SSCI Benchmarking Assessment Report





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1. Application Information

1.1. Benchmark assessment team and date

Scheme Owner name(s)	BRCGS / BRC Trading
Scheme Owner name and address	BRCGS, second floor, 7 Harp Lane London EC 3R 6DP, GB
Scheme Owner name, email, contact number	BRCGS, enquiries@brcgs.com. Contact Fiona Humphries Fiona.humphries@brcgs.com, Phone +44.1737.769.680
Date of previous application (if applicable)	
Benchmark Leader name and contact details	Laurent Vonwiller, laurent.vonwiller@gl-gl.ch
SSCI Technical Manager name	Thomas van Haaren t.vanhaaren@theconsumergoodsforum.com
Observers name	Sairindri Christisabrina s.christisabrina@theconsumergoodsforum.com
Interpreter's name (if applicable)	-
Language (e.g., English or other)	English

1.2. Benchmark assessment scopes

	SSCI Scopes of Recognition	Scopes of Recognition Applied For
ΑI	Processing and Manufacturing	YES
ВІ	Primary Production	NO
CI	At-Sea Operations	NO



2. Executive Summary and Recommendations to the Steering Committee

The SSCI self-assessment was completed between October 2020 and February 2021 in a series of video conferences. This process ended in February with most criteria considered fully aligned with some additional verification needed during the office visit. In early 2021, ETI/BRCGS witness audits took place or were scheduled in sites in Romania, Italy, Greece, Turkey, and Great Britain. This provided the basis for two Office Visits in April, conducted as Remote Office Visits (ROV) due to the COVID-19 situation, focusing on the available BRCGS documents of the implementation of their requirements in audits. These ROVs provided an initial overview of the application of BRCGS guidelines and rules through the audit firms and their control by the Scheme Owner (SO). Both SSCI scheme management and social Criteria were thoroughly discussed.

However, at this time, only a few reports were available and the sampling of countries and audit firms involved was insufficient. So, as more audits were expected to come in the following months in the above-mentioned countries, it was decided to conduct a third ROV in July. This additional ROV allowed SSCI to gain sufficient insights on situations and risks in several countries, on different audit methodologies, and the performance of the audit firms. In both cases, scheme management and social criteria were discussed. The Benchmark Leader (BL) asked that one of these audits needed to take place in a facility with a high-risk profile.

The discussion of audits results, reports and audit documents in the third ROV convinced the BL that BRCGS and its policies, procedures, and performance are strong yet flexible enough to guarantee a fair and well-founded assessment of a site, adequate in detecting non-conformities (NC), and issuing certificates only when conformity with the standard has been established.

It appeared also that BRCGS is controlling the competencies and performances of the soon to be accredited audit firms. An Accreditation Project is currently being led by the United Kingdom Accreditation Service to accredit the participating audit bodies to ISO 17021. This happens in sites with quite different situations and risk profiles. We expect more audits to be conducted in high risks countries and the BL is confident that BRCGS can control for all situations and that audit firms apply the methodology with a high level of professionalism. This can be examined and assessed in future monitoring of continued alignment assessment.

2.1. Result of the self-assessment review and the office visits

The results of the self-assessment were discussed in a series of video conference calls between October 2020 and February 2021. Relevant documents on both scheme management and social criteria were submitted by the scheme owner and included in the evaluation. In the first round, though most criteria were assessed as fully aligned, some



points were selected to be discussed more in-depth. Additional documents or changes in existing documents were required, submitted, and discussed. In February 2021, the self-assessment process could be concluded with most criteria considered fully aligned with further verification needed during the office visit.

At the start of 2021, the SO informed SSCI that witness audits scheduled in Romania, Italy and Great Britain were to be carried out by three certification bodies. This is why, two ROVs were conducted on April 23th & 27th 2021 based on the available experiences and documents, with the following results:

Scheme Owner Governance, Organisational chart, scope, objectives, integrity program: BRCGS (registered at the UK's Companies House under "BRC Trading") is a thoroughly structured company where the responsibilities of each person are defined. At the same time, "multi-competence teams" work together to cover interfaces such as those encountered in the standard development. Position & responsibilities as shown in organigrams were discussed. Competencies appeared to be clearly defined and the decision process clear.

The process development is being carried out by the contact person and other colleagues under supervision from the Technical Advisory Committee (TAC), made up of external parties who are Ethical Trade & Responsible Sourcing (ETRS) specialists, the BRCGS Senior Leadership Team SLT, who then reports to the three International Advisory Bodies (IAB) for Europe, the Americas and in Asia-Pacific. The IABs are made up of senior representatives from the biggest retailers in the world including Walmart, Tesco, Ahold- Delhaize, Waitrose, and others.

Appeal and complaints procedures

These are visible access through the homepage of the SO.

▶ The BRCGS project of an Ethical Trade Standard

It was started at BRCGS several years ago. Stakeholders of various types (such as producers, retailers, audit firms, etc.) were involved in the standard development, then developed step by step up to the application for SSCI benchmarking submitted in May 2020. The project continued then with the implementation phase, as the first audits started at the beginning of 2021. Stakeholders of various types (such as producers, retailers, audit firms, etc.) were involved in the standard development.

Relations with audit firms and accreditation bodies (AB):

The agreements with various audit firms have been checked at random. Procedures, guidance to audit firms and Coordination with UKAS (in the form of a pilot accreditation project on Ethical Trade) appear solid. While a British audit firm is already accredited with UKAS, but not yet for social accountability, others are accredited with the national ABs (Italy) including social accountability.



Audit Outcome, certification:

Audit reports, auditing methodology, and audit witnessing in this initial phase were evaluated and discussed. The submitted audit reports were well-structured and complete. The checklist template is established by BRCGS and covers the whole range of issues required by the SSCI criteria.

