audits

16.1 General – (ISO/IEC 17021-1:2015 Clauses 9.6.2)

16.1.1 The CB SHALL have a documented procedure that describes how it undertakes surveillance audits.

16.1.1.1 The definition of Semi-announced audit is as per Cl 7.2.35. The semi-announced audit process is as per Figure 2 below.

16.1.2 With the exception of Multi-site clients (See section 21, below), surveillance audits of SA8000 certified organisations SHALL be planned and conducted on an annual basis over the three-year certification cycle, as defined in Figure 2 and Figure 3, below.

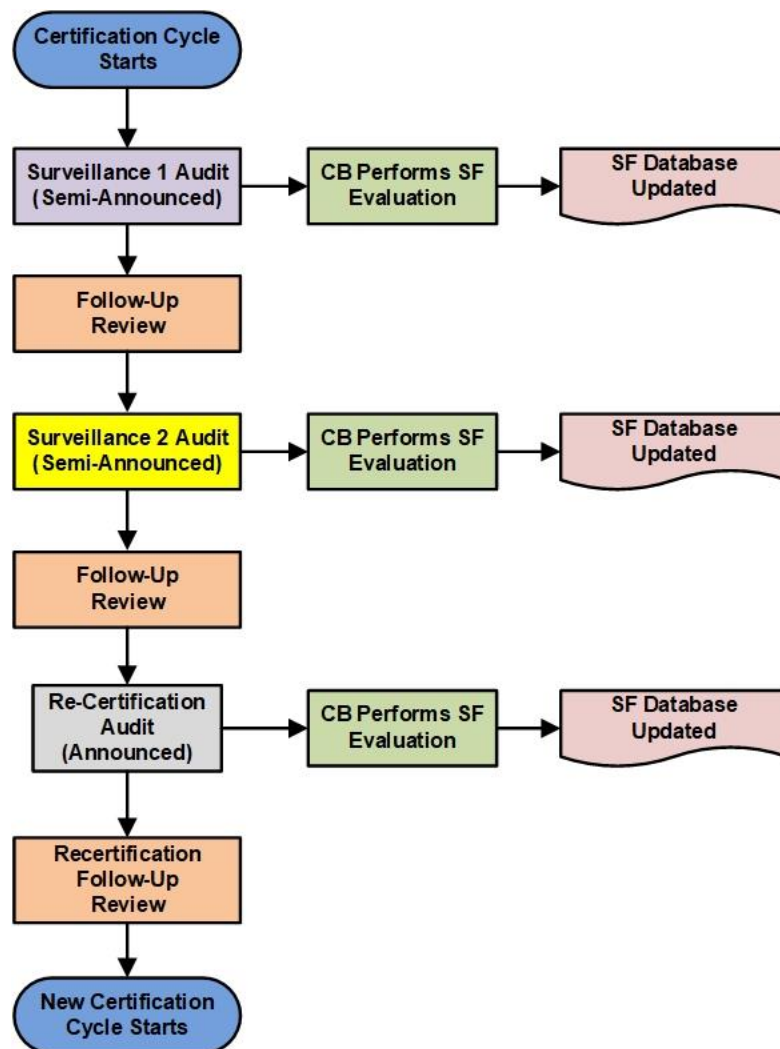


Figure 2 – Surveillance during the SA8000 Certification Cycle

16.1.2.1 The planning of routine surveillance windows and recertification audits SHALL be as follows (Figure 3):

Audit/Certification Cycle Activity	Visit Type	Time Window	Week Numbers
Certification (Cycle Starts = 0 months)	None	None	0
Surveillance Audit #1 (Prior to 6 months)	Semi-announced visit	8 weeks	18-26
Follow-up Review (Prior to 12 months)	Usually announced and performed off-site, however, CB may, at its discretion, perform follow-up review on-site (announced or unannounced).	4 weeks	48-52
Surveillance Audit #2 (Prior to 18 months)	Semi-announced visit	8 weeks	70-78
Follow-up Review (Prior to 24 months)	Usually announced and performed off-site, however, CB may, at its discretion, perform follow-up review on-site (announced or unannounced).	4 weeks	100-104
Re-Certification Audit (Prior to 30 months)	Fully announced visit	8 weeks	122-130
Follow-up and Recertification Review (33-35 months)	Usually announced and performed off-site, however, CB may, at its discretion, perform follow-up review on-site (announced or unannounced).	8 weeks	144-152
Current Certification Expires / Positive Certification Decision made (if requirements met) (Cycle Ends = 36 Months - New Cycle Starts)	None	None	156

Figure 3 – Annual Surveillance and Re-certification Audit Planning

16.1.2.2 The Audit time windows in Figure 3 above SHALL be communicated to the SA8000 Client no less than 8 weeks prior to the audit (or the start of the window for a semi-announced audit). It is the client's responsibility to inform the CB (before the start date of the window) of any local holidays and shutdowns that occur during the window. If the client has a bona fide reason for not being able to accommodate an audit on a day before the first day of the window, then that date is blocked out in the window and the audit not performed on that day. Requests to block out a date received during the specified window SHALL be ignored and the client informed accordingly. The client is not allowed to negotiate on the dates of the window nor is the window permitted to be moved once the CB has informed the client of the same.

Guidance Notes To The Above

- a) Any client that does not readily accommodate a semi-announced surveillance audit visit during the window SHALL have their certification CANCELLED.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

b) *Semi-announced audits should not be performed on the last day of the window.*

- 16.1.3 All SA8000 certified organisations SHALL undergo periodic surveillance audits. Surveillance visits SHALL be planned in accordance with Section 12 “General Audit Planning” above.
- 16.1.4 The amount of time required for the SA8000 audit effort SHALL be as described in Table 15 in section 20.5.
- 16.1.5 As per ISO/IEC 17021, clause 9.1.3.2, the certification cycle SHALL begin with the certification or recertification decision date (as informed by the CB to their client).
- a) The date of the first surveillance audit following the initial certification or recertification decision SHALL be not more than 6 months from the certification or recertification decision date (as informed by the CB to their client).
- 16.1.6 Within the initial certification and subsequent cycles, the frequency of surveillance SHALL be determined as follows:
- a) All SA8000 certified organisations SHALL undergo a surveillance (or recertification) audit at least every twelve months. See Figure 3 above.
- b) Delays in surveillance audit scheduling. Clients SHALL not permitted to delay any surveillance audit unless the facility is subject to a force majeure such as an earthquake, flood or fire and cannot trade. In these cases, the client’s certificate SHALL be immediately suspended and the reason for such suspension recorded by the CB in the client file along with copies of the press coverage for the incident as evidence.
- c) If the Client commences trading within three months of the incident, a special on-site audit SHALL be conducted by the CB to evaluate and confirm that any impacts no longer adversely affect SA8000 conformity.
- d) If the delay due to a client request is greater than three months, then the client’s certificate SHALL be withdrawn/cancelled. Records of a suspension or cancellation SHALL be documented and maintained by the CB.
- e) Under no circumstance SHALL two surveillance audits be combined as one.
- 16.1.7 During each surveillance audit, the Audit Team Leader SHALL ensure that the conformity evidence reviewed by the team includes evidence attesting to conformity during the organisation’s ‘high season/peak productivity’ and ‘low season/low productivity’ (including, but not limited to ‘working hours’ conformity).
- 16.1.8 Each surveillance audit SHALL re-examine, in addition to the items mentioned in Table 10 below, additional SA8000 elements, so that all elements of the SA8000 Standard SHALL have been re-examined within each three-year cycle. Although not all clauses of SA8000 will usually be audited during each surveillance audit, the items in Table 10 SHALL be audited on each surveillance audit. See the Procedure 200A for integration of the Social Fingerprint Independent Evaluation into the surveillance process.

Mandatory Items To Be Reviewed Each Surveillance Audit	
a) Verification of the number of personnel covered by the scope.	<p>b) The review of the management system elements of management review, internal audits and corrective action.</p> <p>Performance monitoring to the SA8000:2014 PIA's SHALL be part of discussions at each management review meeting held by a SA8000:2014 Certified Organisation.</p>
c) Response to any complaints received and the effectiveness of the organisation's complaint mechanism (noting that the existence of suggestion boxes that almost never receive any comments are not deemed to demonstrate effectiveness).	d) Worker training and worker awareness and understanding of the client's SA8000 system in place.
e) Effectiveness of the root cause analysis, corrective and preventive action taken as a result of non-conformities raised during the previous audit (s) by the CB including progress against any TB-N/Cs raised.	f) Effectiveness of the health and safety management system in place, including number of incidents since the previous audit and analysis of any fatalities, any serious accidents, and any potentially hazardous events including fires, spills of toxic chemicals, explosions.
g) Activities of the Worker Representative(s) since the previous audit.	h) Analysis of working hours and remuneration (including during high season, if any) since the previous audit.
i) Comparison between in the CB's calculated current living wage and the process and number that is calculated by the certified organisation.	j) Use of claims made by the client about their SA8000 certified status including the use of CB and SAAS SA8000 mark.
k) Update of the client's SA8000 audit records.	l) Confirmation that the SA8000 Standard is posted in prominent location(s) including in field offices. The posting of the company's SA policy document only does not satisfy this requirement.
m) A site tour of facilities SHALL be mandatory on every on-site audit.	n) Effectiveness of the SPT. An annual meeting only does not usually meet this requirement.

Table 10 - Mandatory Items to Be Audited During Surveillance Audits

16.1.9 The client organisation’s social accountability targets, objectives and performance indicators as described in Table 11 SHALL be identified and maintained with the client’s records so as to show improvement in conformance over time.

Item	Each On-Site Surveillance Audit Report SHALL As A Minimum Include a description Of:
1	Changes to the organisation’s SA8000 management system
2	Changes to the organisational structure
3	Progress made against any Time-Bound Non-Conformities corrective action plans
4	Close-out of non-conformities raised at previous audit - including review of corrective action verification
5	Evaluation of prior follow-up review actions/recommendations
6	Management systems including management review, internal audit, corrective action
7	Complaints and grievances and the organisation’s response
8	Worker training and awareness of health and safety and the SA8000 management system
9	Comprehensive review of the health & safety conditions within the organisation.
10	Overall health and safety risk assessment including review of incidents and accidents
11	Effectiveness of the organisations complaint mechanism
12	Effectiveness of the SPT Activities
13	Worker representative role and activities
14	Working hours
15	Living wage calculation by the organisation
16	Use of SA8000 certification logo

Table 11 – Targets & Objectives to Be Audited Each Surveillance Audit

16.2 Surveillance Audits – Single Site

16.2.1 The CB SHALL conduct site semi-announced audits and follow-up reviews during every three-year certification cycle (see section 7.2 for definitions and Figure 2 and Figure 3, above for scheduling requirements).

16.2.2 The CB SHALL supplement on-site annual audits by conducting follow-up reviews between each on-site audit to ensure that the client continues to monitor and improve its performance (in accordance with Clauses 3.5, 9.4, 9.6 & 9.8 of SA8000:2014).

