SAAS COVID-19 Alternative Process Requirements for the SA8000 Program

1. Revision History

This document "SAAS COVID-19 Alternative Process Requirements for the SA8000 Program" Revision 12 supersedes and replaces Revision 11 (April 26, 2021).

Revision #	Revision Date	Revision Description	Approved By
Revisions 1-6	January 30 - April 24, 2020	New COVID-19 Temporary Notification Document (Communicated via notification emails)	John Brookes
Revisions 7-11	June 5, 2020 – April 26, 2021	Various updates – maintained in archived versions	John Brookes
Revision 12	August 22, 2022	Section 3.3 & 3.4.8 & 4.1.9 – Removed references to "COVID-19 Nonconformity" and (withdrawn) SAI Document, "Supporting Job Stability During the COVID-19 Crisis - Temporary Policy Exceptions to SA8000 Standard" Sections 3.1.2, 3.2.1 (and clarified elsewhere) – Significantly updated the scope of applicability of this document to those regions (essentially specific provinces in China) where government authorities demand to/from quarantine periods. Appendix 6 (recovery Timeline Chart (Obsolete and now withdrawn – paragraph 4.1.14 refers) Minor formatting and language clarifications made throughout.	John Brookes

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3. Introduction

3.1. Background and Overview

3.1.1. From time to time, extraordinary events may occur that are beyond the control of a Certification Body (CB) or Accreditation Body (SAAS), such as the global coronavirus (COVID-19) emergency. During these events, SAAS and SAAS-Accredited CBs have a joint responsibility to uphold the credibility of accredited SA8000 certifications by demonstrating appropriate due diligence and reasonable actions to mitigate program risks. In doing so, however, SAAS and CBs has sought to recognize human risks and respect the rights of individuals who may potentially be impacted by the event.

3.1.2. Due to the COVID-19 pandemic and its impacts around the world, certification bodies (CBs) were, for a limited time, unable to fully adhere to the SA8000 certification protocols and requirements defined within SAAS Procedure 200 for certain certified clients. **From September 1, 2022, other than for those circumstances defined below in section 3.2, SAAS requires CBs to revert to on-site audit protocols fully in accordance with SAAS procedure 200 (version 4.2 – March 2020).** This document continues to address 'SAAS COVID-19 Alternative Process Requirements for the SA8000 Program' **only** where circumstances defined in 3.2 (below) apply.

3.1.3. Because of the long-term nature of COVID-19 impacts and their lasting implications for audit/certification programs, this document aims to define and proceduralize acceptable, standardized, alternative SA8000 audit and certification criteria, thereby providing certification bodies with the direction needed to equitably maintain their accredited certification business in the longer-term (in the face of a wide variety of operational challenges).

3.1.4. Through this document, where circumstances defined in 3.2 (below) apply, SAAS recognizes specific, controlled off-site SA8000 audit activities as being credible for certification purposes. This document defines the framework and solutions needed for CBs to successfully maintain accredited certifications in the medium-long term.

3.1.5. The publication of "SAAS COVID-19 Alternative Process Requirements for the SA8000 Program Version 12" rescinds and replaces all previous SAAS COVID-19 notifications/instructions.

3.1.6. This document defines 'minimum' requirements needed to maintain accredited SA8000 certification where circumstances defined in 3.2 (below) apply. In many cases, (to satisfy the expectations of certification clients, parent organisations and other interested parties), CBs will need to develop protocols and internal requirements **exceeding** those defined in this document.

3.2. Scope of Applicability

3.2.1. This document defines alternative protocols, minimum requirements and guidance to be applied by CBs needing to process SA8000 client applications and maintain certified clients in (only) those situations where the short- and long-term impacts of COVID-19 prevent full adherence to SAAS Procedure 200 requirements (including not only those situations where access to perform a 'conventional on-site audit' is not possible, but also addressing on-site audit situations where management of COVID-19-related risks may be required).

From September 1, 2022, the scope of applicability of this document is strictly limited to:
- certification activities that that would normally be conducted on-site in geographic regions (cities, states/provinces, countries) **where official government policy requires quarantine** (>24 hours) of individuals entering the geographic region.
- certification activities that that would normally be conducted on-site in geographic regions (cities, states/provinces, countries), but which **official government policy would require the Audit Team Leader to quarantine** (>24 hours) upon return to his/her geographic place of residence.

At the time of publication, the above scope applies **ONLY to specific regions in China**. Should another geographical limitation be encountered in accordance with the above scope, the CB shall justify and seek the **prior authorization of the SAAS Technical Director**. CBs are required to justify continuing application of this procedure under all circumstances noting that (as a rule of thumb) if Tourism is allowed in a country then, it is highly unlikely that SAAS will permit the use of this COVID Instruction #12 in that country.

3.2.2. In accordance with the above scope limitations and until such time as this document is amended or rescinded, the protocols, requirements and guidance outlined herein may be applied to maintain SA8000 certifications in lieu of those SAAS Procedure 200 requirements which would be high-risk, or impossible to fulfil under the prevailing circumstances.

3.3. References
3.3.1. SAAS Procedure 200 (current and prior versions)
3.3.2. SAI Document "Responding to Covid-19: Guidance for SA8000-Certified Organisations
3.3.3. IAF Publications

3.4. Definitions
3.4.1. ***On-Site Auditor:*** This term refers specifically to a qualified auditor who has been authorized by the SA8000 Program Manager to perform 'on-site' elements of hybrid SA8000 audits. An On-Site Auditor shall be a competent CB Social Auditor, or CB-approved ISO 45001 Lead Auditor, who is able to access a facility when travel restrictions prevent the preferred CB Lead Auditor from doing so. Prior to any assignment, the selected On-Site Auditor shall:

    3.4.1.1.   be qualified by the CB's SA8000 Program Manager as a SA8000 Senior Lead Auditor, Lead Auditor or SA8000 Auditor (SAAS Procedure 201B refers);

    .. or

    3.4.1.2.   be alternatively qualified by the CB's SA8000 Certification Manager, having been employed by the audit company (or affiliate thereof) for a minimum period of one year, leading, performing and reporting

- solo social audits for other social compliance program(s) (such as SEDEX, BSCI, RBA, WRAP or equivalent client social performance programs); or
- accredited ISO 45001 Audits.

    Appropriate On-Site Auditor authorization and deployment records shall be maintained (refer to 4.1.11, below).

    Note 1: CB's SA8000 Program Manager should ensure that (as a minimum) the On-Site Auditor is skilled in applicable health and safety issues, worker interview techniques, applicable local language, local culture, and applicable legal/regulatory requirements).

Note 2: (Similar to SAAS Procedure 200 v4.2 note in 11.1.8): 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.

3.4.2. **Conventional Audit:** A 'traditional' audit at the client's premises in accordance with SAAS audit requirements defined in SAAS Procedure 200 (incorporating COVID-19 deviations authorized in Appendix 5, below, as necessary).

3.4.3. **Alternative Audit:** A SAAS approved method for conducting controlled SA8000 certification-related audits that are 'alternative' to 'conventional audit' requirements. SAAS recognizes only 'Hybrid Audits', 'Standalone Remote Audits', Remote Enhanced Audits and 'Desktop Remote Audits' which fully conform to the requirements of this document as 'Alternative Audits. (Refer to paragraphs below).

3.4.4. **Hybrid Audit**: A hybrid audit is a combination of: (a) audit management and remote audit activities conducted by a Certification Body SA8000 Lead Auditor (CB LA) using real-time electronic audio-visual link(s) to the client premises for significant portions of the audit; and (b) limited, specified, on-site audit activities directed remotely by the assigned CB LA, but conducted on-site at the clients' premises by an On-Site Auditor. (Refer to paragraphs 4.3 & 4.4 below for process requirements).

3.4.5. **Standalone Remote Audit**: A Standalone Remote audit comprises audit activities conducted remotely by a Certification body's SA8000 Lead Auditor (CB LA) using real-time electronic audio-visual link(s) to the client premises for significant portions of the audit. (Refer to paragraphs 4.3 & 4.5 below for process requirements).

3.4.6. **Desktop Remote Audit**: A Desktop Remote audit comprises audit activities conducted remotely by a Certification body's SA8000 Lead Auditor (CB LA) only when circumstances make it impossible to maintain a real-time electronic audio-visual link to the client premises. (Refer to paragraphs 4.3 & 4.6 below for process requirements).

3.4.7. **COVID-19 Suspension**: A COVID-19 Suspension is a special and temporary category of suspension, valid for 9 months maximum applicable in limited applications as described within section 4.1 of this document.

3.4.8. **COVID-19 Non-conformity:** This temporary type of Nonconformity is no longer applicable and shall no longer be raised. SAI document "Temporary Policy Exceptions to SA8000 Standard" was obsoleted on December 31, 2020.

3.4.9. **Remote Enhanced Audit:** A new variant (April 2021) of the alternative remote Standalone methodology and may be performed in line with Appendix 7 of this document under "Exceptional Circumstances."

Note: With COVID 19 travel restrictions still applicable in certain geographical regions (in accordance with the scope defined in 3.2, above) SAAS continues to recognize "Remote Enhanced Audits" under "exceptional circumstances" (3.4.10, below).

3.4.10.   ***Exceptional Circumstances:*** When, due to a verifiable, legitimate, current (new or continuing) COVID-19 emergency in a locality, a CB is unable to perform an on-site audit activity at a certified organisation that has already been the subject of one or more remote audits (Desktop Audit or Standalone Remote Audit) and would, under prior SAAS COVID-19 requirements, have been immediately subject to COVID-19 suspension.

4. COVID-19 Certification Body Processes

4.1. Certification Body General Measures in Response to COVID-19

4.1.1. CB On-Site Activity - General

4.1.1.1.   Prior temporary instructions "2020 COVID-19 Notification" (version 6 and all prior) were rescinded and replaced by this revised and reformatted document, "SAAS COVID-19 Alternative Process Requirements for the SA8000 Program" on June 5, 2020.

4.1.1.2.   SAAS strongly recommends that SAAS-accredited CBs performing on-site activities do so only after carefully evaluating the risks of such activities and implementing controls to mitigate those risks in accordance with the requirements and guidance provided below (refer to paragraph 4.2 "Certification Body COVID-19 Risk Assessments and Audit Decision-Making" and 4.7 "On-Site Safety Considerations" below).

4.1.2. COVID-19 Follow-Up Review Alternative/Temporary Measure (Discontinued – June 5 2020))

Note: This paragraph referred only to the temporary "COVID-19 follow-up Reviews" previously invoked in SAAS COVID-19 notices. Regardless of the current 'access status' of certification clients, those clients on an annual surveillance audit cycle remain subject to routine (six monthly) follow-up reviews in between annual visits (in accordance with SAAS Procedure 200 paragraph 16).

4.1.3. Initial Certification Alternative Measure

4.1.3.1.   Initial Certification Stage 1 and Stage 2 Audit alternative requirements have been established and may be applied in lieu of SAAS Procedure 200 conventional audit requirements (see alternative requirements in paragraphs 4.2–4.6 below).

4.1.3.2.   The permissible period between Initial Certification Stage 1 and Stage 2 Audits has been amended during the period this document is valid (see Appendix 5).

4.1.4. Recertification Alternative Measure

4.1.4.1.   Recertification Audit alternative requirements have been established and may be applied in lieu of SAAS Procedure 200 conventional audit requirements (see alternative requirements in paragraphs 4.2–4.6 below).

4.1.4.2.   Except as previously permitted under the temporary requirements of COVID-19 Instructions V1-6, a full recertification audit (either a conventional on-site, or an acceptable alternative audit in accordance with paragraphs 4.2–4.6 requirements) shall be completed within 36 months of the date of the prior certification.

Note: Since July 1, 2020, a full recertification decision may no longer be deferred. If a certification decision was deferred under COVID-19 Instructions 1-6 and the CB cannot complete the full recertification within 42 months of the date of the prior certification, client certification shall be suspended (See COVID-19 Suspension, below).

4.1.5. Surveillance Alternative Measure
    4.1.5.1.   Surveillance Audit alternative requirements have been established and may be applied in lieu of SAAS Procedure 200 conventional audit requirements (see alternative requirements in paragraphs 4.2–4.6 below).

4.1.6. Transfer Alternative Measure
    4.1.6.1.   Transfer Audit alternative requirements have been established and may be applied in lieu of SAAS Procedure 200 conventional audit requirements (see alternative requirements in paragraphs 4.2–4.6 below).

4.1.7. Non-Conformities Raised While Applying Alternative Measures
    4.1.7.1.   Where appropriate, the CB auditor shall raise, review, follow-up, and close non-conformities in the normal manner (for example, during the next scheduled follow-up review, or during the subsequent audit).
    4.1.7.2.   Any non-conformity that requires an on-site visit by an auditor to verify closure shall remain open until a satisfactory review can take place during a future on-site visit.

4.1.8. COVID-19 Suspension
    4.1.8.1.   See paragraph 3.4.7, above for a broad definition of the term 'COVID-19 Suspension.'
    4.1.8.2.   Where COVID-19 Suspension may be applicable, CB shall develop, document, maintain and implement Certificate Suspension processes for handling COVID-19 suspensions in accordance with the requirements of ISO 17021-1:2015 section 9.6.5. Exceptionally, in the case of COVID-19 suspensions, the period of suspension may be up to 9 months.
    4.1.8.3.   Unless certification client is readily able to demonstrate conformity with either the requirements of SAAS Procedure 200, or alternative requirement defined in this document, CB shall suspend the client's SA8000 certificate until such time as monitoring audits have been successfully resumed and satisfactory SA8000 performance demonstrated.
    4.1.8.4.   Specifically, the following conditions shall result in COVID-19 Suspension:
- Organisation remains closed thirteen (13) weeks after an audit visit was due and could not be completed; or
- Organisation fails to cooperate with, or conform to, the alternative audit process requirements defined within this document; or

- Organisation is unable to accommodate CB's recertification proposals (in accordance with paragraphs 4.2–4.6 below) for recertification within the prescribed 3-year period.

4.1.8.5. Under suspension, the client's SA8000 certification is temporarily invalid.

4.1.8.6. CB shall maintain records of all COVID-19 Suspensions in accordance with "CB Management Oversight and Reporting of Alternative Measures" paragraph 4.1.11 below (and as required by as required by ISO17021-1:2015 Clause 8.1.2 b).

4.1.9. COVID-19 Non-conformity

4.1.9.1. This type of Nonconformity is no longer applicable.

4.1.9.2. SAI document "Temporary Policy Exceptions to SA8000 Standard" was obsoleted on December 31, 2020.

4.1.10. Client Certification Scope Modification in Response to COVID-19

4.1.10.1. In general, CB is expected to handle unanticipated changes to client certification scope in accordance with the scope requirements defined in Procedure 200 Paragraph 10.

4.1.10.2. CB shall require certification client to define and request (in writing) any scope modification (change/addition/reduction).

4.1.10.3. Where the scope modification is temporary, CB shall determine the timeline for any anticipated future scope changes (e.g. a return to original scope)

4.1.10.4. CB shall consider the risks and operational implications associated with the scope modification request to determine how, and to what extent, certification activities and records may be impacted.

4.1.10.5. CB shall record its review, decisions, and amendments to certification requirements.

4.1.10.6. CB shall implement plans and operational changes, as needed, to meet amended certification requirements.

4.1.11. CB Management, Oversight, and Reporting of COVID-19 Alternative Measures

4.1.11.1. CB Management shall maintain in real-time a 'SA8000 COVID-19 Report' which:

- records and updates the status and credibility of each of the CB's SA8000 Certifications maintained under alternative measures (as defined within this document and prior notifications).

- records and updates impact of COVID-19 on the CB, its certified clients, and their business.

- records (or references) all management decisions made, and actions taken regarding COVID-19 certifications (general CB decisions, personnel/assignment decisions and, and client-specific decisions)

4.1.11.2. SA8000 COVID-19 Reports shall be provided to authorized SAAS personnel upon request.

4.1.12. Potentially Conflicting Expectations

4.1.12.1. In addition to the requirements of this document, CBs are expected to follow updated requirements and recommendations issued by government authorities and by national or other relevant bodies to which the organisation subscribes. Such requirements may be more, or less comprehensive /prescriptive than

those defined in this document. CBs should implement the requirements that are most stringent. If a serious conflict with the requirements of this document arises, please notify SAAS immediately.

4.1.13.   Contractual Obligations

4.1.13.1.   This document introduces certification audit variations which may necessitate a CB's deviation from its certification contract /agreement with its client(s).

4.1.13.2.   Each CB is solely responsible for communicating and agreeing alternative arrangements, and, where necessary, appropriately modifying its contractual agreements with clients.

4.1.14.   Certification Recovery Activities and Timelines

4.1.14.1.   To 'recover' a client's certification audit schedule, the CB SA8000 Program Manager is required to develop and implement a reasonable alternative approach to recovery providing this decision is fully justified and recorded in COVID-19 Records (Paragraph 4.1.11 above)

4.1.14.2.   (Left blank intentionally in this revision)

4.1.14.3.   Each 'COVID recovery audit' shall incorporate 'on-site' elements (i.e. either a conventional audit, or a hybrid audit). Clients that remain unable to accommodate on-site 'recovery audit' elements shall be subject to COVID-19 Suspension.

4.1.15. Worker Voice (Worker Interview Alternative)

4.1.15.1.   To improve 'worker voice' inputs to Remote Standalone and Desk-Top audits (in lieu of CB auditor interviews), the CB's assigned audit team leader shall liaise with the Worker Representative members of the certified client's Social Performance Team ('SPT' - SA8000 clause 9.2 refers). Workers' Representatives on the SPT shall be instructed to assist with 'worker voice' input by interviewing a cross-section of workers (sampled in accordance with SAAS procedure 200) in advance of the scheduled audit.

4.1.15.2.   Topics for 'worker voice' interviews shall be tailored to the specific circumstances of the certified organisation but shall always include the workers' perspectives on the following SA8000 issues: Discrimination; Harassment; Grievance Mechanisms; Unsafe Conditions; Working Hours; and Wages.

4.1.15.3.   The Audit Team Leader shall provide Senior Workers' Representatives with a tool/questionnaire and instructions to guide the process. He/she shall also convene an electronic meeting with the Senior Workers' Representative to answer questions and provide additional instructions and guidance.

4.1.15.4.   Prior to the Remote Standalone or Desk-Top audit, Workers' Representative(s) shall interview sampled workers, in confidence, to identify grievances, concerns, suggestions etc. regarding their employment. All interviews shall be conducted in a COVID-safe environment. Workers names shall not be recorded, nor shall grievances, concerns, suggestions etc. be attributed to an individual worker.

4.1.15.5.   Following the interviews, the Senior Workers' Representatives shall aggregate grievances, concerns, suggestions etc. and send them to the audit team leader so that they can be used to guide the audit team during the Remote Standalone or Desk-Top Audit.

4.1.15.6. During the Standalone or Desk-top Audit, the Audit Team Leader shall direct the audit, considering issues raised by the Workers. If worker voice feedback obtained in the manner above suggests that further worker voice evidence is needed, the Audit Team Leader shall gather such evidence by:

a) Convening remote worker interviews via an electronic means (taking all reasonable steps to ensure that such interview is confidential, secure and COVID-safe);
b) The use of secure polling, questionnaires etc.

Note for Version 10: Previous requirements for a worker invitation letter and methodology (while still available to an audit team as an additional option) are now rescinded. A revised SPT letter now appears at Appendix 3: Audit Input "SPT Worker Feedback Letter" (Template). This version, in accordance with the process above, shall be used with immediate effect when planning audits. It is anticipated that the new process requirements above shall be fully implemented for any/all Remote Standalone and Desk-Top audits by June 1, 2021.

4.2. Certification Body COVID-19 Risk Assessments and Audit Decision-Making

4.2.1. General Guidance

4.2.1.1. SAAS recognizes that certification bodies face many challenging situations in order to credibly maintain SA8000 certifications while recovering from the COVID-19 emergency

4.2.1.2. Although a return to 'conventional' audits is desirable, this may be impossible or impractical in some cases due to the high risks involved and/or operational constraints imposed by certain government authorities or clients. The protocols and guidance provided in the paragraphs below provides options for those CBs and their clients implementing a gradual return to a conventional SA8000 audit program.

4.2.1.3. If CB becomes aware that a client organisation has closed its business, the SA8000 certificate shall be immediately withdrawn (in the usual manner). Withdrawal shall be recorded (Refer to paragraph 4.1.11 above, "CB Management, Oversight, and Reporting of Alternative Measures") and reported to SAI in due course in the usual manner.

4.2.1.4. If a client organisation is temporarily unable to accommodate a CB's on-site or alternative audit*, this shall be recorded and followed-up periodically. Any client that is unable to accommodate a scheduled audit after any 13-week period shall be subject to COVID-19 Suspension (Refer to "COVID-19 Suspension" paragraph 4.1.8, above).

4.2.1.5. Similarly, any client organisation that is due for recertification, that is unwilling, or unable, to accommodate a conventional or approved alternative audit* in sufficient time to permit recertification decision-making within the prescribed timeline shall be subject to COVID-19 Suspension (Refer to "COVID-19 Suspension" paragraph 4.1.8, above).

* Note: A client organisation's financial constraints are NOT a permissible reason to delay a CB audit.

4.2.2. CB Operational Risk Assessment(s)

4.2.2.1. When a CB, as advised by its governing board or relevant committee, (ISO/IEC 17021-1:2015 6.1.3 & 6.1.4 refer) determines that a full or partial return to work may feasible for some or all of its operations (e.g. by country or region), it shall conduct an operational risk assessment to identify all SA8000 certification risks resulting from such a decision, including:

- Infection risks for CB personnel, client personnel, and other personnel with whom an CB representative may come into contact (such as drivers, translators, etc.);
- CB auditors' competence in identifying and evaluating client's COVID-19 (SA8000) issues.

4.2.2.2. The outcome of the risk assessment shall specify short term, medium term and long-term controls/actions (including any training and familiarization) needed to mitigate residual risks for the scope(s) of activity of the risk analysis undertaken (e.g. by country or region).

4.2.2.3. CB shall repeat operational risk assessment periodically, as needed, to further identify, evaluate and mitigate risks associated with changing circumstances.

4.2.2.4. A record of the SA8000 operational risk assessments (including subsequent updates and actions) shall be approved by the CB's governing board or relevant committee and maintained for future review by authorized SAAS personnel upon request.

4.2.2.5. For the scope(s) of CB activity where residual risks are determined to be acceptable for on-site audit visits to occur, CB shall follow the requirements of SAAS Procedure 200, considering the special considerations defined in paragraphs 4.2.3, 4.3, 4.7 and 4.8 below.

4.2.2.6. For the scope(s) of activity where residual risks are determined to remain unacceptably high, or where access to client premises is not feasible, CBs may alternatively maintain certification assurance in accordance with paragraphs 4.2.3–4.6 below (until such time as this document is rescinded, or risks are determined to be acceptable for on-site certification visits to occur).

4.2.2.7. In those cases where residual risks are determined to be acceptable, CBs shall strive to 'catch-up' with surveillance and recertification activities impacted by COVID-19 delays/restrictions in accordance with 4.1.14. – Certification Recovery Activities and Timelines above.

4.2.3. Individual Audit Analysis and Decision-Making

4.2.3.1. Because a conventional on-site audit provides the highest level of assurance, this audit methodology remains mandatory for certification whenever feasible. On those occasions when it is not possible, or safe, for an SA8000 audit team (or individual) to access or travel to the clients' premises, CBs shall offer client, where possible, an alternative audit in accordance with the requirements of this document.