Sensitive points such as scope, site definition, sampling of worker's interviews, anonymity, reporting, review of reports before certification, knowledge of ILO conventions and local labour laws (etc.) are dealt with and regulated. From the discussed reports, it appeared that the three audit firms fully comprehend tools and procedures. The competence and experience of auditors were well documented. BRCGS is reviewing the performance of the audit firms in this important initial phase

Recommendation: The Benchmark Leader suggests that the standard review not only legal requirements from the central governments but also at local Collective Bargaining Agreements (CBAs) which in many countries give the local legal base wage for conformity in specific parts of the countries. For instance, minimal salaries for various worker categories, etc. All points are based on national laws but some go further than the law and are mandatory in the province, some address issues that are not considered by the law. This would ensure continuing alignment with the criteria - SSCI 9.03 (Social): The standard shall require that no employment arrangements are used in order to avoid obligations to workers under applicable national labour and social security laws and SSCI 9.04 (Social): The standard shall require that compensation for standard working hours meets or exceeds applicable legal minimum wages, industry standards or collective bargaining agreements (where applicable).

Step one / step two audits

The auditing process starts with initial auditing of a site at "stage one" followed by "stage two" (in line with the requirements of ISO 17021 for "initial certification audits") with a clear definition of the time frame between the two stages. In stage one audits, "areas of concern" are identified - it is a readiness audit to establish that the site has addressed the entire scope of the ETRS Standard and has a management system in place.

Stage one may be conducted on-site or remotely and is decided by the audit firm based on the information provided by the site on the application form, mandatory self-assessment questionnaire and the requested management system documentation. At the closing meeting, the auditor outlines the areas of concern they have found, allowing the site to consider and address them before stage two.

The site then has up to 6 months to complete its stage two audit which is on-site, unannounced and includes worker interviews. If the auditor finds major or minor non-conformities, the site has 90 days to close them. However, if the auditor finds a critical non-conformity then the audit will be uncertificated and the site would have to go back to the beginning of the Initial Certification Audit (e.g. Stage 1). If the site closes all



major or minor non-conformities within the 90 days' deadline, then the audit firm may award certification if the Independent Certification Reviewer is happy with the evidence provided by the site that the issues are closed. The site would then enter an audit program of surveillance (in years 1 and 2) which monitors conformity with the standard and then recertification (in year 3) to reconfirm certification.

General impressions after ROV one and two

After the first ROV, requirements on scheme management and social appeared as aligned in the few audits conducted at this initial phase.

Reports show a systematic approach, but a remark was that the content looks sometimes formal. Questions were raised about the weight on the quality of the HR-Management System for Human Resources. For instance quality and efficiency of training or procedures to avoid discrimination (etc). At stage 2, very important indicators at quality and efficiency level can be abstracted from interviews with

management and workers. Benchmark Leader's Note: This is not a shortcoming but a

recommendation.

▶ Follow up in ROV three

The Technical Manager and the BL were aware of the fact that BRCGS might be confronted with possibly difficult situations later - in <u>high-risk sites</u>, so after ROV 2 at the end of April 2021, it was decided to require a broader sampling, looking also at audits that were scheduled or planned at this stage, performed by various audit firms - to conclude on the calibration between them. In addition, it was decided to include one country outside of Europe – Turkey.

Representative sampling

During ROV three, more audits had been performed by three audit firms in five countries, so enough documents could be submitted and looked at to allow a more comprehensive view of the whole ETI-BRCGS system. All reports and documents seen and discussed provided a good sense of the situation of all audited sites, with important areas of concern identified in some cases. All SSCI requirements on scheme management and social criteria appeared to be fulfilled.

Calibration

One important result is the impression that all audits performed by different audit firms in different countries were following the same procedures, so a difference in audit results (for instance "areas of concern" detected at "Stage One") did correspond to the specific situation of each site management. Thus, the impression on audit calibration is good, which is an important factor when a scheme owner and their audit firms are working around the world.

▶ Certification and surveillance system

The examination of audit report details showed consistency in the certification and surveillance system (see for instance the description of "Step one" and "Step two" audits.) Also, the review of audit reports and certification decisions appear to be conducted systematically and professionally.



Directory

All reports, collected documents and important information such as on competence and experience of auditors are stored in a directory. Sometimes the submitted documents and those in the directory were not fully identical, but this has been identified and fixed by BRCGS. This point will be looked at in the continued alignment visits to make sure that only definitive versions are stored.

High-risk Sites

As already said, all audits were performed on the European continent or at the edge of Europe (North-eastern Turkey), however, the sampling contains textile factories as well as wine, dairy, vegetable and hazelnuts processing units in various zones. As written above, the continued alignment visits will steadily focus on new countries, new audit firms, and new risks detected.

2.2. Result of the public consultation

After discussion of the results of the self-assessment (in a series of video conference calls between October 2020 and February 2021) and three ROV (April 23th, April 27th and July 8th), the public consultation ran from August 18th to September 15th. No submissions were received.

2.3. Recommendation to the SSCI Steering Committee

During the office visit and the preliminary assessment, the SSCI Benchmark Leaders assessed that BRCGS had the appropriate systems, policies, procedures and practical experience in place to manage the certification programme.

Taking into account that all issued findings were properly addressed, the overall conclusion of the Benchmark leader, shared by the SSCI team, is that CPO operates an effective Certification Programme in conformity with the SSCI requirements v. 1.0. Some recommendations were made and the developments of the standard will be monitored yearly.

We, therefore, recommend full recognition of the BRCGS standard to the SSCI Coalition.