16.2.3 The CB SHALL maintain a documented procedure defining its techniques and requirements for surveillance audits and follow-up reviews in accordance with this procedure.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 16.2.4 Follow-up reviews (typically around 2 hours in duration, including preparation and reporting time) SHALL be conducted by a qualified Lead Auditor (typically the Team Leader leading the prior audit visit) and SHALL comprise appropriate verbal and other electronic interaction to review evidence with client representatives (via VOIP, document sharing, and similar protocols, or face to face, when appropriate). Follow-up review details and outcomes SHALL be appropriately recorded in client files and made available to a SAAS Auditor upon request.
- 16.2.5 As a minimum, the follow-up review techniques performed in line with 16.2.2 SHALL include an explicit and documented review of evidence demonstrating:
- review of client operations and confirmation of continued appropriateness and accuracy of SA8000 certification scope
 - confirmation of number of employees, and/or changes to personnel
 - progress/closure of previously raised non-conformities (See Clause 22.6)
 - progress being made towards required time-bound N/C criteria (See Clause 22.7)
 - the organisation's commitment to health and safety, including satisfactory results and records of the organisation's ongoing health and safety risk assessments and corrective and preventive actions taken (per SA8000 requirement 3.5)
 - the organisation's commitment to its internal 'monitoring', 'complaint management', and 'improvement' processes (per SA8000 requirements 9.4, 9.6 and 9.8).
- 16.2.6 Additionally, during a "Recertification Follow-up Review" (typically performed off-site 33-35 months after the initial certification), the follow-up review activities shall confirm, and records demonstrate, that all required conditions for recertification have been met. Recertification follow-up review records shall clearly document:
- Reconfirmation of SA8000 certification scope
 - Reconfirmation of number of employees
 - Reconfirmation of Certificate and other certification details
 - Confirmation that any previously raised Critical or Major non-conformities have been adequately addressed and closed
 - Recommendation/ Non-Recommendation for continued certification to SA8000 (subject to which, re-certification may be granted or denied by the CB's decision making authority).
- 16.2.7 If the follow-up review identifies weaknesses/findings against the performance of the client company to SA8000 requirements 3.5, 9.4, 9.6 or 9.8, then the reviewing auditor SHALL raise a nonconformity citing "inadequate demonstration of commitment to management systems principles within the organisation's SA8000 Policy (SA8000, 9.1.2)" and further details/evidence of the infraction(s) as follows:
- In the case of minor, isolated (non-systemic) failure to demonstrate commitment, a MINOR nonconformity shall be raised. Further actions SHALL be reviewed during the next scheduled audit visit.
 - In the case of broad, or systemic, lack of commitment, a MAJOR nonconformity shall be raised. A Special Audit (See section 19, below) conducted on-site within 8 weeks to review responses and further actions undertaken (potentially leading to a recommendation for suspension of certification).

16.3 Monitoring Certified Organisation Performance and Non-Conformity Trends

- 16.3.1 The performance of the client organisation to the requirements of SA8000 SHALL be monitored during each surveillance audit over the certification cycle.
- 16.3.2 The CB SHALL have a method by which to highlight to each auditor the issues that have occurred at all previous visits to enable that auditor to monitor trends.
- 16.3.3 The CB SHALL also maintain a record of the client's progress of improvement in performance for each SA8000 element and against the PIA in their audit report.

16.4 Surveillance Audit Worker Interview and Record Review

- 16.4.1 The minimum number of worker files to be reviewed at each surveillance audit SHALL be as defined in

Table 12 - Required Minimum Number of Worker Files to Be Reviewed Per Surveillance Audit below.

- 16.4.2 The format for the number of workers interviewed and minimum time to be spent on interviews is defined in Table 13. If the auditor has reason to vary from the table provided, this SHALL be documented in the client file.

Surveillance Audit - No. of Worker Records To be Reviewed			
Column 1	Column 2	Column 3	Column 4
Number Of Employees	Total Individual Employees Interviewed	**Additional Worker Files To Be Reviewed	Total Worker Files & Wage Records Reviewed
1-10	*	*	*
11-25	1	1	2
26-100	1	2	3
101-250	2	2	4
251-500	3	3	6
501-800	5	4	9
801-1200	5	5	10
1201-2000	7	6	13
2001-3000	7	7	14
3001-6000	8	8	16
6001-10000	8	10	18
10000-15000	10	12	22
15001-20000	10	13	23
<p><i>* Note:</i> <i>* As decided appropriate by the CB Lead Auditor.</i> <i>** The files of the all the workers interviewed SHALL be reviewed in detail. The other files SHALL be skimmed to look for any obvious anomalies that if found SHALL be investigated further.</i></p>			

Table 12 - Required Minimum Number of Worker Files to Be Reviewed Per Surveillance Audit

Surveillance Audit - Workers To Be Interviewed & Hours To Be Spent On Interviews				
Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Employees	No. Of Individual Interviews	No. Of Group Interviews	Total Employees Interviewed	**Effective Time Spent On Interviews In Hours
1-10	*	*	*	30 mins
1-25	1	[1 Group of 2]	3	30 mins
26-100	2	[1 Group of 2]	4	45 mins
101-250	3	[1 Group of 2]	5	1.5
251-500	4	[1 Group of 3]	7	2.5
501-800	5	[1 Group of 3]	8	4.0
801-1200	5	[1 Group of 2] & [1 Group of 3]	10	5.0
1201-2000	6	[1 Group of 2] & [1 Group of 4]	12	5.5
2001-3000	6	[2 Groups of 2] & [1 Group of 3]	13	6.0
3001-6000	8	[2 Groups of 2] & [1 Group of 3]	15	6.5
6001-10000	8	[1 Group of 2] & [1 Group of 3] & [1 Group of 4]	17	6.5
10000-15000	9	[1 Group of 2] & [1 Group of 3] & [1 Group of 4]	18	7.0
15001-20000	10	[2 Groups of 2] & [2 Groups of 3]	20	8.0
* Note:				
* As decided appropriate by the CB Lead Auditor.				
** Approximate time.				

Table 13 - Surveillance Audit Minimum Number of Workers to Be Interviewed

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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Section 17

Recertification Audits

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17. Recertification Audits

17.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.6.3)

- 17.1.1 The CB SHALL have a documented procedure that covers the performance of recertification audits, including the Social Fingerprint Independent Evaluation process.
- 17.1.2 The process as described in Stage 2 Audits above SHALL be followed for all Recertification Audits.
- 17.1.3 Every recertification audit SHALL reassess the effectiveness of the entirety of the policies and actions defined in the client organisation's social management system and the overall effectiveness of that management system in its entirety, taking into consideration internal and external changes which may have affected the social management system.
- 17.1.4 The CB SHALL document the process used and outcome for deciding whether a Stage 1 audit is necessary for the recertification client. A Stage 1 audit may be deemed necessary if the certified organisation underwent a major change since the last certification audit such as a relocation, addition or deletion of locations of the organisation or the addition of business processes, shifts and/or

17.1.6 The audit effort for recertification SHALL be newly calculated based on a documented review of updated information (provided by the certified organization) to consider changes to personnel numbers and other factors. Significant factors to consider SHALL include: the number of personnel, size and geographic spread of facilities, technology in the business services, shift patterns, labour sourcing, and/or a move from dormitories to living outside the factory. Additionally the following items SHALL be reviewed:

- i. progress/closure of previously raised Major and Minor N/C's (See Clause 22.6)
- ii. progress being made towards required time-bound N/C criteria (See Clause 22.7)
- iii. the organisation's commitment to its internal 'monitoring', 'complaint management', and 'improvement' processes (per SA8000 requirements 9.4, 9.6 and 9.8).

If this documented review above shows that progress has not been made then the audit day reduction as in Cl17.1.6 a) and b) below SHALL not apply.

- a) In cases where there has been no significant change within the client organisation, the amount of audit effort SHALL be no less than 70% of that that used for the initial (Stage 2) Audit (see Table 14).
- b) In the case of a significant change, the CB SHALL recalculate the number of audit days required based on 70% of what the initial audit would be with the new and updated changes (see Table 14).
- c) The recertification audit SHALL BE performed in line with the timescale as in Figure 3 above.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

17.1.7 If an organisation has its SA8000 certificate withdrawn by a SAAS-accredited CB for any reason and the client decides, within 6 months, to re-establish its SA8000 certification with the same CB, then this may be affected in line with the Recertification Audit requirements found in this section of the document. Any requests to re-establish its SA8000 certification after 6 months, or with a new CB, SHALL be treated as a new application and an initial Stage 1 and Stage 2 certification audit shall be required.

17.1.8 If an organisation voluntarily decides to cancel its SA8000 certification and then decides within 6 months to re-establish its SA8000 certification with the same CB, then this may be affected in line with the Recertification Audit requirements found in this section of the document. Any requests to re-establish its SA8000 certification after 6 months, or with a new CB, SHALL be treated as a new application and an initial Stage 1 and Stage 2 certification audit shall be required.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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Section 18

Transfer Audits

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18. Transfer Audits (ISO/IEC 17021-1:2015 Clauses 9.5.3.3)

[For further reference and guidance See - IAF MD 2:2007 - IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems – Clauses 2.2 & 2.3]

This Section 18 specifically relates to Transfer Audits. If a CB receives a request for certification from any previously SA8000 certified client, even if they are not treating this request as a transfer audit, then that CB SHALL formally confer with SAAS to ensure that the client has a clean certification history.

18.1 General Requirements

- 18.1.1 From time to time an organisation certified to SA8000 by a SAAS-accredited CB may decide to change its chosen CB. Although the preferred time of such a change is at the end of the 3-year certification cycle, if an organisation elects to change its CB and to continue certification to SA8000 at any point, then the steps as below SHALL be followed. If the requested transfer is because the clients' CB is no longer SAAS accredited, then the procedure as in 18.2 below SHALL be adopted.
- 18.1.2 All SAAS-accredited CBs SHALL have a documented procedure that describes how they affect transfers of SA8000 certification.
- 18.1.3 In all cases, the new CB SHALL obtain a copy of, at minimum, the last 2 SA8000 audit reports produced by the previous CB for review. If these reports are not available (from either the client or the former CB, or with assistance from SAAS) then a transfer CANNOT take place and the client SHALL be considered a new client and an initial certification Stage 1 and Stage 2 audit SHALL be conducted.
- 18.1.4 SAAS-accredited CBs SHALL provide a copy of their last two audit reports of a client that wishes to transfer to another SAAS-accredited CB at the request of that CB.

Note: It is an accreditation requirement (See SAAS Procedure 201A) that upon the transfer of SA8000 certification from one SAAS-accredited CB to another, that the former CB provides copies of their last two audit reports to the new CB along with any concerns that they may have about that client's ability to meet the requirements of SA8000 in a consistent manner.

- 18.1.5 For transfer during or at the end of the certification cycle (i.e. a live and current SA8000 certificate exists), the steps as detailed below SHALL be followed in sequence, before any transfer can occur:
- a) The new CB SHALL be accredited by SAAS for the country (or countries) of the transferee.
 - b) The existing client certificate SHALL be valid, with no open critical or major non-conformities. Organisations whose SA8000 Certificate has expired ARE NOT eligible for this Transfer process and shall be treated as new clients.
 - c) If open critical or major NCs exist, no transfer SHALL be undertaken until a new certification audit (Stage 1 & Stage 2) is performed. If the client is currently suspended with its existing CB, a transfer may not take place until a new certification audit (Stage 1 & Stage 2) is performed. Any open minor non-conformities SHALL be addressed by a corrective action plan.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- d) The new CB SHALL formally notify SAAS (and have received an affirmative reply in writing) of the transfer activity upon scheduling and prior to the on-site audit so SAAS may provide input on any known issues or outstanding complaints and/or concerns about the client.
- e) The new CB SHALL perform and document a review of, at minimum, the 2 most recent SA8000 audit report(s) and all non-conformity findings issued by the former CB, including those previously closed out.
- f) The new CB SHALL perform and document a basic document review that includes the key indicators of the social management system performance.
- g) The new CB SHALL perform and document an on-site audit equivalent to a recertification audit to affect a transfer of certificate; a Social Fingerprint Independent Evaluation shall be conducted as per the recertification requirements.
- h) A new certification cycle shall commence with the issuance of a new SA8000 certificate to a transfer client.
- i) To mitigate any risk of Conflict of Interest issues, when transferring to the new CB the audit team used for the transfer audit SHALL NOT consist of any members that had participated in audits in the last cycle for the previous CB. NOTE: This refers mainly to the use of subcontract auditors that work for several CB's.