4.2.3.2. In order to maintain each client's certification, CB shall conduct audits (preferably 'conventional' on-site audits, but alternatively hybrid audits, remote audits, or Desktop Remote Audits) and follow-up reviews within periods prescribed in Procedure 200 version 4.2 (or on a six monthly basis where contractually agreed with client in accordance with prior versions of SAAS procedure 200).

4.2.3.3.   At least four (4) weeks before each audit becomes due, the CB Scheduler shall contact the certification client to determine whether a conventional audit is possible. If a conventional on-site audit is not feasible due to travel or access restrictions, the decision-making processes below shall be invoked.

4.2.3.4.   Taking into account the outcomes of the CB's Operational Risk Assessment(s) (paragraph 4.2.2, above) CB shall review and evaluate current operational risks and circumstances associated with due audit of a certified client, applicant or transfer organisation by applying the requirements of the "SA8000 COVID-19 'Audit Due' Decision Trees" (Figures 4.2a – 4.2e below). If an audit is possible, the evaluation requires the CB to invoke one of the relevant process requirements as follows:

- Conventional audit (*on-site audit in accordance with Procedure 200).*
- Hybrid Audit *(in accordance with paragraphs 4.4 & 4.5, below).*
- Standalone Remote Audit *(in accordance with paragraphs 4.4 & 4.6, below).*
- Desktop Remote Audit *(in accordance with paragraphs 4.4, and 4.7, below).*

4.2.3.5.   The certification client shall be informed of the outcome and arrangements for the audit shall be commenced.

4.2.3.6.   CB Certification Manager (or his/her formally appointed designee) shall create and maintain a record of, and the justification for, each alternative-audit decision taken (Refer to "CB Management, Oversight, and Reporting of Alternative Measures" paragraph 4.1.11, above).

Figure 4.2a - SA8000 COVID-19 'Stage 1' Decision Tree
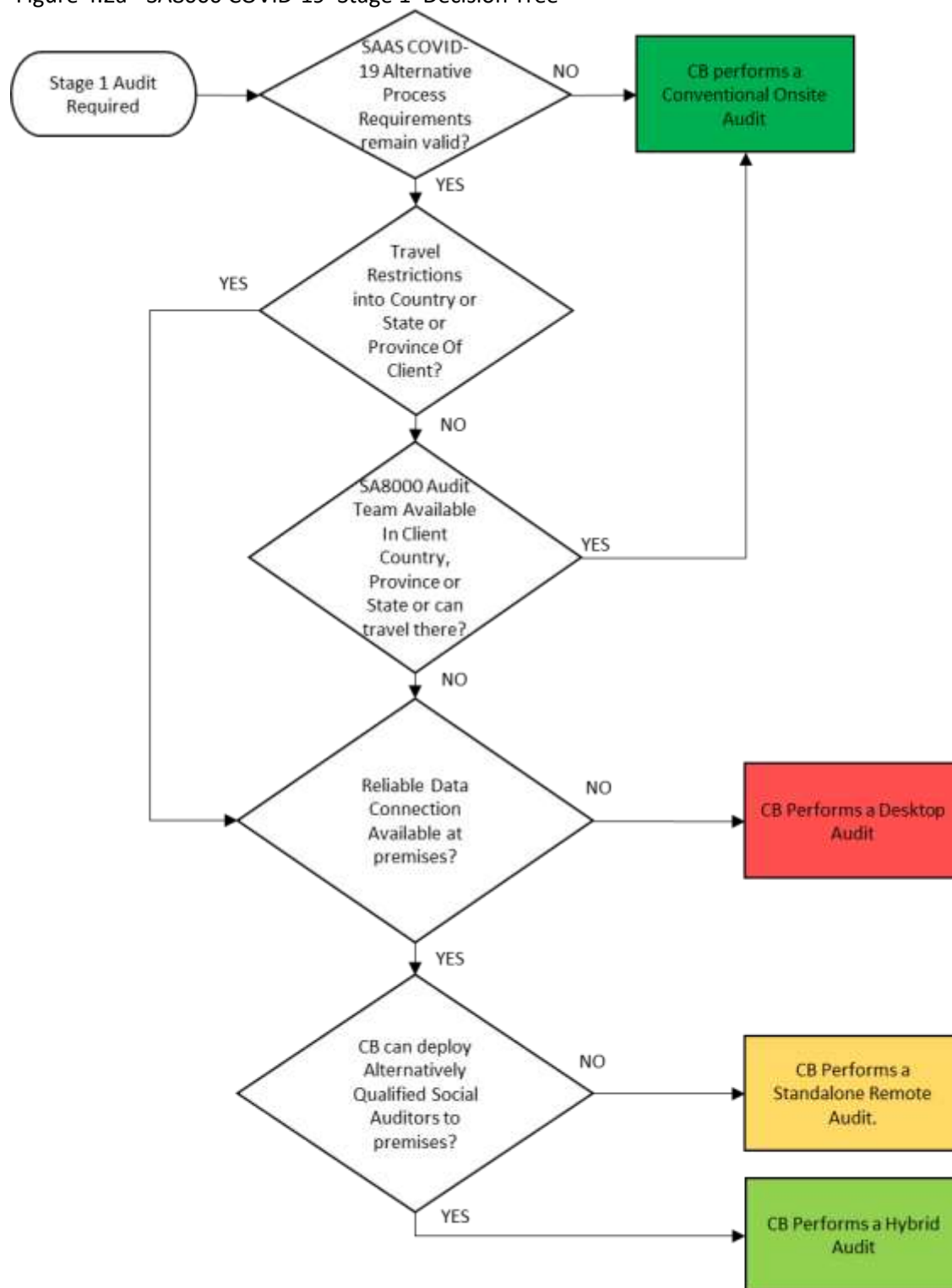
Figure 4.2a: SA8000 COVID-19 'STAGE 1' DECISION TREE

Figure 4.2b - SA8000 COVID-19 'Stage 2' Decision Tree

Notes:
1. Under COVID-19 requirements, a Stage 2 Audit shall always involve "onsite" elements (i.e. Hybrid or Conventional).

2. In cases where neither a conventional audit, nor hybrid audit can be performed, certification is not possible.

3. For 'Highest Risk' Countries, see "Country Risk Assessment Process for SA8000" on SAAS web site > Our Services (http://www.saasaccreditation.org/CountryRiskAssessment)
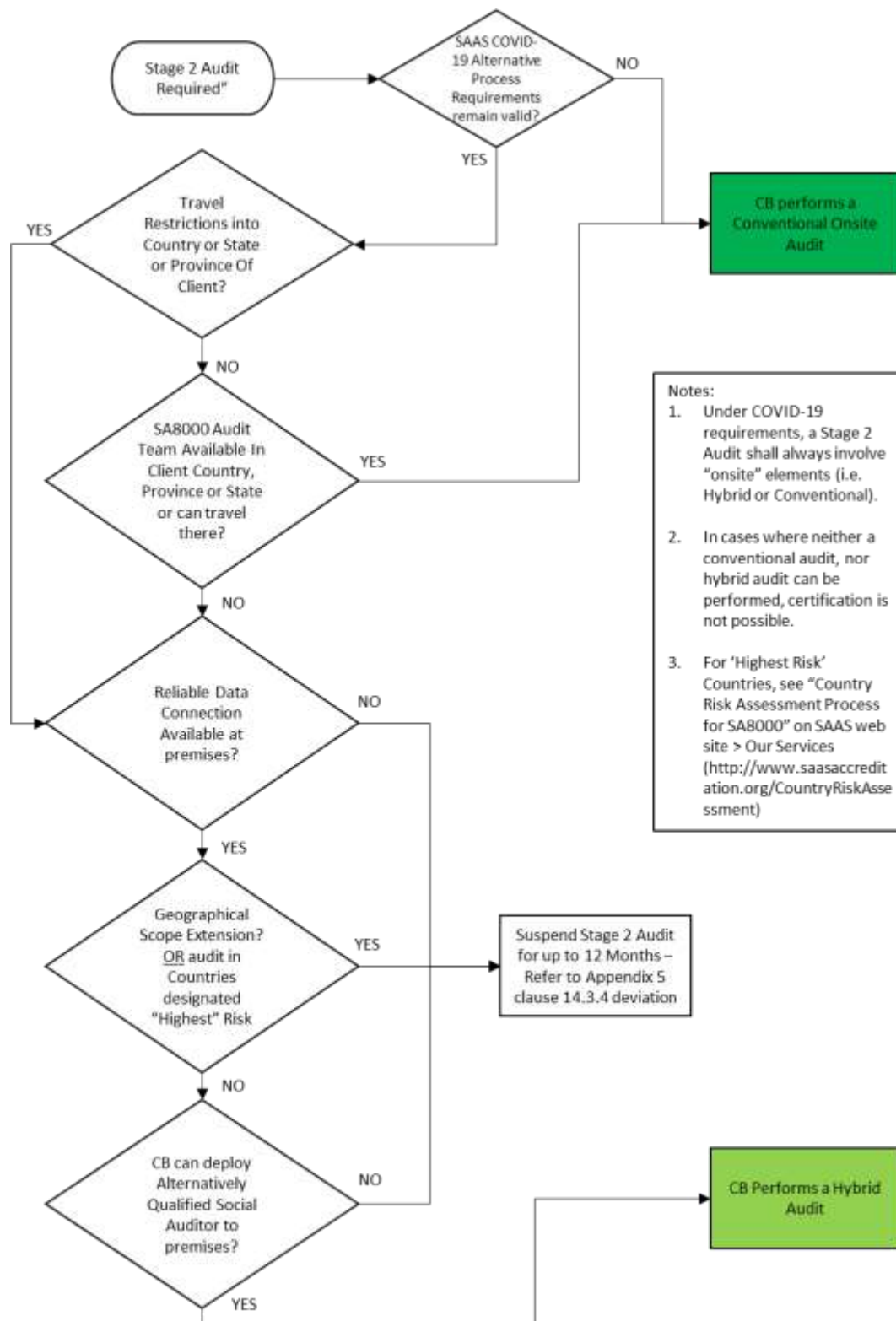
Figure 4.2b: SA8000 COVID-19 'STAGE 2' DECISION TREE

Figure 4.2c - SA8000 COVID-19 'Surveillance' Decision Tree

Notes:
1. * Consecutive Off-Site (Desktop or Standalone Remote) audits are permitted one time for clients on semi-annual surveillance program, but not for clients on an annual program.

2. If the conditions in Note 1 cannot be met, but the conditions of 3.4.10 are met, then the CB can perform a REA in line with the requirements of Appendix 7. (From May 1, 2021).

3. In cases where neither a conventional audit, nor an alternative audit can be performed, the client shall be suspended.
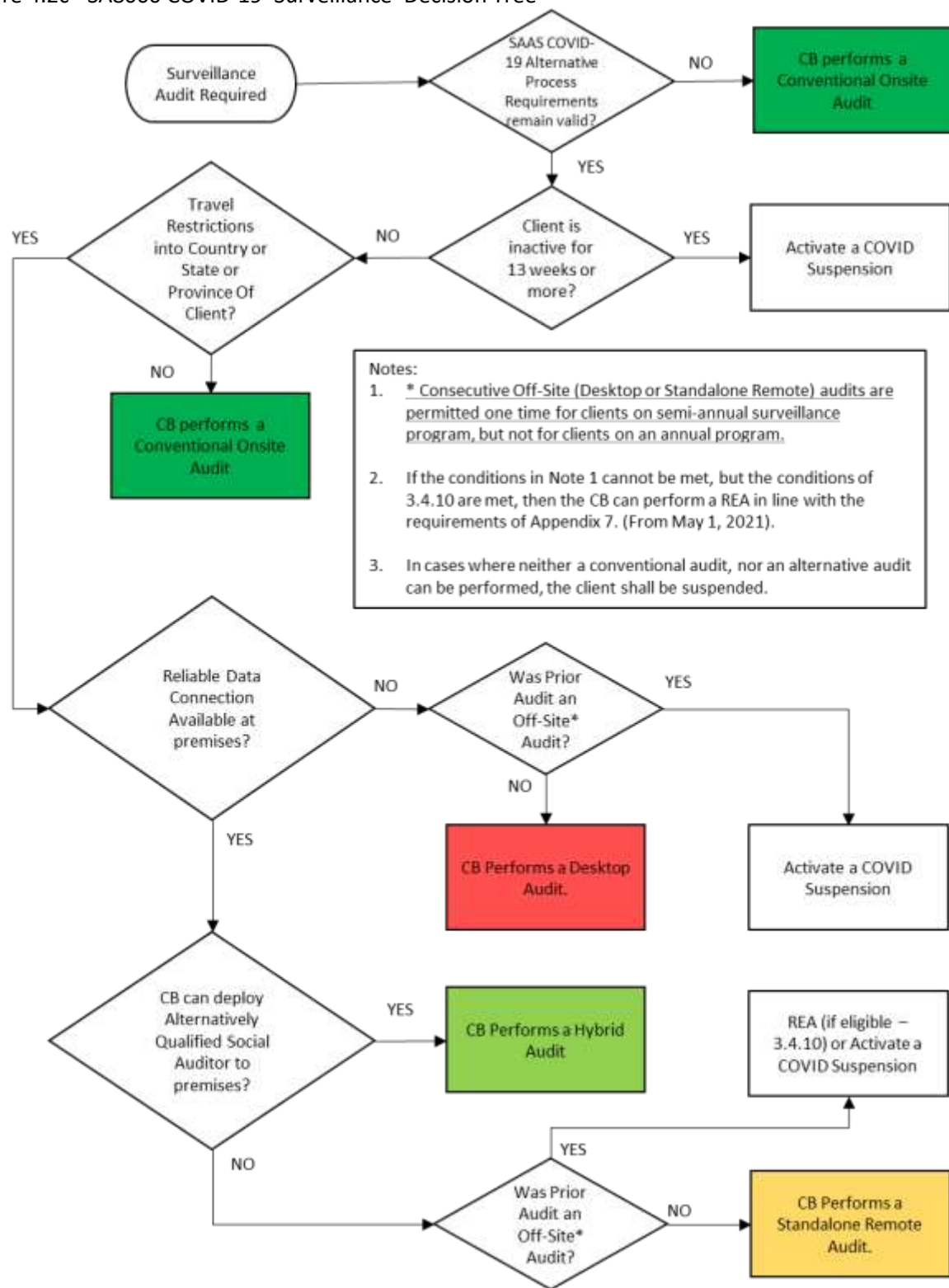
Figure 4.2c: SA8000 COVID-19 'SURVEILLANCE' DECISION TREE

Figure 4.2d - SA8000 COVID-19 'Recertification' Decision Tree

Notes:

1. * Consecutive Off-Site (Desktop or Standalone Remote) are permitted one time for clients on semi-annual surveillance program, but not for clients on an annual program.

2. If the conditions in Note 1 cannot be met, but the conditions of 3.4.10 are met, then the CB can perform a REA in line with the requirements of Appendix 7. (From May 1, 2021)

3. At least once every two certification cycles, the recertification audit shall be a conventional onsite audit.

4. In cases where neither a conventional audit, nor an alternative audit can be performed, the client shall be suspended.

Figure 4.2d: SA8000 COVID-19 'RECERTIFICATION' DECISION TREE

Figure 4.2e - SA8000 COVID-19 'Transfer Audit' Decision Tree
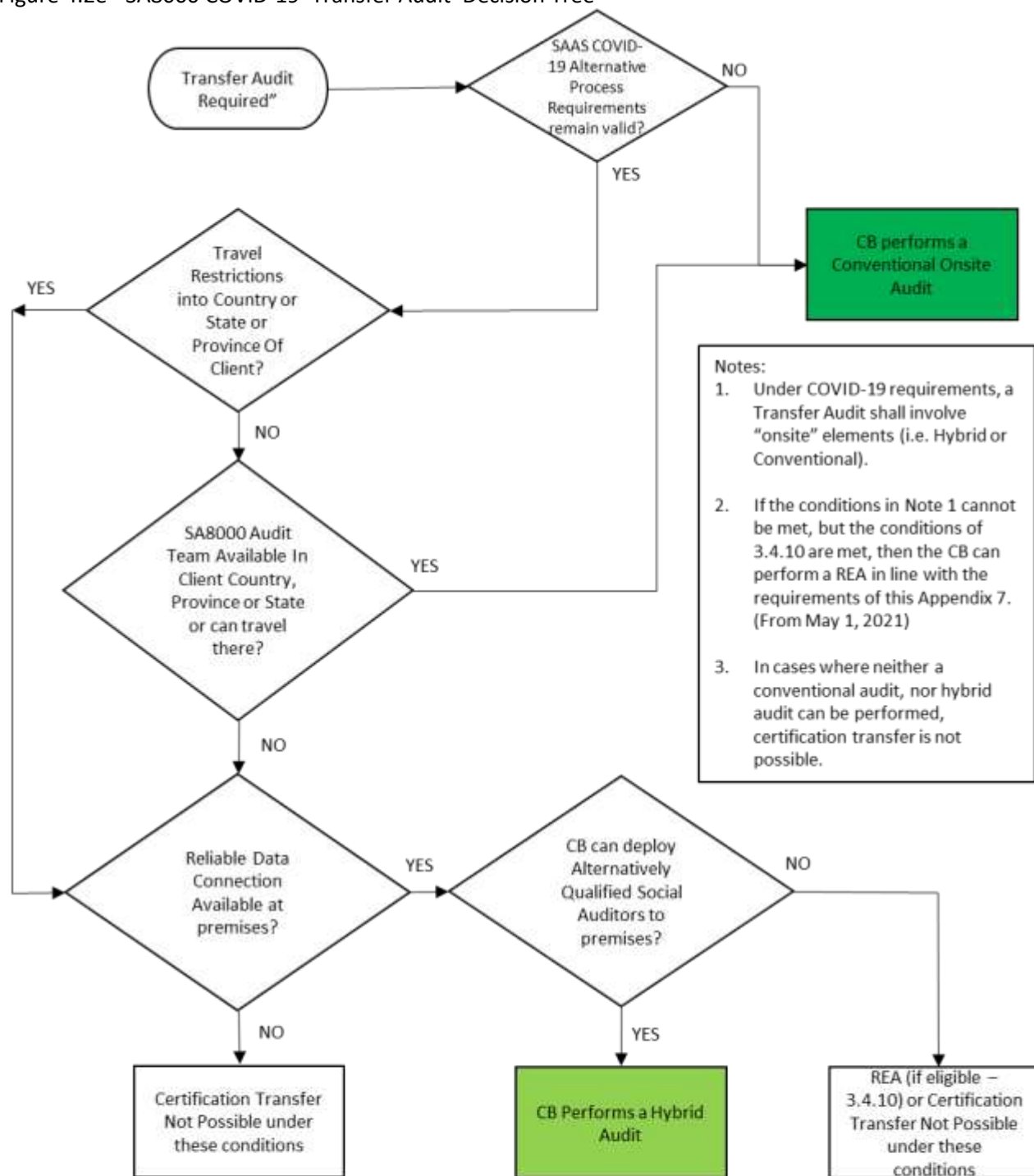
Notes:
1. Under COVID-19 requirements, a Transfer Audit shall involve "onsite" elements (i.e. Hybrid or Conventional).

2. If the conditions in Note 1 cannot be met, but the conditions of 3.4.10 are met, then the CB can perform a REA in line with the requirements of this Appendix 7. (From May 1, 2021)

3. In cases where neither a conventional audit, nor hybrid audit can be performed, certification transfer is not possible.

Figure 4.2e: SA8000 COVID-19 'TRANSFER AUDIT' DECISION TREE

4.3. Certification Body Conventional and Alternative (COVID-19) Audit Requirements

4.3.1.General Requirements – Conventional and Alternative Audits

4.3.1.1.   SAAS currently recognizes 'conventional audits' and four types of 'alternative audits' ('Hybrid', 'Standalone Remote', Remote Enhanced Audits (REA) and 'Desktop' – refer to 'Definitions' in paragraph 3.4, and paragraphs below).

a) A conventional audit demands that on-site evaluation be undertaken by a qualified Lead Auditor and team in accordance with SAAS procedure 200 requirements – as modified by Appendix 5, below.

b) Where the CB's current Operational Risk Assessment (4.2.2, above) permits, CB may reduce COVID-19 exposure time for auditors without invoking Alternative Audit measures by utilizing a "Split Conventional Audit" proving the following conditions are met:

- The Certification Body's SA8000 Program Manager and appointed Lead Auditor/Audit Team Leader shall both agree to this approach.
- Each Split Conventional Audit shall comprise off-site and on-site activities, each of which shall be completed over a maximum period of 4 weeks by a single, suitably competent and qualified Lead Auditor.
- Each Split Conventional Audit shall be conducted in accordance with guidance provided within IAF MD4 (ICT Information & communication Technology) and IAF ID12 (Principles of Remote Assessment).
- On-site effort for a Split Conventional Audit shall be determined in the same manner as for a hybrid audit (>25% of total effort shall be on-site – Paragraph 4.4.3 below refers).
- The Certification Body's SA8000 Program Manager shall, in advance of each Split Conventional Audit, approve the plan (which shall clearly indicate the time to be spent on, and issues to be evaluated during, off-site and on-site elements).
- The off-site elements of each Split Conventional Audit shall be conducted in a similar manner to a "Standalone Remote Audit" (See 4.5 below).

4.3.1.2.   Under all circumstances, irrespective of audit type, CB staff and auditors shall:

- adhere to established SA8000 requirements / interpretations (Performance Indicator Annex & SA8000 Guidance).
- adhere to applicable requirements of SAAS procedure 200 (including arrangements for SA8000 certification and audit schedules; follow-up reviews; secrecy/confidentiality requirements; etc.) except as specifically authorized within this document and its appendices.
- incorporate into each audit an appropriate evaluation of the impacts of COVID-19 risks and control measures, with respect to the requirements of SA8000 – See paragraph 4.3.2 and Appendix 1 below. Where applicable, special consideration shall be given to evaluating the SA8000-related conditions of displaced workers, including personnel on temporary furlough, and those working from home (e.g. "Smart Working" in Italy).

4.3.1.3. At present, alternative audits are recognized only for single-site certification clients that are in good standing with the CB and with SAAS. CB managers wishing SAAS to consider complex and/or multi-site alternative processes should contact the SAAS Technical Director (with cc to SAAS Client Manager) to determine whether a customized alternative approach may be feasible and suggest the alternative approach they wish to pursue.

Note: A substantial period for consideration, planning and approval of a potential customized alternative may be required. SAAS shall not responsible for certificate suspensions that become necessary due to short timeline requests from CBs.

4.3.1.4. Tables 4.3.1a – 4.3.1d below outline requirements for SAAS-recognized alternative audits. Further process details for each are specified in paragraphs 4.4 – 4.6 below.

4.3.1.5. Table 4.3.1e provides a listing of recommended Alternative Audit Records to be maintained by the CB. Recorded evidence shall be sufficient to provide assurance to CB Technical Reviewer, SAAS, and other parties that an alternative audit was completed in accordance with the requirements of this document and SAAS Procedure 200 V4.2 Section 24.

4.3.1.6. Terms used in Alternative Audit Processes (4.3.1 Tables and paragraphs 4.4 – 4.6 below)

- *Pro200* = SAAS Procedure 200 (Latest, V4.2 – or applicable version)
- *Pro200A* = SAAS Procedure 200A 2020
- *CB LA* = CB Qualified SA8000 Lead Auditor (Per SAAS Procedure 201A)
- *PIA* = SAI SA8000 Performance Indicator Annex.
- *ISO 19011* = ISO 19011:2018 - Guidelines for auditing management systems
- *IAF 12* = IAF ID 12:2015 - Principles on Remote Assessment
- *CB* = SAAS Accredited Certification Body
- *VoIP* = Voice over Internet Protocol: Audio & video communication using skype, Microsoft team, Google meet, zoom or similar
- *Live streaming* = on-line streaming media simultaneously recorded and broadcast in real-time
- *Screen sharing* = the practice of sharing contents of one device screen with remote user/s or device/s

4.3.1.7. Documents Referenced in Alternative Audit Processes (4.4 – 4.6 below)

- CB's own Documented Procedure.
- Audit Input Worker Invitation Letter (Appendix 3)
- Documentation to be Considered During Audits [List] (Appendix 4)

4.3.1.8. For the purposes of certification audit quotations, CB shall include all relevant personnel (including those working from home, those on restricted/reduced work schedules, and those temporarily laid-off due to COVID-19 conditions).