3. Results of Assessment and Office Visit

3.1. Time and location details

	Location	People present (e.g. SSCI, consultant, Scheme Owner. Names and roles)	Date and time
Self-assessment	Discussed in	SSCI-TM, BL, SSCI Officer	2020/11/27
desktop review	two meetings after an exchange of documents (Oct. 20 to March 21).	Fiona Humphrey (Technical Manager Ethical Trade & Responsible Sourcing)) Karin Betts (Head of Compliance), Angela O'Donovan (Head of Standards))	2021/02/17
Feedback calls	Many between Oct. 2020 and April 2021	SSCI-TM, BL, SSCI Officer Fiona Humphries, Karen Betts, Angela O'Donovan	
Office visits	ROV one	SSCI-TM, BL, SSCI Officer	2021/04/23
(Remote)	ROV two ROV three	Fiona Humphries Karen Betts Angela O'Donovan	2021/04/27 2021/07/07

3.2. Overview

- ▶ The Benchmarking process starting in September 2020 went along the defined SSCI procedures and basically according to the working plan established at the beginning.
- ▶ Before the application for Benchmarking, BRCGS has established a well-balanced and documented system containing requirements and guidelines for auditing and certification.
- Work progress depended on the conducting of audits in several countries. In such situations, it is difficult to make an exact Working Plan in advance. A representative number of audits in different countries and performed by different CBs was reached in mid-2021.
- In the course of the two Desktop Reviews and three ROVs, audit reports and relevant documents could be discussed in detail, so a good overview of the Standard and its mechanisms was granted.
- After a thorough review, the BL, as well as the TM and the assisting officer, see BRCGS ETRS standard as aligned with all SSCI criteria.



3.3. General Compliance – Strengths & Weaknesses

- ▶ The Standard as reviewed according to SSCI procedures is assessed as fully aligned.
- ▶ The Standard is new and relatively few audits have been carried out in only four countries.
- ▶ It is due to be audited around the world since BRCGS has already clients in all continents. There are good prospects for this, as procedures and tools appear to be well balanced and robust, so the Standard should be fit to assess compliance accurately in many different situations and sites in various countries and regions.
- ▶ The SO appears to control the audit firms, their accreditation, their procedures, their competence, the use of the tools etc. Calibration should not be an issue.
- ▶ Relevant documents are stored in a directory.
- ▶ Relations with audit firms and ABs appear to be solid and the standard appears to be applicable in countries with many different conditions.
- ▶ With further audits in new countries and different regions of the world, the accuracy of mechanisms and tools in new situations should be reviewed and analysed.
- ▶ All this makes the standard strong and gives a good basis for credibility, which is important in social auditing
- ▶ The level is quite high, which may make the Standard difficult to implement in small units (smallholders, small or middle-sized farms, cooperatives without central Quality Systems etc.)
- ▶ Remarks have been made on the importance of local collective bargaining agreements, on the importance of efficiency and quality in training and procedures, on the consistency between actual documents and directory at all stages of the certification process, but these remarks do not question the alignment of the BRCGS ETI Standard with the SSCI criteria.

3.4. Changes made to the Scheme following the benchmarking assessment

Different documents were adapted and improved during the Desktop review. But no significant scheme change was necessary.





3.5. List of findings – Self-assessment and office visit

SSCI Benchmarking Requirements Part	Criterion Number, Chapter	Non-conformity	Partly / no	Action from Scheme Owner	Recommendation from Benchmark leader	Decision from SSCI Manager
(e.g. Part II –)	(e.g. B1.01)					
Part III -Social	2.02	Documents provided but criteria not aligned.	Partly	Documents resubmitted.	Fully aligned now	Agree
Part III -Social	3.12	More accent on remediation with compensation: They will consult internally and revert	Partly	Documents reviewed and resubmitted.	Fully aligned now	Agree
Part III - Social	3.05	Concerns of clarity of language used	Partly	We have decided to retain this clause because bonded labour is where an employer requires a bond from an individual in order to secure work. That bond can be anything from an employment deposit or withholding identity papers or personal possessions. So we have included further explanation in the Justification for Assessment.	Fully aligned now	Agree
Part III – Social	7.02	References missing	Partly	We have provided more explanation as to why we	Fully aligned now	Agree



SSCI Benchmarking Requirements Part	Criterion Number, Chapter	Non-conformity	Partly / no	Action from Scheme Owner	Recommendation from Benchmark leader	Decision from SSCI Manager
				believe the requirements align, referring specifically to the scope of the standard.		
Part III – Social	10.01	Requirement to include working hours over 60 per week in the audit report in cases where national legislations admits it: Will be added	Partly	Further explanation has been provided regarding how ETRS Standard auditors are trained so they must record exceptions in the audit report. Therefore, BRCGS does not believe it is necessary to state this in the requirement.	Fully aligned now	Agreed



4. Results of the Public Stakeholder Consultation

The public consultation ran from August 18th to September 15th.

No submissions were received.





4.1. List of findings – public stakeholder consultation

Criterion Number, Chapter	List of issues raised	Answer from Scheme Owner	Recommendation from Benchmark leader	Decision from SSCI Manager





ANNEX I – Office Visit Checklist

12/04/2021 BRCGS Office Assessment

(Note: Due to COVID-19 situation, all Office Visits (OV) had to be conducted as "Remote Office Visit" (ROV)

(Kindly note that this section shall not be included in any public consultation as part of the SSCI Benchmarking Process)

