

# **WRAP Auditors' Handbook**

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# Purpose of the Auditor's Handbook

The purpose of this Handbook is to serve as a guideline for WRAP-accredited auditors to perform WRAP audits. WRAP reserves the right to make any changes and will provide updates in a timely manner through various platforms, including the WRAP website and memos.

This Handbook is separated into two sections:

- 1. Monitoring Firm Guidelines
  - a. The intended audience is the monitoring firm management
  - b. This section covers information related to:
    - i. Accreditation
    - ii. Certification Management Platform activities
- 2. Auditor Guidelines
  - a. The intended audience are the auditors employed by WRAP-accredited monitoring firms
  - b. This section covers information related to:
    - i. The WRAP audit process
    - ii. Social compliance auditing

This Handbook is a living document, to be updated and distributed to monitoring firms every six months. All updated information in the newest version of the Handbook will be highlighted. WRAP will institute version control to manage the changes. Monitoring firms should maintain the latest version of this Handbook with their WRAP files.

There are multiple appendices to this Handbook. They are referred to parenthetically throughout the document and are linked in the Contents.

Links taking the reader to a web address will be <u>underlined</u> and written in <u>blue</u>.

A Glossary of Terms is included in the Handbook before the appendices. All terms and acronyms in the Handbook that are *italicized* and <u>underlined</u> are linked to the top of the Glossary of Terms section, where the corresponding definition can be found. The first time a term appears on a new page, it will be linked. Subsequent appearances on the same page will not be linked.

Questions about the Handbook can be sent to the Compliance Administration Department (see **<u>Appendix 1</u>** for contact information).

# **Introduction to WRAP**

Worldwide Responsible Accredited Production (WRAP) is an international certification program dedicated to ensuring workers have safe, humane, lawful and ethical working conditions. We promote transparent, sustainable and responsible manufacturing and sourcing practices through education and collaboration. WRAP is headquartered in Arlington, Virginia, USA, with branch offices in Hong Kong SAR and Bangladesh, and representatives in Europe, India, Southeast Asia (Indonesia, Thailand & Vietnam), and Latin America. WRAP certification is recognized by many well-known brands, retailers, and agents around the world.

WRAP's Certification Program seeks to independently monitor and certify compliance with the 12 WRAP Principles. The WRAP Principles (See <u>Appendix 2</u>) are based on generally accepted international workplace standards, local laws and workplace regulations, and include the spirit or language of relevant conventions of the International Labor Organization (ILO), the United Nations Guiding Principles on Business and Human Rights, and the Organization for Economic Cooperation and Development (OECD)'s Guidelines for Multinational Enterprises. The first nine Principles cover child labor and forced labor, health and safety, harassment and abuse, discrimination, hours of work, compensation and benefits, and freedom of association. A Principle on environment serves to demonstrate a facility's commitment to environmentally responsible business practices. The final two Principles, on customs compliance and security, ensure that goods being shipped comply with applicable customs laws and that no nonmanifested cargo (drugs, bombs, etc.) is transported along with finished products. WRAP certified facilities demonstrate full compliance with the minimum security criteria of the United States <u>Customs-Trade Partnership Against Terrorism (CTPAT)</u> Guidelines for Foreign Manufacturers.

Facilities that demonstrate proper adoption, deployment and monitoring of all 12 Principles receive certification, typically for a one-year period, but it can range from six months to two years. A WRAP audit provides an on-the-ground perspective of a facility's operations to ensure that they are maintaining compliant practices; as such, the certificate only applies to an individual facility, not a parent company or brand. All certifications require periodic renewal, and all certified facilities are subject to unannounced <u>Post-Certification Assessments</u> during their certification periods.

Compliance with the Principles is checked via audits carried out by professional third-party monitoring firms that have been accredited by WRAP. The monitoring firms and individual auditors who conduct WRAP audits must meet rigorous accreditation requirements. Auditors undergo a training course conducted by WRAP and attend refresher training courses once every two years.

WRAP maintains high expectations of its staff, accredited monitoring firms, and facilities. All WRAP activities should be conducted with the highest degree of honesty, transparency, and commitment to WRAP values and Principles.

# Use of WRAP Logos







The WRAP Logo is a registered trademark or trademark of Worldwide Responsible Accredited Production in the United States and other countries. A WRAP certification represents assurance of socially responsible production.