4.3.1.9. For the purposes of sampling during an audit (interviews, payroll files etc.) Audit Team Leader shall include all currently active, or partially active personnel (including those working from home and those on restricted/reduced work schedules).

Note: SAAS anticipates a future need (and reserves the right) to expand alternative audit requirements as CBs gain experience implementing these processes. CBs are encouraged to submit constructive recommendations to SAAS.

Table 4.3.1a – Alternative Audits – Outline Criteria & Limitations for Use

Type of Audit (in order of preference)	Outline Audit Process (For full details, see 'definitions' in 3.4 above, and applicable 'Audit Requirements' section below.	Authorized Justification Required.	Limitations/ Comments
Conventional on-site Audit	Qualified Lead Auditor conducts all elements entirely on-site.	None required - preferred auditing methodology.	Required for recertification at least once every two audit cycles.
Hybrid Audit	Qualified Lead Auditor conducts on-line and off-line elements remotely in conjunction with Alternatively Qualified Auditor who conducts assigned on-site elements.	Justify why conventional on-site audit was not possible.	During COVID-19 emergency, may substitute for conventional audit, except as noted above. (Refer to table 4.3.1b, below)
Standalone Remote Audit.	Qualified Lead Auditor conducts on-line and off-line elements entirely remotely.	Justify why neither conventional on-site nor hybrid audit were possible.	Consecutive off-site audits (Desktop Remote Audits or Standalone Remote Audits) are not permitted for clients on an annual surveillance program but are permitted one time for clients completing a semi-annual surveillance program. Not permissible for initial certification stage 2, or transfer audits. (Refer to table 4.3.1b, below)
Remote Enhanced Audit	Qualified Lead Auditor conducts on-line and off-line elements entirely remotely.	As described in Appendix 7 to this document.	Applicable only under Exceptional Circumstances as described in 3.4.10 above.
Desktop Remote Audit	Qualified Lead Auditor conducts off-line elements only, entirely remotely.	Justify why conventional on-site, nor hybrid audit, nor standalone remote audit were possible.	Consecutive off-site audits (Desktop Remote Audits or Standalone Remote Audits) are not permitted for clients on an annual surveillance program but are permitted one time for clients completing a semi-

			annual surveillance program. Not permissible for initial certification stage 2, or transfer audits. (Refer to table 4.3.1b, below)

Table 4.3.1b – Alternative Audits – Applicability Outline

Audit Type	Projected Risk Level	Projected Assurance Level	Stage 1 Permitted Audit Types	Stage 2 Permitted Audit Types	Surveillance Permitted Audit Types	Recert'n Permitted Audit Types	Transfer Permitted Audit Types
Conventional	Lowest	Highest	YES	YES	YES	YES	YES
Hybrid	Moderate	High	YES	YES**	YES	YES**	YES**
Standalone	High	Moderate	YES	NO	YES*	YES*	NO
Remote Enhanced	High	Moderate	NO	NO	YES	YES+	YES+
Desktop	Highest	Lowest	YES	NO	YES*	YES*	NO

*For Annual Surveillance Clients - Consecutive off-site audits not permitted – For six-monthly surveillance Clients, they are permitted on one occasion. Else follow process as laid down in Appendix 7 of this instruction.
** One time only – Audits of this type permitted only once within any four-year period. Else follow process as laid down in Appendix 7 of this instruction.
+ Permitted under Exceptional Circumstances as described in Appendix 7 of this document.

Table 4.3.1c – Alternative Audits – Audit Effort Outline

Type of Audit	Conventional On-site	Hybrid Audit	Standalone Remote Audit	Remote Enhanced Audit (REA)	Desktop Remote Audit	Comments
Stage 1	Minimum per SAAS Procedure 200	Minimum per SAAS Procedure 200**	Minimum per SAAS Procedure 200*	N/A	1 Day minimum i.e., 2 sessions of 4 hours each.	As per IAF guidance remote audits should be performed in half-day (maximum) sessions.
Stage 2	Minimum per SAAS Procedure 200	Minimum per SAAS Procedure 200**	N/A	N/A	N/A	
Surveillance	Minimum per SAAS	Minimum per SAAS	Minimum per SAAS	1 Day minimum	1 Day minimum	As per IAF guidance remote audits should be

	Procedure 200	Procedure 200**	Procedure 200*	i.e., 2 sessions of 4 hours each.	i.e., 2 sessions of 4 hours each.	performed in half-day (maximum) sessions
Re-certification	Minimum per SAAS Procedure 200	Minimum per SAAS Procedure 200**	Minimum per SAAS Procedure 200*	2 Days Minimum i.e., 4 sessions of 4 hours each.	2 Days Minimum i.e., 4 sessions of 4 hours each.	As per IAF guidance remote audits should be performed in half-day (maximum) sessions
Transfer	Minimum per SAAS Procedure 200	Minimum per SAAS Procedure 200**	Minimum per SAAS Procedure 200*	Minimum per SAAS Procedure 200*	N/A	
		* Typically spread over more total days to accommodate communications ** Typically spread over more total days to accommodate communications AND a minimum 25% of time on site (refer to section 4.4.3)				

Table 4.3.1d - Alternative Audit Process – Communications Criteria

Alternative Audit Process – Communications Criteria			
Conventional Audit Normative Requirement	**Primary Responsibility & Communications (Minima)** (Not all requirements applicable for Stage 1 Audit)		
	Hybrid Audit	**Standalone & REA Remote Audits**	**Desktop Remote Audit**
a) Stakeholder Engagement - [Pro200 Cl. 11.1.3]	By CB LA via VoIP, Telephone, Email.	By CB LA via VoIP, Telephone, Email.	By CB LA via VoIP, Telephone, Email.
b) Initial Research - [Pro200 Cl. 13.2 & 13.3] (Pre-Stage 1 activity)	By CB LA via VoIP, Telephone, Web Research, Email.	By CB LA via VoIP, Telephone, Web Research, Email.	By CB LA via VoIP, Telephone, Web Research, Email.
c) Communication of audit plan in Advance and dealing with [ISO17021-1 Cl 9.2.3.5 issues-Pro200 Cl. 12.1].	By CB LA via Email.	By CB LA via Email.	By CB LA via Email.
d) Sending of "SPT Worker Feedback Letter" in Advance [Paragraphs 4.5 & 4.6 below]	N/A – Interviews conducted on-site.	By CB LA via Email.	By CB LA via Email.
e) Opening Meeting -	Involving CB LA (remotely), On-Site	Involving CB LA (remotely), Client Top	Involving CB LA (remotely), Client Top

[ISO19011 Cl 6.4.3 and Pro200 Cl. 15.3]	Auditor, Client Top Management, Management Rep, Worker Rep. * Via VoIP, screen sharing, as planned. (*Potentially also SPT Members, Relevant Process Owners, as planned, subject to social distancing precautions).	Management, Management Rep, Worker Rep. * Via VoIP, screen sharing, as planned. (*Potentially also SPT Members, Relevant Process Owners, as planned, subject to social distancing precautions).	Management, Management Rep, Worker Rep. Via Telephone (Supplemented or replaced by VoIP, whenever possible).
f) Anti-bribery statement [Pro200 C.15.3.5]	By CB LA via VoIP/Email	By CB LA via VoIP/Email	By CB LA via Email.
g) Site map/factory layout [Pro200 C.15.4.3, Table 25.r]	By CB LA via email. Supplemented by VoIP, screen sharing	By CB LA via email. Supplemented by VoIP, screen sharing	By CB LA via Email. (Supplemented by VoIP, screen sharing whenever possible)
h) Performing review of documented information - [ISO19011 Cl. 6.3.1 and Pro200 15.6]	By CB LA and On-Site Auditor, via VoIP, screen sharing, as planned.	By CB LA via VoIP, screen sharing, as planned.	By CB LA via document review as planned (Supplemented by Telephone, VoIP, screen sharing, whenever possible)
i) Conducting Management Interviews [Pro200 Cl.15.8.1]	By CB LA and On-Site Auditor, supplemented by VoIP, screen sharing, as planned.	By CB LA via VoIP, screen sharing, as planned.	By CB LA via Telephone (Supplemented or replaced by VoIP, screen sharing, whenever possible)
j) SPT and Worker Rep(s) Interviews - [Pro200 Cl.15.8.2 and 15.8.3]	By On-Site Auditor and CB LA, supplemented by VoIP, screen sharing, as planned.	By CB LA via VoIP, screen sharing, as planned	By CB LA via Telephone (Supplemented or replaced by VoIP, screen sharing, whenever possible)
k) Effectiveness of SPT.	By On-Site Auditor and CB LA, supplemented by VoIP, screen sharing, as planned.	By CB LA via VoIP, screen sharing, as planned.	By CB LA document review (Supplemented by Telephone, VoIP, screen sharing, whenever possible)
l) Review of effectiveness of	By On-Site Auditor	By CB LA via VoIP, screen sharing, as planned.	By CB LA document review (Supplemented by

complaint system		(Potentially also via worker feedback)	Telephone, VoIP, screen sharing, whenever possible - potentially also via worker feedback)
m) Conducting Worker Interviews - [Pro200 Cl.15.8.4]	By On-Site Auditor	(No conventional worker interviews). CB LA responds to and follows-up (via suitably confidential media), worker feedback received in response to "SPT Worker Feedback Letter" - Appendix 3.	(No conventional worker interviews). CB LA responds to and follows-up (via suitably confidential media), worker feedback received in response to "SPT Worker Feedback Letter" - Appendix 3.
n) Interview of on-site subcontract labour and suppliers - [Pro200 Cl.15.8.5]	By On-Site Auditor	(No conventional worker interviews). CB LA responds to and follows-up (via suitably confidential media), worker feedback received in response to "SPT Worker Feedback Letter" - Appendix 3.	(No conventional worker interviews). CB LA responds to and follows-up (via suitably confidential media), worker feedback received in response to "SPT Worker Feedback Letter" - Appendix 3.
o) Reviewing Physical Conditions - [Pro200 Cl.15.4 and 15.5]	By On-site Auditor, supplemented (as planned) by On-site Auditor's live-streaming to CB LA, photographs.	By CB LA. Where possible, by client live-streaming & real-time photographs, as planned. Alternatively, photographs /pre-recorded video clips to be sent in advance by client.	By CB LA. Photographs /pre-recorded video clips to be sent in advance by client, as planned.
p) Review of Previous Audit NCs - major /minor [Pro200 Table 22 & 23]	By CB LA via documents /records/photographs sent by client via email. (Supported by On-Site Auditor, and supplemented by VoIP, screen sharing, live-streamlining, etc. as planned / as needed).	By CB LA via Documents /records/photographs sent by client via email. (Supplemented by VoIP, screen sharing, live-streamlining, etc. as planned / as needed).	By CB LA. Documents /records/photographs, sent by client via email. (Supplemented by Telephone, VoIP, and screen sharing, whenever possible).
q) Taking of Photographs – [Pro200 Cl. 15.7.6]	By On-Site Auditor	By CB LA. Where possible, by client live-streamlining & real-time photographs via VoIP,	By CB LA. Photographs to be sent by client via email, in advance.

		screen sharing, as planned. (Alternatively, photographs to be sent via email, in advance, by client).	(Supplemented by Telephone, VoIP, and screen sharing, whenever possible).
r) Management System Maturity Declaration [Pro200A: V2, May 2020], (when applicable as per clause 5 -MD Frequency and planning)	By CB LA via documents sent via email, in advance, by client. (Supported by On-Site Auditor, and supplemented by screen sharing, live-streamlining, etc. as planned / as needed).	By CB LA via documents sent via email, in advance, by client. (Supplemented by screen sharing, live-streamlining, etc. as planned / as needed).	By CB LA via documents sent via email, in advance, by client. (Supplemented by Telephone, VoIP, and screen sharing, whenever possible).
s) On-line Updates of SAI database	By CB LA.	By CB LA.	By CB LA.
t) Preparation of Audit Findings (& conclusions) [ISO19011 Cl 6.4.9.1 and 6.4.9.2 and Pro200 Tables 24 & 25]	By CB LA. (Supported by On-Site Auditor, and supplemented by screen sharing, live-streamlining, etc. as planned / as needed).	By CB LA.	By CB LA.
u) Closing Meeting - [ISO19011 Cl 6.4.10 and Pro200 Cl. 15.9].	Involving CB LA (remotely), On-Site Auditor (if required), Client Top Management, Management Rep, Worker Rep. * Via VoIP, screen sharing, as planned. (*Potentially also SPT Members, Relevant Process Owners, as planned, subject to social distancing precautions.)	Involving CB LA (remotely), Client Top Management, Management Rep, Worker Rep. * Via VoIP, screen sharing, as planned. (*Potentially also SPT Members, Relevant Process Owners, as planned, subject to social distancing precautions.)	Involving CB LA (remotely), Client Top Management, Management Rep, Worker Rep. Via Telephone (Supplemented or replaced by VoIP, whenever possible)
v) Audit Reporting [Pro200 Table 24]	By CB LA. (Supported by On-Site Auditor's audit records, such as interview records, photographs,	By CB LA.	By CB LA.

		auditor notes etc., as planned).		

Table 4.3.1e - Alternative Audits – Recommended Records

		Recommended Record Evidence Required for Each Alternative Audit Type (IAF MD4 Paragraph 0.3 & 4.2.6 refer)		
		Hybrid Audit	Standalone & REA Remote Audits	Desktop Remote Audit
1	Testing of VOIP system prior to Audit.	Emails and short (< 1min) video clip.	Emails and short (< 1min) video clip.	N/A
2	Opening Meeting	PPT Used by LA. Photograph of those present. Audit Notes Audio file of the meeting Attendance list	PPT Used by LA. Audit Notes Photograph of those present Audio file of the meeting Attendance list	.As per Procedure 200 V4.2. Attendance list Photograph of those present. Audio file of the meeting PPT Used by LA
3	Management System Review	Photos as required by Procedure 200 V4.2 and copies of documents via photographs i.e. permits, policies as requested by LA.	Emails, Photographs, Audio File of conversations.	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
4	Management Interviews	As required by Procedure 200 V4.2 & Audio File of conversation.	As required by Procedure 200 V4.2 & Audio File of conversation.	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
5	Combined Quick Overview and H & S Tours	As required by Procedure 200 V4.2 & Video and Audio Files of conversation and issues seen.	As required by Procedure 200 V4.2 & Video and Audio Files of conversation and issues seen.	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
6	Worker Interviews	Just checklists and ADR's NO Audio or Video	Just checklists and ADR's NO Audio or Video	Just checklists and ADR's NO Audio or Video
7	Working Hours Review	Audio Files and Screen Capture/Photographs of Working Hour Records	Audio Files and Screen Capture/Photographs of Working Hour Records	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.

8	Payroll Review	Audio Files and Screen Capture/Photographs of Wages Records	Audio Files and Screen Capture/Photographs of Wages Records	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
9	Complaints	Audio Files and Screen Capture/Photographs of Complaints	Audio Files and Screen Capture/Photographs of Complaints	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
10	Closing Meeting	PPT Used by LA. Photograph of those present. Audit Notes Audio file of the meeting Attendance list	PPT Used by LA. Photograph of those present. Audit Notes Audio file of the meeting Attendance list	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.
11	General Communications	Audio files of conversation between the On-site Auditor and Remote CB LA	Audio files of conversation between the Client and Remote CB LA	Generally, as per Procedure 200 V4.2 including email interactions and audio/video clips as applicable.

4.3.2.Evaluation of the Impacts of COVID-19 Risks and Control Measures

4.3.2.1.   When conducting audits of any type (conventional or alternative), at any stage of certification, CB auditors shall duly consider the impacts of the COVID-19 virus with respect to the protection and wellbeing of workers and other personnel.

4.3.2.2.   In particular, CB auditors shall ensure that certified organisations have appropriately assessed risks (SA8000 section 9.2 – "Identification and Assessment of Risks") and have implemented appropriate control measures to mitigate identifiable risks to workers and others. "SA8000 COVID-19 Impacts – Auditor Quick Reference Guide" (See Appendix 1) may be used as a guide to assist auditors in this respect. SAI document "SAI Document "Responding to Covid-19: Guidance for SA8000-Certified Organisations" provides more complete recommendations for client organisations.

4.3.2.3.   Further, CB auditors need to be vigilant in ensuring that a client organisation's COVID-19 controls (for example: health and safety controls) are implemented in practice and are not only a paperwork exercise.

Note: SAI's document "SAI Document "Responding to Covid-19: Guidance for SA8000-Certified Organisations" provides more detailed guidance and interpretation of COVID-19 considerations (including legal and regulatory considerations) potentially impacting SA8000 conformity. It includes an entire section defining recommendations for a "COVID-19 Risk

Assessment Framework". This document should be used by all interested parties (including auditors) seeking to clarify SA8000 interpretations of COVID-19 issues in the workplace.

4.4. Hybrid Audit Requirements

4.4.1. Communications Criteria for Hybrid Audits

      4.4.1.1.   The principal Hybrid Audit communications criteria & normative cross-references (e.g. SAAS Procedure 200 clauses) are defined in table 4.3.1d.

4.4.2. General Requirements for Hybrid Audits

      4.4.2.1.   In accordance with paragraph 4.2 of this procedure (and associated decision-trees), a Hybrid Audit may be the best viable option for a CB to maintain a certification when travel restrictions and/or access to certification client premises prevents a conventional audit.

      4.4.2.2.   Hybrid Audits shall generally be performed in accordance with IAF 12 and ISO 19011. Except as defined below, the scope, planning, process, and documentation of the audit shall follow Pro200.

      4.4.2.3.   The CB shall develop and maintain a documented procedure(s) defining its SA8000 Hybrid audit process requirements.

      4.4.2.4.   A Hybrid Audit shall be performed by a CB SA8000 Lead Auditor (CB LA) or Senior Lead Auditor with support from an On-site Auditor.

      4.4.2.5.   Overall responsibility for audit planning, preparation, coordination, performance and reporting of a hybrid audit rests with the assigned CB LA.

      4.4.2.6.   The assigned CB LA performs all planning and preparation for the audit, including review of system documentation. During the audit, the assigned CB LA utilizes an On-Site Auditor (see definition in paragraph 3.4, above) to be their eyes, ears, and hands to perform assigned audit tasks in accordance with the prescribed audit plan and as directed.

      4.4.2.7.   In order to facilitate remote opening/closing meetings, conduct management interviews, share records etc. the assigned Lead Auditor connects electronically to remotely manage and perform elements of the audit in real-time through an on-line meeting or web conferencing platform.

      4.4.2.8.   On-site audit activity is performed by an On-Site Auditor following the planning and real-time directions provided in advance by the appointed CB LA.

      4.4.2.9.   The On-Site Auditor reviews physical conditions, accesses records and performs other on-site activities remaining connected via a real-time live video streaming as specified by the audit plan and as directed by the assigned Lead Auditor, (noting that, to protect confidentiality, worker interviews are not streamed by VoIP).

4.4.3. Planning and Scheduling of Hybrid Audits

      4.4.3.1.   SAAS reserves the right to prohibit a CB from performing Hybrid audits if their performance of the same is found to be lacking.

      4.4.3.2.   Refer to Table 4.3.1c – "Alternative Audits – Audit Effort Outline" to determine minimum audit effort required (at least 25% of which time shall be on-site – for example, in the case of a simple, small, service organisation). When planning a hybrid audit, CB LA shall assign additional on-site time and tasks commensurate with the nature and risks of the certified organisation. Consideration shall be given to:

- the number and type of interviews to be conducted (per Proc200);
- the physical size and complexity of the facility (products, processes, people, systems etc.);
- the number and nature of health and safety hazards present.

4.4.3.3. Planning and preparation for a Hybrid audit requires significant preliminary effort to establish and confirm reliable data/internet connections (to allow real-time video streaming and screen sharing) as well as arranging for an On-Site Auditor to conduct on-site activities.

4.4.3.4. Once the above arrangements are confirmed, CB shall assign the Hybrid Audit to CB LA and an On-Site Auditor.

4.4.3.5. CB LA shall start preparation for audit depending on type of audit (Stage 1, Stage 2, Recertification, Surveillance, Transfer) generally in accordance with the requirement of Pro200.

4.4.3.6. At least 20 working days before the proposed date of the Hybrid Audit, the CB-LA shall request (via email) the Client to provide access to soft copies of documentation required (Refer to SAAS Procedure 200 requirements for this type of audit and to Appendix 4: 'Documentation to be Considered During Audits', below) . Should client fail to produce requested documentation to the satisfaction of the CB LA, he/she shall raise a 'Major' non-conformity as described in Procedure 200 (for "denied access").

4.4.3.7. During preparation the CB LA shall also:
- ensure that the appropriate entries have been made in the SAI Database.
- establish and validate reliable data connections, screen sharing and video streaming connections.
- ensure that the Hybrid Audit will be performed at a time when the client's representatives (Including SPT representatives) are available to connect remotely, considering time zones differences, if any.

4.4.3.8. Upon satisfactory completion of initial client communications, CB LA shall send the Audit Plan for the Hybrid Audit which shall include times for when the On-Site Auditor shall perform on-site activities, audit paths for both CB LA and On-Site Auditor and when the CB LA may contact the Client to request clarifications.

4.4.3.9. CB LA shall ensure that audit plan and audit paths are discussed, conveyed to the On-Site Auditor to avoid any miscommunication that may jeopardize the audit process.

4.4.3.10. The list of activities, areas to be covered, means and ways to connect via video streaming in real-time shall be effectively communicated On-Site Auditor.

4.4.3.11. The CB shall define and document how confidentiality is assured throughout the Hybrid Audit.

4.4.3.12. The CB shall ensure that the person representing the client is the SA8000 management system representative and not a consultant.

4.4.3.13. The CB Hybrid Audit Procedure shall detail how to review information that cannot be shared remotely (i.e. due to confidentiality or access issues) and how this is to be dealt with during the audit (i.e., follow-up, issuance of a non-conformance, etc.).

4.4.3.14. If, at any time, and in any respect, client fails to cooperate in accordance with the required process (to the satisfaction of the CB LA), a 'Major' non-conformity shall be raised for "denied access" (as described in Pro200).

4.4.4. Selecting the Forum and Technology for Hybrid Audits

    4.4.4.1.   VoIP Forum and technology planning should include:

- Determining the platform for video streaming and screen sharing for hosting the audit, to be agreed upon between CB and the Client.
- Granting security and/or profile access to the Auditor.
- Testing platform compatibility between the Auditor and Client (and if appropriate SAAS) prior to audit.
- Encouraging and considering the use of webcams, cellphone cameras, cameras, etc. when physical evaluation of an event/site is desired or necessary.

    4.4.4.2.   Scheduling requires that the following be carefully considered:

- Time zone acknowledgement and management to coordinate reasonable and mutually agreeable convening times.

    4.4.4.3.   A trial meeting using the same media platforms agreed upon shall be conducted at least 10 working days prior to the Hybrid audit to ensure the scheduled audit will perform as planned and satisfy mutually agreed security/confidentiality criteria.

- Speed of access, visual resolution and audio quality shall be sufficient for CB LA to perform his/her reviews and interviews efficiently and confidently.