FIUCESS					
Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
e.g. A1.01 Legal Entity	The Scheme Owner shall be an organisation that is a legal entity, which could be held legally responsible for the schemes' operations.	[It can normally be found in the Explanatory Note section]	[Please state all records reviewed during the office visit.] [Type and name(s) of document(s) reviewed] [Background information/comme nts on document]	[Please state your observations and clearly specify if the scheme meets the SSCI criteria fully, partly, or not at all.]	☐ Fully ☐ Partly ☐ Not aligned
			[Findings from staff interviews]		
A1.01 Legal Entity		 an official document showing registration with legal authorities current legal status of an organisation. (e.g. 	Companies House registration information can be found at https://beta.companiesho	With this link, the SSCI requirement is documented: It shows confirmation by the British gov. that BRC Trading Ltd. is registered	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		incorporation papers, statutes, business licenses and registration with tax authorities.)	use.gov.uk/company/042 81617	as a private limited comp. since 2001-09-04, therefore legally responsible	
A1.02 Independent management of scheme owners in relation to audit firms			Document «BRCGS004": "Requirements for Certification Bodies Offering Certification against the Criteria of BRCGS", Section 4 Contractual Obligations, clause 4.1 (p.8	The document referred to shows that BRC Trading Ltd. is not performing audits itself but it is a Standard Owner (SO) delegating the audit task to Audit firms accredited according to ISO 17065 & having a contractual arrangement with BRC Trading Ltd.	☑ Fully☐ Partly☐ Not aligned
A1.03 Adequate arrangements on liabilities		 system for business risk assessment, insurance policy, clauses in accreditation body and/or audit firms contracts addressing liability. Insurance OR Evidence of reserves OR Contract language; Indication of why arrangements are adequate for context; Audited financial statements 	Document «BRCGS004»: "Requirements for Certification Bodies Offering Certification against the Criteria of BRCGS", Section 4 Contractual Obligations, clause 4.9 Liability insurance (p. 12)	The document referred to shows that BRC Trading Ltd. Has an insurance incorporating employer's liability, public & product liability as well as professional indemnity	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
A1.04 Governance policies and procedures		 Statutes by-laws, organizational chart; internal procedures; job descriptions; conflict of interest statements; quality assurance manuals 	Part IV of the Document "Global Standard and Responsible Sourcing, Issue 2, October 2020 (see pages 60-62), in the following related to as "Global Standard"	Some questions related to the "Advisory boards members" (elected or appointed? By whom? etc.), to TOR, to bodies such as TAC, SLT or IAB were clarified in the Office Visits (OV)	⊠ Fully □ Partly □ Not aligned
A1.05 Appeals and complaints resolution procedure		 website or platform with appeals and complaints resolution procedure publicly accessible of SO, CBs and ABs contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm accreditation manual, certification requirements/methodologies that cover all of the elements review of incidents log (complaints or appeals) including resulting actions 	Document "BRCGS005" Compliant Investigation Process, Section 1	Some questions of the "feedback processes" (at the Desktop Review stage) were clarified in the OVs.	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
A2.01 A clearly-defined scope for auditing		 explicit scope definition in certification methodology/requirements, standards, objectives. contracts with accreditation bodies, audit firms and/or certified operations 	Global Standard	The definition of scope including secondary sites and service providers is clear	⊠ Fully □ Partly □ Not aligned
A3.01 Approval, suspension, withdrawal system		 contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm; accreditation manual; certification requirements/methodologies; audit reports, guidance documents specifying the conditions under which accreditation may be suspended or withdrawn. 	Document «BRCGS004»	Accurate description was seen in the desktop review.	⊠ Fully □ Partly □ Not aligned
A3.02 Procedures for monitoring of performance of audit firms		 documented procedures of Scheme Owner contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm; accreditation manual; 	Document «BRCGS004» Document «BRCGS009»	Questions on the review of complaints and risk relations at the desktop review stage were answered during OV.	⊠ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		 certification requirements/methodologies that cover all of the elements review of assessments including risk factors considered review of monitoring program and outcomes 			
A4.01 Policy on the use of symbols, logos, claims		 legal registration of logos and seals with applicable agents. claims policy covers clear scope for on and off product use, claims and statements including policy for misuse. contractual relationships specify explicitly adherence to claims policy. records of applications for use of claims, records of complaints or violations. publicly available Logo Use and Claim document which is explicitly referenced informal arrangement with certified entity. direct logo agreements, licensing or membership agreements with the Scheme Owner or its commercial partner or indirect contracts/agreements through the audit firm. 	Document «Brand Guidelines for Certificated Sites»	Question on the relation between logo and scope desktop review stage were answered during OV	□ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
A4.02 Case of certification schemes on the policy on the use of symbols, logos and claims		 direct logo agreements, licensing or membership agreements with the Scheme Owner or a delegated authority. indirect contracts/agreements through the audit firm. 	Document «Brand Guidelines for Certificated Sites»	A reference document said to have been submitted was not found at the Desktop Review stage. Resubmitted & Reviewed	☑ Fully ☐ Partly ☐ Not aligned
A5.01 Document control procedure		The document control procedure should include how X documents are tracked, managed and stored including keeping a record of the various versions created.	Document «QM004»	Document control procedure was fully aligned already at the desktop review stage	☑ Fully ☐ Partly ☐ Not aligned
A5.02 Standard development procedure		Procedures defining the process of standard development and revision are easily available for the public, such as online, in appropriate languages.	«Global Standard»	Questions in public availability of procedures were raised at the Desktop stage and answered in the frame of OVs	☑ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
A5.03 Stakeholder participation in the standard development		 internal procedure/quality handbook for standard development revision and approval processes that describe how balance is achieved, such as through stakeholder mapping, announcements and invitation. 	«Global Standard»	A balanced participation of stakeholders and technical experts takes place	⊠ Fully □ Partly □ Not aligned