18.1.6 Clients certified by organisations not accredited by SAAS are not considered recognized, valid SA8000 certificate holders. Therefore, those clients SHALL NOT be considered eligible to undergo the transfer process and initial certification audits SHALL be conducted. However, the CB SHALL read any and all social audit reports available. The accredited CB SHALL also report to SAAS any such clients that have received unaccredited SA8000 certificates so SAAS may investigate the organisation issuing unaccredited SA8000 certificates. The only exception to this prohibition SHALL be applicant CBs undergoing the accreditation process with SAAS. See Procedure 201A for details on the issuance of unaccredited SA8000 certificates by applicant CBs.

18.2 Transfer requested when a CB is no longer accredited to perform SA8000 audits

- 18.2.1 All SAAS-accredited CBs SHALL have a documented procedure that describes how they affect transfers of SA8000 certification from clients if their CB is no longer SAAS accredited, .
- 18.2.2 For transfer during or at the end of the certification cycle (i.e. a live and current SA8000 certificate exists), the steps as detailed below SHALL be followed in sequence, before any transfer can occur:
 - a) The new CB SHALL be accredited by SAAS for the country (or countries) of the transferee.
 - b) The new CB SHALL formally notify SAAS (and have received an affirmative reply in writing) of the transfer activity upon scheduling and prior to the on-site audit so SAAS may provide input on any known issues or outstanding complaints and/or concerns about the client.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

18.2.3 The new CB SHALL perform a SPECIAL VERIFICATION AUDIT as follows:

a) If the client is in a Highest Risk Country then it requires a mandatory 1 day on-site special visit irrespective of company size. This visit SHALL include an onsite review of the clients documented management system (DMS), risk assessment, management review, internal audits, SPT Monitoring Activities, Social Fingerprint scores and the previous CB reports for the current cycle.

b) If the client is in a High-Risk country then this only requires an offsite review of the client's DMS, risk assessment, management review, internal audits, SPT Monitoring Activities and Social Fingerprint scores and the previous CB reports for the current cycle.

Note: if the CB wishes to do an on-site 1 day special audit (as maybe a result of their own certification risk assessment) then they can do this but have to justify why in the client file.

c) In Lowest Risk Countries the new CB "picks up" the audit activities in line with the previous CB's program (e.g. Surveillance #2) - and performs a document review of the previous reports only.

18.2.4 A comprehensive audit report of the activities in a) b) or c) above SHALL be produced to enable those responsible for the certification decision to come to the correct transfer decision.

18.2.5 The Special Verification Audit (as 18.2.3 above) SHALL also review any existing open critical, major, minor and time-bound non-conformities and agree the existing or a revised CAP for the closure of the same. The assigned auditor/audit team SHALL also review the general compliance of the company to the requirements of SA8000.

18.2.6 The date of the new certification continuation SHALL be the existing date of the previous CB's certificate unless a re-certification audit was performed and, in that case, the date SHALL be the date of the granting of SA8000 Certification made by those responsible for the certification decision.

18.2.7 If the previous CB has already performed their 2nd Annual Semi-Announced audit then, a recertification audit SHALL be performed in lieu of that described in 18.2.2 above.

18.2.8 Unless an on-site visit is required, it is expected that the transfer from the previous CB to the new CB will be made at minimal or reduced cost.

18.2.9 All transfer activities under this Section 18.2 SHALL be completed with 10 weeks of the previous CB relinquishing involvement with the Client company (and certificate cancellation) otherwise a new Recertification Audit SHALL be performed.

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Section 19

Special Audits

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19. Special Audits

19.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.6.4)

19.1.1 The CB SHALL have a documented procedure that covers the performance of special audits with the possible need for access to the CB client's premises (that may be announced, semi-announced, or unannounced) included in the contractual agreement between the CB and their client.

19.1.2 The CB SHALL document in the client file the reason for the Special Audit, the process used and the outcome of the decision of the Special Audit.

19.1.3 Types of Special Audits. Special audits are typically performed for the following reasons:

a) Extension/expansion of a client organisation's scope of SA8000 certification.

b) To investigate possible auditor bribery.

c) To investigate a complaint, whether generated internally, from a stakeholder, from a client organisation or from SAAS.

d) As part of a calibration/duplicate audit process.

e) To verify on-site, the effectiveness of a CAP produced by the CB Client Organisation as response to the raising of a Critical, Major or Time-Bound nonconformity.

f) As the result of issues raised during a Follow-Up Review.

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Section 20

Audit Effort – Single Site

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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20. Audit Days – Single Site

20.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.1.4)

- 20.1.1 The overall audit time expressed in the **minimum number of auditor days** taken to audit an organisation against the requirements of the SA8000 Standard includes time to ensure adequate stakeholder engagement, off-site auditing activities (including planning of the audit, review of the preparatory documents, writing the report and managing the general aspects of the job) as well as performing the on-site audit.
- 20.1.2 The CB SHALL calculate the time to spend on the audit by factoring in the sector complexity, perceived risk, country risk category (as determined by the SAAS Certification Country Risk Assessment Process), number of personnel, and off-site worker interviews to be conducted, where appropriate. The IAF/ISO approach is useful, and CBs SHALL review IAF MD 5:2013 for guidance on risk assessment and audit duration. However, the document itself cannot be fully adopted when certifying organisations to SA8000 as it is not possible to use the full-time equivalent approach for social audits.
- 20.1.3 Particular attention SHALL be paid when calculating the auditor days for the on-site audit as the on-site audits are the most critical phases in the entire certification process and allows the auditor to assess full compliance to the SA8000 Standard Elements.
- 20.1.4 Table 14 defines the MINIMUM and AVERAGE audit days for the stages of the initial audit. In some cases, more audit days will be allocated by the CB.
- 20.1.5 The number of personnel in the organisation for use with the audit day table SHALL be calculated considering the total number of personnel (including seasonal, part-time and temporary workers, indirect workers, and subcontractors and on-site suppliers) paid by the client, either directly or through an employment agency or an on-site subcontractor.
- a) Calculation of personnel SHALL be based on totals during the high season.
 - b) Calculation of personnel SHALL not be reduced by converting part-time personnel into full-time equivalents.
 - c) Calculation of personnel SHALL include on-site and exclusive suppliers, including those personnel supplied by a private employment agency. Personnel provided by such suppliers SHALL be included as part of the scope of the SA8000 audit (and hence audit day calculations) rather than the control of supplier's clause of SA8000.

20.2 Single Site Initial Certification Audit Effort

- 20.2.1 The audit effort used for SA8000 Initial Certification Audits SHALL be as Table 14.

Stage 1 - Standard Audit Effort				
Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Employees	Total Minimum Stage 1 Audit & Social Fingerprint Review & Stage 2 Preparation - Days [Hours]	Approximate Time Spent On Social Fingerprint IE Days [Hours]	Minimum Stage 1 On Site Audit Effort Days [Hours]	Average Stage 1 Reporting Days Days [Hours]
1-25	1.5[12]	0.25[2]	1[8]	0.25[2]
26-100	2[16]	0.25[2]	1.4[11]	0.35[3]
101-250	2[16]	0.25[2]	1.4[11]	0.35[3]
251-500	2[16]	0.25[2]	1.4[11]	0.35[3]
501-800	2[16]	0.25[2]	1.4[11]	0.35[3]
801-1200	2[16]	0.25[2]	1.4[11]	0.35[3]
1201-2000	2[16]	0.25[2]	1.4[11]	0.35[3]
2001-3000	2[16]	0.25[2]	1.4[11]	0.35[3]
3001-6000	2[16]	0.25[2]	1.4[11]	0.35[3]
6001-10,000	3[24]	0.25[2]	2.2[18]	0.55[4]
10,001-15,000	3[24]	0.25[2]	2.2[18]	0.55[4]
15,001-20,000	3[24]	0.25[2]	2.2[18]	0.55[4]

Stage 2 - Standard Audit Effort				
Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Employees	Total Minimum Stage 2 Audit & Social Fingerprint Review & Stage 2 Preparation - Days [Hours]	Approximate Time Spent On Social Fingerprint IE Days [Hours]	Minimum Stage 2 On Site Audit Effort Days [Hours]	Average Stage 2 Reporting Days Days [Hours]
1-25	2[16]	0.25[2]	1[8]	0.75[6]
26-100	3[24]	0.25[2]	2[16]	0.75[6]
101-250	4[32]	0.25[2]	3[24]	0.75[6]
251-500	6[48]	0.25[2]	5[40]	0.75[6]
501-800	7[56]	0.25[2]	5.75[46]	1[8]
801-1200	9[72]	0.25[2]	7.75[62]	1[8]
1201-2000	11[88]	0.25[2]	9.75[78]	1[8]
2001-3000	12[96]	0.25[2]	10.75[86]	1[8]
3001-6000	13[104]	0.25[2]	11.75[94]	1[8]
6001-10,000	14[112]	0.25[2]	12.25[98]	1.5[12]
10,001-15,000	15[120]	0.25[2]	13.25[106]	1.5[12]
15,001-20,000	16[128]	0.25[2]	14.25[114]	1.5[12]

Table 14 - Single Site Initial Certification Audit Effort in Days

20.2.2 When using Table 14, the following SHALL be taken into account.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- a) All activities (excluding preparation, off-site auditing, follow-up review activities and audit reporting) are performed on-site. The effort suggested should be understood to be absolute minimums and in many cases more time will have to be added due to issues such as size of site, complexity of processes, use of labour agencies etc.
- b) Stage 2 preparation time includes research, audit planning, living wage calculations and stakeholder consultation.
- c) The use of translators and interpreters, in most cases, SHALL necessitate additional time (See ISO 17021:2015 Clause 9.1.4.4). If a translator is used, then the CB SHALL justify the number of audit days used.
- d) An audit performed for the first time in a new country for the CB may necessitate additional time. The CB SHALL justify the number of audit days used for the certification of an organisation in a new country.
- e) Fractionalization of prescribed audit days resulting in half days may occur as per the audit day tables found in this document. As a result, half day audits are allowed at those SA8000 certified organisations under the SAAS Procedure 200.

f) The reporting time mentioned in Table 14 (and other tables in this procedure, refers to the Audit Team Leader time only. This time SHALL NOT be used by back office staff to complete the Living Wage of Social Fingerprint Tools Off-Site.

Note:

1) "Reporting Time" - REFERS TO THE TIME ALLOCATED TO THE AUDIT TEAM LEADER TO FINALISE THE AUDIT REPORT IN LINE WITH ISO17021-1:2015. Any administrative activities such as the collection and collation of records is additional to the times indicated in Table 14.