The WRAP Logo, WRAP Certified Facility Logo, and the Made in a WRAP Certified Facility Logo are the exclusive property of Worldwide Responsible Accredited Production (WRAP). WRAP certifies socially responsible factories in the global sewn products sectors. The Logos are available for use by parties who make, buy, or sell products made in WRAP-certified facilities. The Logos are also available for use by Monitors and other WRAP partners to show their support and association with WRAP.

Where used, the Logos must be reproduced as shown above. Where possible, the trademark credit line should be cited as well. In all instances of use, care must be taken to ensure the significance of the Logo is put in its proper context; in particular, it should be clear that it is not being used to make a product quality claim (for instance, if the Logo is to be placed on a product, then the user should utilize the "Made in a WRAP-certified facility" version of the Logo).

#### **Additional Use Conditions**

- A. Production Facilities
  - a. A production facility may use the WRAP Certified Facility Logo so long as the facility holds a valid WRAP certification. The facility must maintain full compliance with WRAP's 12 Principles during its certification period. The facility or facility group has the responsibility to ensure that the WRAP logo's use is limited to the certification period. Facilities may use the Logo on websites, business cards, social media, and other related media.
- B. Buyers (Brands and Retailers)
  - a. Buyers may use the WRAP Logo on consumer goods, packaging, websites, social media, corporate social responsibility reports, and related materials if facilities producing such goods are WRAP-certified and remain WRAP-certified as described above.

- C. Monitoring Firms
  - a. Monitoring firms may use the WRAP Logo on their website, business cards, promotional materials, and social media provided the Monitor is WRAP-accredited while the WRAP Logo is in use.

## **Confidentiality of Audit Documents**

WRAP strongly values the confidentiality and privacy of the facilities in the WRAP certification program. WRAP only shares audit documents with entities outside of the WRAP organization with permission from the facility.

Facilities must authorize buyer(s) to receive and view any audit document from the facility's records. Once the audit has been conducted, the audit report is the property of the entity who pays for the audit (which is almost always the facility itself). The owner has the right to share the audit report with any entity it chooses. WRAP can always disclose a facility's status with regards to whether it is certified or not. For facilities that have chosen to be visible on WRAP's website, that information can also be ascertained through that public portal.

## **Conflict of Interest**

All auditors and monitoring firms performing activities that support WRAP facility certification are required to abide by the WRAP conflict of interest policy provisions listed below. The purpose of this policy is to ensure that high standards of conduct and integrity are maintained, and to limit the risk which might arise due to a conflict of interest.

A conflict of interest occurs when an auditor or monitoring firm is faced with an actual or potential compromise to conduct a fair and impartial facility audit. A conflict of interest may involve personal, business, or other interests.

For example:

- A. A monitoring firm is a partner in a business seeking a contract for services
- B. An auditor receives gifts from a facility during the audit

WRAP Conflict of Interest policy provisions for auditors and monitoring firms:

- 1. Promptly and fully disclosed any conflict of interest with a facility to WRAP
- 2. Exercise good faith and act with the highest business professional standards in all transactions in WRAP-related facility certification process duties
  - a. Auditors or monitoring firms shall not use their position, or knowledge gained therefrom, such that a potential conflict might give rise to a compromise of the best interests of WRAP or an inappropriate benefit or advantage going to any individual or organization

- b. They shall also seek to avoid all situations which suggest the appearance of a conflict of interest
- 3. No person or any member of their immediate family shall personally benefit by reason of any dealing with facility to be certified by WRAP, other than by normal, reasonable, and just compensation for services actually rendered to it
- 4. No person shall accept any favor, gratuity, or gift (other than small mementoes or tokens of appreciation) which may or could appear to influence the WRAP facility certificate process
- 5. Promptly disclosed any new employment activity, grant award, investment, or other interest, which may involve obligations that compete, appear to compete, or conflict with the WRAP facility certificate process
- 6. Activities existing which lead to the determination that a conflict of interest exists with a specific facility will disqualify an auditor and monitoring firm from participating in the WRAP facility certificate process

After full disclosure, however, and with due deliberation, WRAP may approve or ratify a transaction which involves a conflict of interest with an auditor and monitoring firm, provided adequate and reasonable information confirms such is in the best interests of WRAP and the facility to be certified.

# **Monitoring Firm Guidelines**

# 1. Monitoring Firm Accreditation

Monitoring firms seeking accreditations must submit documents to PartnerAccreditation@wrapcompliance.org.