A5.04 Standard revision procedure		 internal procedure/quality handbook defining public consultation process. Terms of Reference Review participation, communication and mechanisms/tools of past or current consultation. some sort of system (e.g. excel) for organizing, categorizing and responding to comments. review past consultation system, comments and responses taken. 	«Global Standard»	Questions on stakeholders consultation at Desktop Review stage were answered in the frame of OVs. The Standard went through a 60-day consultation period between December 2018 and February 2019 which was published on the BRCGS website. Stakeholders submitted comments on the Standard, its audit protocol and their feedback was then reviewed by the Working Group who approved the resulting changes.	⊠ Fully □ Partly □ Not aligned
A5.05 Timeframe of public consultation		 internal procedure/quality handbook defining public comment period including process for variations for non- substantive changes Terms of reference of the draft standard 	«Global Standard»	Questions on stakeholders consultation at Desktop Review stage were answered in the frame of the OVs	⊠ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		Review previous comments and dates for submission on draft standards.			
A5.06 Frequency of the standard review and revision		 internal procedure, quality handbook, public work program. monitoring and evaluation system. public comments and consideration of reports for standard revisions. 	«Global Standard»	Questions on the concept of "relevance" at desktop review stage were answered in the Frame of the OVs. In the Standard, BRCGS has already committed to conduct a review every three years. Please see the comment in the previous box about the release of Issue 2 in October 2020.	☑ Fully ☐ Partly ☐ Not aligned
A5.07 Standard guidance document		In cases where there is a detailed normative standard, additional guidance may not be necessary. Where interpretation of the standard is required: • additional normative or nonnormative guidance	«Global Standard»	A document submitted in correction mode at desktop review stage was later submitted in the definitive version	☑ Fully ☐ Partly ☐ Not aligned
B1.01 Maintenance Requirement against ISO/IEC 17021-1 or 17065		 contracts; memorandums of understanding and/or memorandum of agreements between Scheme and audit firms that specify audit firms be accredited with the current version of ISO 17021 or 17065; accreditation manual / certification requirements/methodologies; 	«Global Standard» Document «BRCGS004»	Provisions of accreditation against ISO/IEC 17021 are clearly defined in BRCGS documents	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		 audit firms' certificate of accreditation. certificate of accreditation from a recognized accreditation body Listing of audit firm on national accreditation website for the Scheme's standard 			
B1.02 Case for an audit firm not yet accredited to ISO/IEC 17021 or ISO/IEC 17065 on scheme transition period		 Contracts memorandums of understanding and/or memorandum of agreements between Scheme and audit firms that specify audit firms be accredited with the current version of ISO 17021 or 17065; Evidence (emails, internal documentation) of audit firm's application and schedule for accreditation including milestones: application, desk-based review, witness audit and projected accreditation date accreditation manual or certification requirements/methodologies; audit firms' certificate of accreditation 	Document «BRCGS 004»	The transition period for accreditation was assessed as clear already in the Desktop Review	□ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B1.03 Requirement on a contractual arrangement in compliant with ISO/IEC 17011		 contracts memorandums of understanding and/or memorandum of agreements between scheme and accreditation bodies or audit firms that specify accreditation bodies to be compliant with ISO/IEC 17011 accreditation bodies' certificate of accreditation (on website). accreditation manual or certification requirements/methodologies; 		Contractual arrangements were assessed to be clear at desktop review already	⊠ Fully □ Partly □ Not aligned
B1.04 Requirements for audit firms to be verified by the accreditation body		 requirements are specified in certification requirements/ methodologies or a separate audit firm and/or accreditation manual. reference to requirements in contracts or formal agreements with audit firms or accreditation bodies. 	Document «BRCGS004»	Already at desktop stage review requirements for audits forms to be verified by Accreditation Bodies were seen as clear.	⊠ Fully ☐ Partly ☐ Not aligned
B1.05 Competence of accreditation bodies' personnel		agreement/contract between the Scheme Owner and audit firm to use national accreditation bodies which are IAF members and signatories to the Multilateral Recognition Arrangement for ISO 17065.	Document «BRCGS004»	Already at desktop stage review, it was seen that BRCGS works with reliable and authorized Accreditation Bodies.	⊠ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		 contract/agreement between the Scheme Owner and the accreditation body if applicable, certification/accreditation manuals. review of CVs of accreditation body staff. training records 			
B1.06 Competence of assessment staff within accreditation body		 agreement/contract between the Scheme Owner and audit firms to use national accreditation bodies which are IAF members and signatories to the Multilateral Recognition Arrangement for ISO 17065. contract/agreement between the Scheme Owner and the accreditation body if applicable, certification/accreditation manuals. review of CVs of accreditation body staff. training records 	Document «BRCGS004»	The competence of UKAS and other national Accreditation Bodies was established. BRCGS works with UKAS in the frame of a pilot project which has been discussed already I the desktop review phase	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B1.07 On-site Audit within accreditation process		 accreditation/certification requirements/methodologies, accreditation body office audit reports, audit schedule. specified in accreditation body or audit firm contracts/agreements. agreement/contract between the Scheme Owner and audit firm to use national accreditation bodies which are IAF members and signatories to the Multilateral Recognition Arrangement for ISO 17065. 	Document «BRCGS004»	On-site Audits as part of the accreditation process is defined in BRCGS documents	⊠ Fully □ Partly □ Not aligned
B1.08 Withdrawal / suspension agreement between scheme owner and accreditation body		 contracts, memorandums of understanding and/or memorandum of agreements between scheme and audit firms accreditation manual or certification requirements/methodologies; valid accreditation certificate 	Document «BRCGS004»	Questions related with agreements with Accreditation Bodies at desktop review stage were answered in the frame of OVs.	⊠ Fully □ Partly □ Not aligned
B1.09 Requirement in a case of multiple accreditation body		 contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firms accreditation manual, certification requirements/methodologies. 	Document «BRCGS004»	Questions related with the use of multiple Accreditation Bodies were raised at desktop review stage and answered in the frame of OVs.	⊠ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		guidance documents, checklists and templatesaudit reports.			