2) In accordance with ISO17025-1:2015 Clause 9.4.8.2 *The audit team leader shall ensure that the audit report is prepared and shall be responsible for its content.....*

- 20.2.3 If the distance between two linked locations belonging to the same client and working to the same management system procedures (e.g. for a main manufacturing unit and a satellite production unit) is less than 1 hour drive by car apart, the number of employees at both sites may be added together (clubbed) for audit effort planning purposes.

Note: *The one-hour time limit is as measured by using applications such as Google Maps, Bing Maps, Waze, Baidu Maps and Gaode Maps as follows.*

<https://map.baidu.com/>; <https://www.bing.com/maps>; <https://www.waze.com/>;
<https://www.google.com/maps/>; <https://gaode.com/>

- 20.2.4 An audit day SHALL be defined as a full normal working day of 8 hours, excluding meals and breaks and travel time to and from the audit, and travel time between facilities, if the organisation has for example two or more locations. Lunch breaks should be limited to 45 minutes and in countries where lunch breaks are 1.5 or 2 hours the CB's Audit Plan SHALL detail what the Audit Team will do during this extended period.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

a) The number of audit days SHALL not be reduced by scheduling longer hours per workday. The only exception is on days when shift work is being covered (see Table 1).

b) The Audit Team Leader SHALL mark-up-by-hand a copy of the audit plan (as anticipated) to show the actual arrival/departure times and actual changes to the planned audit activities and/or assignments (as executed). This marked-up copy (which may be retained either as a hard-copy, or as an electronically scanned copy such as a PDF or JPG) SHALL be maintained by the CB as an audit record. *Note: An electronically amended version of the originally anticipated plan incorporated within the audit report does NOT meet this requirement.*

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

20.2.5 No SA8000 Audit SHALL ever be combined with other audits such as ISO 9001, ISO 14001, OHSAS 18001, or ISO 45001 BUT may performed at the same time as other Social/Labor and Ethics Audits as long as the audit effort is not compromised for either program.

20.3 INTENTIONALLY LEFT BLANK

20.4 Initial Audit Days for CB's First Certification in a New Country

- 20.4.1 Prior to performing any SA8000 audit activity in a new country, the CB SHALL apply for and be granted an Expansion to Scope. See Procedure 201A for process details.
- 20.4.2 When performing the first SA8000 audit in a new country, the CB SHALL increase the audit days described in Table 14 by 20%.

20.5 Single Site Surveillance Audit Effort

- 20.5.1 Surveillance audits SHALL be scheduled as per the details in Section 16 above.
- 20.5.2 The number of days allocated to a surveillance audit SHALL be based on the Stage 2 initial certification audit days. In the case where an organisation has been the subject of a recertification audit and there were significant changes in the number or personnel or activities, then the surveillance audit effort SHALL be based on the new recalculated value.
- 20.5.3 A contract review SHALL be performed prior to each audit to understand changes in employment during the audit cycle and, as necessary, adjust the audit day effort. This SHALL be performed and documented as part of the audit planning at least 4 weeks ahead of the audit date.
- 20.5.4 Table 15 provides the number of audit days required on-site per individual audit with fractionalization of the prescribed audit days being permitted.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Minimum Single Site Annual Surveillance Audit Effort In Days				
Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Employees	Annual Surveillance Audit Effort* Excluding On Site Reporting	Annual Surveillance Audit Reporting Time	Follow-Up Review	Total Annual Surveillance Audit Effort (i.e. Column 2 + Column 3 + Column 4)
1-25	2	0.5	0.25	2.75
26-100	2	0.5	0.25	2.75
101-250	2	0.5	0.25	2.75
251-500	3	0.5	0.25	3.75
501-800	3	0.5	0.25	3.75
801-1200	4	0.75	0.25	5
1201-2000	5	0.75	0.25	6
2001-3000	5	0.75	0.25	6
3001-6000	5	0.75	0.25	6
6001-10,000	6	1	0.25	7.25
10,001-15,000	6	1	0.25	7.25
15,001-20,000	7	1	0.25	8.25
Note: * Includes 0.25 days Social Fingerprint I.E.				

Table 15 - Single Site Annual Surveillance On Site Audit Effort

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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Section 21

Multiple Sites

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21. Multi-site Certification Audits

21.1 Background and Context

Note: See the following documents for guidance:

- IAF MD 5:2019 Determination of Audit Time of Quality, Environmental, and Occupational Health & Safety Management Systems
- ISO 31000:2018 Risk management -- Guidelines

21.1.1 a) The rationale of a multi-site certification audit program is to reduce audit costs **without notably increasing risk**. A client organisation SHALL only be offered a multi-site certification if it is in full conformance with ALL the requirements of Section 21.2.

b) The decision to apply a multi-site certification process SHALL be instigated by the CB's client by making a request to the CB in writing. When the CB is satisfied that the requirements of Section 21.2 are met in full by their client, then a multi-site certification approach may be adopted, and the client notified formally in writing.

21.1.2 The CB SHALL bear in mind that permitting a client to become certified using a multi-site approach SHALL not be granted automatically. A documented justification that SHALL BE retained in the client file.

21.1.3 Within the SA8000 system, the scope of multi-site SA8000 certification can be divided into two sector types. These being:

- I. Manufacturing (All sectors)
- II. Service Sector, Farms and Plantations.

21.1.4 To mitigate the risks mentioned in 21.1.1 above, a multi-site certification audit program **SHALL ONLY** be offered to organisations that can demonstrate that they subject each of their sites to an on-site internal audit at least on a biennial basis. Formal internal audit reports and findings raised SHALL be available at each CB audit of the client's head office.

21.2 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.1.5)

21.2.1 A multi-site organisation SHALL be defined as per the definition in section 7 of this document. The organisation SHALL have a common management system which has established policies and procedures to manage all sites. The sites SHALL be subject to internal audits and monitoring by the Head Office. Multi-site SA8000 certificates SHALL be allowed except as defined in Section 10.1 Requirements.

21.2.2 a) The CB Client SHALL complete a Multi-site Questionnaire (provided by the CB) that includes a description of the primary and secondary processes (as defined in IAF MD 19:2016).

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- 21.2.3 The IAF/ISO approach to multiple sites is useful and CBs may refer to IAF MD 1:2018 & IAF MD 5 for guidance on sampling. However, the documents themselves cannot be fully adopted when certifying organisations to SA8000. In a social accountability context where every worker and every location is important, all workers SHALL be considered within the SA8000 certification process. The full-time equivalent concept is also not relevant to SA8000 certification when planning audit effort.
- 21.2.4 The CB SHALL have a documented procedure for determining whether a multi-site approach is possible for a client that identifies, as a minimum:
- Compliance with Procedure 200 Clause 21.2
 - The Risk Assessment Process used by the CB to identify the risks of offering a multi-site approach to each particular client.
 - Justification of the sampling used for Initial Certification, Recertification and Surveillance Audits.
- 21.2.5 A multi-site audit scheme can be applied in SA8000 where multiple sites are assessed together in order to provide a group or country certificate (see IAF MD 1:2018 for further definitions). The following requirements apply before a CB can issue a multi-site certificate and audit program to SA8000 for a client organisation:
- A multi-site organisation has a Head Office and 2 or more sites at which the same kinds of activities take place and where all sites operate under the same centrally managed system. If an organisation has 1 Head Office and 1 Site then this CANNOT be accepted as a multi-site certification. In this case these SHALL be considered as single site certifications.
 - Certificates issued to multi-site Clients SHALL NOT contain the names of Exclusive Suppliers, Non-Exclusive Suppliers or Subcontractors and can only refer to the branches of organisations that have a common ownership whose activities are completely within the Scope of the multi-site SA8000:2014 certification.
 - The scope of a multi-site certificate SHALL be transparent and clear for all stakeholders to understand exactly what is included in the certification. In addition to certification scope requirements specified in section 10, above, multi-site certification SHALL NOT apply to organisations where the sites have fundamentally dissimilar or unrelated processes or activities, even though they may be under the same management system.
 - The CB SHALL maintain a matrix listing all of the sites within the scope of the certificate, the locations, primary and secondary processes performed, the schedule of auditing those sites (in accordance with figure 4, below) and the plan to audit the sites as well as a record of all the non-conformities raised at each site. Development of this matrix SHALL include a risk analysis for assigning sampling of locations and number of days.
 - All sites that are to be included in the scope of a multi-site certificate SHALL be evaluated (by a mixture of onsite audits and documentation review) during the Stage 2 and Recertification audits (this may though be by means of reviewing the results of the client's internal audit reports or off-site audits). Other than under exceptional and reasonably justified circumstances, all sites SHALL physically audited at least once during the 3 year certification cycle).

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

f) All sites in a “multi-site” audit scheme SHALL be certified by the same accredited CB that has certified the organisation’s headquarters. If the CB utilizes subcontractors to deliver certification services for the client, the same subcontracted body SHALL audit the client’s entire system.

g) The client SHALL clearly understand (by means of wording in the CB’s contract for SA8000 certification) that, in the case of multi-site certificates, if the certified organisation demonstrates a systemic failure in meeting SA8000 requirements, then the CB SHALL review whether the multi-site certification ought to be cancelled. Records of such a review SHALL be maintained by the CB.

h) The client SHALL be aware it is not acceptable that, in order to overcome the issues raised by non-conformities identified by a CB with respect to a site, that the organisation seek to exclude this site from the scope of the multi-site certification process.

i) There SHALL be at least one of the CB Client’s Internal Auditor Team who SHALL have demonstrated social auditing competency and qualifications. There SHALL be no exceptions to these requirements.

j) Multi-site Head Office audits SHALL be performed on a six monthly basis (fully announced, unless CB and client agree otherwise) in accordance with the table below and the Certification Surveillance Audit Plan for the 3 year cycle produced by the CB.

Multi-Site Audit/Certification Cycle Activity	Visit Type	Time Window	Week Numbers
Certification Granted (Cycle Starts = 0 months)	None	None	0
Head Office Surveillance Audit #1 (Prior to 6 months)	Announced visit	8 Weeks	18-26
Head Office Surveillance Audit #2 (Prior to 12 months) Audit includes a SF IE.	Announced visit	8 Weeks	44-52
Head Office Surveillance Audit #3 (Prior to 18 months)	Announced visit	8 Weeks	70-78
Head Office Surveillance Audit #4 (Prior to 24 months) Audit includes a SF IE.	Announced visit	8 Weeks	96-104
Head Office Re-Certification Audit (Prior to 30 months)	Announced visit	8 Weeks	122-130
Head Office Follow-up and Recertification Review Audit (33-35 months)	Usually performed Off-site, unless an on-site announced visit is deemed necessary	None	144-152
Current Certification Expires / Positive Certification Decision made (if requirements met) (Cycle Ends = 36 Months - New Cycle Starts)	None	None	156
<p><i>Note 1: The above table shows scheduling requirements for the organisation’s Head Office (centralized controls). Audit visits and monitoring activities related to additional sites shall be in accordance with the CB’s Certification Surveillance Audit Plan.</i></p> <p><i>Note 2: CB audit plans/matrices for multi-site certifications granted prior to December 31, 2019 may vary from the above (in accordance with requirements specified in SAAS Procedure200, version 3.1).</i></p>			

Figure 4 – Multi-Site Surveillance and Re-certification Audit Planning

Minimum Single Site Six Monthly Surveillance Audit Effort			
Column 1	Column 2	Column 3	Column 4
Number Of Employees	*6 Monthly Surveillance Effort Excluding On Site Reporting	6 Monthly Surveillance Effort Reporting Time	Total 6 Monthly Surveillance Effort Time
1-25	1	0.5	1.5
26-100	1	0.5	1.5
101-250	1	0.5	1.5
251-500	1.5	0.5	2
501-800	1.5	0.5	2
801-1200	2	0.5	2.5
1201-2000	2.5	0.5	3
2001-3000	2.5	0.5	3
3001-6000	2.5	0.5	3
6001-10,000	3	1	4
10,001-15,000	3	1	4
15,001-20,000	3.5	1	4.5

Note:
*Including a 0.25 Day Social Fingerprint IE when appropriate.