# 2. Auditor Accreditation

## 2.1 Qualifications to be a WRAP Auditor

- A. Must be a full-time employee of a WRAP-accredited monitoring firm
- B. Must have an APSCA auditor number
- C. An auditor with less than CSCA status must meet the following requirements:
  - a. Attend WRAP's 5-day training course and pass the exam
  - b. Have a minimum of 25 man-days of social compliance audit experience
    - i. ISO management systems audits can count as part of the 25 man-days, but cannot be the majority (greater than 12 man-days)

It is monitoring firms' responsibility to ensure their auditors meet the minimum 25 man-day requirement. For individuals with less or no social compliance audit experience who want to be WRAP auditors, their audit firms should track their man days after they attend the 5-day training and pass the exam. Once the 25-man-day audit requirement is met, contact WRAP. WRAP will verify the audit log and issue the WRAP auditor badge upon satisfaction.

## 2.2 Qualifications to be a WRAP Lead Auditor

Must have all qualifications listed above, and the following:

- A. Have RA status with APSCA and a WRAP 5-day training course certificate, or
- B. Have CSCA status with APSCA and a WRAP bridge course certificate (2-day training covering WRAP Principles and audit reporting)

NOTE: These are WRAP's requirements. If a non-qualified auditor conducts WRAP audits prior to WRAP's approval, the auditor will be suspended.

## 2.3 Criteria to Attend WRAP's 5-Day Social Compliance Auditors Course

- A. Anyone from our monitoring firms, including report reviewers, can attend the course
- B. Prior to the course, monitoring firms must inform WRAP if their participant(s) intend to be a WRAP auditor

- a. Simply attending the course will not make the participant a WRAP auditor
  - i. Depending on the attendee's experience, WRAP will determine who can conduct WRAP audits after the course
- b. Auditors with RA status can be the Lead Auditor after successfully passing the course
- C. Course participants will *NOT* be issued a WRAP auditor badge if:
  - a. Participants do not intend to be a WRAP auditor
  - b. Participants are not yet qualified to be a WRAP auditor (see Part I for qualifications to be a WRAP auditor and the lead auditor)
  - c. The invoice is unpaid

#### 2.4 Additional Information on Auditor Accreditation

WRAP may also request to conduct shadow audits on auditors, the cost of which will be borne by monitoring firms unless exceptions are made. If the shadow audit identifies areas of improvement, the monitoring firm will be responsible for the cost of an additional shadow audit. Approval of auditors will only be given *after* the successful completion of the course examination and any shadow audits that WRAP deems necessary.

All accredited auditors must always wear a valid WRAP monitor identification badge while on location at the facility being audited. *It is the responsibility of the monitoring firm and the individual auditor to remain valid by keeping up to date on refresher training as required by WRAP. Failure to coordinate and complete periodic training will result in the withdrawal of the auditor's accreditation with WRAP.* Dates and locations of monitor refresher courses can be found on the <u>WRAP website</u>.

WRAP requires each monitoring firm to have internal controls and systems that regularly update and inform their auditors on revisions or additions to the local and national laws *and* changes to the WRAP program. Changes to the WRAP program will be announced formally and in advance of expected implementation to adequately communicate updates to individual auditors.

WRAP requires auditors to operate in their native countries, and monitoring firms are limited to audits in countries for which they have been approved. For country exceptions, the monitoring firm must request approval in writing from WRAP *prior* to an audit taking place.

WRAP has the right to request audit files from any WRAP audit at any time. WRAP may assess the internal management systems of the monitoring firm to ensure all persons involved in WRAP audits are maintaining the standards of integrity and confidentiality listed in this Handbook.

WRAP may at any time investigate the integrity and/or competence of an individual auditor and/or monitoring firm if there is reason to believe the standards listed in this Handbook.

If a monitoring firm wishes to appoint a new WRAP-accredited auditor, releases an auditor from duty, or has an auditor resign from their firm, WRAP must be informed within one week. Please contact the Compliance Administration Department (See <u>Appendix 1</u> for contact information).

# 3. APSCA

All WRAP monitoring firms must be a member of <u>Association of Professional Social</u> <u>Compliance Auditors (APSCA)</u> and all WRAP audits must include APSCA firm number and auditors' APSCA number.

The lead auditor in every audit must be either:

- A. APSCA RA (Registered Auditor), or
- B. CSCA (Certified Social Compliance Auditor) level auditor

Other team members can be ASCA (Associate Social Compliance Auditor) level auditors. If there is a situation where the audit cannot be led by an RA or CSCA level auditor, the monitoring firm MUST contact WRAP in advance to see if an exception can be granted (which should only happen in rare cases involving markets where resources are limited).

All audit reports must have every auditor's APSCA number, along with their auditor level designation.