B2.01 Legal status of audit firms		 an official document showing registration with legal authorities; and current legal status of organization; incorporation papers, statutes; business licenses and; registration with tax authorities. 	Document «BRCGS0035»	A questions related to legal status of audit firms wat raised at desktop review stage and answered in the frame of the OVs.	⊠ Fully □ Partly □ Not aligned
B2.02 Contractual relationship with audit firms		 contracts legal agreements accreditation and certification manual requirements. 	Document «BRCGS004» Document «BRCGS035»	The conditions for contractual relationship with audit firms is clearly defined in BRCGS documents	⊠ Fully □ Partly □ Not aligned
B2.03 Notification system of audit activities and withdrawal/suspen sion cases		 contract/agreement between the Scheme Owner and the audit firm; certification requirements/methodologies; review of correspondence notifications review of audit activities log including status of clients (e.g. active, withdrawn, 	Document «BRCGS004» Document «BRCGS033»	At Desktop Review stage, questions on the collection of data on the audit firms (which happens in the frame of the directory) were raised and answered in the frame of the OVs.	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		suspended) cross checked with any public lists			
B2.04 Quality system of audit firm		 contract/agreement between the Scheme Owner and the audit firm; certification requirements/methodologies; audit firm quality management system documentation including manuals 	Document «BRCGS004»	Already at Desktop review stage, it appeared that BRCH'Gs is controlling the QS of audit firms and makes sure that it is effective and fully implemented.	☑ Fully ☐ Partly ☐ Not aligned
B3.01 Definition of auditor qualification and competence		 contract/agreement between the Scheme Owner and the audit firms, accreditation/certification requirements/methodologies specifying criteria for each function, auditor assessment and training records, auditor CVs. 	«Global Standard Document «Auditor competency guideline ET106	Requirements on training, qualification, education & experience, management of exceptions, particular circumstances have been found already at Desktop Review stage. There exists also an ETI auditor guideline defining types of auditors, competences needed, desired personal behaviour, experiences and skills, auditor registration with BRCGS, training etc. This was already clear at Desktop Review stage.	☑ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B3.02 Auditor's years of experience		 contract/agreement between the Scheme Owner and the audit firms; accreditation/certification requirements/methodologies specifying criteria for each function; lead auditor assessment and training records; lead auditor CVs. 	«Global Standard Document «Auditor competency guideline ET106	Already at Desktop Review stage, it was seen that the required Auditors experience is properly described in BRCGS documents.	☑ Fully ☐ Partly ☐ Not aligned
B3.03 Requirement on transition period - in a case an audit firm is not yet meeting B3.02 criterion		 contracts; memorandums of understanding and/or memorandum of agreements between Scheme owners and audit firms accreditation manual or certification requirements/methodologies 	Document «BRCGS004»	Already at Desktop Review stage, it was seen that a transition period is defined in the event that an audit firm does not yet meet requirements of the Standard owner	☑ Fully ☐ Partly ☐ Not aligned
B3.04 Competence assessment of auditors		 contract/agreement between the Scheme Owner and the audit firms; accreditation/certification requirements/ methodologies specifying requirement; guidance outlining the system and criteria for competencies, training; auditor assessment and training records; auditor CVs; accreditation body reports. 	«Global Standard» Document «Auditor competency guideline ET106»	At Desktop Review stage, questions were raised about "knowledge of the relevant sector", "knowledge of site's specific H+S issues" and "knowledge related to the production process or associated services". They were answered in the frame of the OVs.	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B3.05 Auditor training		 Scheme Owner procedure for auditor approval; contract/agreement between the Scheme Owner and the audit firm; accreditation/certification requirements/methodologies specifying criteria for each function; auditor assessment and training records 	Document «Auditor competency guideline ET106	Already at Desktop Review stage, it was seen that requirements of BRCGS for auditor's approval are accurate.	⊠ Fully □ Partly □ Not aligned
B3.06 System to maintain best practice knowledge		 contract/agreement between the Scheme Owner and the audit firm; accreditation/certification requirements/methodologies specifying criteria for continuous professional development, auditor training, assessment and training records that cover sector specific activities 	Document «Auditor competency guideline ET106	At Desktop Review stage, a question was raised about ""Industry Best Practice". It was answered in the frame of OVs.	☐ Fully ☐ Partly ☐ Not aligned
B3.07 Auditor training on specific social compliance risks		 contract/agreement between the Scheme Owner and the audit firm, accreditation/certification requirements/methodologies specifying criteria risk assessment including performance review records auditor training, assessment and training records. 	Document «Auditor competency guideline ET106 Document «BRCGS004»	At Desktop Review stage, a question on the submitted document was raised. It was answered in the frame of OVs.	□ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B3.08 Sub- contracting requirement		 contract/agreement between the Scheme Owner and the audit firm, assurance provider requirements/methodologies specifying criteria for continuous professional development, auditor training, assessment and training records. 	Document «Auditor competency guideline ET106	Already at Desktop Review stage, it appeared that Requirements in case of subcontracted audits are clear	☑ Fully ☐ Partly ☐ Not aligned
B3.09 Auditor Calibration		 contract/agreement between the Scheme Owner and the audit firm accreditation/certification requirements/methodologies Audit firm quality system manual auditor assessment and training records. 	Document «Auditor competency guideline ET106	At Desktop Review stage, questions on calibration and continuity were raised. They were answered in the frame of OVs.	☐ Fully☐ Partly☐ Not aligned
B4.01 Compliance assessment methodology		 assurance requirements/methodologies, contracts and agreements with the audit firm, guidance interpretation documents, Scheme Owner internal assessment system with assessment reports, training and calibration records. 	BRCGS Global Standard, part III, Audit protocols	Already at Desktop review stage, it appeared that processes like the selection of CBs, application, contractual arrangements, setting fees, audit programme, scope, multi-site audits, audit objectives, team selection, duration, self-assessment, audit completion process, selection of workers, nonconformities, NC, audit outcome, final report, certification, recertification are clearly defined.	☑ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B4.02 Audit Scope on on-site assessment		 contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm, accreditation manual, certification requirements/methodologies, guidance documents specifying procedures for determining site visits including sampling, review audit reports. 	BRCGS Global Standard St, part III, Audit protocols	Already at Desktop Review stage, it appeared that accurate provisions are taken to guarantee clear scope (including main site, off-site locations, accommodation facilities etc.).	☑ Fully ☐ Partly ☐ Not aligned
