

# SMETA Corrective Action Plan Report (CAPR)

Version 6.1



dex Audit Reference: 2022VNZAA421965352 SMETA Corrective Action Plan Report (CAPR) Version 6.1

Audit Details						
Sedex Company Reference: (only available on Sedex System)	ZC: 421956110		Sedex Site Reference: (only available on Sedex System)		ZS: 1001508	
Business name (Company name):	Nha Be - Soc Trang Garment Joint Stock Company					
Site name:	Nha Be - Soc Trang Garment Joint Stock Company					
Site address: (Please include full address)	National Road 60, Ward 7, Soc Trang City, Soc Trang Province  Country:			Vietnam		
Site contact and job title:	Ms. Nguyen Thi Le H	la – HI	R Manager			
Site phone:	+84907012437		Site e-mail:		leha@	nbc-soctrang.vn
SMETA Audit Pillars:	∑ Labour Standards	Health & Safety (plus Environment 2-Pillar)		Environment 4-pillar		Business Ethics
Date of Audit:	5 December 2022 / Desktop 6 Jan 2023					

# Report Owner (payer): (If paid for by the customer of the site please remove for Sedex upload) **Audit Company Name & Logo:** SGS Vietnam Ltd Nha Be - Soc Trang Garment Joint Stock Company

Audit Conducted By						
Affiliate Audit Company	$\boxtimes$	Purchaser		Retailer		
Brand owner		NGO		Trade Union		
Multi– stakeholder			Combined Audit	select all that appl	(y)	

# **Audit Content:**

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

# 2-Pillar SMETA Audit

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

# **4-Pillar SMETA**

- 2-Pillar requirements plus
- Additional Pillar assessment of Environment
- Additional Pillar assessment of Business Ethics
- The Customer's Supplier Code (Appendix 1)
- (3) Where appropriate non-compliances were raised against the ETI code / SMETA Additions & local law and recorded as non-compliances on both the audit report, CAPR and on Sedex.
- (4) Any Non-Compliance against customer code shall not be uploaded to Sedex. However, in the CAPR these 'Variances in compliance between ETI code / SMETA Additions/ local law and customer code' shall be noted in the observations section of the CAPR.

# **SMETA Declaration**

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

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

Any exceptions to this must be recorded here (e.g. different sample size): None

Auditor Team (s) (please list all including all interviewers): Lead auditor: Nguyen Ngoc Thong - APSCA# RA 21700485 Team auditor: Nguyen Sy Quoc Van - APSCA# RA 21704267

Interviewers: Nguyen Sy Quoc Van

Report writer: Nguyen Ngoc Thong Report reviewer: Shiji A M (12/12/2022)

Date of declaration: 5 Dec 2022

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

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

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# **Audit Parameters**

Audit Parameters					
A: Time in and time out	Day 1 Time in: 08:20 Day 1 Time out: 16:30	Day 2 Time in: Day 2 Time out:	Day 3 Time in: Day 3 Time out:		
B: Number of auditor days used:	2 man-days (2 auditors x 1 c	lay)			
C: Audit type:	Full Initial Periodic Full Follow-up Partial Follow-Up Partial Other If other, please define:				
D: Was the audit announced?	☐ Announced ☐ Semi – announced: Window detail: 2 weeks (1-14 Dec 20) ☐ Unannounced				
E: Was the Sedex SAQ available for review?					
F: Any conflicting information SAQ/Pre-Audit Info to Audit findings?	☐ Yes ☐ No If <b>Yes</b> , please capture detail in appropriate audit by clause				
G: Who signed and agreed CAPR (Name and job title)	Ms. Nguyen Thi Le Ha – Administrative Manager				
H: Is further information available (if yes, please contact audit company for details)	or  ☐ Yes  ☐ No				
I: Previous audit date:	N/A				
J: Previous audit type:	N/A				
K: Were any previous audits reviewed for this audit	☐ Yes ☐ No ☑ N/A				
SAQ/Pre-Audit Info to Audit findings?  G: Who signed and agreed CAPR (Name and job title)  H: Is further information available (if yes, please contact audit company for details)  I: Previous audit date:  J: Previous audit type:  K: Were any previous audits reviewed	Yes No If <b>Yes</b> , please capture detail Ms. Nguyen Thi Le Ha – Adm Yes No N/A N/A Yes No		t by clause		