# 4. Auditor Rotation

WRAP requires monitoring firms to rotate its auditors if the facility has been audited by them in the previous certification cycle. A new audit team must conduct the recertification audit if there is capacity. If there are not enough auditors to rotate the whole team, then only change the lead auditor. If the monitoring firm does not have the capacity to change even the lead auditor, then the monitoring firm must inform and request approval from WRAP to proceed with the audit.

Under certain circumstances, WRAP may ask the facility to change the monitoring firm from one certification cycle to the next.

# 5. Audit Requirement

- A. WRAP requires its existing partners to conduct a minimum of four WRAP initial audits at new facilities in major markets per quarter
- B. WRAP will be tracking the number of audits monitoring firms have conducted each quarter

# 6. Invoices, Payments, and Badges

- A. Quarterly Invoices
  - a. Monitoring firms have 30 days to pay for the invoices
  - b. WRAP will send a reminder if payment is not received within the 30 days
  - c. If payment is still not received after the reminder has been sent, WRAP will remove the monitoring firm from the website until payment has been received
  - d. If corrections to invoices are needed, please contact Payment and Registration Department (See <u>Appendix 1</u> for contact information)
- B. Training Invoices
  - a. If an attendee cannot make training, please communicate with WRAP promptly
  - b. Monitoring firm MUST provide invoice number on the payment
  - c. Payment is due within 30 days of receiving invoice
- C. Badges
  - a. When an auditor leaves the monitoring firm, WRAP must be informed immediately, and their badge must be mailed to WRAP's local office
  - b. Auditors must register for Refresher Training 3 months before their badge expires
    - i. Note: It is the auditor's responsibility to know when the next training sessions are scheduled
    - ii. If there are no training sessions before the auditor's badge expires, WRAP must be informed
    - iii. If the auditor needs to conduct an audit while their badge is expired, contact the Compliance Administration Department for approval (See <u>Appendix 1</u> for contact information)
  - c. For overdue or incorrect badges, contact the Payment and Registration Department (See <u>Appendix 1</u> for contact information)
  - d. New badges will be issued only after Refresher Training is completed

# 7. Certification Management Platform

#### 7.1 If an Audit is Not Visible

A facility may not appear on a monitoring firm's dashboard for the following reasons:

- A. The facility did not select a monitoring firm during the application process
- B. The facility selected an incorrect monitoring firm
- C. The facility has not submitted payment to WRAP/WRAP has not applied their payment
- D. The facility's payment has expired

Email the Compliance Administration Department (See <u>Appendix 1</u> for contact information).

### 7.2 Monitoring Firm Contacts and Communication Roles

Monitoring firms can assign individuals to have access to WRAP's Certification Management Platform. The Monitoring Firm Manager contact role has access to the platform to upload report documents.

Monitoring firms can choose which automated email notifications they want each contact to receive:

- A. Audit requests
- B. Document upload notifications

Email the Compliance Administration Department (See <u>Appendix 1</u> for contact information) to set up contact and communication roles for individual auditors.

## 7.3 Document Types

An individual uploading a document will always receive the upload notification in addition to the Monitoring Firm Report Manager(s) and the Monitoring Firm Managers(s). Monitoring firms can upload the following types of documents to the Certification Management Platform:

- A. CAP Report
- B. CAP Report Revised
- C. REC Report
- D. REC Report Revised
- E. Other
- F. WHAP
- G. WHAP Revised
- H. Investigation Report
- I. Code of Ethics
- J. Detailed Engineering Assessment
- K. Alert Notification
- L. Zero Tolerance Report
- M. Worker data

CAP REPORT

CAP REPORT REVISED REC REPORT REC REPORT REVISED OTHER WHAP WHAP REVISED INVESTIGATION REPORT CODE OF ETHICS DETAILED ENGINEERING ASSESSMENT ALERT NOTIFICATION ZERO TOLERANCE REPORT WORKER DATA

## 7.4 Report Submission

Audits are listed under each monitoring firm's dashboard. This is where documents are uploaded and submitted. Please refer to the Document Uploading Instructions in <u>Appendix 3</u>.

- A. Auditors MUST select correct report type while uploading the report in the platform
  - a. If 'REC Report' is selected as the outcome of the audit, a CAP FU will not generate, and the audit will move to the 'Submitted to WRAP' tab

- b. If 'CAP Report' is selected as the outcome of the audit, a CAP FU will generate, and the Initial audit will move to the 'Submitted to WRAP' tab
- B. WRAP gets an email notification when a document is uploaded
- C. Auditors can upload as many documents as they want before submitting as final

After a document is successfully uploaded, the automated upload notification will be sent to contacts previously identified by the monitoring firm.