Note: Meeting/web conferencing platforms such as Microsoft Teams/Skype/Google Meet/WeChat/WhatsApp/etc. with 'screen sharing' enabled are typically suitable. The same platform or an alternative real-time electronic streaming medium such as GoPro Camera or Cellphone Video Camera and associated links/applications are typically suitable for providing real-time video linkage where required. Electronic media must be pre-selected, agreed with client management and tested for adequate performance in advance the audit.

4.4.5. Performing Hybrid Audits

    4.4.5.1.   On the agreed day(s)/time(s), the CB LA and On-Site Auditor shall conduct the Hybrid Audit by reviewing those elements required by Pro200.

    4.4.5.2.   Using the site map and connected to the CB LA via a live video stream, the On-Site Auditor shall perform a walk-through /site tour of the client's facilities following the directions of the CB LA. CB LA may instruct On-Site Auditor to visit specific areas to see in real-time via video streaming.

    4.4.5.3.   CB LA shall, as required, request client to share further documents and records (in real-time via the chosen VoIP tool, or as requested). CB LA may also delegate review of documentation and records to the On-Site Auditor.

    4.4.5.4.   Interviews shall be held with the SPT Team and management representatives via the chosen VoIP tool (not applicable for stage 1 audit).

    4.4.5.5.   The On-Site Auditor shall conduct worker interviews and provide the results confidentially to the CB LA (not applicable for stage 1 audit).

    4.4.5.6.   The On-Site Auditor shall apply appropriate COVID-19 precautions including 2 meters social distancing with the personnel during any interview (if necessary, using a cell phone while maintaining visual contact).

    4.4.5.7.   CB LA shall review the clients' entries into the SAI Database and report conformity.

    4.4.5.8.   Should an item/document not be able to be reviewed or complete determination made, a record of this issue shall be made in the audit report.

4.4.5.9. The audit should be facilitated in quiet environments whenever possible to avoid interference and background noise

4.4.5.10. Facilitation of the audit shall. Wherever practicable, follow normal audit plans and processes.

4.4.5.11. Both parties should make their best effort to confirm what was heard, stated, and read throughout the audit.

4.4.5.12. All Hybrid audits should be concluded with a summary, review of the day(s)'s events, issues of concern, clarification of issues, non-conformities and expectations.

4.4.5.13. Allowance shall be made for the Auditor to terminate the audit prior to schedule due to an inability to maintain satisfactory connections or conditions during the scheduled time. Any such occurrence shall be recorded in the audit report.

4.4.5.14. Both parties need to take appropriate measures to safeguard confidentially of data in any format.

4.4.5.15. The On-Site Auditor shall submit detailed on-site audit evidence and summary (document copies, audit notes, photographs, etc.) to CB LA no later than 72 hours after conclusion of on-site audit activities.

4.4.6. Reporting Hybrid Audits

4.4.6.1. Any significant findings (areas of concern for stage 1 audit) shall be relayed to the client on the day of the audit or, at the latest, the following day.

4.4.6.2. Findings (Non-conformities, corrective actions, Opportunities for Improvement, etc.) shall be drafted by the Hybrid Audit team members and provided to the Client in a timely manner for review and acknowledgement following each session.

4.4.6.3. Findings shall be documented (as per Pro200) and the Client encouraged to provide additional information, as necessary. Clients are only permitted to share documents /records during the time of the audit.

4.4.6.4. The details required in the CB's Audit Report shall be detailed in the CB's Hybrid Audit Procedure and met requirements of the appropriate section of Pro200.

4.4.6.5. The audit report shall reference the documentation reviewed.

4.4.6.6. Workers interview records shall be recorded separately and only shared with the CB and not the client.

4.4.6.7. The CB LA should confirm deletion of any confidential documents, images, recordings, with the client's representative.

4.4.6.8. The treatment of non-conformities, renewing/continuing approval of certification shall be in accordance with the relevant sections of Pro200.

4.4.6.9. CB LA shall prepare the Audit report for the Hybrid Audit and (following review by the CB's technical review function), report shall be uploaded to the SAI Database (if possible).

4.4.6.10. Audit notes from the On-Site Auditor shall be part of audit report package and should be reviewed during technical review process performed by CB for certification decisions.

4.5. Standalone Remote Audit Requirements

4.5.1. Communications Criteria for Standalone Remote Audits

4.5.1.1. The principal Standalone Remote Audit communications criteria & normative cross-references (e.g. SAAS Procedure 200 clauses) are defined in table 4.3.1d.

4.5.2. General Requirements for Standalone Remote Audits

4.5.2.1. In accordance with paragraph 4.2 of this procedure (and associated decision-trees), a Standalone Remote Audit may be the best viable option for a CB to maintain a certification when travel restrictions and/or access to certification client premises prevents a conventional audit.

4.5.2.2. Standalone Remote Audits shall generally be performed in accordance with IAF 12 and ISO 19011. Except as defined below, the scope, planning, process, and documentation of the audit shall follow Pro200.

4.5.2.3. The CB shall develop and maintain a documented procedure(s) defining its SA8000 Standalone Remote audit process requirements.

4.5.2.4. Responsibility for planning, preparation, coordination, performance, and reporting of a Desktop Remote Audit rests with a CB SA8000 Lead Auditor (CB LA) working off-site. Wherever possible, the assigned CB LA should already be familiar with the client's premises, management system and its operations.

4.5.2.5. A standalone remote audit consists of 2 elements.

- Firstly, an off-site review of documents and records previously requested from the client.

- Secondly a triangulation of evidence and a further real-time review of system documents and records. This is achieved by interacting with the clients' SA8000 Management Representative and other appropriate personnel using a suitable on-line meeting or web conferencing platform (such as Microsoft Teams/Skype/Google Meet/WeChat/WhatsApp etc. with screen sharing enabled)

4.5.3. Planning and Scheduling of Standalone Remote Audits

4.5.3.1. SAAS reserves the right to prohibit a CB from performing standalone remote audits if their performance of the same is found to be lacking.

4.5.3.2. Refer to Table 4.3.1c – "Alternative Audits – Audit Effort Outline" to determine minimum audit effort required.

4.5.3.3. At least 20 working days before the proposed date of the Standalone Remote Audit, the CB-LA shall request the Client to provide access to soft copies of documentation required (Refer to SAAS Procedure 200 requirements for this type of audit and to Appendix 4: 'Documentation to be Considered During Audits', below) .

4.5.3.4. Should client fail to produce requested documentation to the satisfaction of the Lead Auditor, he/she shall raise a 'Major' non-conformity as described in Pro200 (for "denied access").

4.5.3.5. During the audit preparation the CB LA shall also:

- Send the SAAS "SPT Worker Feedback Letter" (having previously customized and translated it, as necessary, into the languages of all workers) to the client requesting that this be circulated to all workers (permanent, contractual, men & women, as applicable);

- ensure that the appropriate entries have been made in the SAI Database.

- establish and validate reliable data and screen sharing connections.

- ensure that the Standalone Remote Audit will be performed at a time when the client's representatives (Including SPT representatives) are available to connect remotely, considering time zones differences, if any.

4.5.3.6. Upon satisfactory completion of initial client communications, CB LA shall send the Audit Plan for the Standalone Remote Audit which shall include times when the CB LA may contact the Client to request clarifications.

4.5.3.7. The CB shall define and document how confidentiality is assured throughout the Standalone Remote Audit.

4.5.3.8. The CB shall ensure that the person representing the client is the SA8000 management system representative and not a consultant.

4.5.3.9. The CB Standalone Remote Audit Procedure shall detail how to review information that cannot be shared remotely (i.e. due to confidentiality or access issues) how this is to be dealt with during the audit (i.e., follow-up, issuance of a non-conformance, etc.).

4.5.3.10. If, at any time, and in any respect, client fails to cooperate in accordance with the required process (to the satisfaction of the CB Lead Auditor), a 'Major' non-conformity shall be raised for "denied access" (as described in Procedure 200).

4.5.4. Selecting the Forum and Technology for Standalone Remote Audits

4.5.4.1. VoIP Forum and technology planning should include:
- Determining the platform for video streaming and screen sharing for hosting the audit, to be agreed upon between CB and the Client.
- Granting security and/or profile access to the Auditor.
- Testing platform compatibility between the Auditor and Client (and if appropriate SAAS) prior to audit.
- Encouraging and considering the use of webcams, cellphone cameras, cameras, etc. when physical evaluation of an event/site is desired or necessary.

4.5.4.2. Scheduling requires that the following be carefully considered:
- Time zone acknowledgement and management to coordinate reasonable and mutually agreeable convening times.

4.5.4.3. A trial meeting using the same media platforms agreed upon shall be conducted at least 10 working days prior to the Hybrid audit to ensure the scheduled audit will perform as planned and satisfy mutually agreed security/confidentiality criteria.
- Speed of access, visual resolution and audio quality shall be sufficient for CB LA to perform his/her reviews and interviews efficiently and confidently.

Note: Meeting/web conferencing platforms such as Microsoft Teams/Skype/Google Meet/WeChat/WhatsApp/etc. with 'screen sharing' enabled are typically suitable.

4.5.5. Performing Standalone Remote Audits

4.5.5.1. On the appointed day(s)/time(s), the CB LA shall perform the remote Standalone Audit by reviewing those elements required by Pro200.

4.5.5.2. Interviews shall be held with the SPT Team and management representatives via the chosen VoIP tool.

4.5.5.3. CB LA shall, as required, request client to share further documents and records (in real-time via the chosen VoIP tool, or as requested).

4.5.5.4. CB LA shall follow-up worker feedback requests appropriately. If necessary, the CB LA may solicit worker input via a telephone or social network tool, but NOT over VoIP with the client involved.

4.5.5.5. CB LA shall review the clients' entries into the SAI Database and report accordingly.

4.5.5.6. Should an item/document not be able to be reviewed or complete determination made, a record of this issue shall be made in the audit report.

4.5.5.7. The audit should be facilitated in quiet environments whenever possible to avoid interference and background noise.

4.5.5.8. Facilitation of the audit should follow normal audit plans and processes.

4.5.5.9. Both parties should make their best effort to confirm what was heard, stated, and read throughout the audit.

4.5.5.10. All remote audits should be concluded with a summary, review of the day(s)'s events, issues of concern, clarification of issues, non-conformities and expectations.

4.5.5.11. Allowance shall be made for the Auditor to terminate the audit prior to schedule due to an inability to maintain satisfactory connections or conditions during the scheduled time. This shall be recorded in the audit report.

4.5.5.12. Both parties shall take appropriate measures to safeguard secrecy /confidentially of data in any format, as agreed.

4.5.6. Reporting Standalone Remote Audits

4.5.6.1. Significant findings shall be relayed to the client on the day of the audit or at the latest the following day.

4.5.6.2. Findings shall be documented (as per Pro200) and the client encouraged to provide additional information, as necessary. Clients are only permitted to submit documents /records (as requested by the auditor) during the length of the audit.

4.5.6.3. The details required in the CB's Audit Report shall be as described in the appropriate section of Pro200 and further defined within detailed in the CB's Standalone Remote Audit Procedure. The audit report shall also include the details of the documentation reviewed. Details of feedback received from workers shall be recorded separately and only shared within the CB (not the client).

4.5.6.4. The CB LA should confirm deletion of any confidential documents, images, recordings, with the client's representative.

4.5.6.5. The handling of non-conformities, renewing/continuing approval of certification shall be in accordance with the relevant sections of Pro200.

4.5.6.6. CB LA shall prepare the Audit report for the Standalone Remote Audit and (following review by the CB's technical review function), report shall be uploaded to the SAI Database (if possible).

4.5.6.7. The treatment of non-conformities, renewing/continuing approval of accreditation shall follow Pro200.

4.6. Desktop Remote Audit Requirements

4.6.1. Communications Criteria for Desktop Remote Audits

4.6.1.1. The principal Desktop Remote Audit communications criteria & normative cross-references (e.g. SAAS Procedure 200 clauses) are defined in table 4.3.1d.

4.6.2. General Requirements for Desktop Remote Audits

    4.6.2.1.   In accordance with paragraph 4.2 of this procedure (and associated decision-trees), a Desktop Remote Audit may be the best viable option for a CB to maintain a certification when travel restrictions and/or access to certification client premises prevents a conventional audit.

    4.6.2.2.   Desktop Remote Audits shall generally be performed in accordance with IAF 12 and ISO 19011. Except as defined below, the scope, planning, process and documentation of the audit shall follow Pro200.

    4.6.2.3.   The CB shall develop and maintain a documented procedure(s) defining its SA8000 Desktop Remote Audit process requirements.

    4.6.2.4.   Responsibility for planning, preparation, coordination, performance and reporting of a Desktop Remote Audit rests with a CB SA8000 Lead Auditor (CB LA) working off-site. Wherever possible, the assigned CB LA should already be familiar with the client's premises, management system and its operations.

    4.6.2.5.   A Desktop Remote Audit consists of:

- requesting a number of system documents and records from the client via an email prior to commencement of audit.
- a review and evaluation of these documents against established audit criteria (SA8000; SA8000 Performance Indicator Annex; SA8000 guidance; legal, regulatory, and other applicable requirements);
- interviews via telephone, as practical
- the request of further documents/evidence by email, as necessary.
- preparation of audit report.

4.6.3. Planning and Scheduling of Desktop Remote Audits

    4.6.3.1.   SAAS reserves the right to prohibit a CB from performing Desktop Remote Audits if their performance of the same is found to be lacking.

    4.6.3.2.   At least 20 working days before the proposed date of the Desktop Remote Audit, the CB-LA shall request (via email) the Client to provide access to soft copies of documentation required (Refer to SAAS Procedure 200 requirements for this type of audit and to Appendix 4: 'Documentation to be Considered During Audits', below) .

    4.6.3.3.   During preparation the CB LA shall also:

- Send the SAAS "SPT Worker Feedback Letter" (having previously customized and translated it, as necessary, into the languages of all workers) to the client requesting that this be circulated to all workers (permanent, contractual, men & women, as applicable);
- ensure that the appropriate entries have been made in the SAI Database.
- ensure that the Desktop Remote Audit is performed at a time when the client's representative is at least contactable during half of the audit considering time zones differences, if any.

    4.6.3.4.   Upon satisfactory completion of initial client communications, CB LA shall send the Audit Plan for the Desktop Remote Audit which shall include times when the CB LA may contact the Client (via telephone or other) to triangulate evidence through interview, or request clarifications.

4.6.3.5. The CB shall define and document how confidentiality is assured throughout the Desktop Remote Audit.

4.6.3.6. The CB shall ensure that the person representing the client is the SA8000 management system representative and not a consultant.

4.6.3.7. The CB Remote Desktop Audit Procedure shall detail how to review information that cannot be shared remotely (i.e. due to confidentiality or access issues) and how this is to be dealt with during the audit (i.e., follow-up, issuance of a non-conformance, etc.).

4.6.3.8. If, at any time, and in any respect, client fails to cooperate in accordance with the required process (to the satisfaction of the Lead Auditor), a 'Major' non-conformity shall be raised for "denied access" (as described in Pro200).

4.6.4. Selecting the Forum and Technology for Desktop Remote Audits

4.6.4.1. Not applicable. Normal telephone and email communications only.

4.6.5. Performing Desktop Remote Audits

4.6.5.1. On the appointed audit day(s), the CB LA shall perform the Desktop Remote Audit by reviewing all documents sent by their client to generally the requirements of Pro200, PIA and their own Desktop Remote Audit procedure.

4.6.5.2. If required, CB LA shall request more documents or records from their client during the audit.

4.6.5.3. Evidence shall be triangulated through telephone interview, as deemed appropriate by CB LA.

4.6.5.4. CB LA shall review the clients' entries into the SAI Database and report accordingly.

4.6.5.5. Should an item not be able to be reviewed this shall be recorded in the audit report.

4.6.6. Reporting Desktop Remote Audits

4.6.6.1. Any significant findings shall be relayed to the client on the day of the audit or, at the latest, the following day.

4.6.6.2. Findings shall be documented (as per Proc200) and the Client encouraged to provide additional information, as necessary. Clients are only permitted to submit documents /records upon request of the auditor during the time of the audit.

4.6.6.3. The details required in the CB's Audit Report shall be defined within their Remote Audit Procedure and as described in the appropriate section of Pro200.

4.6.6.4. The audit report shall also refer to documentation reviewed. Communications with Workers shall be recorded separately and only shared with the CB.

4.6.6.5. The CB LA should confirm deletion of any confidential documents, images, recordings, with the client's representative.

4.6.6.6. The treatment of non-conformities, renewing/continuing approval of certification shall be in accordance with the relevant sections of Pro200.

4.6.6.7. CB LA shall prepare the Audit report for the Desktop Remote Audit and (following review by the CB's technical review function), report shall be uploaded to the SAI Database (if possible).

4.7. On-Site Safety Considerations

4.7.1. On-Site Activities: General 'Post-COVID-19' Directive

    4.7.1.1.   Intentionally blank – See note below.

    Note: The former content of this sub-paragraph has been appropriately relocated to the end of the section addressing "Operational Risk Assessment(s)" – see paragraph 4.2.2.7 above. Further, following feedback received from CB representatives (June 2020).

    4.7.1.2.   The safety of staff is critically important at this time. SAAS reminds CBs that the intent of the scope of SA8000 should apply to its staff as well as its clients:

- "………protect all personnel within an organisation's control and influence who provide products or services for that organisation, including personnel employed by the organisation itself and by its suppliers, sub-contractors, sub-suppliers and home workers………"

    4.7.1.3.   CBs need to carefully consider local and national government laws and regulations and plan for the risks before asking Auditors to travel and perform audits.

    4.7.1.4.   Similarly, auditors and other CB personnel should not be forced to travel or work unwillingly under any circumstance.

    4.7.1.5.   Social distancing and other infection control measures within the community and at clients' premises should be maintained. Appendix 2, below, outlines the minimum COVID-19 precautions that CB's should adopt when performing on-site audits.

4.8. Authorized Deviations from SAAS Procedure 200, 200A and Procedures 201A and 201B Requirements

4.8.1. Certain recognized 'deviations,' common to multiple CBs, are outlined in Appendix 5. Other minor deviations may be permissible.

4.8.2. Significant deviations from Procedure 200 (except as authorized within this document or agreed in writing by SAAS Technical Director or Executive Director) will not be retroactively authorized/accepted by SAAS.

    4.8.2.1.   When requesting a deviation, the CB SHALL submit their Risk Assessment for the audit(s) in question that describes:

- why an onsite audit cannot be performed;
- what the previous audits have been in COVID-19;
- what type of audit they intend to perform this audit (e.g. combine Surveillances 3&4);
- the intended audit effort this audit;
- evidence that there are travel restrictions or quarantine measures in place.

4.8.3. While SAAS encourages CB auditors to be empathetic towards client organisations recovering from the impacts of COVID-19, CB auditors are no longer permitted to deviate in any manner from SA8000 requirements.

4.8.4. If in doubt about options above, contact the SAAS Technical Director in advance for clarification.

5. SAAS (COVID-19) Oversight Processes 2021

5.1. General

5.1.1. In June 2020, due to the ongoing uncertainty, risks and disruptions caused by the current coronavirus pandemic, SAAS communicated to CBs its intention to replace all remaining on-site accreditation oversight activities for the remainder of 2020 with alternative remote accreditation oversight activities. Consequently, the preliminary SAAS activity outline sent to each CB at the beginning of the year was rescinded. In its place, a new SAAS activity outline (based upon an alternative, remote office audit and a witness audit alternative - WAA) was sent to each CB on June 16, 2020 to specify alternative accreditation oversight obligations through the period July to November 2020. This oversight program is being continued into 2021 and will run from approximately 1 May 2021 to 31 December 2021.

5.1.2. With the cooperation of CB staff, and in a manner like any other audit, a SAAS Lead Auditor is assigned to plan, conduct and complete each remote Office Audit and WAA in accordance with respective audit plans for each audit type.

5.1.3. Along with traditional email document-sharing, SAAS alternative audit processes require the use of one or more suitable VoIP/screen-sharing platforms (such as Microsoft Teams/Zoom/Google Meet/Web Ex etc.) to communicate and exchange information during audits.

5.1.4. Following completion, the assigned SAAS Lead Auditor provides the CB with two reports (an Office Audit Report and a WAA Report) which record the details of the audit processes, audit findings, and audit conclusions.

5.2. SAAS Remote CB Office Audit 2020 Outline

5.2.1. Unless otherwise previously advised, each CB is subject to a single remote CB Office Audit conducted over several on-line (VoIP) and off-line sessions. Its objective, focus, and content are identical to those of a conventional on-site SAAS Office Audit (i.e., a review of the CB's adherence to, and performance against, ISO17021:1-2015, SAAS P200 V4.2 March 2020, including the review of a series of sample client files). Because all office audits are taking place remotely, SAAS is combining HO audits with selected regional & critical office location audits (as applicable, CB by CB and as advised by the assigned SAAS Lead Auditor).

5.2.2. Ahead of the finalized audit dates, the CB is expected to share documents and information requested by the SAAS Lead Auditor. Prior to the audit, the SAAS Lead Auditor will share with the CB a detailed audit plan showing projected on-line and off-line sessions.

5.3. SAAS Witness Audit Alternative (WAA) 2020 Outline

5.3.1. Unless otherwise previously advised, in addition to a Remote Office Audit (and replacing SAAS' conventional witness audits in 2020), each CB is subject to a single Witness Audit Alternative (WAA). A WAA also takes place over several on-line (VoIP) and off-line sessions, with the objective of providing in-depth insight into the CB's SA8000 audit management and certification decision-making processes.

5.3.2. A WAA involves a deep dive into 1-5 (predetermined according to the complexity of the CB and the number of witness audits already conducted in 2020) client files, as well as interviews with CB audit team members, sales/scheduling staff, technical reviewer(s), manager(s), and office staff (as appropriate). Wherever feasible the SAAS LA interacts in real-time with the assigned CB LA & CB audit team immediately before (equivalent to a SAAS & CB witness audit opening meeting), and again immediately after (equivalent to a SAAS & CB witness audit closing meeting), each sample-selected SA80000 audit.

5.3.3. The CB is expected to share a list of all scheduled audits with the assigned SAAS LA, who will select an appropriate sample of audit/certification process activities for review during the WAA. Prior to the WAA, the LA shares with the CB a detailed audit plan showing projected on-line and off-line sessions.

5.3.4. As requested by the SAAS Lead Auditor (and well in advance of WAA activity dates), the CB is expected to share certification documentation and related information (previous audit reports, contract review documents, audit preparation and planning documents etc.) pertinent to the selected CB certification client(s).

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Appendix 1: SA8000 COVID-19 Impacts – Auditor Quick Reference Guide

Note: This table will be regularly updated as changed conditions/circumstances are identified.

SA8000:2014	Element	COVID-19 Issues for Review
Section 1	Child Labour	What changes have the company made to their recruitment policy and remediation policy with respect to COVID 19? How would they send a child back home safely under COVID 19? Do the company believe that they might be subject to more child/young worker trying to get jobs? Special attention should be paid to potential overutilization of young worker employed, in cases where there may be shortage of workers.
Section 2	Forced or Compulsory Labour	Are workers forced to work shifts, longer hours, 7 day working under COVID 19? Are workers free to leave the workplace for home if they are sick and how does the company help them to do so? This also applies to subcontract labour on-site. Are the previous procedures still in place and followed?
Section 3	Health and Safety	Company is aware of applicable COVID 19 rules from central and local Government and from Customers. Has the Company adopted these rules and published them for all workers to see? Has the risk assessment been updated to include these requirements? Check company's efforts to prevent, minimize virus spread in workplace/company including canteen, dormitory, residential colonies, crèche, occupational health center, guest house. Hygiene/sanitization/social distancing/PPE? From gate entry to exit from factory after completing work. Testing /checking temperatures at entry & records (kept if permitted by law?) Availability of hand wash facility? Hand sanitizers? Free of cost? Use of toilets- men/women- is social distancing ensured? Hand wash -soap and water available in adequate quantity? Training on COVID 19 issues? Efforts to protect the vulnerable like pregnant women/disabled workers and those with a poor health history? has company had any COVID 19 cases? If yes, how did they ensure isolation and quarantine? Treatment & recovery? Post recovery? How does the company manage to protect others who may have been in contact with the COVID 19 affected person? Do they test for COVID 19 upon an employees' arrival or request proof that the employee is COVID 19 free? In some countries, government mandate companies to provide arrangements for stay of workers. If this is applicable? Check the stay arrangements? Are employees that are working from home covered in Health & Safety training and communications?