Figure 4A – 6 monthly Multi-Site Surveillance and Re-certification Audit Planning

21.3 Applicability of SA8000 Multiple-Site Certification

21.3.1 The organisation SHALL have one designated and formally nominated SA8000 management representative and deputy at the organisation headquarters for the whole group of sites, as well as local management representatives at the additional sites, and the following SA8000 requirements SHALL be MANAGED CENTRALLY at a designated organisation headquarters:

- a) Authorisation and Control of the SA8000 Management System Documentation;
- b) Evaluation and control of corrective actions, including root cause analysis, correction and preventive action;
- c) Centralised Management Review that addresses all sites;
- d) Centralised Hazard Identification and Risk Assessment activities and management of locally based Social Performance Teams. Risk Assessments performed by the client organisation SHALL not be just Health and Safety based but SHALL focus on all the Clauses of SA8000:2014.
- e) Centralised internal audit planning, delivery and evaluation of internal audit results. [Due to the reliance of the CB on the client's own internal audit process to assess the sites within its own organisation].
- f) Control of suppliers;
- g) Centralised management systems addressing HR function;
- h) Identification and management of training needs.

21.3.2 The client organisation SHALL conduct internal audits of ALL sites at least;

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

- a) Prior to the Stage 2 and every Recertification Audit.
- b) Biennially during the 3 year certification cycle.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

21.4 Manufacturing Multi-site Stage 1 and 2 Audit Effort – Head Office Audit

- 21.4.1 The organisation’s Head Office Stage 1 and 2 initial certification audits SHALL be performed as normal and fully in line with the requirements of Section 20.2 ‘Single Site Initial Certification Audit Effort’. Please see Procedure 200A for integration of Social Fingerprint into all stages of the multi-site certification process.
- 21.4.2 The audit effort calculation for the initial Stage 1 and 2 certification audits for a manufacturing company Head Office SHALL be based on that as described in Table 14. During the Stage 1 Audit, it is expected that as well as at Head Office that a typical site is also visited to confirm the primary and secondary processes performed at Sites as per 21.2.2.
- 21.4.3 The records reviewed at the initial Stage 2 certification audit for a manufacturing company Head Office SHALL be based on that as described in Section 15 – Table 6.
- 21.4.4 The worker interviews at the initial Stage 2 certification audit for a manufacturing company Head Office SHALL be based on that as described in Section 15 – Table 9.

21.5 Manufacturing Multi-site Stage 2 Audit Effort – Other Factories/Sites

- 21.5.1 A reduced audit effort for the other manufacturing sites within the same group may be applied as Section 21 - Table 16 below.
- 21.5.2 The records reviewed at the initial Stage 2 certification audit for other manufacturing sites within the same group SHALL be based upon the value of **50%** of the number of employees as described in Section 15 – Table 6.
- 21.5.3 The worker interviews at the initial Stage 2 certification audit for other manufacturing sites within the same group SHALL be based upon the value of **50%** of the number of employees as described in Section 15 – Table 9.
- 21.5.4 If the distance between two linked locations belonging to the same client and working to the same management system procedures (e.g. for a main manufacturing unit and a satellite production unit or warehouse) is less than 1 hour drive by car apart, the number of employees at both sites may be added together (clubbed) for audit effort planning purposes.

Note: The one-hour time limit is as measured by using applications such as Google Maps, Bing Maps, Waze, Baidu Maps and Gaode Maps as follows.

<https://map.baidu.com/>; <https://www.bing.com/maps>; <https://www.waze.com/>;
<https://www.google.com/maps/>; <https://gaode.com/>

Multi-Site Manufacturing Initial Audit Effort - Additional Sites			
Column 1	Column 2	Column 3	Column 4
Number Of Employees	Total Average Stage 2 Audit, Preparation & Reporting - Days [Hours]	Minimum Stage 2 On Site Audit Effort Days Days [Hours]	*Average Stage 2 Reporting Days Days [Hours]
1-25	1.25[10]	1[8]	0.25[2]
26-100	1.25[10]	1[8]	0.25[2]
101-250	2[16]	1.5[12]	0.5[4]
251-500	3[24]	2.5[20]	0.5[4]
501-800	3.5[28]	3[24]	0.5[4]
801-1200	4.5[36]	4[32]	0.5[4]
1201-2000	5.5[44]	5[40]	0.5[4]
2001-3000	6[48]	5.5[44]	0.5[4]
3001-6000	6.5[52]	6[48]	0.5[4]
6001-10,000	7[56]	6.5[52]	0.5[4]
10,001-15,000	7.5[60]	7[56]	0.5[4]
15,001-20,000	8[64]	7.5[60]	0.5[4]
*Note: It maybe possible to combine the audit reporting of a Head Office and other sites into one report.			

Table 16 - Multi-Site Other Factories/Sites Minimum On-Site Initial Audit Effort

21.6 Manufacturing Multi-site Surveillance Effort – Head Office

21.6.1 This SHALL be performed in line with Section 20 - Table 15.

21.6.2 The records reviewed at each surveillance audit for a manufacturing company Head Office SHALL be based on that as described in Section 16 –

Table 12.

21.6.3 The worker interviews at each surveillance audit for a manufacturing company Head Office SHALL be based on that as described in Section 16 – Table 13.

21.7 Manufacturing Multi-site Surveillance Effort – Other Factories/Sites

21.7.1 This SHALL be performed in line with Section 21 - Table 17.

21.7.2 The records reviewed at the surveillance audit for the other manufacturing sites within the same group SHALL be based upon the value of **50%** of the number of employees as described in Section 16

–

Table 12.

21.7.3 The worker interviews at the surveillance audit for the other manufacturing sites within the same group SHALL be based upon the value of **50%** of the number of employees as described in Section 15 – Table 13.

Multi-Site Manufacturing Surveillance Audit Effort Additional Sites			
Column 1	Column 2	Column 3	Column 4
Number Of Employees	Minimum 6 Monthly Surveillance Effort Excluding On Site Reporting Time - Days [Hours]	*Average 6 Monthly Surveillance Reporting Time Days [Hours]	Total 6 Monthly Surveillance Average Effort Time
1-25	0.5[4]	0.25[2]	0.75[6]
26-100	0.5[4]	0.25[2]	0.75[6]
101-250	0.5[4]	0.5[4]	1[8]
251-500	0.5[4]	0.5[4]	1[8]
501-800	1[8]	0.5[4]	1.5[12]
801-1200	1[8]	0.5[4]	1.5[12]
1201-2000	1[8]	0.5[4]	1.5[12]
2001-3000	1[8]	0.5[4]	1.5[12]
3001-6000	1.5[12]	0.5[4]	2.0[16]
6001-10,000	1.5[12]	0.5[4]	2.0[16]
10,001-15,000	1.5[12]	0.5[4]	2.0[16]
15,001-20,000	1.5[12]	0.5[4]	2.0[16]

*Note: It maybe possible to combine the audit reporting of a Head Office and other sites into one report.

Table 17 - Multi-Site Other Factories/Sites Minimum On-Site Surveillance Audit Effort

Manufacturing Group Audit Effort Example

		Table 15 - Days	Table 16 - Days	Table 17 - Days	Table 18 - Days
Location	Employees	Initial Audit Effort	6 Monthly Surveillance	Initial Audit Effort	6 Monthly Surveillance
Head Office	1000 Employees	11	2.5		
Site 1	1000 Employees			4.5	1.5
Site 2	800 Employees			3.5	1.5
Site 3	250 Employees			2	1

* The above times are to be taken as minimum and may have to be increased for high risk, large, complex sites.

Table 18 - Manufacturing Group Audit Effort Example

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Manufacturing Group Records & Worker Interview Example

		Initial Audit		Surveillance	
Location	Employees	Table 6 - Records	Table 9 - Interviews	Table 13 - Records	Table 14 - Interviews
Head Office	1000 Employees	30	30		
Site 1	1000 Employees	15	15	5	3
Site 2	800 Employees	14	13	5	4
Site 3	250 Employees	7	8	2	3

* The above are to be taken as minimum and may have to be increased for high risk, large, complex sites.

Table 19 - Manufacturing Group Records & Worker Interview Example

21.7.4 The above is meant to cope with the majority of multi-site certification scenarios. SAAS may be requested to consider variations to the above on an exceptional basis. Such variations will be considered in the context of a submission by the CB with an associated required document review by SAAS.

21.8 Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Head Office Audit

21.8.1 The organisation’s Head Office Stage 1 and 2 initial certification audits SHALL be performed as normal and fully in line with the requirements of Section 20.2 Single Site Initial Certification Audit Effort. Please see Procedure 200A:2015 (Audit Requirements for Accredited Certification Bodies For Social Fingerprint) into all stages of the multi-site certification process.

21.8.2 The audit effort calculation for the initial Stage 1 and 2 certification audits for a Service, Farms and Plantations company Head Office SHALL be based on that as described in Table 14. It is expected that as well as the Stage 1 Audit at Head Office that a typical site is also visited to confirm the primary and secondary processes performed at Sites as per 21.2.2.

21.8.3 The records reviewed at the initial Stage 2 certification audit for a Service, Farms and Plantations Head Office SHALL be based on that as described in Section 15 – Table 6.

21.8.4 The worker interviews at the initial Stage 2 certification audit for a Service, Farms and Plantations Head Office SHALL be based on that as described in Section 15 – Table 9.

21.8.5 If a CB audit team is not permitted access to any of these permanent sites at any time for whatever reason, a Critical Non-conformity SHALL be raised and the Client’s multi-site certification SHALL be cancelled and withdrawn.

21.9 Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Sites

21.9.1 Service, Farms and Plantations Sites Stage 2 Audit Effort SHALL be subject to full, limited and documentation review audits as per Table 20 below.

21.9.2 The records reviewed at the initial Stage 2 certification limited audit for a Service, Farms and Plantations Sites SHALL be at the discretion of the CB Audit Team Leader ensuring that this does not adversely impact the credibility of the certification. The thoroughness of the documentation review depends on the robustness of the internal audits performed by the multi-site organisation and how much these can be relied on. It is expected that in their review of records, some records will be just “scanned” by the CB Auditor and others subject to a thorough

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

review and triangulation. Records SHALL be made and maintained by the CB Auditor justifying the sampling protocol used.

21.9.3 The worker interviews at the initial Stage 2 certification audit for a Service, Farms and Plantations Sites SHALL be based at the discretion of the CB Audit Team Leader ensuring that this does not adversely impact the credibility of the certification.