#### 7.5 Extension Requests

- A. Auditors must check payment confirmation and schedule audits within the six-month registration period
- B. Follow-up audits must be conducted within the six-month timeframe
- C. All extension requests must be submitted with a detailed explanation and before the current payment expires
- D. WRAP will ask the auditor and facility to share the audit window to verify if the audit was delayed by the facility or the monitoring firm

#### 7.6 Future Enhancements

- A. Monitoring firms will have the ability to search a facility by name and/or WRAP ID
- B. Once a facility is certified the WRAP ID will drop off the 'Submitted to WRAP' tab
- C. Monitoring firms will be able to add auditors within their firm to be selected during audit submission

## 7.7 САРТСНА

- A. <u>CAPTCHA</u> is a program set in place to differentiate human from robot input used to ward off spam and automated data theft
- B. CAPTCHA stands for Completely Automatic Public Turing Test to Tell Computers and Humans Apart
- C. Registration for WRAP's platform requires the usage of CAPTCHA to verify the user is a human
- D. If you have trouble registering because your device does not allow the use of CAPTCHA, please contact the Compliance Administration Department (See <u>Appendix 1</u> for contact information)

# **Auditor Guidelines**

# 8. Document Control

WRAP requires all monitoring activity to be conducted using the below standardized supporting documents and methodology, with which all auditors must be familiar prior to the audit.

Documents are available for download by auditors with a username and password on the Certification Management Platform. Updates will be formally announced and provided to a contact person at each monitoring firm. All auditors are required to produce and maintain audit files that support the assessments generated for each facility for a minimum period of three years.

All auditors must retain the following documents:

#### 8.1 Facility Pre-Audit Self-Assessment Questionnaire

The facility will complete the <u>*Pre-Audit Self-Assessment (PASA)*</u> and submit copies of the completed document to WRAP and their selected monitoring firm. The audit team must receive the completed PASA 15 days prior to the audit window. This will allow the auditor time to review the information in the questionnaire.

## 8.2 Man-Day, Interview, and Record Review Requirements

The <u>Man-Day</u>, Interview, and Record Review requirements show minimum required sample sizes to ensure an adequate number of records are reviewed and worker interviews conducted. Audit reports not following these requirements will not be accepted, and the auditor may be required to return to the facility to complete the lacking interviews and/or record reviews. Please see <u>Appendix 4</u> for a complete breakdown of WRAP's Man-Day, Interview, and Record Review Requirements based on facility size.

#### A. Notes on Man-Days

- a. The number of man-days needed is based on the number of workers at the facility
- b. Man-days required and reported in the audit report must be fully spent onsite
  - i. This does not include time spent traveling, report writing, offsite review, etc.
  - ii. Lunch time is included in the 8-hour man-day
- c. No more than 10 hours a day are to be spent on WRAP audits per auditor
  - i. If there are unforeseen circumstances, WRAP must be notified as soon as possible, and it should be noted in the audit report

- d. It is the facility management's responsibility to accurately fill out the <u>Pre-Audit</u> <u>Self-Assessment (PASA)</u> and the application on the platform so the auditor can plan for the correct number of <u>man-days</u>
- e. The monitoring firm may charge the facility more fees if additional man-days are needed due to incorrect number of workers
- B. Notes on Interviews
  - a. Interviews must be with workers from different work sections and levels within the facility
  - b. Facility management interview will not be counted towards the total number of worker interviews included in the report
  - c. Subcontracted workers (e.g., *canteen*, security guards) must be included during the interview process
  - d. Management cannot interfere with interview process in any way and cannot choose who will take part in the interviews
  - e. Interviews are to be conducted in a private area to foster confidentiality
- C. Notes on Record Review
  - a. Record review periods for <u>new</u> and <u>renew</u> facilities are different
    - i. New/*lapsed* facilities must have at least the preceding three months of records for review
    - ii. Renew facilities must have three months (Current/Random/Peak, nonconsecutive) of records for review from the past 12 months

## 8.3 Copy of WRAP Principles

#### See Appendix 2.

#### 8.4 Opening and Closing Meeting Checklists

The Opening and Closing Meeting Checklists allow the auditor to ensure all areas are discussed during the opening and closing meetings. See the checklists in <u>Appendices 5 and 6</u>.