Section 4	Freedom of Association & Right to Collective Bargaining	Considering COVID 19 situation- and if union or workers committee exists, any revision in CBA based on COVID 19 situation?
Section 5	Discrimination	Any instance of discrimination based on community? Hot spot regions of returning workers? Equal opportunity given to all? To work & earn?
Section 6	Disciplinary Practices	Any instance of disciplinary action due to violations of COVID safeguards? Have COVID 19 rules been made part of disciplinary action in a proper manner? Any action if workers refuse to come to work due to fear of infection?
Section 7	Working Hours	What are the shift work hours now? Any norm/rules by government about shift duration? No. of workers allowed in each shift? Entry and attendance marking of workers. How? Contact-less biometric system entry? OT? In case shift duration extension, extended hours are OT hours? Or normal working hours? Check notice from government/authorities? How is attendance & in and out time monitored and recorded? Weekly days off? For employees that are working from home how does the company monitor their working hours?
Section 8	Remuneration	How are wages paid? Cash or through bank? Cash may have contamination – UV sterilization etc.? Wage slip/salary slip given? Digital or by hand? Contamination potential. Payment of OT hours? Is living wage paid? In case of any incentives announced- has company paid? How, did company pay full wages (at least legal min wage) to all workers during lockdown times? Any pay deductions made due to business losses? Are reductions in pay accurately documented in worker pay slips? Did you inform/communicate about deductions? Was it discussed with union? WR? Were they convinced? Any wage deduction as part of disciplinary action? OR leave without pay? No work no pay? Any voluntary pay cut?
Section 9.1	Policies, Procedures, Records	Check client has developed appropriate policies and procedures to manage the COVID 19 situation and has effectively communicated and made these accessible to personnel in all appropriate languages. Communications have also been shared with customers, suppliers, sub-contractors, and sub-suppliers, as appropriate? Records of the same have been maintained. Regular Management Reviews are held to review the company's performance with respect to COVID 19.

Section 9.2	Social Performance Team	Check to see how the SPT is ensuring that the companies COVID 19 policies and procedures are being followed particularly with respect to hygiene and social distancing. Enquire how the SPT continues to function in COVID 19 times. As companies will be working crews/shifts how does the company ensure that there is SPT coverage during all working hours?
Section 9.3	Identification and Assessment of Risks	Check how the company adds COVID 19 to their Risk Assessment (see guidance provided in SAI Document "Responding to Covid-19: Guidance for SA8000-Certified Organisations"). Do they cover as a minimum; Increase worker physical and mental resilience, Measures to reduce transmission, Minimization of contact rate, Reducing the risk of infection, Employer and Employees duties, PPE provision and usage, COVID 19 Testing, most at-risk workers and vulnerable groups, Reporting of illnesses, Post COVID 19 recovery.
Section 9.4	Monitoring	Introduction of additional COVID 19 compliance audits by the SPT and GEMBA walks.
Section 9.5	Internal Involvement and Communication	Check for changes in ways of communication and interaction how is social distancing maintained? Use of signage and PPT training sessions. Training should be in small groups. What are the plans for their Post COVID 19 recovery? Has the company considered alternative methods of training (virtual training) rather than face to face training?
Section 9.6	Complaint Management and Resolution	How can workers complain in COVID 19 times? Alternatives to the usual complaint boxes which now have possible COVID 19 contamination issues.
Section 9.7	External Verification and Stakeholder Engagement	This may understandably be of a lower priority than getting the company and workers back to work but, how have the company ensured that they still engage with Stakeholders during COVID 19 times.
Section 9.8	Corrective and Preventive Actions	Should not be affected by COVID 19 other than the availability of SPT members to perform the necessary CA and PA activities.
Section 9.9	Training and Capacity Building	The existing training plan should have been extended to deliver timely COVID 19 training for ALL and records maintained accordingly. Is the company considering alternative methods of training (virtual training) rather than face to face training?
Section 9.10	Management of Suppliers and Contractors	Has the interaction with suppliers been factored into the company's COVID 19 Action Plan? Are exclusive suppliers and homeworkers covered by the company's COVID 19 Action Plan? Has the company considered alternative methods for on-site monitoring of exclusive suppliers/homeworkers, if any? To what extent have supplier/subcontractor relationships been affected by COVID 19?

Appendix 2: Specific Safety Recommendations for Certification Bodies in Response to COVID-19

1. **CB Obligations to Staff (including auditors)**

   1.1. Minimum Expectations for a CB: The following outlines the minimum expectations for a CB. Additional controls should be considered and added as determined by the CB's risk assessment, or as stated by law.

   1.2. Refer to publications from the world Health Organisation (WHO) "Coronavirus disease (COVID-19) advice for the public", Centers for Disease Control and Prevention (CDC) "Coronavirus (COVID-19)", national government, and other reputable sources for further information.

   1.3. Further to the outcome of CB's risk assessment (4.2 above), CB management should define, document, communicate, implement, and monitor company policies and requirements with respect to COVID-19 risks and controls in the workplace (at both CB and client premises).

   1.4. It is recommended that CB controls include, but not necessarily be limited to:
   - Instructions and advice for staff who feel unwell or may have been exposed to COVID-19.
   - Staff must be symptom-free and no longer contagious before returning to work (for guidance, see Figure 1).
   - Requirements for personal hygiene (for guidance, see Figure 2).
   - Requirements for social distancing. 2-metre minimum recommended (for guidance, see Figure 3).
   - Requirements and Instructions for use of personal protective equipment (PPE).
   - Requirements for regular and thorough cleaning of working surfaces at the end of each shift etc.
   - The right for a member of staff to remove themselves, without penalty or disciplinary action, from any situation in which the above precautionary controls are not effectively implemented.
   - Other requirements, precautions and instructions promoted by government and other relevant authorities.

   1.5. Insofar as feasible, and as soon as feasible, facilitate COVID-19 testing (at company cost) to all staff required to return to duty: Testing should be conducted prior to return and immediately thereafter (for any potentially exposed staff) should potential COVID-19 exposure be suspected.

   1.6. Require staff to communicate to CB management prior to each workday and maintain records:
   - Current body temperature (as measured that morning).
   - Self-declaration: 'No COVID-19 symptoms observed.'
   - Self-declaration: 'No known exposure to person who may be infected by COVID-19.'

   1.7. Provide staff suitable equipment as follows and as required by law:
   - Accurate body-temperature thermometer.
   - Full Facemasks or disposable face mask – N95 or better, if possible.
   - Latex gloves.
   - Goggles.
   - Soap for regular hand washing.

- Alcohol Gel/Liquid for hand sanitization.
- "Bunny suit" as needed.

2. Considerations When Planning On-Site Audits and Associated Travel/Accommodation

2.1. Minimum expectations for a CB. Additional controls should be considered and added as determined by the CB's risk assessment, or as stated by law.

2.2. Audit Planning Considerations: During the audit planning process, the CB personnel should determine, define, document, and communicate (to auditors and client personnel) audit-specific risks and required risk-mitigation controls.

2.3. The following requirements/ restrictions/ expectations should be considered:
- CB's COVID-19 policies and processes;
- General COVID-19 controls (in accordance with section 1 above);
- National and local COVID-19 legal and other requirements;
- Transportation and accommodation provider policies and processes;
- Client policies and processes.

2.4. Audit Plan: In addition to meeting audit plan requirements of SAAS Procedure 200, each Audit Plan should address:
- The importance of social distancing and that the audit team will be practicing social distancing during the audit.
- Personal protective equipment (PPE) requirements (face masks as a minimum for all face to face interactions during the audit).
- Personal hygiene.
- Meetings/interviews to be held in rooms without recirculated air-conditioning and be limited to no more than 3 persons at a time for 15 minutes maximum.

2.5. Additional Planning Controls
- Long trips on public transport should be avoided.
- Social distancing should be observed in all environments.
- The use of recycled air conditioning in any shared space should be avoided.
- Auditors should not share hotel rooms with each other.
- Wherever possible, auditors should use their own transportation, or a van service provided by the CB or client (if possible, the windows of the transportation vehicle should remain open).

3. Considerations When at The Clients' Premises

3.1. The following outlines the minimum expectations for a CB. Additional controls should be considered and added as determined by the CB's risk assessment, or as stated by law.

3.2. Opening Meeting
- Attendance should be limited to the bare minimum, ensuring that both management and worker interests are represented.

- During the Opening Meeting, the CB Audit team and client company representatives should discuss and agree the importance of adherence to COVID-19 controls throughout the audit (as outlined above and communicated via the audit plan).

3.3. Audit Conduct
   3.3.1. Auditors should ensure that they, and client representatives, adhere to ALL agreed controls. Particular attention should be paid to:
   - Social distancing.
   - Personal protective equipment (PPE). Face masks as a minimum for all face to face interactions during the audit.
   - Personal hygiene.
   - Meetings/interviews to be held in rooms without recirculated air-conditioning and be limited to no more than 3 persons at a time for 15 minutes maximum.
   - Confirming that all audit team members have access to, and use, appropriate PPE.
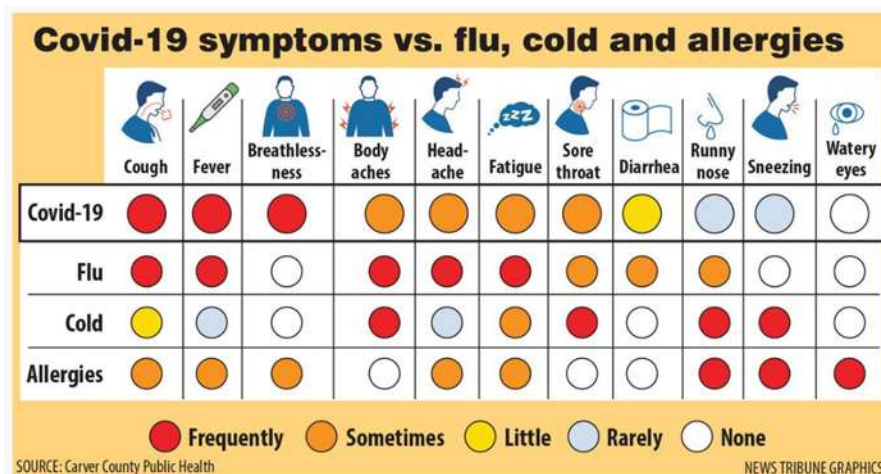
3.4. Closing Meeting
   3.4.1. Attendance should be limited to the bare minimum, ensuring that both management and worker interests are represented.

4. Additional On-Site Controls
4.1. Social distancing, good hygiene, PPE, and other required controls to be maintained at all times, including factory tour, mealtimes, etc.
4.2. Auditors should avoid entering busy areas such as canteens, dormitories, and crèches if proper social distancing is impractical.
4.3. Auditors should use disposable latex gloves when handling equipment, documents etc.
4.4. CB/Auditors may promulgate (or accept) a jointly agreed declaration addressing further specific controls such as:
   - Willingness to undergo body temperature check.
   - Absence of COVID-19 symptoms.
   - No known contact with individuals having COVID-19 symptoms.
   - No recent visits to, (or contact with another person known to have visited), a COVID-19 containment zone or other specified COVID-19 'hotspot'.
   - Other mutually agreed conditions/declarations, (such as those identified above).

Figure 1 – Typical COVID 19 Symptoms

Covid-19 symptoms vs. flu, cold and allergies

SOURCE: Carver County Public Health   NEWS TRIBUNE GRAPHICS

Source: https://www.duluthnewstribune.com/lifestyle/health/5022312-What-symptoms-tell-you-and-why-they-arent-a-sure-thing

Figure 2 – Personal Hygiene

Source: https://www.gov.sg/article/what-can-you-do-to-protect-yourself-from-covid-19

Figure 3 – Social Distancing

SOCIAL DISTANCING GUIDELINES AT WORK

1 Avoid in-person meetings. Use online conferencing, email or the phone when possible, even when people are in the same building.

2 Unavoidable in-person meetings should be short, in a large meeting room where people can sit at least three feet from each other; avoid shaking hands.

3 Eliminate unnecessary travel and cancel or postpone nonessential meetings, gatherings, workshops and training sessions.

4 Do not congregate in work rooms, pantries, copier rooms or other areas where people socialize. Keep six feet apart when possible.

5 Bring lunch and eat at your desk or away from others (avoid lunchrooms and crowded restaurants).

6 Avoid public transportation (walk, cycle, drive a car) or go early or late to avoid rush-hour crowding on public transportation.

7 Limit recreational or other leisure classes, meetings, activities, etc., where close contact with others is likely.

Source: https://www.shrm.org/resourcesandtools/tools-and-samples/pages/social-distancing-guidelines.aspx

Appendix 3: Audit Input "SPT Worker Feedback Letter" (Template)

Suggested Template to solicit Worker Engagement and Feedback During Remote CB Standalone and Desk-Top Audits

(Using CB Letterhead/Email Header)

Dear [client contact name] [Date]

As you know, [name of CB] is performing a remote audit of [Company Name] on [date(s)]. An important part of our audit process is to confidentially gather information from workers. In the past our auditors have conducted interviews with workers face-to-face, but in these COVID times, this is not possible.

In order to meet SA8000 'COVID-19 Alternative certification requirements', please ensure that the [Company Name] SA8000 Worker Representative(s) circulates page 2 of this document **to the entire [Company Name] facility workforce** (including management, non-permanent, and contracted and subcontractor(s), men, women, all personnel) at least one week before the audit. Please maintain records of this communications for review by the Audit Team Leader.

Should you have any questions please do not hesitate to contact me.

Many thanks for your assistance with this matter.
Yours

A. B. Name
CB Name
SA8000 Program Manager

Note: Copied to Company Notice Board(s)

CB Letterhead/Logo

Dear Worker/Employee

Due to COVID 19 restrictions, [name of CB] SA8000 auditors are currently unable to conduct face-to-face interviews at [Company Name] premises. As an alternative, your SPT Worker Representative(s) may contact you to see if you have any concerns or issues that you want relayed to the [CB Name] Audit Team. Similarly, as always, please contact your SPT Worker Representative(s) if you wish to proactively advise them of any SA8000 workplace issue.

Communication with your SPT Worker representative or [name of CB] is confidential and will not be relayed to your company or any other party/person. Any discussion that you have with your SPT Workers Representative(s) or [name of CB] will not be attributable to you.

We hope that you will grasp this opportunity to give feedback to the [CB Name] Audit Team. Lastly, if you want to contact [name of CB] directly please email/SMS Text the CB Lead Auditor as follows.

[Audit Team Leader. Name]
[Audit Team Leader. email]
[Audit Team Leader. Cell Phone Number]

Yours

A. B. Name
CB Name
Audit manager

Note: Copied To Company Notice Board(s)

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Appendix 4: Documentation to be considered during Audits (Conventional & Alternative Audits)

1. **Introduction**

   1.1. Below is a list of documentation (including records) that, in the opinion of SAI/SAAS, should be considered and evaluated appropriately during all types of SA8000 Audits.

   1.2. The list is generic and non-exhaustive, but may be used as a helpful 'aide memoire' by individuals developing SA8000 management systems and conducting audits. CB Auditors are expected to add to and customize this list when performing audits (e.g. the nomenclature of documents may vary between clients, and/or country, local, or industry specific documents are also required in most instances).

Note: Items written in grey font in the table below are those PIA indicators that do not specifically invoke review of documentary evidence to establish conformity with SA8000 (i.e. indicators that may, or may not be referenced in client documentation, but which may be fulfilled and verified, on-site, through review of operational practices only).

Social Accountability Requirements		
SA8000:2014 Standard Requirements	**SA8000:2014 Performance Indicator Annex**	**List Of Documents To Be Considered During SA8000 Audit: Records That The Organisation Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LAs**
0. GENERAL DOCUMENTATION REQUIRED		
General Docs Required From Company - Assuming Contract Review has already been performed.	Not directly addressed by the PIA.	- Organisation introduction, organisation chart, product, process, infrastructure etc. - Employee Handbook, as applicable - Plan showing location of where the SA8000 Standard and Company Social Policy is posted - Evidence that Social Fingerprint assessments have been performed and the scores uploaded to the SAI Portal - Business license/Incorporation Certificate - Valid license and all necessary official approvals to run the company's operations. - Emergency equipment location plan i.e. fire extinguishers, hydrants, fire doors, fire exits. - Documentary evidence on production capacity planning - Boundary/Factory Floor/Layout Plan- showing chemical storage etc. (site map and pictures of company from different areas/floors/buildings). - Plan showing the evacuation assembly points

		• Plan/record of how the company has adopted/will adopt the requirements of the Performance Indicator Annex • Client submitted application form, questionnaire and other docs including sales correspondence to validate all the information & scope including outsourcing process, if any. • CB Contract and Application review documents.

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s
1. CHILD LABOUR		
1.1 The organisation shall not engage in or support the use of child labour.	1. No children present in production work areas (1.1). 2. No fake or forged identification documents Accepted during the recruitment process (1.1). 3. Verifiable proof of age documentation is Maintained for every worker (1.1).	• Child labor prohibition policy. • Age verification procedure • Recruitment Procedure • Personal documents of worker (ID card, birth certificate, education certificate), Any other evidence of age verification and non-falsification of records (e.g. Record of Dental checkup from authorized medical) • All PIA requirements as described in the adjacent column are addressed by the client.
1.2 The organisation shall establish, document, maintain and effectively communicate to personnel and other interested parties, written policies and procedures for remediation of child laborer's, and shall provide adequate financial and other support to enable such children to attend and remain in school until no longer a child as defined above.	Not directly addressed by the PIA.	• Remediation procedure • Action plan if child labour found
1.3 The organisation may employ young workers, but where such young workers are subject to compulsory education laws, they shall work only outside of school hours. Under no circumstances shall any young worker's school, work and transportation time exceed a combined total of 10 hours per day, and in no case shall young workers work than 8 hours a day. Young workers may not work during night hours.	Not directly addressed by the PIA.	• Young worker protection policy • Young worker registration approval from labour bureau • Young workers overview records • Young workers' work cycle overview • Overview of apprenticeships granted in the company • Documentation of all training given to young workers
1.4 The organisation shall not expose children or young workers to any situations – in or outside of the workplace – that are hazardous or unsafe to their physical and mental health and development.	Not directly addressed by the PIA.	• Annual health examination report • Risk assessment and related action plan with specific measures to protect young workers and young female workers

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s
2. FORCED OR COMPULSORY LABOUR		
2.1 The organisation shall not engage in or support the use of forced or compulsory labour, including prison labour, as defined in Convention 29, shall not retain original identification papers and shall not require personnel to pay 'deposits' to the organisation upon commencing employment.	2. No unreasonable restraints on personnel's freedom of movement, including movement in the canteen, during breaks, and related to toilet use, access to water, access to necessary medical attention or access to religious facilities (2.1). 3. Security measures implemented by the organisation do not intimidate or unduly restrict the movement of workers (2.1). 4. Terms of employment outlined at the time of recruitment do not differ in any way from the terms offered during the course employment (2.1). 5. Personnel are free from pressure, coercion, or threats that would in any way force them to accept a job or maintain employment (2.1).	• Policy/Procedure on Forced or Compulsory Labour that addresses the issues of the PIA. • Security guards' regulations, job description, certificate, contract, and time keeping records • Exit Passes/Gate Passes with security showing freedom of movement. • Contract of the security guard company and any other subcontract organisation such as canteen and cleaning services and dormitory/crèche management. • Employment contracts/appointment letters including those related to security personnel, cleaning and other services. • Records of employees/workers visiting canteen, health care center, crèche, religious facilities, if any showing all have access. • All PIA requirements as described in the adjacent column are addressed by the client.
2.2 Neither the organisation nor any entity supplying labour to the organisation shall withhold any part of any personnel's salary, benefits, property or documents in order to force such personnel to continue working for the organisation.	Not directly referenced in the PIA.	• Worker contracts or agreements, including with recruitment agencies • Employment contracts
2.3 The organisation shall ensure that no employment fees or costs are borne in whole or in part by workers.	Not directly referenced in the PIA.	• Audit records on labor/recruitment agencies • Contracts with labor/recruitment agencies
2.4 Personnel shall have the right to leave the workplace premises after completing the standard workday and be free to terminate their employment provided that they give reasonable notice to their organisation.	1. All overtime hours are voluntary, coercion, threats, or penalties are not used to pressure personnel into overtime work (2.4).	• Policy/Procedure on voluntary overtime working that addresses the issues of the PIA. • Posters where workers' rights and obligations are displayed that includes the statement that ID cards or Passports SHALL not be retained by the company or labour/recruitment agency • All PIA requirements as described in the adjacent column are addressed by the client.
2.5 Neither the organisation nor any entity supplying labour to the organisation shall engage in or support human trafficking.	Not directly referenced in the PIA.	• Policy on Forced or Compulsory Labour

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s
3. HEALTH AND SAFETY		
3.1 The organisation shall provide a safe and healthy workplace environment and shall take effective steps to prevent potential health and safety incidents and occupational injury or illness arising out of, associated with or occurring in the course of work. It shall minimize or eliminate, so far as is reasonably practicable, the causes of all hazards in the workplace environment, based upon the prevailing safety and health knowledge of the industry sector and of any specific hazards.	**DOCUMENTS/LICENSES/PERMITS/CERTIFICATES** 1. Licenses, permits and/or certificates are maintained as required by law and renewed in order to retain their validity. These documents are issued by a valid and recognized legal entity and issued to the organisation possessing them, with the appropriate location, scope and validity date (3.1). These documents include, for example: a. Business and operating permits; fire safety and electrical certificates; permits for equipment such as boilers, generators, elevators, fuel, and chemical storage tanks; and building, emissions, and waste-disposal permits. 2. A record of the maximum number of people allowed to be in the building at one time (maximum occupancy) is available. In multi---story buildings, the maximum occupancy number for each floor is publicly posted on the appropriate floor (3.1). 3. A list of the individuals on-site can be produced in real time so that an accurate head count can be performed (3.1).	• Health and Safety Policy • Valid inspection and insurance for machinery and vehicles • Documented records of accidents and incidents • Risk assessment for safe, healthy and hygienic working conditions • Action plan for safe, healthy and hygienic working conditions • Occupational health and safety regulations applicable for the industry • Official building certificate about safety and appropriateness for the industry • Valid certificates and licenses • Records of official inspections conducted to ensure building and equipment safety, including date of validity and corrective actions if any • Building structure safety / Real estate certificate • Approval document of temporary building/construction • Fire safety inspection report /Fire NOC from government department • Electricity inspection report • Industry specific Risk assessment and Hazard identification- e.g. Petrochemical, Pesticide/Insecticide/Pharma /Power Plant/Hospitals • All PIA requirements as described in the adjacent column are addressed by the client.