Audit attendance	Management	Worker Representatives		
	Senior management	Worker Committee representatives	Union representatives	
A: Present at the opening meeting?	⊠ Yes □ No	☐ Yes ☒ No	⊠ Yes □ No	
B: Present at the audit?	⊠ Yes □ No	☐ Yes ⊠ No	⊠ Yes □ No	
C: Present at the closing meeting?	⊠ Yes □ No	☐ Yes ☒ No	⊠ Yes □ No	

D: If Worker Representatives were not present please explain reasons why (only complete if no worker reps present)	The union representative was workers committee representative.  There was not any worker's representative in this facility. It is a common practice in Vietnam.
E: If Union Representatives were not present please explain reasons why: (only complete if no union reps present)	N/A

# Guidance

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

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

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

# Root cause (see column 4)

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

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

# **Next Steps:**

- 1. The site shall request, via Sedex, that the audit body upload the audit report, non-compliances, observations and good examples. If you have not already received instructions on how to do this then please visit the web site <a href="https://www.sedexglobal.com">www.sedexglobal.com</a>.
- 2. Sites shall action its non-compliances and document its progress via Sedex.

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

# **Corrective Action Plan**

	Corrective Action Plan – non-compliances								
Non- Compliance Number The reference number of the non- compliance from the Audit Report, for example, Discrimination No.7	New or Carried Over Is this a new non- compliance identified at the follow-up or one carried over (C) that is still outstanding	Details of Non- Compliance Details of Non-Compliance	Root cause (completed by the site)	Preventative and Corrective Actions Details of actions to be taken to clear non- compliance, and the system change to prevent re- occurrence (agreed between site and auditor)	Timescale (Immediate, 30, 60, 90, 180,365)	Verification Method Desktop / Follow-Up [D/F]	Agreed by Management and Name of Responsible Person: Note if management agree to the non- compliance, and document name of responsible person	Verification Evidence and Comments Details on corrective action evidence	Status Open/Closed or comment
NC 01 3. Health and safety No. 1	New	Based on Site observation and management interview, it was noted that the factory did not post MSDS for BT1122 chemical tanks in Boiler area as legal requirements	☐ Training ☐ Systems ☐ Costs ☐ lack of workers ☑ Other – please give details: Lack of the knowledge	The factory should be posted MSDS at the workplace as local law requirement	30 days	Desktop	Nguyen Thi Le Ha – Administrative Manager	Desktop review on 6 Jan 2023: Based on provided evidence, MSDS of BT- 112 chemical tanks in boiler area were posted as legal requirement.	Closed
NC 02 3. Health and safety No. 02	New	Based on site observation, document review and management interview, it was noted that BT1122 chemical tanks was not provided secondary container as legal requirements.	☐ Training ☐ Systems ☐ Costs ☐ lack of workers ☑ Other – please give details: Lack of the knowledge	The factory should be provided secondary containment at the workplace that has caused hazardous chemicals.	30 days	Desktop	Nguyen Thi Le Ha – Administrative Manager	Desktop review on 6 Jan 2023: Based on provided evidence, all BT1122 chemical tanks were stored in secondary container as legal requirements.	Closed
NC 03 3. Health and safety No. 03	New	Based on the facility tour, it was noted that at least 20% of employees at the sewing section, cutting section, and packing	☐ Training ☐ Systems ☐ Costs ☐ lack of workers	It is recommended that the facility shall ensure all workers wear	30 days	Desktop	Nguyen Thi Le Ha – Administrative Manager	Desktop review on 6 Jan 2023: Based on provided evidence, it was noted that all employees at the	Closed