B4.03 Selection procedure on pertinent audit locations		 contract, memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm, accreditation manual; certification requirements/methodologies, guidance documents specifying procedures for determining site visits including sampling, review audit plans and reports 	BRCGS Global Standard, part III, Audit protocols	Already at Desktop Review stage, it appeared that BRCGS requires clear procedures for the selection of pertinent audit locations.	☐ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B4.04 Audit frequency		 accreditation manual/certification requirements/methodologies. Issued certificates with validity (online database or on request) accreditation manual/certification requirements/methodologies Scheme Owner internal risk assessment system with assessment reports. Review audit plans based on documented methodology, audit reports, schedules and issued certificates. 		Already at Desktop Review stage, it appeared that BRCGS provisions on Audit frequency are accurate	☑ Fully ☐ Partly ☐ Not aligned
B4.05 Additional surveillance audits		 accreditation manual/certification requirements/methodologies. Audit reports and schedules Review complaints log 	Document "BTCGS004"	Already at Desktop Review stage, it appeared that BRCGS document define measures to be taken in the case of incidents that may indicate a failure of the site's system, taking the necessary steps such as assessment of incident, initiating partial or total re-audits etc.	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B4.06 Audit period and variations		 accreditation manual/certification requirements/methodologies. Audit reports and schedules review of exemptions 	Global Standard, Issue 2, issue 2	At the Desktop Review stage, a question was raised about the numbering of the paragraph related to this topic. The numbering was corrected accordingly. A clause mentions that at least two-thirds of the peak workforce is necessary on the site at audit time.	☑ Fully ☐ Partly ☐ Not aligned
B4.07 Audit duration and its rationale		 accreditation manual/certification requirements/methodologies. Audit Plans with applied methodology and rationale audit reports and schedules online methodology 	Document ET 110 Audit Duration calculator	At Desktop Review stage, it was seen that Audit duration is based on the size of the workforce and site, its location, the demographics of the workforce and languages spoken. The calculator provides certification bodies with tables that advise on the number of workers to be interviewed In addition, there is a section in the Audit Protocol that addresses worker interviews and the factors that need to be considered when sampling workers.	☑ Fully☐ Partly☐ Not aligned
B4.08 Procedure and guidance for multi-site auditing		 memorandum of understanding or enforceable agreement between the Scheme Owner and the audit firm; Certification requirements/methodologies specifying multi-site procedures; guidance specifying certification procedures for multi-site certifications, in 	Global Standard, Issue 2, part III	Procedures and guidance for multisite auditing are provided as it appeared already in the Desktop Review.	☑ Fully☐ Partly☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		order to support consistency between audit firms; • audit reports.			
B4.09 Worker and management interview		 accreditation manual/certification requirements/methodologies. Review Audit Plans with applied methodology and rationale Audit reports 	Global Standard, Issue 2, part III	Already in Desktop Review it appeared that BRCGS has clear procedures for site tour, document review, worker's interviews etc. In the OV, review of reports showed accuracy and compliance in the management of workers interviews and in the related reporting.	□ Fully □ Partly □ Not aligned
B4.10 Sampling methodology of worker interview		 accreditation manual/certification requirements/methodologies. Review Audit Plans with applied methodology and rationale Audit reports 	Global Standard, Issue 2, part III	Already in Desktop Review it also appeared that BRCGS has a clear sampling methodology for the worker's interviews etc.	☑ Fully ☐ Partly ☐ Not aligned
B4.11 Procedure on the execution of worker interview		 accreditation manual/certification requirements/methodologies. Review Audit plans with applied methodology and rationale that indicate representative mix, type of interviews, etc Review Worker interview matrix/schedules Audit reports 	Global Standard, Issue 2, part III Document "ET 114 auditing techniques"	At Desktop Review stage, a question was raised about confidentiality factors, which was answered in the OVs and the discussion of audit reports	□ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B5.01 Required information on certificates / audit reports		 mandatory normative documents such as certification; requirements/methodologies with audit firms that cover all points listed; mandatory certificate/audit template includes all points listed; review examples of certificates and audit reports. 	Document ET 113 Full Audit report BRCGS ETRS	The document submitted in the Desktop Review was provisory but finally a final version was provided	⊠ Fully □ Partly □ Not aligned
B5.02 Identification of audit types (i.e. announced, semi, or unannounced)		 accreditation manual/certification requirements/methodologies; Audit reports and certificates. 	Document ET 113 Full Audit report BRCGS ETRS Global Standard, Issue 2, part III	Same situation for the document (first submitted as a provisory document), but the audit types must be clearly defined under "Audit results, where "audit type" must be selected (such as initial certification audit stage 1, stage 2 etc.)	⊠ Fully □ Partly □ Not aligned
B5.03 Proof of alignment and/or non-conformity in audit reports		 mandatory normative documents such as certification requirements/methodologies with audit firms that cover all points listed. mandatory audit template including checklist of evidence, non-conformities and list of evidence. review examples of audit reports 	Document ET 113 "Full Audit report BRCGS ETRS"	Same situation for the document. As per Non-Conformities, they are detected in stage 2 audits, after "Potential concerns" are identified in stage one audits. The conformity of audit reports has been discussed in the three ROVs.	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B5.04 Technical Review of audit reports and surveillance audits		 mandatory normative documents such as certification requirements/methodologies with audit firms that cover all points listed. mandatory audit template including checklist of evidence, non-conformities and list of evidence. review examples of audit reports that all elements of the CGF requirement are included review risk-based determination of audit firms for surveillance audits with clear rationale for reviews CVs of reviewers including relationship with SO or audit firm 	Global Standard, Issue 2, part III and Appendix III Document ET 117 required competencies for Application reviewers and Independent Certification Decision Makers, Issue 2"	The requirements for Audit reports and Certification documents are clearly stated in the document	⊠ Fully □ Partly □ Not aligned