#### **8.5 Documentation Guidance**

There are relevant records and documents the facility should make available for the auditor's assessment during the audit. These will vary by country, and additional records will be necessary to check in most countries. Auditors must possess and retain at least the following documents from the facility:

- A. <u>PASA</u>
- B. Policies and procedures
- C. Relevant licenses, insurance (as applicable)
- D. Health and Safety certificates, Environmental certificates
- E. Facility floor plan(s)
- F. Process flowchart (as applicable)
- G. Risk Assessment

#### 8.6 Individual Worker Interview Questions

- A. The Individual Worker Interview Questions outlines key questions auditors must ask of selected employees during the audit
- B. Interviews must be conducted in a manner that respects individual privacy, may be on or off site, and must be free from management participation in selection, questioning, or influencing of workers
- C. Questions provided are for subject matter guidance; auditors should use their judgment in supplementing and expanding on the questions to obtain necessary information
- D. Use of the guide ensures presentation of properly phrased questions and sufficient coverage and follow-up of all subject matter

#### 8.7 Group Interview Questions

- A. The Group Interview Questions outlines key questions auditors should ask at group interviews
  - a. These questions should be general and not personal
- B. If the auditor feels the need to pursue a line of questioning with one member of the group, this should be done later in an individual interview

#### 8.8 Audit Summary and CAP Pages

- A. The Audit Summary must be completed by the lead auditor at the end of the closing meeting on the last day of the audit
- B. The Corrective Action Plan (CAP) allows the lead auditor to summarize areas of noncompliance and document the corrective actions agreed upon by the facility during the closing meeting
  - a. The lead auditor should consider the remediation plan adequate to ensure the root cause of the issue is being addressed and the facility will be able to achieve full compliance with WRAP's 12 Principles (See <u>Appendix 2</u>) by the date listed

C. The signed CAP also serves as documentary evidence that the facility was informed of all findings prior to the auditor's departure and must therefore be retained in the audit files

#### 8.10 Photo Template

WRAP provides a photo template that all auditors must use. Please provide photos of all areas requested at minimum with clear and readable date and time stamps; additional photos are appreciated.

#### 8.11 Detailed Audit Report

- A. The Detailed Audit Report provides a comprehensive description of the facility and any findings raised
- B. Auditors should apply internal controls to ensure the findings documented in reports remain confidential, and the names of individual workers should not be mentioned in cases that may compromise their identity
- C. Distribution of the audit report should be limited to the facility, the entity paying for the audit, and WRAP staff unless otherwise authorized by the facility
- D. The full audit report should be prepared as soon as possible after audit completion
  - a. The auditor should not delete any fields or prepopulated words or boxes and copying and pasting from previous audit reports is **not** allowed

## 9. Pre-Audit Check

The auditor must follow these steps in order before the audit is scheduled:

#### 9.1 Check Facility's Payment

- A. To verify that WRAP has received registration payment from the facility, check one of the following:
  - a. Request "WRAP Payment Confirmation" from facility (this is sent by WRAP once the payment has been received and approved)
  - b. Log in to WRAP platform; if the facility is listed in the platform within the auditor's dashboard, they have paid the registration fee
- B. The facility's registration payment is valid for six months from registration
  - a. The facility may request an extension if they are unable to successfully pass an audit with no non-compliances before their six-month registration period expires

- b. If the facility takes six months or more from the date of their previous audit to correct non-compliances, an initial audit will be required
- c. If there are an excessive number of non-compliances raised during the initial audit, WRAP may require an onsite follow-up audit, or in some cases, another initial audit
  - i. Auditors must confer with WRAP before they proceed

#### 9.2 Check the Facility Address, Days of Operation, and Working Hours

- A. If the address information is not adequate or complete, please contact the facility directly to get the exact address and directions
- B. Confirm the facility's days of operation and working hours from the facility

#### 9.3 Ensuring Audit Team's Safety

WRAP places high importance on the safety of the audit team. Situations that impose risk should be disclosed to the audit team in advance. These can include, but are not limited to, civil disorder, travel restrictions, weather conditions, and overall public safety.