	ERGONOMICS 2. Workstations are designed or modified in line with the results of the health and safety risk assessment to minimize bodily strain (3.1). **EMERGENCY PREPAREDNESS** 5. Exit doors are unlocked during working hours or are push-bar doors that can be unlocked from the inside, and are clear and unblocked. Exit doors open in the direction of travel, can be readily opened from inside the workplace by any worker without the use of keys or tools, and open wide enough to safely evacuate personnel in the case of an emergency (3.1). 6. There are enough exits to safely serve the number of workers and the height and type of building or structure. Window fire exits are not acceptable as viable fire exits (3.1). a. There are at least two emergency exits per floor. b. The maximum travel distance to an emergency exit is 200 feet or 60 meters for industrial buildings with no sprinkler systems. 7. All doors to exit hallways and staircases open in the direction of travel and can be readily opened from inside by any worker without the use of keys or tools. Evacuation routes are clear and unblocked (3.1). 8. Doors that lead to the exterior of the building that are not designated as exits are labelled as such (e.g. "Not---An---Exit" sign in the local language(s) and the language of the workers)	
3.1 Continued	(3.1).	• As above
	EMERGENCY PREPAREDNESS 9. There is one or more designated and marked assembly points outside the workplace. The assembly points are in an area that is a safe distance away from the reach of a possible fire. The area is large enough to accommodate the full number of employees and other personnel who may reasonably be on-site at any given time (3.1). 10. Emergency exit signs are visible from 30m, use letters at least 18cm high and are illuminated in bright colours or have a photo---luminescent front panel (3.1). 11. Exit routes have emergency lighting and are marked with signs, with at least one easily seen from any area within the workplace. Battery---operated exit signs are checked regularly, and batteries replaced after the manufacturers designated	
3.1 Continued	time period (3.1).	• As above

	12. Personnel are guided to exits or away from hazardous areas with floor markings, tape, or other indications (3.1).	
	13. Emergency battery lighting is provided for all stairways and where needed on exit routes (3.1).	

	FIRE EXTINGUISHERS 1. Fully operational firefighting equipment is maintained, regularly tested, unobstructed, clearly marked and accessible (3.1). 3. If fire hydrants are present, then the hoses, standpipes and all water sources, including fire pumps, are inspected and flushed at least twice per year (e.g. during fire drills) (3.1). **ALARM SYSTEM** 1. An alarm system exists and is audible throughout the entire organisation on every floor, including production areas, warehouses, dormitories, canteens or crèches, and any other employer-provided worker service facilities. The alarm has a distinct sound that is different from any other noise notification systems (3.1). 2. An alternative system is available when the alarm system is undergoing maintenance (3.1). **GENERAL WORKING ENVIRONMENT** 1. Workplaces, including walkways and aisles, yard and storage areas, lifts, and stairways, are kept clean and maintained in good condition (3.1). 2. All primary aisles are a minimum of 1.12 meters wide or wider as stated by local law, are marked, & kept unobstructed at all times (3.1). 3. Stairway railings of no less than 1 metre high are installed on exposed stairs where a person could potentially fall off the side of the stairway (3.1). **WATER, AIR, NOISE AND TEMPERATURE** 1. Work areas have adequate lighting, ventilation and temperature controls (3.1). 2. All water, inside or outside of the facility, drains properly so it does not to create a slipping hazard or a breeding ground for insects (3.1).	
3.1 Continued		• All PIA requirements as described in the adjacent column are addressed by the client.

4. Employees are not subjected to noise levels greater than 85 decibels for more than 8 hours per day without the use of hearing protection (3.1).

6. Calibrated sound meters are used to take periodic measurements of noise levels in the organisation and record the sound levels in the various work areas (3.1).

7. Legal requirements are met regarding worker hearing tests in order to determine whether workers have experienced any hearing loss (3.1).

ELECTRICAL SAFETY
1. Electrical systems and wiring are maintained in safe condition (3.1).

2. Electrical equipment is grounded when it is required by the distribution system that is used to prevent injury and/or fire in risky areas (3.1).

3. The doors of all electric panels, whether on distribution boards, switches, plugs and sockets or machinery, are kept closed at all times (3.1).

CHEMICAL AND HAZARDOUS WASTE HANDLING AND STORAGE
1. A documented master inventory/list of chemicals and their storage location(s) on the premises is available (3.1).

2. The material safety data sheet (MSDS) for any substance and chemical used in the organisation is easily accessible from where the chemical is stored or used. Chemical safety information and product labels are available in the local languages of the workers. Labels include information on hazardous ingredients, characteristics and properties and special precautions to follow when using, handling and storing the chemical (3.1).

4. Chemical handling and storage areas have immediate access to an eyewash station and shower (3.1).

8. Hazardous waste storage containers are separated from ordinary waste, are clearly and properly marked and are protected from the weather and any fire risks (3.1).

	9. Hazardous waste storage containers are checked regularly for spills and secondary containment is provided to prevent direct exposure to the environment (3.1).	

	MEDICAL CARE 1. Pre-employment medical exams, when required by law, are provided free of charge to all personnel. These exams may not include pregnancy or virginity tests (3.1). 2. Annual occupational health checks for workers handling hazardous materials are conducted. These occupational health checks are conducted by a qualified medical professional at the organisation's expense (3.1). 3. Medical care is available on-site or the organisation is in close proximity to facilities where basic health and injury needs can be addressed. If there is no medical care provided on---site, the organisation has a system in place to address severe injuries when needed (3.1). 4. One properly stocked and readily accessible first aid kit is available for at least every 100 workers. The kit contains, at a minimum, basic supplies such as bandages, scissors, gloves and gauze (3.1). 5. The locations of first aid boxes are posted with a first aid sign, which also includes the names and photographs of trained first aid personnel for each shift and an emergency contact number (3.1). 6. In cases where first aid supplies are locked for security reasons first aid trained staff can access the supplies within 2 minutes (3.1). **CHILDCARE FACILITIES** 1. Childcare facilities are located on the ground floor, away from the production and storage areas and children do not have access to production areas (3.1).	
3.1 Continued		• All PIA requirements as described in the adjacent column are addressed by the client.
3.2 The organisation shall assess all the workplace risks to new, expectant and nursing mothers including those arising out of their work activity, to ensure that all reasonable steps are taken to remove or reduce any risks to their health and safety.	Not directly referenced in the PIA.	• Risk assessment for new, expectant, and nursing mothers

3.3 Where hazards remain after effective minimization or elimination of the causes of all hazards in the workplace environment, the organisation shall provide personnel with appropriate personal protective equipment as needed at its own expense. In the event of a work-related injury the organisation shall provide first aid and assist the worker in obtaining follow-up medical treatment.	**PERSONAL PROTECTIVE EQUIPMENT (PPE)** 1. Personnel are provided with and use PPE as mandated by the organisation's occupational health and safety risk assessment (3.3). **WATER, AIR, NOISE AND TEMPERATURE** 5. In high noise level areas, hearing protection is provided. In addition, clear signage requiring the use of such protection is posted and worker usage is enforced in an appropriate manner (3.3).	• PPE safety certificates • Purchase invoices of the PPEs bought by the auditee • First aid kits and maintenance record and map of locations of first aid boxes • List of trained first aiders • Contracts with Doctors, Dentists, Opticians • List of trained fire fighters • All PIA requirements as described in the adjacent column are addressed by the client.
3.4 The organisation shall appoint a senior management representative to be responsible for ensuring a safe and healthy workplace environment for all personnel and for implementing this Standard's Health and Safety requirements.	Not directly referenced in the PIA.	• Formal memo/letter designating the senior management representative from top management of the company. • Job description and KPI's of the designated manager.
3.5 A Health and Safety Committee, comprised of a well-balanced group of management representatives and workers, shall be established and maintained. Unless otherwise specified by law, at least one worker member(s) on the Committee shall be by recognized trade union(s) representative(s), if they choose to serve. In cases where the union(s) does not appoint a representative or the organisation is not unionized, workers shall appoint a representative(s) as they deem appropriate. Its decisions shall be effectively communicated to all personnel. The Committee shall be trained and retrained periodically in order to be competently committed to continually improving the health and safety conditions in the workplace. It shall conduct formal, periodic occupational health and safety risk assessments to identify and then address current and potential health and safety hazards. Records of these assessments and corrective and preventive actions taken shall be kept.	**HEALTH AND SAFETY COMMITTEE** 1. A documented procedure for the Health and Safety Committee's periodic occupational health and safety risk assessments is available. The risk assessment covers current and potential health and safety hazards, including ergonomic risks and geographic risks and threats, such as hurricane, seismic activity, flood and landslide (3.5). 2. The Committee is trained on incident investigation and health and safety inspection and hazard recognition (3.5). 3. The Committee is involved in all incident investigations (3.5). **ERGONOMICS** 1. Adequate and accurate records of measures implemented to address the ergonomics risks identified by the health and safety committee's health and safety risk assessment are maintained (3.5).	• Documentary evidence of the election process of the health and safety committee • Minutes of the health and safety committee meetings • Records (including photographs) of formal, periodic occupational health and safety risk assessments to identify and then address current and potential health and safety hazards • All PIA requirements as described in the adjacent column are addressed by the client.

	TRAINING 1. Personnel are trained on emergency evacuation. Fire drills take place at least once per year for all shifts. All personnel, including new personnel, know the drill procedure and consider it routine (3.6). 2. Personnel are trained on recognition of hazards and emergencies and appropriate action (3.6). 3. Personnel are trained on the proper operation and storage of personal protective equipment (PPE), tools, machinery and equipment (3.6). 4. Authorized personnel are trained on tools, systems, jobs and work areas that require specific training and skills. Unauthorized personnel are trained to avoid using or visiting those tools, systems and work areas (3.6). 5. Chemical handlers are trained on the safe use and handling of chemicals, as well as any relevant medical treatment if needed (3.6).	
3.6 The organisation shall provide to personnel, on a regular basis, effective health and safety training, including on-site training and, where needed, job-specific training. Such training shall also be repeated for new and reassigned personnel, where incidents have occurred, and when changes in technology and/or the introduction of new machinery present new risks to the health and safety of personnel.	6. All new personnel are trained, as noted in the indicators above, as part of their orientation training and within one month of joining the organisation (3.6). **FIRE EXTINGUISHERS** 2. Personnel demonstrate knowledge and understanding of the basic practical use of fire extinguishers (3.6).	• Health and safety policy • Health and safety training program & records • Dangerous machines licenses, including but not limited to lifts, electrical equipment, high-pressure equipment • All PIA requirements as described in the adjacent column are addressed by the client.

	PERSONAL PROTECTIVE EQUIPMENT (PPE) 2. All personnel demonstrate their knowledge and understanding of: a. Which PPE is necessary for each task, operation or process; b. When the PPE is necessary; c. How to use and adjust the equipment; d. Limitations of the equipment; and e. Proper care and maintenance of the equipment (3.6). **MACHINE GUARDS AND SAFETY** 2. Personnel demonstrate their knowledge and understanding of how to operate machinery in a safe and effective manner (3.6). 4. Special permits and training are required to operate high--- hazard equipment such as elevators, forklift trucks, boilers and welding equipment (3.6). **CHEMICAL AND HAZARDOUS WASTE HANDLING AND STORAGE** 7. Only authorized employees handle hazardous waste (3.6). **KITCHEN, CAFETERIA AND CANTEENS** 7. 100% of Kitchen, Cafeteria and Canteen personnel have received training in hygienic food preparation and nutrition (3.6).	
3.6 Continued		• As above

3.7 The organisation shall establish documented procedures to detect, prevent, minimize, eliminate or otherwise respond to potential risks to the health and safety of personnel. The organisation shall maintain written records of all health and safety incidents that occur in the workplace and in all residences and property provided by the organisation, whether it owns, leases or contracts the residences or property from a service provider.	**EMERGENCY PREPAREDNESS** 1. A documented emergency preparedness and response plan that outlines the actions that all personnel should take in case of fire and/or other emergencies (manmade and/or natural disasters) is available. The plan clearly defines the persons responsible for preventing, reducing the impact of, and addressing any such emergency event (3.7). 2. Automated fire safety systems (fire detection, smoke detection, alarm, fixed or mobile extinguisher systems) exist and are subject to routine checking and maintenance (3.7). 3. Evacuation plans are posted at regular intervals by the organisation in the workplace and in residences and property provided by the organisation, in the language(s) of the workers, with a clear "You are here" mark (3.7). 4. Signs that indicate the identity of the first aid providers, fire wardens, emergency response team and the manager in	• Approval certificate of chemical warehouse • Register / record of chemical goods • Hazardous chemicals inventory • MSDS of all chemicals used on the company's premises • Documentary evidence of consumption, withdrawal and disposal of chemicals • Building fire safety certificate • Fire equipment inspection procedure & record • Fire evacuation plan and signage • Fire drill record / program (including photographs) • Noise , Air Quality, etc. testing / monitoring report • Register & Annual Report of pressure vessels, boiler, lifting facilities, etc. • Documentary evidence of workers' qualifications for those who deal with dangerous machines, electrical installation and any other activity that requires specific training due to the high level of risk • Worker Health Certificate • Firefighting equipment (e.g. inspection tags on fire extinguishers)

	charge of health and safety are posted conspicuously in the workplace (3.7). **GENERAL WORKING ENVIRONMENT** 4. A documented procedure to prevent the ignition of fires from sources of heat, open flames, electrical sparking, hot surfaces, welding, smoking, heat or sparks is available. The procedure includes a mandate for adequate housekeeping to ensure that uncontrolled combustible material is removed, as well as decontamination measures. It mandates that hazardous material is stored and handled in a safe way and includes the following measures (3.7): a. Workplaces are clean, free from dirt and dust, and are not exposed to potential ignition sources, such as cigarettes. b. Flammable and hazardous materials are properly stocked and kept away from ignition sources. c. Gas sensors are placed around gas---using and processing equipment.	• All PIA requirements as described in the adjacent column are addressed by the client.
	MACHINE GUARDS AND SAFETY 1. A documented risk assessment of machinery is available and updated when new machines are incorporated into processes. All machines have the necessary safety devices and guarding, as identified in the risk assessment, such as pulley guard, needle guard, eye guard and/or finger guard. Cutting, stamping and punching machines are required to have two---handed button operation (3.7). 3. A documented maintenance plan that outlines industrial machine, equipment and wiring inspections is available. Adequate and accurate records are kept of machine, equipment and wiring inspections and repairs (3.7). **CHEMICAL AND HAZARDOUS WASTE HANDLING AND STORAGE** 3. A documented procedure for storing chemicals in order to avoid contact between incompatible chemicals and providing for secondary containment is available (3.7). 5. A documented procedure for proper labelling of chemicals is available (3.7). 6. A documented procedure for the proper handling and storage of hazardous waste is available (3.7).	
3.7 Continued	**MEDICAL CARE**	• As above

	7. Adequate and accurate records of incidents and near misses. These records are reviewed during the management review meeting and Health and Safety Committee meetings. These records are kept for at least two years (3.7).	

	WATER, AIR, NOISE AND TEMPERATURE 3. Safe and clean drinking water is free and available at all times and within a reasonable distance of all workstations. There is an adequate amount of potable water stations relative to the number of personnel. The means to drink water (i.e. cups) is safe, sanitary and available in an appropriate amount (3.8). **RESTROOM FACILITIES** 1. An adequate number of restroom facilities are provided. The facilities meet local hygiene requirements and have functioning toilets and sinks with running water. There are a sufficient number of facilities relative to the number of employees and, where practicable, facilities are separated by gender (3.8). 2. Restroom facilities are cleaned and serviced regularly (3.8). 3. Toilet paper is free of charge. Cleansing agents or hand soap and hand towels or dryers and garbage pails are provided in all restroom facilities (3.8). **KITCHEN, CAFETERIA AND CANTEENS** If a kitchen, cafeteria and/or canteens are available on the premises: 1. Kitchen, cafeteria and canteens areas operate under sanitary, safe conditions and have anti-slip floor mats (3.8). 2. K-class fire extinguishers are provided in all kitchens (The K-class fire extinguisher works on fires caused by fats, greases and oils) (3.8). 3. Kitchen, Cafeteria and Canteens have sufficient seating to accommodate the majority of workers working at a given time. The seating is also sufficient if there is enough space for workers to eat in shifts (3.8). 4. Kitchen, Cafeteria and Canteen staff ensure that any spoiled or questionable food is not served and is properly disposed. Staff ensures that utensils, dishes and cookware are properly sanitized after each use (3.8).	• Kitchen/canteen hygiene certificate • Kitchen/canteen workers health certificate • Vermin control plan • Vermin control equipment e.g. UV Fly Killer, Mouse/Rat Bait. • Records of regular cleaning/sanitation of toilets- men/women • Drinking water quality certificate or record • Water tank Cleaning record • Potable water at production facilities and dormitories • Health and safety for facilities including but not limited to temperature, noise level and lighting • All PIA requirements as described in the adjacent column are addressed by the client.
3.8 The organisation shall provide, for use by all personnel, free access to: clean toilet facilities, potable water, suitable spaces for meal breaks, and, where applicable, sanitary facilities for food storage.		

	5. Kitchen, Cafeteria and Canteen staff have a health check at least annually and/or obtain a health certificate if required by local law (3.8). 6. All workers that handle food wear an apron, gloves and hair net and wash their hands after using restroom facilities (3.8). 8. The kitchen has a pest and vermin program that effectively ensures that there are no pests and vermin present (3.8).	

	DORMITORIES 1. Dormitories are located in a building separate from the production areas and warehouses and are well maintained (3.9). 2. Dormitories are secure, clean and have adequate safety provisions, such as: potable water, fire extinguishers, first aid kits, unobstructed and clearly marked emergency exits with doors that cannot be locked against egress, fire alarms in working order and emergency lighting. Emergency evacuation drills are conducted at least once per year (3.9). 3. Each dormitory floor has at least 2 accessible, unlocked, and clearly marked exits leading to the outside (3.9). 4. The minimum amount of square footage allocated per resident is 3.7 meters per worker, or as is provided by law (3.9).	
3.9 The organisation shall ensure that any dormitory facilities provided for personnel are clean, safe and meet their basic needs, whether it owns, leases or contracts the dormitories from a service provider.	5. Each resident has his or her own bed or mat, an area for personal items, and the ability to secure belongings (3.9). 6. Toilets and showers provide adequate privacy and each has its own cubicle (3.9). 7. Water usage for showering and bathing should not be restricted and/or limited to unreasonable hours of operation. Hot water is provided (3.9). 8. Each dormitory has adequate lighting and ventilation to produce a comfortable living area (3.9).	• Visit/pictures of dormitory & canteen/Guest house, as applicable showing adequacy of space, washrooms, ventilation, basic hygiene etc. • Records Of Fire Drills • Evacuation Plans and Signage • Contracts with Providers of Canteen and Dormitory/ Guest house, as applicable • Records including pictures of Crèche, trained nurse and regular inspection/maintenance of crèche, as applicable (including contracts, if crèche is a contracted service) • Records of regular inspection and maintenance of company provided Bus/vehicle for commuting of workers and employees, fire tenders and ambulance, as applicable. • Records of inspection/permission for Occupational Health Centre /qualified Doctor/trained nurse- male/female • Audits of Canteen and Dormitory/Guest House Providers • All PIA requirements as described in the adjacent column are addressed by the client.
3.10 All personnel shall have the right to remove themselves from imminent serious danger without seeking permission from the organisation.	Not directly referenced in the PIA.	• Health and Safety Policy • Employees Handbook

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	**List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s**
4. FREEDOM OF ASSOCIATION & RIGHT TO COLLECTIVE BARGAINING		
4.1 All personnel shall have the right to form, join and organize trade union(s) of their choice and to bargain collectively on their behalf with the organisation. The organisation shall respect this right and shall effectively inform personnel that they are free to join a worker organisation of their choosing without any negative consequences or retaliation from the organisation. The organisation shall not interfere in any way with the establishment, functioning or administration of workers' organisation(s) or collective bargaining.	1. The organisation does not propose or initiate worker elections (4.1). 2. Worker elections are independent and freely conducted by workers for workers; worker participation in this process is voluntary (4.1). 7. Worker organisations are permitted to post union/committee notices in conspicuous and agreed upon places (4.1). 8. All provisions of collective agreements are honored (4.1). 9. The organisation is open to dialogue with trade unions and demonstrates good faith in bargaining with trade unions (4.1).	• Policy/Procedure on Freedom of association & Right to collective bargaining that addresses the issues of the PIA. • Employees Handbook/Employee personal files • Minutes or documents of meetings that led to the collective bargaining agreement (if applicable) • Collective Bargaining Agreement (if applicable) • Procedure for workers elections. Records/notices/posters showing workers elections process and evidence showing workers voluntary participation and involvement. • All PIA requirements as described in the adjacent column are addressed by the client.
4.2 In situations where the right to freedom of association and collective bargaining are restricted under law, the organisation shall allow workers to freely elect their own representatives.	Not directly referenced in the PIA.	• Documentary evidence of the workers representative election • List of worker's representative • Signage of who are the workers representatives • Documented responsibilities of worker's representative • Records of agreements with workers representatives • Documentary evidence of regularly scheduled workers meetings
4.3 The organisation shall ensure that union members, representatives of workers and any personnel engaged in organizing workers are not subjected to discrimination, harassment, intimidation or retaliation for being union members, representative(s) of workers or engaged in organizing workers, and that such representatives have access to their members in the workplace.	3. Workers indicate that worker organisations have had the opportunity to present the organisation to the workforce (4.3). 4. Trade union representatives are allowed regular and reasonably free access to workers during workers' free time (4.3).	• Union agreements • Meeting minutes of union • Activity record of union • Approval of Government union member • Government Union Member List • All PIA requirements as described in the adjacent column are addressed by the client.

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	**List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s**
5. DISCRIMINATION		
5.1 The organisation shall not engage in or support discrimination in hiring, remuneration, access to training, promotion, termination or retirement based on race, national or territorial or social origin, caste, birth, religion, disability, gender, sexual orientation, family responsibilities, marital status, union membership, political opinions, age or any other condition that could give rise to discrimination.	1. Job postings and advertisements, handbooks, leaflets, flyers, training materials, memos, posters and other communication materials are not discriminatory (5.1). 2. Incidents of discrimination are documented, reviewed by the organisation and lead to a documented remediation plan. The remediation plan is implemented, and results are part of the management review (5.1). 3. All personnel have the same opportunity to apply for and be considered for the same jobs (5.1). 4. All personnel are treated fairly regarding benefits, dormitory and canteen/cafeteria privileges (5.1).	• Recruitment Policy /Procedures that address the issues of PIA. • Recruitment and dismissal procedures and records • Methods of recruitment information • Example recruitment advertisements/leaflets, flyers, training material, memos, posters etc. • Records of incidents of discrimination. • Remediation plan for incidents of discrimination, if any. • Evidence showing provision for equal opportunity to all including access to canteen, dormitory, cafeteria etc. • All PIA requirements as described in the adjacent column are addressed by the client.
5.2 The organisation shall not interfere with the exercise of personnel's rights to observe tenets or practices or to meet needs relating to race, national or social origin, religion, disability, gender, sexual orientation, family responsibilities, union membership, political opinions or any other condition that could give rise to discrimination.	Not directly referenced in the PIA.	Company non-discrimination policy
5.3 The organisation shall not allow any behavior that is threatening, abusive, exploitative or sexually coercive, including gestures, language and physical contact, in the workplace and in all residences and property provided by the organisation, whether it owns, leases or contracts the residences or property from a service provider.	Not directly referenced in the PIA.	• As 5.2 above • Employee Handbook
5.4 The organisation shall not subject personnel to pregnancy or virginity tests under any circumstances.	Not directly referenced in the PIA.	• Non-discrimination policy • Employee medical records

SA8000:2014 Standard Requirements	**SA8000:2014 Performance Indicator Annex**	**List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s**
6. DISCIPLINARY PRACTICES		
6.1 The organisation shall treat all personnel with dignity and respect. The organisation shall not engage in or tolerate the use of corporal punishment, mental or physical coercion or verbal abuse of personnel. No harsh or inhumane treatment is allowed.	1. Adequate and accurate records for all cases of disciplinary action are available (6.1). 2. Workers are informed when a disciplinary procedure has been initiated against them and have the right to participate and be heard in any disciplinary procedure against them (6.1). 3. Workers confirm by signature or thumbprint all documented records of disciplinary action against them. This confirmation acknowledges that the workers are aware of the action, though they may not necessarily agree with the rationale, and that the workers know that such records are maintained in the organisation's personnel files (6.1).	• Disciplinary practices policy / procedure that address issues in PIA • Disciplinary practices records, evidence showing worker are informed when a disciplinary procedure has been initiated against them and they have the right to participate and be heard in any disciplinary procedure against them including signature/thumbprint. • Employee Handbook • Employee Personal Files • Documentary evidence on disciplinary cases and the measures taken • Documentary evidence of workers' performance assessments and procedures • All PIA requirements as described in the adjacent column are addressed by the client.