B5.05 Communication procedure on sensitive findings found in case of non-compliances		 mandatory normative documents such as certification requirements/methodologies with audit firms that covers requirement action plan protocol to protect workers when situations of imminent danger to workers are identified and to verify that the situation 	Global Standard, Issue 2, part III Interpretation Guidelines Global Standard for Ethical Trade and Responsible Sourcing (issue 2, 2020)	At the stage of Desktop Review, questions were asked on the issue of action to be taken after identification of immediate dangers to the workers. reference was made to the Interpretation Guideline, which had not yet been submitted. The missing document has been submitted, the question was discussed again and could be answered in the frame of the OVs.	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		has been adequately and appropriately resolved review of audit reports critical N/Cs and resulting actions			
B6.01 Classification system on non-conformities types		 contract/agreement between the Scheme Owner and the audit firm; certification requirements/methodologies specifying classifications of non-conformities and conditions for allowing certification with non-compliances; guidance specifying procedures and process for classifying nonconformities and conditions for issuing certification; review of audit reports, corrective action plans and follow up; cross check with list of certified entities. 	Global Standard, Issue 2, part III	Already in Desktop Review it was established that BRCGS distinguishes between three levels of non-conformity: Critical, Major and Minor.	□ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B6.02 Rot Cause analysis on non- conformities		 mandatory normative documents such as certification; requirements/methodologies with audit firms that covers this requirement; review examples of audit reports and corrective action plans and follow up; cross check with list of certified entities. 	Global Standard, Issue 2, part III	At the stage of Desktop Review, questions on root causes were asked, which were satisfactorily answered in the course of the OVs.	☑ Fully☐ Partly☐ Not aligned
B6.03 Corrective action plan		 mandatory normative documents such as certification requirements/methodologies with audit firms that covers this requirement review examples of audit reports and corrective action plans to verify that they contain all elements including details that indicate all NCs are addressed and timeline for addressing them 	Global Standard, Issue 2, part III Document "Et 113 Full Audit report BRCGS ETRS"	A Preventive Action Plan (PAP) must be developed develop in the case of Non conformity within 90 days of the completion of stage two audits or 28 days in the phase of surveillance or re certification audits.	☑ Fully☐ Partly☐ Not aligned
B6.04 Implementation procedure of corrective action plan		 mandatory normative documents such as certification requirements/methodologies with audit firms that covers this requirement. review examples of audit reports and corrective action plans including verification 	Global Standard, Issue 2, part III	Already at the stage of Desktop review it was established that the site must produce evidence of corrective action to close out non-conformities, which may include providing objective evidence such as updated procedures, records, photographs etc., or a new on-site assessment by the certification body may be necessary. Corrective actions and proposed preventive action shall be included in audit reports. Certification will not be granted until this process has been	☑ Fully ☐ Partly ☐ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
		follow up actions. in the case of on-site assessment - review of assessment report that corrective action plan was followed. in the case of justified desk review (only if NOT critical or major noncompliance) - review of verification and CV of reviewer to ensure technically competent.		followed and verified through the certification body's independent technical review.	
B6.05 Follow-up action procedure on non-conformities		 mandatory normative documents such as accreditation manual, certification requirements/methodologies with audit firms that covers this requirement; review examples of audit reports and corrective action plans to verify that they contain all elements including details that indicate all NCs are addressed and timeline for addressing them 	Global Standard, Issue 2, part III	Already at the stage of desktop review, it was established that BRCGS makes the audit firm responsible for following up and verifying the corrective and preventative actions taken to close non-conformities, which must be submitted within a specified timescale.	□ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
B6.06 Requirement for certification schemes on documentation procedure(s) in case of withdrawal/suspen sion		 mandatory normative documents such as accreditation manual; certification requirements/methodologies, audit reports; guidance documents specifying the conditions under which certification may be suspended or withdrawn; review of any suspensions 	Global Standard, Issue 2, part III	Already at the stage of desktop review, it was established that BRCGS specifies that certification bodies must have a procedure for the suspension or withdrawal of a site's certificate.	⊠ Fully □ Partly □ Not aligned
B6.07 Appeals procedure		 mandatory normative documents such as certification requirements/methodologies with audit firms that covers this requirement. website point of contact, explanation of process including timelines and form that is clearly defined for complaints/appeals (not just general Contact us) quality assurance manuals review of complaints and appeals log 	Global Standard, Issue 2, part III	BRCGS requires that a certification body shall have a documented procedure for the consideration and resolution of appeals against an audit decision. These investigative procedures shall be independent of the individual auditor and certification decision-maker. The documented appeals procedure of the relevant certification body will be made available to the site on request.	⊠ Fully □ Partly □ Not aligned
B7.01 Data management and maintenance system		 review of database or report outputs; evidence of use of data for management purposes - e.g., monthly reports, performance evaluations, etc. 	https://brcdirector y.co.uk/	The BRCGS Directory provides the data management system that allows the Compliance Team to manage information about certification bodies and monitor their performance (including auditor competencies and overseeing the quality of reported data). This was difficult to verify in the Desktop Review, however,	⊠ Fully □ Partly □ Not aligned



Number	Clause	Recommended records to review	Records Reviewed	Observation	Alignment
				during the OVs the BRCGS team did demonstrate the functionality of the Directory.	
B7.02 Key Components of data management system		review of database or report output that includes all of the CGF elements	-	During the office visits, it was demonstrated that information such as: * Number of approved audit firms * Number of audit reports/certificates issued * Number of delisted sites * Several others can be found in the Directory.	☑ Fully☐ Partly☑ Not aligned