21.9.4 If the distance between two linked locations belonging to the same client and working to the same management system procedures (e.g. for a main manufacturing unit and a satellite production unit) is less than 1 hour drive by car apart, the number of employees at both sites may be added together (clubbed) for audit effort planning purposes.

Note: The one-hour time limit is as measured by using applications such as Google Maps, Bing Maps, Waze, Baidu Maps and Gaode Maps as follows.

<https://map.baidu.com/>; <https://www.bing.com/maps>; <https://www.waze.com/>;
<https://www.google.com/maps/>; <https://gaode.com/>

Column 1	Column 2	Column 3	Column 4	Column 5
Number Of Sites	Total Sites To Be Audited	Full Audit	*Limited Audit	**Documentation Review Audit
1-3	All	All	N/A	N/A
4-7	4	2	1	1
8-11	5	2	2	1
12-19	6	2	1	3
20-29	8	3	2	3
30-39	9	3	2	4
40-99	10	3	3	4
100-199	21	5	3	13
200-399	31	6	4	21
400-699	40	6	4	30
700-999	50	7	5	38
1000-3000	60	8	5	47
*Location chosen at random and performed as an unannounced 0.5 day on-site audit focussed on health and safety and worker interviews.				
** Review of time and attendance, payroll, internal audit results and employee complaints performed by at Head Office on randomly selected sites.				

Table 20 - Service, Farms and Plantations Multi-Site Stage 2 Audit Effort – Sites

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Example Of Service, Farms and Plantations Stage 2 Audit Effort

Location	Employees	Table 15 - Days Initial Audit Effort Stage 1 & Stage 2	Total # of Sites To Be Audited	# of Sites For Full Audit	# of Sites For Limited Audit	# of Documentation Review Audits
Head Office	60	5				
66 Sites	N/A		10	3	3	4

The above times are to be taken as minimum and may have to be increased for high risk, large, complex sites.

Table 21 - Example Of Service, Farms and Plantations Stage 2 Audit Effort

21.9.5 The above is meant to cope with the majority of multi-site certification scenarios. SAAS may be requested to consider variations to the above on an exceptional basis. Such variations will be considered in the context of a submission by the CB with an associated required document review by SAAS.

21.10 Service, Farms and Plantations Multi-site Surveillance Audit Effort.

21.10.1 Because of the sampling required, multi-site certifications in the service, farm and plantation sector can never be considered for annual surveillance audits. The CB SHALL produce a surveillance plan/matrix that covers their sampling of the whole network of Head Office and Sites for the complete 3-year certification cycle.

21.10.2 The Client’s Head Office SHALL be audited at least every six months by the CB. The audit effort day calculation for these audits SHALL be calculated as per Table 15.

21.10.3 In the service sector, where work is undertaken at sites not owned by the certified organisation, the CB SHALL perform a documented risk assessment to develop a surveillance strategy for those sites. The remoteness of location or expense of travel SHALL not have an effect as to whether a location ought to be visited or not. The output of the risk assessment SHALL result in identifying and adding the appropriate sites to be visited to the CB’s surveillance plan/matrix for the client’s 3 year certification cycle.

21.11 Multi-site Recertification Audits – All Sectors

21.11.1 Recertification Audits SHALL be performed in the manner as for Stage 2 initial certification audits with no reductions in audit effort.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 22

Non-Conformity Classification

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22. Non-Conformity Classification

22.1 General - (ISO/IEC 17021-1:2015 Clauses 9.4.5; 9.4.9; 9.4.10)

22.1.1 In accordance with the SA8000 Standard, the client organisation SHALL comply with national and other applicable laws. When such applicable laws and the SA8000 Standard address the same issue, the provision which affords the highest level of protection to workers SHALL apply. Please reference clause 22.8 below, the SA8000 Standard, the Performance Indicator Annex, SA8000 Guidance and other related documents for guidance and interpretation.

22.1.2 Unlike Social compliance Code Of Conduct Audits, SA8000 Certification demands a management systems approach and not a series of “quick fixes” to issues found. Therefore the CB Audit Team Leader shall consider audit findings in aggregate and conduct further investigations as necessary to determine to what extent, observed findings constitute a failure of one (or more) management system process requirement(s).

Note: A “Management system process requirement” in this context includes all SA8000 section 9 requirements and the overarching Health & Safety management requirement of SA8000, 3.1.

22.1.2.1 Where there is a clear and obvious failure to satisfy a management system requirement, a nonconformity shall be raised (using the non-conformity classifications outlined below) against that management system element of SA8000 Section 9 in lieu of (or in addition to) applicable performance elements.

22.1.2.2 Non-conformities may also be written against the individual management system elements of SA8000 Section 9 for a failure of the company to comply with the relevant section(s) of its own management system procedures.

22.1.3 SAI has issued an SA8000 Performance Indicator Annex (PIA) to support implementation of the SA8000:2014 and assessment of compliance against the requirements found in the Standard. It is a list of compliance indicators expected to be met by every organisation complying with the SA8000 Standard. The requirements in the PIA may be fully or partially required by local or national law and SHALL be used as a guide in identifying potential client non-conformity throughout the SA8000 audit process, although evaluation of every indicator during every audit is not mandatory.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

22.1.3.1 Each performance indicator in the PIA constitutes a secondary reference, providing a quantitative or qualitative measure of performance directly related to one or more of the requirements of the SA8000 Standard itself. The PIA is not a standalone or normative document; it requires simultaneous reference to the related requirement(s) of the SA8000 Standard.

22.1.3.2 CB auditors SHALL use these indicators to evaluate the extent to which an organisation's activities/controls and social performance conform to each of the SA8000 Standard requirements. Therefore, the assessment planning and on-site audit shall include a process to review conformance with the indicators included in the PIA.

22.1.3.3 CB auditors shall use the information in the PIA to create and execute an audit plan in order to ensure that reviews of appropriate SA8000-related performance expectations are incorporated into the audit and determine conformance/non-conformance with respect to SA8000 requirements.

22.2 Non-Conformity Findings Classification

22.2.1 Types of Non-Conformity: There are four types of audit non-conformity findings that may be raised as the result of an SA8000 Stage 2, Surveillance, Transfer, Recertification or Special Audit. These are as follows:

- a) Critical Non-Conformity
- b) Major Non-Conformity
- c) Minor Non-Conformity
- d) Time-Bound Non-Conformity

22.2.2 Violations observed during an SA8000 audit that, in the opinion of the CB Audit Team, require immediate action by the CB client are known as critical issues, zero tolerances or immediately reportable issues and SHALL require the CB Auditor to raise a Critical Non-Conformity at the time of observing the violation. The CB auditor SHALL report the matter to the organisation immediately. In the case of such an issue, the CB Auditor SHALL immediately contact their CB to seek advice as to whether the audit ought to be aborted or continue. Lost revenue SHALL not be considered as a factor to determine whether the audit ought to continue or not.

22.3 Non-conformity Definitions

22.3.1 A CRITICAL non-conformity [CNC] SHALL be issued in the case of:

- a) A grievous breach of the SA8000 Standard that results in severe impact to individual rights, life, safety and/or SA8000, SAI or SAAS' reputation. That includes:
 1. A breach of ethical standards;
 2. Immediate threats to workers lives; and/or
 3. Grievous and intentional violations of human rights.
- b) See also the Definitions section of this document for further clarification.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

c) In the case of an SA8000 certified organisation: the raising of a CN/C by a CB results in the immediate suspension of the organisation's SA8000 Certificate. If the CNC was issued due to a breach of ethical standards, and leads to withdrawal of the SA8000 certificate, the organisation may re-apply for certification after a period of 12 months from the point at which the client has adequately demonstrated full and effective correction and corrective action that resolves ALL of the issues related to the CNC.

22.3.2 A MAJOR non-conformity is one or more of:

a) The absence or total breakdown of a system to meet an SA8000 requirement. A number of minor non-conformities against one requirement can represent a total breakdown of the system and thus be considered a major non-conformity;

b) A non-conformity that the judgment and experience of the SA8000 Audit Team Leader indicates is likely either to:

1. result in the failure of the social management system in meeting its goals and expectations or
2. to materially reduce its ability to reliably assure control of its policies and directives in the workplace to protect its workers.

c) A MINOR non-conformity that has not been addressed, or for which no significant improvement has been made by the time of a follow-up audit, in spite the organisation's commitment to resolve the issue.

d) A non-conformity that poses an imminent and immediate but not life-threatening threat to the health and safety of workers [in which case a Critical NC SHALL be raised].

e) A Major non-conformity may be raised after the audit ONLY in the case where an auditor is concerned for their personal safety and the possible consequences that might arise if they raised the Major NC at the time of the audit.

f) A MAJOR non-conformity that has not been addressed or for which no significant improvement has been made by the time of a follow up audit, in spite of the organisation's commitment to resolve the issue, SHALL lead to the organisation being issued a warning and moved toward suspension.

22.3.3 A Minor non-conformity is one or more of:

a) A failure or oversight in some part of the organisation's social management system relative to SA8000 that is not systemic in nature;

b) A single observed lapse in following one item of an organisation's social management system.

22.3.4 A Time-Bound Non-Conformity [TB NC]:

a) A special non-conformity that can only be raised as a result of audit evidence and findings demonstrating that the client organisation meets the local law BUT NOT the higher requirements of SA8000:2014 or vice versa. TB-NC's CAN ONLY be raised for the findings as described in Table 22 below.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

SA8000 Standard Element	Time-Bound Non-conformity	Maximum Corrective Action Timeline	Monitoring and Reporting Required By CB	Monitoring and Reporting Required By Organisations SPT
Clause 7 - Working Hours	The client organisation does not meet the maximum working hours and/or maximum overtime hours per week as prescribed by SA8000 or the country law (whichever is the lesser amount)	24 Months (see Table 26 for further clarification)	Every Surveillance Audit on site and additional reviews as required by the Certification Risk Assessment for the Client performed by the CB.	Every 6 months
Clause 8 - Remuneration	The client organisation pays workers the legal minimum wage but not a living wage	24 Months	Every Surveillance Audit on site and additional reviews as required by the Certification Risk Assessment for the Client performed by the CB.	Every 6 months

Table 22 - List Of The Only Allowable Time Bound N/C's

Note: For further details on the above TB-NC's please refer to Annexures B & C of this Procedure.

22.4 Non-conformity Format

22.4.1 Each audit non-conformity finding SHALL have four distinct parts:

- a) The statement of non-conformity;
- b) The grading of the non-conformity (critical, major, minor or time-bound);
- c) Reference to the specific requirement in SA8000 audit criteria (including a summary of that requirement), AND additional reference to the applicable law, regulation, or other normative document, where appropriate;
- d) The objective evidence observed that supports the statement of non-conformity.

22.4.2 The CB SHALL specify a time frame in which responses to critical, major, minor and time-bound NCs must be addressed as per Table 23. The time frame refers to the number of days from the last day of the on-site audit.

- a) TB NC closure SHALL be addressed as per Clause 22.7 below.