SA8000:2014 Standard Requirements	**SA8000:2014 Performance Indicator Annex**	**List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s**
7. WORKING HOURS		
7.1 The organisation shall comply with applicable laws, collective bargaining agreements (where applicable) and industry standards on working hours, breaks and public holidays. The normal work week, not including overtime, shall be defined by law but shall not exceed 48 hours.	2. Time cards, an electronic bar card system, or attendance sheets are used to measure actual working hours and break times for all workers, regardless of whether they are paid by hour, piece rate, job, or other form. The measurement system includes in and out times at the start and end of each day (7.1). 3. If attendance sheets are used, they include workers' signatures or thumbprints to confirm (on at least a weekly basis) the accuracy and completeness of the attendance sheets (7.1). 4. Workers maintain their own time records; for example, they punch in and out themselves (7.1). 5. Adequate and accurate time records are maintained for at least one year (7.1).	• Working Hours Policy /Procedure that address all issues in PIA • Working hours shift/schedule • Working Hours Procedure showing whether payment will be hourly, on piece rate, or any other. • Overview of seasonal workers • Time card / biometric attendance records for at least last one year. • Consolidated working hours permit • Employee Handbook • Employee Contracts/Appointment letters/terms of employment. • Records/evidence showing workers/employees get time for break. • Procedure for Home worker /employees working from home working hours and payment. • Evidence to demonstrate adequacy, completeness and time and attendance records including signature/thumbprints/electronic records/SAP/ERP

		systems (validation and calibration of ERP software system including admin controls) • All PIA requirements as described in the adjacent column are addressed by the client.
7.2 Personnel shall be provided with at least one day off following every six consecutive days of working. Exceptions to this rule apply only where both of the following conditions exist: a) National law allows work time exceeding this limit; and b) A freely negotiated collective bargaining agreement is in force that allows work time averaging, including adequate rest periods.	Not directly referenced in the PIA.	• Collective Bargaining Agreement • Documentary evidence of national law exception • Employee Handbook • Employee Contracts
7.3 All overtime work shall be voluntary, except as provided in 7.4 below, shall not exceed 12 hours per week and shall not be requested on a regular basis.	Not directly referenced in the PIA.	• Documented overtime procedure including agreements with workers • Documentary evidence on production capacity planning
7.4 In cases where overtime work is needed in order to meet short-term business demand and the organisation is party to a freely negotiated collective bargaining agreement representing a significant portion of its workforce, the organisation may require such overtime work in accordance with such agreement. Any such agreement must comply with the other requirements of this Working Hours element.	1. Reasonable steps are taken to inform workers about the nature and expected duration of extraordinary business circumstances that may necessitate longer working hours with sufficient advance warning allow workers to accommodate this situation (7.4).	• Collective Bargaining Agreement showing nature and expected duration of extraordinary business circumstances that may necessitate longer working hours with sufficient advance warning allow workers to accommodate this situation • Documentary evidence of national law exception • Employee Handbook • Employee Appointment letters/Contracts/terms of employment • All PIA requirements as described in the adjacent column are addressed by the client.

SA8000:2014 Standard Requirements	SA8000:2014 Performance Indicator Annex	List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s
8. REMUNERATION		
8.1 The organisation shall respect the right of personnel to a living wage and ensure that wages for a normal work week, not including overtime, shall always meet at least legal or industry minimum standards, or collective bargaining agreements (where applicable). Wages shall be sufficient to meet the basic needs of personnel and to provide some discretionary income.	**LIVING WAGE ESTIMATE** 1. Uses both quantitative and qualitative methods (8.1). a. The quantitative method involves the following steps at a minimum: i. Assesses workers' expenses. ii. Assesses the average family size in the area. iii. Analyses the typical number of wage earners per family. iv. Analyses government statistics on poverty levels (Poverty level analysis will indicate the cost of living above the poverty line). b. The qualitative method involves the following at a minimum: i. Consultation with workers to understand whether workers' wages are sufficient to cover the basic needs for themselves and their dependents, using the quantitative analysis as a point of reference. 2. Arrives at a figure that meets the basic needs of personnel and provides some discretionary income (8.1). **LIVING WAGE STEP-APPROACH** 1. The existing baseline is established. There is evidence that at least the legal minimum wage or collective bargaining wage when applicable – is being paid (8.1). 2. The living wage estimate has been conducted, as described above (8.1). 3. The living wage estimate and a strategy to advance wages to meet or exceed it are in place. Progress is monitored and documented systematically with indicators and milestones (8.1). **WAGE PAYMENT** 1. At least the legal minimum wage, industry standard wage or collective bargaining wage, whichever is highest, is paid (8.1).	• Payroll records • Remuneration Policy/Procedure that address all issues in PIA • Basic Needs/Living Wage Calculation in line with PIA • Evidence of survey/involvement of workers/employees in determining living wage. • Documentation on legal minimum wages relevant for the sector • Production records of last one year • Production capacity/productivity calculation records • Lists of wage ranges and calculations including for piece rate workers • Personnel data files for all workers (including seasonal workers) • Wage records of all employees/contractors • Records/evidence of payment to piece rate employees • Records/evidence of payment to employees working from home. • Records /evidences of payment to home workers, if any • Evidence of issuance of wage slips/salary slips in a language understood by employees/workers. • Evidence of payment of statutory benefits/social security • Evidence of payment to contractors • Evidence of full and final account settlements of those retired/left the company. • All PIA requirements as described in the adjacent column are addressed by the client.
8.2 The organisation shall not make deductions from wages for disciplinary purposes. Exception to this rule applies only when both of the following conditions exist: a) Deductions from wages for disciplinary purposes are permitted by national law; and b) A freely negotiated collective bargaining agreement is in force that permits this practice.	Not directly referenced in the PIA.	• Collective Bargaining Agreement • Documentary evidence of national law exception • Employee Handbook • Employee Contracts

8.3 The organisation shall ensure that personnel's wages and benefits composition are detailed clearly and regularly to them in writing for each pay period. The organisation shall lawfully render all wages and benefits due in a manner convenient to workers, but in no circumstances in delayed or restricted forms, such as vouchers, coupons or promissory notes.	**WAGE PAYMENT** 2. All wages, including overtime compensation, are paid within legally defined time limits. If the law does not define time limits, compensation is paid at least once per month (8.3). 3. All workers are provided with a separate documented pay statement/stub, other than the payroll, for each pay period. The pay statement/stub shows earned wages, wage calculations, regular and overtime pay, bonuses, all deductions and the final total wage. Payment is accurate and accountable (8.3). 4. No one receives wages on behalf of a worker, unless the worker has, in full freedom, authorized in writing for another person to do so (8.3). 5. All legally required benefits are rendered. Waivers are unacceptable (8.3). **PAYROLL DOCUMENTATION** 1. All workers are included in payroll and social security records (8.3). 2. Payroll documents, journals and reports are available, complete, accurate, and up-to date (8.3). 3. Copies of payroll documentation pertaining to workers employed by a third party organisation, such as a labour agency, security or cleaning firm, or a canteen provider, are made available upon request (8.3).	• Pay slips for workers and documentary evidence of payments • Payment to third party organisations like Labour agency, cleaning firm, canteen provider, any other. • Documentary evidence of additional benefits (commercial insurance if applicable) • Wage / promotion policy & calculation method • Meal / dormitory allowance • Local official document of insurance scheme • Social security payment evidence • Documentary evidence of updated contributions to social insurance funds • Employee Contracts • All PIA requirements as described in the adjacent column are addressed by the client.
8.4 All overtime shall be reimbursed at a premium rate as defined by national law or established by a collective bargaining agreement. In countries where a premium rate for overtime is not regulated by law or there is no collective bargaining agreement, personnel shall be compensated for overtime at the organisation's premium rate or at a premium rate equal to prevailing industry standards, whichever is higher.	Not directly referenced in the PIA.	• Over time payment policy • Employee Contracts • Employee Handbook • Documentary evidence of voluntary nature of overtime.
8.5 The organisation shall not use labour-only contracting arrangements, consecutive short-term contracts and/or false apprenticeship or other schemes to avoid meeting its obligations to personnel under applicable laws and regulations pertaining to labour and social security.	Not directly referenced in the PIA.	• Employee Contracts • Employee Job Descriptions • Employee Handbook

SA8000:2014 Standard Requirements	**SA8000:2014 Performance Indicator Annex**	**List Of Documents To Be Considered During SA8000 Audit: Records That The Company Should Have Available For Review By The CB LA and CB Documents that should be cross-checked by the CB LA.s**
9. MANAGEMENT SYSTEM		
9.1 Policies, Procedures and Records		
9.1.1 Senior management shall write a policy statement to inform personnel, in all appropriate languages, that it has chosen to comply with SA8000.	Not directly referenced in the PIA.	• Policy statement posted around the company and dormitory (if applicable) in all appropriate languages. • Employee Handbook
9.1.2 This policy statement shall include the organisation's commitment to conform to all requirements of the SA8000 Standard and to respect the international instruments as listed in the previous section on Normative Elements and Their Interpretation. The statement shall also commit the organisation to comply with: national laws, other applicable laws and other requirements to which the organisation subscribes.	2. SAAS/SAI contact details and the relevant CB contact details are conspicuously displayed on the organisation's policy statement (9.1.2).	• SA8000 Policy and its display at strategic locations. • Display of SAAS/SAI contact details in strategic locations • Employee Handbook • Policy statement posted around the company and dormitory (if applicable) in all appropriate languages. • All PIA requirements as described in the adjacent column are addressed by the client.
9.1.3 This policy statement and the SA8000 Standard shall be prominently and conspicuously displayed, in appropriate and comprehensible form, in the workplace and in residences and property provided by the organisation, whether it owns, leases or contracts the residences or property from a service provider.	Not directly referenced in the PIA.	• Employee Handbook • Policy statement posted around the company and dormitory (if applicable) in all appropriate languages.
9.1.4 The organisation shall develop policies and procedures to implement the SA8000 Standard.	3. Policies state all the requirements of SA8000 and procedures provide instructions on how personnel shall comply with the policies. All personnel demonstrate knowledge and understanding of these policies and procedures. Specifically, the following is expected (9.1.4): a. A policy stating all requirements of the Child Labour element, and a policy governing the work eligibility of job applicants. b. A policy stating all requirements of the Forced or Compulsory Labour element. c. A policy stating all requirements of the Health and Safety element. This policy states how the organisation manages safety and health issues and outlines the steps the organisation takes to ensure that health and safety hazards are identified and addressed. d. A policy stating all requirements of the Freedom of Association and Right to Collective Bargaining element. This policy states personnel's rights and the country's laws regarding freedom of association and collective bargaining. e. A policy stating all requirements of the Discrimination element. f. A policy stating all requirements of the Disciplinary Practices element. This policy clearly states the organisation's progressive disciplinary measures.	• Documentary evidence of the company's management system (Policy, Procedures, Work Instructions and Forms) for the implementation and maintenance of their SA8000:2014 Management System [SAMS] • All PIA requirements as described in the adjacent column are addressed by the client.

	g. A policy stating all requirements of the Working Hours element. h. A policy stating all requirements of the Remuneration element. This policy clearly states: 1) The system through which personnel can contest wage payments and receive clarifications in this respect in a timely manner; 2) personnel's wages, including the calculation of wages, incentives systems, benefits and bonuses they are entitled to under applicable laws.	
9.1.5 These policies and procedures shall be effectively communicated and made accessible to personnel in all appropriate languages. These communications shall also be clearly shared with customers, suppliers, sub-contractors and sub-suppliers.	1. All personnel demonstrate knowledge and understanding of the organisation's policy statement, which includes its commitment to comply with the SA8000 Standard (9.1.5).	• Procedure on how the SAMS is made accessible to personnel in all appropriate languages and customers, suppliers, sub-contractors and sub-suppliers • Evidence that all personnel demonstrate knowledge of organisation's SA8000 Policy. • All PIA requirements as described in the adjacent column are addressed by the client.
9.1.6 The organisation shall maintain appropriate records to demonstrate conformance to and implementation of the SA8000 standard, including the Management System requirements contained in this element. Associated records shall be kept and written or oral summaries given to the SA8000 worker representative(s).	4. SA8000 worker representative(s) demonstrate knowledge and understanding of written or oral summaries given to them by management on conformance and implementation of the SA8000 Standard (9.1.6).	• Evidence that Worker Representative demonstrate knowledge and understanding of SA8000 standard requirements (at least in summary, in local language) • Procedure on management system records including their storage and disposition. • All PIA requirements as described in the adjacent column are addressed by the client.
9.1.7 The organisation shall regularly conduct a management review of its policy statement, policies, procedures implementing this Standard and performance results, in order to continually improve.	5. Adequate and accurate records from management review demonstrating the organisation's performance relative to the goals and targets set for complying with the SA8000 Standard (9.1.7).	• Management review minutes with actions and progress
9.1.8 The organisation shall make its policy statement publicly available in an effective form and manner to interested parties, upon request.	6. The organisation shall make its policy statement publicly available. At a minimum, the organisation shall post its statement on its website (9.1.8).	• Procedure on how the SAMS is made publicly available in an effective form and manner to interested parties, upon request. • Clients website and display of Policy, use of SAAS logo • Evidence that a single company SA8000 certification is not misused by entire group company, as applicable.

9.2 Social Performance Team		
9.2.1 A Social Performance Team (SPT) shall be established to implement all elements of SA8000. The Team shall include a balanced representation of: a) SA8000 worker representative(s); and b) Management. Compliance accountability for the Standard shall solely rest with Senior Management.	1. Documented procedures governing the SPT that clearly define the role of its members, as well as the time commitments for their functions, are available (9.2.1). 2. SPT members demonstrate knowledge and understanding of their role regarding the organisation's full and sustained compliance with SA8000, with continual improvement (9.2.1). 3. SPT members demonstrate that they have clear authority from senior management to carry out their responsibilities (9.2.1). 4. SPT members demonstrate that they are properly trained and have sufficient resources to carry out their roles (9.2.1).	• Documentary evidence of how the SPT was elected/established. • Documentary evidence that the SPT is balanced and that the members are competent to perform their roles. • Evidence that SPT has been given clear cut roles and responsibilities. • Evidence of knowledge demonstration by SPT members • Evidence that SPT members have clear authority from senior management to carry out their responsibilities. • Record/evidence of SPT training • Evidence showing resource allocation for SPT work

		• All PIA requirements as described in the adjacent column are addressed by the client.
9.2.2 In unionized facilities, worker representation on the SPT shall be by recognized trade union(s) representative(s), if they choose to serve. In cases where the union(s) does not appoint a representative or the organisation is not unionized, workers may freely elect one or more SA8000 worker representative(s) from among themselves for this purpose. In no circumstances shall the SA8000 worker representative(s) be seen as a substitute for trade union representation.	5. The organisation does not propose or initiate the election of the SA8000 worker representative(s) (9.2.2). 6. The SA8000 worker representative(s) election(s) is (or are) independent and freely conducted by workers for workers; worker participation in this process is voluntary (9.2.2).	• Documentary evidence of how the SPT was elected/established. • Documentary evidence of how the worker representative was elected/established without any interference from management. • Evidence that workers elections and participation is voluntary and conducted by workers. • Documentary evidence that the SPT is balanced and that the members are competent to perform their roles. • All PIA requirements as described in the adjacent column are addressed by the client.

9.3 Identification and Assessment of Risks		
9.3.1 The SPT shall conduct periodic written risk assessments to identify and prioritize the areas of actual or potential non-conformance to this Standard. It shall also recommend actions to Senior Management that address these risks. Actions to address these risks shall be prioritized according to their severity or where a delay in responding would make it impossible to address.	1. The SPT has documented risk assessment procedures for assessing relevant risks for all elements of SA8000 (9.3.1). 2. The scope of the risk assessment includes internal business operations and processes, as well as suppliers/subcontractors, private employment agencies and sub-suppliers (9.3.1). 3. SPT members demonstrate knowledge and understanding of the risk assessment procedures (9.3.1). 4. Documented risk assessments that identify and prioritize the areas of actual or potential non-conformance to the Standard are available (9.3.1).	• Documentary evidence that the SPT conducts periodic written risk assessments to identify and prioritize the areas of actual or potential non-conformance to this Standard. • Evidence that risk assessment includes internal business operations and processes, as well as suppliers/subcontractors, private employment agencies and sub-suppliers • Evidence of knowledge demonstration of Risk Assessment by SPT members • All PIA requirements as described in the adjacent column are addressed by the client.
9.3.2 The SPT shall conduct these assessments based on their recommended data and data collection techniques and in meaningful consultation with interested parties.	Not directly referenced in the PIA.	• Documentary evidence that periodic written risk assessments are based on their recommended data and data collection techniques and in meaningful consultation with interested parties.

9.4 Monitoring		

9.4.1 The SPT shall effectively monitor workplace activities for: a) compliance with this Standard; b) implementation of actions to effectively address the risks identified by the SPT; and c) for the effectiveness of systems implemented to meet the organisation's policies and the requirements of this Standard. It shall have the authority to collect information from or include interested parties (stakeholders) in its monitoring activities. It shall also liaise with other departments to study, define, analyze and/or address any possible non-conformance(s) to the SA8000 Standard.	1. The SPT maintains adequate and accurate records of its monitoring activities (9.4.1).	• Documentary evidence that the SPT effectively monitors the workplace activities for compliance, implementation, and effectiveness of their management system with SA8000 • Evidence to demonstrate that SPT have the authority to collect information from or include interested parties (stakeholders) in its monitoring activities. • Evidence to demonstrate that SPT understands and has adequate knowledge about monitoring requirements of standard and monitoring effectiveness of all actions implemented.
9.4.2 The SPT shall also facilitate routine internal audits and produce reports for senior management on the performance and benefits of actions taken to meet the SA8000 Standard, including a record of corrective and preventive actions identified.	2. Internal audits on all elements of SA8000 are conducted at least annually (9.4.2). 3. Senior management demonstrates knowledge and understanding of the monitoring reports it receives from the SPT (9.4.2).	• Internal Monitoring/Audit Program that covers factory and subcontractors and suppliers. • Audit Checklists • Audit Reports • Non-conformities and corrective and preventive actions identified • Evidence of knowledge demonstrated by Senior Management.
9.4.3 The SPT shall also hold periodic meetings to review progress and identify potential actions to strengthen implementation of the Standard.	4. The SPT meets at least once every six months to review progress and identify potential actions to strengthen implementation of the Standard (9.4.3).	• Documentary evidence of planned meeting dates • Minutes of the SPT periodic meetings with action points

9.5 Internal Involvement and Communication

9.5.1 The organisation shall demonstrate that personnel effectively understand the requirements of SA8000 and shall regularly communicate the requirements of SA8000 through routine communications.	1. Personnel demonstrate knowledge and understanding of the requirements of SA8000 (9.5.1). 2. Personnel demonstrate knowledge and understanding of the SPT's role and are able to identify the SA8000 worker representative(s). [Note: this is not applicable to organisations that do not have SA8000 worker representative(s)] (9.5.1).	• Evidence of an awareness training plan and calendar for workers and management • Documentary evidence of awareness training given to workers, management and human resources (e.g. list of attendees with signatures and PPT of training content) • Documentary evidence of trainer competence • Documentary evidence of workers training on occupational health and safety • Evidence of knowledge and awareness demonstrated by all personnel • All PIA requirements as described in the adjacent column are addressed by the client.

9.6 Complaint Management and Resolution

9.6.1 The organisation shall establish a written grievance procedure that is confidential, unbiased, non-retaliatory and accessible and available to personnel and interested parties to make comments, recommendations, reports or complaints concerning the workplace and/or non-conformances to the SA8000 Standard.	1. An effectively communicated and documented complaints procedure is readily available to workers in appropriate language(s). The procedure permits workers to settle complaints directly with their immediate supervisor, or if they choose, with someone other than their immediate supervisor. The procedure describes the steps that supervisors and managers take to protect personnel who file complaints (9.6.1). 2. Personnel demonstrate knowledge and understanding of the organisation's documented complaints procedure (9.6.1). Specifically, personnel understand that the procedure is: a. Available to all personnel. b. Intended to collect comments, recommendations, reports or complaints concerning the workplace and/or non-conformances to the SA8000 Standard. c. Confidential. d. Unbiased and e. Non-retaliatory.	• Complaints/Grievance Procedure • Evidence of retaliation, if any • Evidence that complaint procedure is available in languages understood by all workers. • Documentary evidence of grievances /complaints lodged/investigated • Evidence to demonstrate that all workers/employees are aware and understand about the complaint/grievances. • All PIA requirements as described in the adjacent column are addressed by the client.
9.6.2 The organisation shall have procedures for investigating, following up on and communicating the outcome of complaints concerning the workplace and/or non-conformances to this Standard or of its implementing policies and procedures. These results shall be freely available to all personnel and, upon request, to interested parties.	3. There is a specific person (or multiple persons) who is responsible for investigating, following up on and communicating the outcome of complaints received. This person demonstrates knowledge and understanding of the documented complaints procedure (9.6.2). 4. Personnel demonstrate that complaints are acted upon by the organisation. Personnel receive communication on the outcome of complaints received (9.6.2). 5. The steps the organisation takes when receiving complaints from interested external parties are addressed by the complaints procedure or another procedure (9.6.2).	• Complaints Procedure showing clearly roles for each person involved in investigation and redressal process. • Procedure to receive and respond to complaints from interested parties. • Records of complaints from • Documentary evidence of complaints lodged/investigated • Evidence showing actions and progress on each complaint/grievances. • Documentary evidence that results are freely available to all personnel and, upon request, to interested parties. • All PIA requirements as described in the adjacent column are addressed by the client.
9.6.3 The organisation shall not discipline, dismiss or otherwise discriminate against any personnel or interested party for providing information on SA8000 compliance or for making other workplace complaints.	Not directly referenced in the PIA.	• Complaints Procedure • Employee Handbook • Records of disciplinary actions (any instances of action due to complaint)

9.7 External Verification and Stakeholder Engagement		
9.7.1 In the case of announced and unannounced audits for the purpose of certifying its compliance with the requirements of this Standard, the organisation shall fully cooperate with external auditors to determine the severity and frequency of any problems that arise in meeting the SA8000 Standard.	Not directly referenced in the PIA.	• Procedure to ensure cooperation with external auditors during unannounced audits. • CB & client contract - terms and condition.
9.7.2 The organisation shall participate in stakeholder engagement in order to attain sustainable compliance with the SA8000 Standard.	1. Relevant stakeholders in the community have been identified and are involved in the SA8000 compliance process in at least one of the following ways (9.7.2):	• Stakeholder engagement procedure • Records/evidence of stakeholders engagement.

	a. Consultation during internal or external audits; b. Meetings to discuss SA8000 compliance issues; c. Co-training of workers and/or managers on SA8000 compliance issues; d. Reporting on complaints and resolutions regarding SA8000 compliance issues; e. Cooperation in surveying workers on SA8000 compliance issues; f. Reviewing organisational progress and program review related to SA8000 compliance through a structured role. 2. Adequate and accurate records are maintained of communication with stakeholders and their involvement in the areas listed above (9.7.2).	• Feedback/reports from any stakeholders and responses, if any • Records of communication/correspondence with stakeholders identified as relevant to the purpose of organisation. • All PIA requirements as described in the adjacent column are addressed by the client.