section did not wear PPE Other – please appropriate PPEs sewing section, cutting (mask) during working give details: Lack of while working. section, and packing time. the knowledge section wore PPE (face masks) during working time NC 04 New It was noted that at ☐ Training The facility shall 30 days Desktop Nguyen Thi Le Desktop review on 6 Jan Closed ☐ Systems train and ensure all least 03 out of 10 sewing Ha-2023: 3. Health and machines were eye ☐ Costs employees use Administrative Based on provided ☐ lack of workers safety No. 04 guards provided for lower eye guards Manager evidence, it was noted sewing machines. Other – please when using sewing that 3 out of 3 sewing However, eye guards aive details: Lack of machines. machines were kept at were raised too high and the knowledge appropriate height. could not prevent employees from being injured. NC 05 Closed New It was noted from site ☐ Training Factory should 30 days Desktop Nguyen Thi Le Desktop review on 6 Jan ☐ Systems equip first aid kit tour that 02 out of 05 Ha -2023: 3. Health and selected first aid kits ☐ Costs with 27 items as Administrative Based on provided safety No. 05 were stocked from 14 to ☐ lack of workers local law Manager evidence, 2 out of 2 first Other – please aid kits were stocked 20 items instead of 27 requirement. give details: Lack of with 27 required first aid required first aid items as legal requirement. the knowledge items as legal requirement. NC 06 ☐ Training During site observation The factory shall 30 days Nguyen Thi Le Desktop review on 6 Jan New Desktop Closed and management ☐ Systems subtitle all warning Ha-2023: Costs 3. Health and interview, it was noted signs into the local Administrative Based on provided safety No. 06 that 1 out of 2 warning ☐ lack of workers language as Manager evidence, warning signs sians on the air M Other – please requirements. on the air-compressor compressor machine aive details: Lack of machines were in the were not in the local the knowledge local language as legal language as legal requirement. requirement.

	Corrective Action Plan – Observations				
Observation	New or Carried	<b>Details of Observation</b> Details of Observation	Root cause	Any improvement actions discussed	
Number	Over		(completed by the site)	(Not uploaded on to SEDEX)	



The reference number of the observation from the Audit Report, for example, Discrimination No.7	Is this a new observation identified at the follow-up or one carried over (C) that is still outstanding			
0.B Management Systems	New	The ethical Code (i.e., ETI Base Code for SMETA audits) is not communicated to the site's own suppliers.	Facility is not aware of this requirement	The facility management said that they will send ETI Based Code to its suppliers soon.

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



# Confirmation

Please sign this document confirming that the above findings have been discussed with and understood by you: (site management)  If actual signatures are not possible in electronic versions, please state the name of the signatory in applicable boxes, as indicating the signature.						
A: Site Representative Signature:	Ms. Nguyen Thi Le Ha	Title: Administrative Manager				
		Date: 5 Dec 2022				
B: Auditor Signature:	Nguyen Ngoc Thong, Nguyen Sy Quoc Van	Title: Auditors				
		Date: 5 Dec 2022				
C: Please indicate below if you, the site management, dispute any of the findings. No need to complete D-E, if no disputes.						
D: I dispute the following numbered non-	-compliances:					
NONE						
E: Signed:		Title				
a signature on this line)		Date				
F: Any other site Comments:						
NONE						
E: Signed: (If any entry in box D, please complete a signature on this line)  F: Any other site Comments:						

# **Guidance on Root Cause**

# **Explanation of the Root Cause Column**

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

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

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

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

# Some examples of finding a "root cause"

## Example 1

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

## Example 2

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

### Example 3

A site uses fines to control unacceptable behaviour of workers.

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

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

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

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

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





For more information visit: Sedexglobal.com

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

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

# Click here for Buyer (A) & Buyer/Supplier (A/B) members:

http://www.surveymonkey.com/s.aspx?sm=riPsbEoPQ52ehCo3lnq5lw\_3d\_3d

# Click here for Supplier (B) members:

http://www.surveymonkey.com/s.aspx?sm=d3vYsCe48fre69DRgIY\_2brg\_3d\_3d

# **Click here for Auditors:**

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

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