Critical NC		Major NC		Minor NC	
Corrective Action Plan Sent To CB Within	Corrective Action Completed Within	Corrective Action Plan Sent to CB Within	Corrective Action Completed Within	Corrective Action Plan Sent to CB Within	Corrective Action Completed Within
1 Week	1 Month	1 Month	3 Months	2 Months	6 Months

Table 23 - NC Response & Close-Out Timescale

- b) The CB and client organisation shall agree on the timing for the organisation's response for the NCs. In general, this will be as per Table 23.
- c) Organisations shall not be issued an SA8000 certificate if there are any open CRITICAL or MAJOR NCs to SA8000.
- d) Minor NCs may remain open for a specified period, not longer than 6 months, to allow sufficient time to close them effectively with on-site follow up at the next surveillance audit.
- e) Corrective actions not completed within the allocated timing SHALL result in upgrading the NC and/or suspension or loss of the SA8000 certificate, depending on the nature of the lapse of the social accountability management system.

22.4.3 The CB is also encouraged to raise other categories of findings to provide added value to the organisation being audited. These categories of findings may include some combination of those listed below, with appropriate terminology and definition.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

a) **Observation (OBS)** – this is where the CB can comment on best practice and ensure a value added component to each audit.

b) **Opportunity For Improvement (OFI)** – these are intended to indicate where practice is inconsistent or systems may be improved. OFIs SHALL not be used where Minor NCs ought to have been raised and SHALL not constitute telling the client organisation what to do (i.e. consultancy).

c) **CB Eyes Only Comments** - Anecdotal, undocumented or unconfirmed statements or information that are relevant to the process SHALL be recorded by the CB but NOT included in the audit report to the CB's client. These comments are then used to prepare the CB Audit Team for the next audit.

22.5 Closure of Non-Conformities during Audits

22.5.1 All non-conformities SHALL be recorded. Non-conformities SHALL NOT be closed by the CB during the audit in which they were issued. The CB SHALL require the organisation to submit root cause analysis (see ISO 17021-1:2015 Clause 9.4.9) and evidence of containment and systemic corrective action, along with evidence of effective implementation, for each non-conformity issued.

22.6 Closure of Non-Conformities – Critical, Major and Minor N/C's

22.6.1 As per ISO 17021-1:2015 Clause 9.4.10 the CB SHALL verify the effectiveness of correction and corrective actions taken prior to closing an NC.

a) On-site verification of effectiveness SHALL be required for closure of all Critical and Major NCs. There may be very limited circumstances when a Critical or Major can be closed via documentation review. The CB SHALL maintain records detailing this deviation and under what circumstances it was allowed.

b) The special audit to confirm effectiveness of corrective actions addressing Critical NCs SHALL take place within 30 days of issuance of the Critical NC. The audit to confirm effectiveness of corrective actions addressing Major NCs SHALL take place within 90 days of issuance.

c) Evidence of verification of effectiveness of the Clients CAP SHALL be documented and maintained in the client's file.

22.7 Closure of Time-Bound Non-Conformities.

a) The CB SHALL have procedures to determine when and how to perform an on-site audit visit or off-site audit to ensure effective closure of a Time-Bound NC.

b) If the SA8000 Organisation does not implement their proposed CAP in an effective manner (within the time frame AGREED by their CB) then a CRITICAL N/C SHALL be raised and the Organisations SA8000 Certification SHALL be suspended and then ultimately withdrawn. In exceptional circumstances (such as illness or departure of key personal within the SA8000 Certified Organisation)

a one-off extension of a MAXIMUM of 6 weeks may be give against the timelines stated in the CAP. Any extension SHALL BE formally documented by the CB.

c) The SPT is ultimately responsible for the implementation and effective prosecution and monitoring of their Certified Organisations CAP.

22.8 Nonconformities That Also Contravene Legal or Regulatory Requirements

22.8.1 Audit evidence gathered may indicate that a legal/regulatory requirement(s) is not being met. This may relate to a standalone requirement, such as:

- A requirement to submit periodic data to authorities
 - Non-conformity to be raised in terms of organisation's 'failure to fulfil legal/regulatory requirement'

or it may relate directly to an SA8000 requirement, such as

- A requirement for workers to wear suitable PPE in a hazardous environment).
 - Non-conformity to be raised in terms of 'failure to meet SA8000 requirement clause # AND failure to fulfil legal/regulatory requirement'

22.8.2 When evaluating evidence (of either type above), the Audit Team Leader shall determine the nonconformity classification by reference to the nonconformity definitions in section 22.3, above. In the case of flagrant, egregious or persistent violations of the law, a Critical non-conformity SHALL be raised (A grievous breach of the SA8000 Standard that results in severe impact to individual rights, life, safety and/or SA8000, SAI or SAAS' reputation. – Section II Normative Elements and Their Interpretation – "The organisation shall comply with local, national and all other applicable laws").

	Requirement	Evidence	Reasoning	Non-Conformity Classification
a)	"Any electrical generator shall be inspected annually and permitted by [local authority]."	One of two electrical generators is properly permitted; the permit for the second generator expired a month ago; the organisation has records to demonstrate that the permit application was filed on-time and has been followed-up with the regulator (i.e. renewal is being delayed by regulatory authority.)	22.3.3 "A single observed lapse in following one item of an organisation's social management system"	Minor (legal)
b)	"A Lactation Room shall be provided for nursing mothers."	Mothers are permitted to nurse, but no dedicated 'lactation room' evident	22.3.3 "A single observed lapse in following one item of an organisation's social management system"	Minor (legal)
c)	"Company shall annually provide all workers with a respiratory evaluation"	No annual respiratory evaluations have occurred for the past three years. i.e. The program has been	22.3.2 "Absence or total breakdown of a system" (needed to comply with a defined legal/regulatory requirement)	Major (legal)

		neglected, or has been intentionally abandoned.		
d)	National Fire Safety "Means-of-Egress" Regulations	Workplace has numerous unidentified fire emergency (means-of-egress) hazards and management is unfamiliar with applicable regulations.	22.3.1 a) A grievous breach of the SA8000 Standard that results in severe impact to individual rights, life, safety and/or SA8000, SAI or SAAS' reputation. – Section II Normative Elements and Their Interpretation – "The organisation shall comply with local, national and all other applicable laws"	Critical (SA8000 & Legal)

Table 23a: Examples of Identified Legal or Regulatory Issues and Classifications of Non-Conformities

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Section 23

Audit Reporting

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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23. Audit Reporting

23.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.4.8)

- 23.1.1 The CB audit team SHALL provide a full report on the client's audited activities and operations within 1 month after the last day of each Stage 1, Stage 2, Surveillance, Transfer, **Special**, and Recertification audit.
- 23.1.2 The audit report SHALL clearly show the parts of the system that were audited.
- a) The report SHALL include evidence of positive reporting showing conformance to the elements of the Standard. Positive reporting with supporting details provides value added information to the client and the CB technical reviewer and decision-makers.
 - b) The context, findings and issues against each part of the audit SHALL be included and set out a description of the current situation, how specific requirements are managed, with supporting evidence and information to substantiate any findings.
 - c) See Procedure 200A:2015 (Audit Requirements for Accredited Certification Bodies For Social Fingerprint) for the integration of the Social Fingerprint Independent Evaluation in the audit report.
- 23.1.3 As part of the SAAS accreditation audit, following a SAAS witness audit, the CB SHALL provide a copy of their audit report to SAAS [identical to that as provided to their client] within 10 working days after the last day of the on-site audit.
- 23.1.4 The SA8000 Audit Team Leader SHALL be responsible for ensuring that comprehensive reporting notes and checklists are completed by all auditors and that these are kept as a record of the audit as hard or soft copies in the client file.
- 23.1.5 Unconfirmed statements or information reported by managers, workers, worker representatives or other stakeholders that are relevant to the process SHALL be recorded and kept as audit notes [maintaining confidentiality of sources] and not be included in the report.
- 23.1.6 The report SHALL NOT include reference to the root cause analysis, corrective and preventive action proposed by the client organisation as this is part of the audit follow-up activity.
- 23.1.7 At the end of each on-site audit, the CB auditor SHALL leave a copy of any NCs raised during the audit with the client so the client may begin the process of identifying containment actions, root cause and corrective actions.

23.2 Audit Report Content

- 23.2.1 The CB's SA8000 Audit Report SHALL ensure that positive reporting of each SA8000 element is addressed in the report as a macro-area of assessment, with more specific and descriptive notations consistently provided for those issues (single requirements) that are relevant to the specific organisation/area. Typically the report SHALL contain the items in Table 24.

Note: All management and worker interview records SHALL BE treated as confidential and NOT included in the report.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

a) A brief overall description of the organisation being evaluated with some information on the nature of the business, the size, number of employees, shift patterns and makeup of the organisation, and attach the CB's regional background research materials.	b) NCs are referenced to the appropriate clause and reflect the violation expressed from a management system perspective.
c) Most importantly- describe where the team proposes accepting a deviation from the wages provision of the standard and raised TB Non-Conformities. This is intended to provide the CB's Certification Decision Maker(s) with adequate information to decide on certification.	d) Working hours- e.g. if there is no overtime problem, auditors SHALL report the evidence supporting compliance with the working hours criteria of SA8000, for example that the organisation has adequate equipment and staff to fill the orders it has accepted. The method that the organisation uses for time and attendance recording SHALL also be described e.g. biometric finger print.
e) Status of control of suppliers- Include a brief summary on the status of "control of supplier" programs and risk mapping exercise e.g. a brief description of the plan and current results in terms of approved suppliers, demonstrated compliance or pending certifications.	f) Wages- Provide basic wage information as an example of wages paid. This could be accomplished with a payroll sheet and a brief explanation of wage utilized.
g) Home work- Include a brief description of home work if/when it is encountered, with an emphasis on the method of control and number of workers involved.	h) Freedom of association- Provide a description of the presence of a trade union on site if there is one, or note what trade unions are prevalent or simply recognized in the sector and in the region, the common practice in the industry for representation, and how the employer demonstrates employees' freedom to form a union of desired.
i) Worker Representative – Provide a brief description of how any SA8000 worker representatives or committees were elected and when. Include any evidence of meetings, minutes, negotiations, and whether workers know their representative.	j) Health and Safety- Confirm that conditions in the organisation are compliant with local laws and SA8000 minimum standards and SA8000 PIA and Guidance Documents.
k) A description of any grievances or complaints received by the organisation since the last audit. The process as to how they were investigated and how the identification of the complainant was kept confidential. Include examples if there are many, and any that have remained unresolved for a long period of time.	l) Description of how previous NCs and the organisation's corrective action from previous NCs has been monitored and closed.
m) Note 'interview formats' used- along with reports of information (i.e. number of interviewees per group, number of groups, on or off site).	n) The SA8000 audit report SHALL NOT reference buyers or customers of the organisation.
o) Photographs that are taken as evidence as part of the audit shall be included in the audit report.	p) Social Fingerprint Self-Assessment and Independent Evaluation scores and correlation to NC's as appropriate.
q) A statement outlining the effectiveness of the SPT	r) A statement outlining the effectiveness of the company complaint mechanism.
s) Improvement Progress by the client against the SF Score, SA8000 Standard and PIA Requirements.	

Table 24 - Audit Report Content

23.3 Audit Report Review

23.3.1 EVERY Audit Report SHALL be subject to a process and technical review.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

23.3.2 All Report Reviewers SHALL be as a **minimum Lead Auditor** (See also SAAS Procedure 201B).

23.3.3 CB's SHALL establish Report Review Outcome KPI's for each Auditor. The result of which SHALL be factored into the Auditor review and competence monitoring process.