9.8 Corrective and Preventive Actions

9.8.1 The organisation shall formulate policies and procedures for the prompt implementation of corrective and preventive actions and shall provide adequate resources for them. The SPT shall ensure that these actions are effectively implemented.	Not directly referenced in the PIA.	• Policy/Procedure for Corrective and Preventive actions. • Evidence to demonstrate implementation of corrective actions by SPT. • Non-conformity, correction and corrective action status and progress
9.8.2 The SPT shall maintain records, including timelines, that list, at minimum, non-conformances related to SA8000, their root causes, the corrective and preventive actions taken and implementation results.	Not directly referenced in the PIA.	• Records of Non-conformity, correction and corrective action status and progress and monitoring if actions are effective.

9.9 Training and Capacity Building

9.9.1 The organisation shall implement a training plan for all personnel to effectively implement the SA8000 Standard as informed by the results of risk assessments. The organisation shall periodically measure the effectiveness of training and record their nature and frequency.	Not directly referenced in the PIA.	• Evidence of a training plan based on risk assessment and calendar for workers and management training. • Documentary evidence of training given to workers, management and human resources (e.g. list of attendees with signatures and PPT of training content) and evidence of trainer competence • Documentary evidence of workers training on occupational health and safety • Records/evidence of measuring effectiveness of training.

9.10 Management of Suppliers and Contractors

9.10.1 The organisation shall conduct due diligence on its suppliers/subcontractors, private employment agencies and sub-suppliers' compliance with the SA8000 Standard. The same due diligence approach shall be applied when selecting new suppliers/subcontractors, private employment agencies and sub-suppliers. The minimum activities for the organisation to fulfil this requirement shall be recorded and shall include: a) effectively communicating the requirements of this Standard to senior leadership of suppliers/subcontractors, private employment agencies and sub-suppliers. b) assessing significant risks of non-conformance by suppliers/subcontractors, private employment agencies and sub-suppliers. [Note: an explanation of "significant risk" is found in the guidance document]; c) making reasonable efforts to ensure that these significant risks are adequately addressed by suppliers/subcontractors, private employment agencies and sub-suppliers and by the organisation where and when appropriate, and prioritized according to the organisation's ability and resources to influence these entities; [Note: an explanation of "reasonable effort" is found in the guidance document]; and d) establishing monitoring activities and tracking performance of suppliers/subcontractors, private employment agencies and sub-suppliers to ensure that these significant risks are effectively addressed.	Not directly referenced in the PIA.	- Policy/Procedure for the Management of Suppliers and Contractors - Evidence to demonstrate due diligence - List of employment agencies and evidence of due diligence if service used - Evidence of effective communication of standard requirements to leadership of suppliers/sub-suppliers /employment agencies. - Risk assessment of potential significant risk of conformance by suppliers/sub-suppliers /employment agencies - Evidence of monitoring of suppliers/sub-suppliers /employment agencies to assess risk mitigation. - Evidence of tracking performance of suppliers/sub-suppliers /employment agencies - Contract with service providers including food services, guards, transportation agents - Suppliers/sub-suppliers /employment agencies audit/monitoring results
9.10.2 Where the organisation receives, handles or promotes goods and/or services from suppliers /subcontractors or sub-suppliers who are classified as home workers, the organisation shall take effective actions to ensure that such home workers are afforded a level of protection substantially equivalent to that afforded the organisation's other workers under the requirements of this Standard.	Not directly referenced in the PIA.	- Policy /Procedure for Home workers - Records of monitoring of home workers - Record of payment to home workers

NOTE:

i) It is not a SAAS requirement that details of all company operating permits or licenses be entered in an SA80000 audit report. Such information is better recorded in the auditors' notes. A statement such as "Building and fire safety permits and licenses required by [local/state name] were examined and found to be renewed as required (e.g. [local/state name] hazardous chemical storage permit CS-118528)." is sufficient for SA8000 reporting purposes.

FOR CONVENIENCE CB AUDITOR CAN ADD OTHER DOCUMENTS AS THEY WISH BELOW:		

NOTES:

Appendix 5: Broadly Authorized Deviations from SAAS Procedure 200 and 201 Requirements
(All Applicable Audit Types)

Notes:

1) The following measures apply ONLY at this time to those geographic locations where a government formally imposes quarantine measures for persons leaving and arriving (see 3.2.1, above)

2) *Deviations exclusive to 'Alternative Audits' are defined in body of this document rather than the table below (which applies primarily to conventional audits, but, in most cases, applies also to one or more types of alternative audit).*

3) *Grey highlights indicate text updated in this version (from Rev. 7).*

4) *This table will be regularly updated as changed conditions/circumstances are identified.*

SAAS Procedure 200 V4.2					
Clause No.	Process	COVID-19 Revision	COVID-19 Deviation	Rationale	Last Update
Multiple Clauses Procedure 200	Social Fingerprint		Throughout Procedure 200 reference is made to (SA8000) "Social Fingerprint" processes. In lieu of "Social Fingerprint" refer to current SAAS Procedure 200A May 2020 V2.0. (Management system Maturity Declarations (in lieu of "SF Independent Evaluation")	SAI no longer using the term 'social fingerprint for SA8000 conformity assessment activity.	June 5, 2020
9.1.1 b)	Approved Deviations from Procedure 200 Requirements	None	This Clause permits a CB to deviate from Procedure 200 requirements under exceptional situations.	The current COVID-19 emergency constitutes an exceptional situation.	April 24 2020
11.1.4	Auditing All Shifts	Modified as follows until further notice:	"CB auditor(s) shall consider evidence of conformity for all shifts. For conventional and hybrid audit types, auditors may choose to be physically on-site only during the normal (day shift) working hours."	Reduce infection risks.	June 5, 2020
11.1.6	Recertification Period	Supplemented by alternative measures	Except as permitted under the current scope applicability of this document (See	The current COVID-19 emergency constitutes an exceptional situation.	Aug 22, 2022

		defined in this document	==3.2.1), the requirements of procedure 200 now apply==		
11.1.8, 11.1.9 & SAAS Procedure 201B	Personnel Competency	Supplemented with additional requirements as follows until further notice:	"Wherever practicable, Certification Body shall follow requirements as stated. In cases where CB auditor travel, or site access, is restricted (in accordance with the conditions specified within this document), CB's Program Manager (only) may authorize, in writing and on a job-by-job basis, alternative auditing staff as an exception to the requirements of Procedure 201B criteria for: I. Social Accountability Auditor/Technical Training Successfully Completed II. Management Systems /Auditor Training Successfully Completed III. Audit Experience IV. CPE/CPD Hours Such assignments shall meet the requirements defined within the operational requirements of this document."	Under these exceptional circumstances, CB auditor travel and facility access may be impossible, or too risky for the preferred audit personnel to be assigned. SAAS Has defined acceptable alternative process requirements (including audit team requirements) to address such situations.	June 5, 2020
12.1.1b & 16.1.1 & Other	Semi-Announced and Unannounced Audits	Modified until further notice.	==Except as permitted under the current scope applicability of this document (See 3.2.1), the requirements of procedure 200 now apply==	Semi-Announced and Unannounced Audits create additional logistical challenges and risks	==Aug 22, 2022==
12.1.1 d) and 12.1.1 e)	Audit Team Composition	Rescinded until further notice	Due consideration should be given to team composition, however, where justified a single auditor is acceptable until further notice.	Use of single auditor contributes to reducing infection risks.	April 24 2020

14	Stage 1 Audits - General	Supplemented by alternative measures defined in this document	See figure 2, and section 4.4 of this document. Other than as defined within this document, requirements of this section shall be applied insofar as practicable.	Contingency alternatives where conventional (procedure 200) audit arrangements cannot be applied in full.	June 5, 2020
14.3.4	Time between Stage 1 and Stage 2 audits	Modified as follows until further notice:	"If more than 6 months passes between the end of the Stage 1 audit and the planned first day of the Stage 2 audit and additional time is required, the CB shall conduct a follow-up review after 6 months. The maximum time between a Stage 1 Audit and Stage 2 Audit shall be 12 months, otherwise the CB shall conduct an additional Stage 1 audit."	Under these exceptional circumstances, this permits client organisations (who have been intensely occupied with COVID-19 business concerns and may even have been closed) additional time to prepare for Stage 2 Audit	June 5, 2020
15	Stage 2 Audits - General	Supplemented by alternative measures defined in this document	See figure 3, and section 4.4 of this document. Other than as defined within this document, requirements of this section shall be applied insofar as practicable.	Contingency alternatives where conventional (procedure 200) audit arrangements cannot be applied in full.	June 5, 2020
15.3.2	Opening Meeting Attendance	Modified as follows until further notice:	"Senior Management of the client organisation shall be requested to attend the Opening Meeting. Attendance should be limited to the bare minimum, ensuring that both management and worker interests are represented."	Reduction of non-essential attendees can reduce infection risks	April 24 2020
15.9.2a)	Closing Meeting Attendance	Modified as follows until further notice:	"Senior Management of the client organisation shall be requested to attend the Opening Meeting. Attendance should be limited to the bare minimum, ensuring that both management and worker interests are represented."	Reduction of non-essential attendees can reduce infection risks	April 24 2020

16	Surveillance Audits - General	Supplemented by alternative measures defined in this document	See figure 4, and section 4.4 of this document. Other than as defined within this document, requirements of this section shall be applied insofar as practicable.	Contingency alternatives where conventional (procedure 200) audit arrangements cannot be applied in full.	June 5, 2020
16.1.2	Semi-announced Visits	Modified as follows until further notice:	"Whenever possible, CB shall perform on-site audit visits 'semi-announced' in accordance with Procedure 200 requirements. However, if necessary due to COVID-19 restrictions, CB may perform 'announced' visits providing the reasons for this are documented within audit records." *(this applies to references to 'semi-announced visits' elsewhere in Procedure 200)*	Exceptional circumstances may demand proper infection risk planning.	April 24 2020
16.1.6b)	Surveillance Scheduling	Rescinded until further notice	Until further notice, this document overrides and replaces this clause with respect to the force majeure introduced by COVID-19.	Exceptional circumstances demand alternative approaches.	June 5, 2020
16.1.6 e)	Combined Visit Effort	Modified as follows until further notice:	"In the case of a 6 monthly surveillance program ONLY, the audit effort of two consecutive COVID-19 'certification timeline recovery audits' may be combined (In lieu of applying this requirement)."	Exceptional circumstances and reduced auditor availability (in some cases) demand a compressed certification program timeline.	April 24 2020
17	Recertification Audits - General	Supplemented by alternative measures defined in this document	See figure 5, and section 4.4 of this document. Other than as defined within this document, requirements of this section shall be applied insofar as practicable.	Contingency alternatives where conventional (procedure 200) audit arrangements cannot be applied in full.	June 5, 2020

18	Transfer Audits - General	Supplemented by alternative measures defined in this document	See figure 6, and section 4.4 of this document. Other than as defined within this document, requirements of this section shall be applied insofar as practicable.	Contingency alternatives where conventional (procedure 200) audit arrangements cannot be applied in full.	June 5, 2020
18.2.9	Timing of Transfer Audits	Modified as follows until further notice:	"All transfer activities under this Section 18.2 shall be completed within 26 weeks of the previous CB relinquishing involvement with the Client company (and certificate cancellation) otherwise a new Recertification Audit shall be conducted.	Exceptional circumstances and reduced auditor availability (in some cases), taking note of possible delays in audit planning and client's availability.	June 5, 2020
20.2.4	Audit Workday	Modified as follows until further notice:	"CB auditor(s) shall work the same length of shift (or management working day - not less than 6 hours), as the client."	It is possible that due to a lack of orders, lack of workers, national or local government mandates, clients may be working less than an 8-hour day.	April 24 2020
22.0	Non-conformity Classification	Applicable modification withdrawn – August 22, 2022.	<mark>Following the withdrawal of SAI's document, "Temporary Policy Exceptions to SA8000 Standard", the requirements of SAAS procedure 200 now apply in full</mark>	Applicable modification withdrawn – August 22, 2022.	<mark>Aug 22, 2022</mark>
Annex B Working Hours	Time-Bound Non-Conformity Conditions for SA8000 Clause 7.0 – Working Hours	Modified as follows until further notice:	IF* client circumstances MEET exception conditions required for 'Policy Exception' in SAI's document, "Temporary Policy Exceptions to SA8000 Standard" THEN: • CB shall not raise a new time-bound non-conformity • Timeline requirements and goals of any existing time-bound non-conformity shall be suspended in until SAI 'Policy Exceptions' are withdrawn, at which point, the	Under temporary exceptional circumstances, SAI's document "Temporary Policy Exceptions to SA8000 Standard" provides more detailed interpretation of COVID-19 exceptions (including legal and regulatory considerations)	June 5, 2020

| | | | timeline and goals shall be resumed from the point-of-suspension.
• CB shall raise a COVID-19 Non-conformity (see paragraph 4.1.9, above)

Note: Annex B and Annex C continue to apply in full when/if audited conditions fail to meet exception conditions required for 'Policy Exception' in SAI's document, "Temporary Policy Exceptions to SA8000 Standard". | | |
| Annex C

Living Wage | Time-Bound Non-Conformity Conditions for SA8000 Section 8.0 – Remuneration – "Living Wage" | Modified as follows until further notice: | As for Annex B, above | As for Annex B, above | June 5, 2020 |

SAAS Procedure 201A: 2015

Clause No.	Process	COVID-19 Revision	COVID-19 Deviation	Rationale	Date
1.22	Internal Audits	Modified as follows until further notice:	"Internal audits may be conducted REMOTELY by CBs full-time staff during the COVID-19 pandemic."	Reduction of non-essential travel can reduce infection risks.	June 5, 2020
Annex A, 7.2.11.1	Personnel involved in the certification activities	Modified as follows until further notice.	"The CB shall observe each of its auditors performing an SA8000 audit on-site at least once every 24 months. On site observations are not required during the COVID-19 pandemic and alternative means shall be employed to satisfy the requirements of	Reduction of non-essential travel can reduce infection risks.	April 24 2020 Modified 29th January 2021

			ISO17021-1:2015 Annex A and B. Witnessed audits by SAAS shall not satisfy this requirement. Such observations and reviews shall be performed by full-time Senior Lead Auditors, as identified in SAAS Procedure 201B."		
7.5.4.1	Internal Audits of Subcontractors	Modified as follows until further notice:	"Internal audits may be conducted REMOTELY by CBs full-time staff during the COVID-19 pandemic."	Reduction of non-essential travel can reduce infection risks.	June 5, 2020
Annex A, 7.5.4.4	Duplicate Audits	Modified as follows until further notice.	"Duplicate audits Shall now be continued either REMOTELY or on site by CBs full-time staff during the COVID-19 pandemic."	Reduction of non-essential travel can reduce infection risks.	June 5, 2020 Modified 29th January 2021
9.4.6.3	Special Audits	Modified as follows until further notice.	"Special Audits Shall be replaced by a deep dive detailed file review of an SA8000 Client over the last complete 3-year Certification Cycle by CBs full-time staff during the COVID-19 pandemic."	Reduction of non-essential travel can reduce infection risks.	29th January 2021

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Appendix 6: Certification Recovery (Now Withdrawn - Left blank intentionally in this revision -)

Obsolete &Withdrawn (August 22, 2022) – Refer to paragraph 4.1.14 above.

Appendix 7: Remote Enhanced Audits (Applicable for Surveillance, Recertification and Transfer Audits under exceptional Circumstances)

1 Introduction

To enable Surveillance, Re-certification, and Transfer Audits to continue during prolonged Pandemic Situations, SAAS has introduced the Remote Enhanced Audit (REA) process which, under exceptional circumstances (See definition and criteria in 3.4.10 above) and if approved by SAAS, may be adopted by a CB. 'Decision Tree' flowcharts 4.2c), 4.2d) and 4.2e) have been amended to reflect this eligibility.

2 REA Process Outline Requirements

2.1 A CB with certification clients wishing to use the SAAS REA Process SHALL follow the requirements as outlined below:

a) A REA may be used for surveillances (6 or 12 months schedule), recertification, or transfer audits ONLY, noting that a REA can NEVER be used for new certifications (stage 1 or stage 2).

b) There is basically one REA process (similar to a Standalone Audit) applicable for all audit types, with specific extras added for recertification and transfer audits.

2.2 The CB must first request permission to perform 'Remote Enhanced Audits' (REAs) by sending an email to the SAAS TD wherein they will outline where (via an Excel Spreadsheet) all REAs are anticipated to be performed throughout the current quarter (Initially for April-June 2021, and quarterly thereafter.) Details SHALL include:

- The CB Client Reference Number
- Client Name
- Type Of Audit (as described in Procedure 200, not the CB's unique name for it),
- Anticipated date of audit
- Country of audit
- Prior audit details (most recent certification cycle)
- Full justification for REA request (meeting "Exceptional Circumstances")
- Attachments and/or hyperlinks supporting "Exceptional Circumstances")

2.3 A highly reliable video-streaming connectivity is a prerequisite for all REA's. Certification clients unable to guarantee highly reliable video-streaming shall not be eligible for a REA, in which case CB shall issue a COVID-19 Suspension at the audit due date.

2.4 Without exception, all REA Audits SHALL be entered into the SAI Audit Tool. Failure to do so will result in the audit being declared as null and void and the client company being issued with a COVID-19 Suspension.

2.5 All REA's shall follow recordkeeping requirements of SAAS Procedure 200 Section 24.

3 CB Obligations to Certification Client and Interested Parties

3.1 Upon SAAS approval (above) CB SHALL immediately and clearly:

a) Update its public certification status notification for each client approved for REA process ("SA8000 Certification continues for this organisation at present without on-site audits, in accordance with SAI/SAAS special Remote Enhanced Audit (REA) requirements").

b) Notify affected certification clients of this status (which may, or may not be acceptable to buyers or other stakeholders). If not acceptable to client, then the SA8000 certificate shall be COVID-suspended at the audit due date.

c) Notify affected certification clients that SAAS may subject them to additional/increased scrutiny at a future date.

4 SAAS REA Process Outline Requirements

4.1 SAAS TD reviews CB quarterly REA requests and, subject to review/clarifications, approves request (redlining specific certifications, where the request is denied/unacceptable). If a REA request is not accepted by SAAS, then regular (prior) COVID protocols apply – i.e. if client not eligible for alternative audit, certificate shall be subject to COVID-19 suspension at the audit due date.

Note 1): This situation will be reviewed on or before the 31st May 2021 and, if deemed necessary, those CB's employing REA's will be invited to request REA's for the next quarter (July-September 2021), and so on.

Note 2) Each CB's REA list will be reviewed and updated quarterly – interim updates/additions are possible by special request, but in such cases, SAAS will bill a CB a minimum of $250 for each update.

Note 3) SAI/SAAS may withdraw/rescind this REA option at any time with three months' notice.

5 REA Focus Areas

5.1 A REA is based on the SAAS COVID 19 Instruction #12 "Stand Alone" methodology and focuses on:

   a) Management of Significant health and safety risks.
   b) Ongoing compliance with the SAI Performance Indicator Annex (see Annex 4 to this document for further guidance).
   c) Management of complaints and other worker* feedback.
   d) Operational Control of the Client's Social Performance Team.
   e) Worker* voice activities (See paragraph 4.1.15, above).

   * All personnel (i.e. not only paid hourly or per piece).

6 REA Planning and Implementation

6.1 CB identifies those clients within the next quarter that will require a REA having ensured that they comply with the eligibility requirements (3.4.10 above).

6.1.1 CB confirms that, to their best knowledge, an excellent and reliable internet connection exists at the clients premises. If not then that client is removed from the Excel List of proposed REAs.

6.2 The CB checks to ensure the existence of a current client certification risk assessment for each client and updates those where necessary.

6.3 The REA planning details are added to the REA Excel Spreadsheet.

Note: "The audit effort of a Surveillance or Recertification REA is (as a minimum*) the same as that required by the applicable audit effort table in SAAS Procedure 200. If less time is taken, then the CB shall maintain readily accessible audit records fully justifying the reason(s).

*A well-researched, well-planned and well-executed REA would typically take a little longer (0.5 days) than the audit effort prescribed in SAAS Procedure 200 (due to numerous small delays such as additional communication needed with the onsite client representative or CB Social Auditor).

6.4 To minimize potential bias risks, wherever possible, each REA shall be led by a CB Lead Auditor that has never been on site for this client before (even as a subcontractor for another CB).

6.5 The CB sends the Excel Worksheet of all clients where it wishes to perform REAs in the next quarter to the SAAS TD for Approval.

Note: Only SA8000 Remote Enhanced Audit Approval Form Worksheets, downloaded from the SAAS Document Library, will be accepted.

6.6 SAAS TD approves REAs or otherwise communicates decision to the CB, following which the assigned LA produces an audit for each REA based upon a Remote Standalone Methodology and sends to the client company as described in SAAS Procedure 200.

6.7 A REA commences with a deep dive research about the client. Using the internet and where possible feedback from NGO's and Unions and other stakeholder near to the client's premises.

6.8 Next, the last two previous reports for the current cycle are re-reviewed and anomalies documented for follow-up during the REA.

6.9 The areas of the SA8000 Standard that must be reviewed during a REA are as described below in Table 1. The CB should also consult Appendix 1 of this document.

6.10 The audit is performed in line with SAAS Procedure 200, this COVID Instruction #11 and the SAI Audit Tool.

Notes:

1) Should local circumstances unexpectedly change for the better before a scheduled REA is performed, the CB may change from performing a REA to a conventional audit. SAAS TD should be informed ASAP.

2) If Internet access is lost, another date can be agreed for the audit, or a COVID-19 Suspension issued.

3) Failure to use the SAI Audit Tool shall result in a COVID-19 Suspension for the CB Client.

SA8000 Clause	Audited During REA
1. Child Labour	Optional – depending on CB Client Risk Assessment.
2. Forced or Compulsory Labour	Mandatory
3. Health and Safety	Mandatory
4. Freedom of Association & Right to Collective Bargaining	Optional – depending on CB Client Risk Assessment.
5. Discrimination	Optional – depending on CB Client Risk Assessment.
6. Disciplinary Practices	Mandatory
7. Working Hours	Mandatory
8. Remuneration	Mandatory
9. Management System	Mandatory
9.1 Policies, Procedures and Records	Mandatory
9.2 Social Performance Team	Mandatory
9.3 Identification and Assessment of Risks	Mandatory
9.4 Monitoring	Mandatory
9.5 Internal Involvement and Communication	Mandatory
9.6 Complaint Management and Resolution	Mandatory
9.7 External Verification and Stakeholder Engagement.	Optional – depending on CB Client Risk Assessment.
9.8 Corrective and Preventive Actions	Mandatory
9.9 Training and Capacity Building	Mandatory
9.10 Management of Suppliers and Contractors	Optional – depending on CB Client Risk Assessment.
A) Personnel Interviews.	Mandatory
B) Photographic evidence of social distancing at Opening/Closing Meeting and throughout the REA.	Mandatory

Table 1 - REA Audit Activities

End of COVID-19 Instruction #12.