- A. In high-risk areas, the audit team may require invitation from the facility to conduct an audit
  - a. Some audits may be announced with 24 hours' notice prior to the audit
  - b. Auditors must inform WRAP that an audit will be announced at least one week prior to the audit

#### 9.4 Issue the Facility a Four-Week Audit Window

- A. The facility should approve the window and inform the auditor of any holidays and days when the facility is not in operation
  - a. If the holidays or days off effectively reduce the possible audit window time to where the audit is not unannounced, a new audit window should be issued
- B. All possible measures should be taken to keep the actual date(s) of the audit confidential through effective and enforced internal management system procedures within the monitoring firm
  - a. If WRAP has any reason to believe the audit dates are being announced to the facility, or that the auditor is not following protocol, WRAP will impose sanctions on the auditor

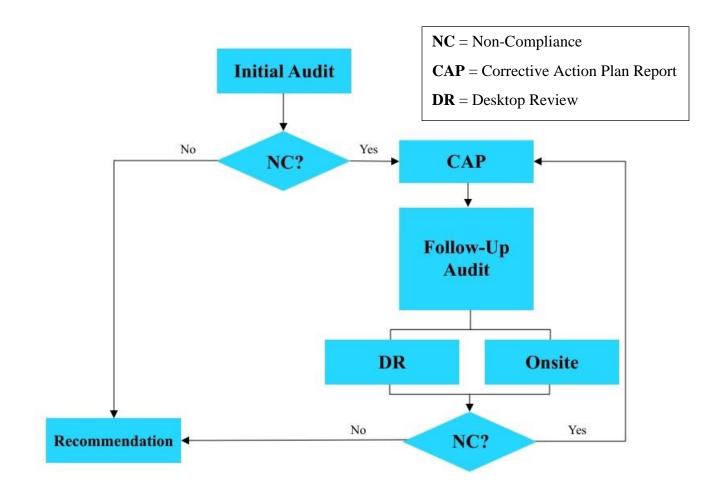
#### 9.5 Review the Facility's PASA

- A. Auditors must review the <u>PASA</u> before conducting the audit, so they can be familiarized with the information below:
  - a. The facility's previous <u>WHAP</u> (if applicable)
  - b. The number of workers employed at the facility
  - c. The number of shifts in the facility
  - d. Languages spoken by the management and workers
  - e. If there are foreign or migrant workers employed, and the languages spoken by those workers
    - i. Check whether foreign or migrant workers pay recruitment fees
  - f. Whether or not the facility offers dormitories to their workers
  - g. The way WRAP requirements have been deployed within the facility
- B. Once the auditor determines that the facility has satisfactorily completed the questionnaire, the auditor should schedule an unannounced onsite audit to the facility within a four-week audit window that the monitoring firm issued to the facility

#### 9.6 Create an Audit Plan

- A. Plan the number of *man-days* required to be at the facility (See <u>Appendix 4</u>)
- B. Select auditor/audit team

The cost of the audit will be borne by the facility and paid directly to the monitoring firm they selected from the approved list of accredited independent monitoring firms upon registering with WRAP. The monitoring firm will perform the onsite evaluation as per the regulations and guidelines of the certification program and this Auditors' Handbook. The costs entailed in the contracting of a monitoring firm will be negotiated directly between the facility and the selected monitoring firm.



# **10. Audit Types**

The following onsite WRAP audits are to be conducted in an unannounced manner with a fourweek audit window issued to the facility:

- A. Initial audit
- B. Onsite follow-up audit
- C. Alternative-to-Decertification follow-up audit

Only *Post Certification Assessments (PCAs)* are to be completely unannounced.

The only type of audit that is not unannounced in the WRAP program is a desktop review.

## **10.1 Initial Audit**

All facilities (*New*, *Lapsed*, and *Renew*) will begin their certification cycle with an *initial audit*. Initial audits must be conducted within six months of the facility's payment registration. If a facility shows full compliance when the initial audit is conducted, then a *follow-up audit* is not required, and the monitoring firm can proceed with recommendation for certification. If a follow-up audit is required, it will either be an *onsite follow-up audit* or a *desktop review*.

## **10.2 Follow-Up Audit**

- A. Onsite Follow-Up Audit
  - a. Conducting an onsite follow-up is not only dependent on the number of noncompliances raised during the initial audit, but on the severity of the noncompliances
  - b. After identifying all non-compliances, the auditor should have a conversation with WRAP to determine whether the non-compliances require an onsite follow-up
  - c. Non-compliances raised under Principles 5, 6, and/or 8 will typically require an onsite follow-up audit
  - d. This cannot take place until 45 days after the facility has implemented corrective actions for all non-compliances
- B. Desktop Review
  - a. If the non-compliance is minor and does not require onsite verification, it can be closed by desktop review
  - b. Facilities are required to send documents, pictures, or any other kind of record for review through email to the monitoring firm to close minor non-compliances
  - c. This must take place within 30 days of the initial audit

## 10.3 Post Certification Assessment (PCA)

Please see the <u>Post Certification Assessment (PCA)</u> section on page 47. The <u>PCA</u> must take place within three months of the PCA authorization letter request.