23.3.4 Outcome KPI's SHALL include but are not limited to:

a) An analysis of the turnaround time (TAT) from the last day of the audit until when the CB receives the complete audit package for technical review. Auditors with persistently tardy performance SHALL NOT BE USED.

b) An analysis of the number of N/C;'s raised by each audit team member per audit. *

** Note: Typically, if this is less than 1.3 non-conformities per audit then the Auditor should be further investigated for possible "soft auditing/soft grading".*

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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Section 24

Audit Records

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24. Audit Records

24.1 General Requirements - (ISO/IEC 17021-1:2015 Clauses 9.9.2)

24.1.1 Each CB SHALL maintain, as a minimum, the records in Table 25 with respect to all on-site audits performed.

a) These records may be kept as either hard or soft copies in the client file for the length of the certification cycle plus 3 years.

b) Copies of all audit plans, audit reports, and non-conformities SHALL be available in soft copy at the CB's Head Office (as defined in SAAS Procedure 201A).

a) Copies of scheduled audits showing time and assigned auditors.	b) Calculation of audit effort.
c) Signed copies of Code of Ethics/ Anti-bribery Form.	d) Opening and Closing Meeting Attendee Lists.
e) Notes/minutes from stakeholder consultations and other pre-audit research.	c) Explanation of living wage calculation of both CB and client organisation.
d) Client's completed application form.	e) Pre-assessment reports, if conducted.
f) Document reviews performed for initial and transfer audits.	g) Stage 1 readiness review report, including the evidence that all requirements of SA8000 are addressed by the certification applicant's process.
h) The audit plan (agenda) for each audit demonstrating auditor itinerary details, time frames, subjects (processes) covered, and personnel involved.	i) The final audit report, including the opening and closing meeting attendance records, photographs, positive reporting notes and checklists completed by each auditor and the audit team, and their recommendation regarding granting or continuation of certification.
j) Copies of all non-conformities issued, audit reports, follow up reports, and other documentation leading to the verification of the effectiveness of the correction of the non-conformities.	k) Audit logs/notes as maintained by each audit team member.
l) The audit team members' initial assignment approval by the CB and acceptance of each team member by the client organisation.	m) Social Fingerprint Self-Assessment and Independent Evaluation scores.
q) Brief overview of the client's compliance with the requirements of the SAAS Performance Indicator Annex.	r) Copy of the Organisation's "SITE or Factory Layout PLAN"

Table 25 - Audit Records

24.1.2 Records SHALL be maintained in a language common to the local offices and auditors and the SA8000 head office for the CB. ALL certification records SHALL be made available, via translation if necessary, for review by the SAAS accreditation auditor upon request.

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
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Annex A

Example SA8000 Certification Template

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The following template represents the format and content of a typical SA8000 certification body certificate, which may be varied by individual CBs in accordance with their company's own identity program. Please note the wording under Scope of Certification, which reflects best practice with respect to "exclusive suppliers" and SA8000 certification scope (refer to sections 7 and 10, above).

Add
Certification
Body
Logo
Here

ABC CERTIFICATION INC.

SA8000 MANAGEMENT SYSTEM CERTIFICATION CERTIFICATE

Certificate Number: abcd 12345 2016 Rev 1

This is to certify that:

CB Client Company Name

No. ??, A Road, A City, A Province, A Zip Code, A Country

has been found to conform with an appropriate and effective management system that meets the requirements of Social Accountability Management System Standard:

SA8000:2014

Scope of Certification:

The scope of certification described by this certificate relates to the empowerment and protection of all personnel who provide products or services for that organisation at the above address, including personnel employed by the organisation itself {Optional - and by its suppliers, sub-contractors, sub-suppliers and home workers} for the following activities:

- 1) Manufacture Of Shirts *{with Primary Processes Of Cutting; Sewing; Washing; Stain Removal; Labelling & Packing}*
- 2) Manufacture Of Plastic Water Bottles *{with Primary Processes Injection Molding; Washing; Labelling & Packing}*

Note: the activities of ABC Company Ltd. operating from the same premises are covered by Certificate No. efg 12345 2016 Rev 1

Date Of Initial Certification

1 January 2016

This Certificate Is Valid Until:

1 January 2019

The Certification Audit Was Performed and Supervised By:

A Persons Name
SA8000 Lead Auditor



Place and Date:

A City, A Country

For and On Behalf Of

ABC Certification Inc.

A Persons Name
Management Representative

Note: Lack of fulfilment of the conditions specified in the appropriate Certification Agreement may render this Certificate invalid.

Social Accountability International and other stakeholders in the SA8000 process only recognize SA8000 certificates issued by qualified CBs granted accreditation by SAAS and do not recognize the validity of SA8000 certificates issued by unaccredited organizations or organizations accredited by any entity other than SAAS. Additionally, all SA8000 certificates shall contain the address of the SAAS website (www.saasaccreditation.org/certification) where stakeholders can confirm the validity of an accredited SA8000 certificate.

This Certificate is Issued By SAAS Accredited Unit: ABC CERTIFICATION INC., No. ??, A Road, A City, A Province, A Zip Code, A Country

Author: P. Scott	Social Accountability Accreditation Services	Issue: 4.2
Approval: J. Brookes & R. Zaid	SAAS Procedure 200:2020	Effective: March 6, 2020

Annex B

Working Hours

Time-Bound Non-Conformity Conditions for SA8000 Clause 7.0 – Working Hours

This requirement of SA8000 is intended to ensure that all workers at SA8000 certified organisations work a reasonable number of hours per week and do not exceed the maximum working hours permissible by law **nor work overtime on a regular basis**. It is recognized, however, that in certain countries, legal requirements and general practice are disconnected. A time-bound non-conformity SHALL BE raised against SA8000 requirement Clause number 7 - 'Working Hours' where **BOTH** of the following criteria are met:

1. National and/or local law requires a normal work week lower than SA8000's requirement of 48 hours a week, not including overtime, *and*
2. Lack of compliance to the law is the general practice, with lack of or weak legal enforcement from the government

The Time-Bound non-conformity classification and timeline are described in **Table 26** below. Initial certification and recertification SHALL ONLY be granted at a Level 3 and above. Organisations that are currently certified at the time of Procedure 200 Version 4.2 release are permitted to remain certified if they ~~can~~ receive a Level 1 or Level 2 Time-Bound Non-Conformity for Working Hours to allow them time for transition.

Organisation Performance	TB-NC Classification (Level)	Corrective Action Timeline	Consequences
The client organisation does not request regular overtime to be worked, meets the maximum working hours and maximum overtime hours per week as prescribed by SA8000 or the country law (whichever is the lesser amount)	5	<ul style="list-style-type: none"> • None. 	<ul style="list-style-type: none"> • None (Conforming)
<ul style="list-style-type: none"> • Legal number of working hours and overtime hours permitted for a normal week inclusive of OT do not exceed a total of 60 hours a week, <i>and</i> • OT hours exceed 12 hours per week on an infrequent basis. 	4	<ul style="list-style-type: none"> • For initial certification, A Corrective Action Plan (CAP) must be approved by the CB prior to the certification decision • For a TB-NC raised during the certification cycle, a CAP SHALL be sent to their CB within two months of the audit end date. • 18 months to become Compliant - Must demonstrate adequate control/ monitoring processes and progress at intervals not exceeding 6 months 	<ul style="list-style-type: none"> • - Failure to demonstrate progress against the approved CAP results in immediate certificate suspension and subsequent withdrawal of certification.

<ul style="list-style-type: none"> • Legal number of working hours permitted for a normal work week inclusive of OT do not exceed a total of 60 hours a week, <i>and</i> • OT hours exceed 12 hours per week on a regular basis 	3	<ul style="list-style-type: none"> • For initial certification, Corrective Action Plan (CAP) must be approved by CB prior to the certification decision • For a TB-NC raised during the certification cycle, a CAP SHALL sent to their CB within one month of the audit end date. • 18 months to promote performance to Level 4 <ul style="list-style-type: none"> - Must demonstrate adequate control/ monitoring processes and progress at intervals not exceeding 6 months. 	<ul style="list-style-type: none"> • Failure to demonstrate progress results in immediate certificate suspension and subsequent withdrawal of certification
<ul style="list-style-type: none"> • Legal number of working hours permitted for a normal work week inclusive of OT hours exceed a total of 60 hours a week 	2	<ul style="list-style-type: none"> • Corrective Action Plan SHALL be sent to their CB within one week of the audit end date. • 6 months to promote performance to Level 3 <ul style="list-style-type: none"> - Must demonstrate adequate control/ monitoring mechanisms. 	<ul style="list-style-type: none"> • - Failure to demonstrate progress results in immediate certificate suspension and subsequent withdrawal of certification
<ul style="list-style-type: none"> • Gross OT; working hours including OT significantly above 60 hours a week; egregious total working hours. 	1	<ul style="list-style-type: none"> • Immediate suspension • Corrective Action Plan SHALL be sent to CB within one week of the audit end date. • 6 months to promote to Level 2 <ul style="list-style-type: none"> ○ Must demonstrate adequate control/ monitoring mechanisms 	<ul style="list-style-type: none"> • Failure to demonstrate progress results in withdrawal of certification

TABLE 26 – Working Hours Levels Categorization

NOTE: The above references to overtime are based on such overtime being infrequent. Overtime is considered regular (frequent) if it is worked every week e.g. every Saturday or 1, 2 or 3 evenings every week. In such cases this is a direct violation of Clause 7.3 of SA8000 and the situation must be corrected by raising a – Level 3 TB-NC as above with the same Corrective Action Timelines and Consequences.

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Annex C

Living Wage

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C0-Time-Bound Non-Conformity Conditions for SA8000 Section 8.0 – Remuneration – “Living Wage”

C1 Overview

As defined in SA8000:2014

A Living Wage: Is the remuneration received for a standard work week (excluding overtime) by a worker in a particular place sufficient to afford a decent standard of living for the worker and his or her family.

Elements of a decent standard of living include food, water, housing, education, health care, transport, clothing, and other essential needs including provision for unexpected events.

The term BASIC NEEDS WAGE is now deprecated and from an SA8000 certification context is replaced by the term LIVING WAGE.

CB Auditors SHALL ensure that when reviewing a living wage that they verify that the remuneration for a normal working week (excluding overtime) is sufficient to ensure that this allows a family to meet its basic needs, and provides it with some ability to deal with emergencies, without resorting to welfare or other public assistance.

C2-This requirement of SA8000 is intended to ensure that all workers at a SA8000 certified organisation are paid a living wage. However, it is recognized that not every organisation is able to completely improve and revise wage structures at the time it applies for certification. SA8000 applicants have up to 24 months to increase wages to the level of the living wage, provided that the following conditions are met at the time of initial certification:

- Compliance with minimum wage laws, *and*
- An analysis of workers’ wage needs has been completed, and
- A target and strategy are in place to advance wages and show progress over time.

C3 A nonconformity raised against SA8000 living wage requirement clause number 8 - ‘Remuneration’ is, therefore, eligible for a ‘time-bound non-conformity’ approach as detailed in Procedure 200 Table 23 and as outlined below.

C4 -NOTE:

The time-bound nonconformity requirement mentioned in C2 above refers to the minimum wage currently published by the relevant government authority even in cases where the validity of the current minimum wage law(s) is the subject of a challenge or dispute (e.g. a legal challenge in a court of law).

-----End of SAAS Procedure 200 Issue 4.2-----