## 10.4 Alternative-to-Decertification Follow-Up Audit

Please see the <u>Alternative-to-Decertification</u> section on page 49. This is a follow-up audit to a PCA. Follow-up audits to PCAs are requested by WRAP only if the non-compliances raised during the PCA cannot be closed through desktop review. No audit activity should be scheduled until the facility signs and returns to WRAP the <u>Alternative-to-Decertification (ATD) letter</u>.



# **11. Audit Execution**

## **11.1 Audit Objectives**

- A. Review and assess the compliance status (e.g., physical condition and management systems) of facility against the WRAP Principles and relevant local laws
  - a. Non-compliances must be brought to the attention of facility management at the time they are recognized if possible, and the identity of workers who supplied information during an interview should be kept confidential
  - b. All non-compliances will be presented at the closing meeting to be discussed and agreed upon by the auditor and management
- B. The intent of the WRAP program is to affirm best practices and enforce the adoption, deployment, and monitoring of WRAP's 12 Principles
  - a. Strong observation skills are critical to successful auditing

## **11.2 Opening Meeting**

- A. The main purpose of the opening meeting is to ensure that facility management understands the audit process and is fully aware of the timescales and scope of the audit
- B. The audit team shall re-confirm that facility management is to provide information and guide the facility tour
- C. A well-executed opening meeting will result in a smooth assessment of the facility, whereas a poorly executed opening meeting can result in uncooperative management and a prolonged audit

- D. During the opening meeting, auditors shall emphasize to the facility their confidentiality, anti-bribery policy, and Zero Tolerance policy
  - a. A copy of the risk assessment (e.g., fire safety, H&S) and internal audit(s) shall also be obtained at this time to ensure thorough verification during the plant tour
- E. To facilitate the meeting, the Opening Meeting Checklist must be used (See <u>Appendix</u>  $\underline{5}$ )

#### **11.3 Facility Tour & Initial Observations**

- A. The main purpose of the facility tour is to verify company operations and inspect safety and welfare aspects against WRAP requirements
- B. Records can also be selected to cross-check with provided documents and verify for consistency
  - a. Other areas of concern may include (but are not limited to) underage workers, subcontractors onsite and security, and so on
- C. The facility tour is an opportunity to look for interviewees
  - a. The audit team should be aware of individuals appearing underage and/or working on dangerous operations
  - b. When selecting workers for interviews, multiple individuals should be selected at the same time; individuals should never be singled out
- D. The facility tour identifies those hygienic, aesthetic and/or visible safety issues that can be corrected during the onsite evaluation and gives the facility an opportunity to correct those issues prior to the closing meeting
  - a. If there is a missing fire extinguisher, blocked aisle or some other condition that can be easily rectified and does not represent an egregious, systematic violation of WRAP Principles, these issues may be closed at the time of the audit, but must still be listed on the CAP and listed as "closed" as well as mentioned during the closing meeting
- E. During the tour, the audit team should ask questions about how the facility operates, which could provide insight into possible areas of concern
  - a. The audit team will gather information on topics like subcontracting, working hours, production management, workflow, management oversight, potential bottlenecks that could lead to violations, etc
  - b. The time required to conduct the facility tour will vary depending upon the size of the plant
  - c. It is critical that the audit team goes into all areas and buildings on the site, including the canteen, dormitories, bathrooms, and storage areas
- F. The audit team shall check ALL areas of the facility without exception
  - a. If full access to any area is restricted to the audit team, it must be reported to WRAP

- b. If facility management does not allow access to any part of the facility grounds, the audit team should explain that verification of compliance is impossible without full access
- G. Digital or other photographs must be taken after the lead auditor receives consent from facility management
  - a. The audit team should take photographs to show a specific finding in which a photograph will help better communicate the severity and/or context of the finding
  - b. The audit team should not take photos of people's faces (if unavoidable, *faces must be blacked out* before being submitted), trade secrets, or client sensitive information
  - c. Photos must be inserted into the WRAP photo template before report submission
  - d. All audit photos must have a clear and visible date and time stamp, proving the photos were taken on the day(s) of the audit

## **11.4 Interviews**

Interviews with workers are fundamental to the success of the audit as workers can provide information not evident from visual observation, management interviews, and records/document review. Auditors should crosscheck information gathered from other sources, detect potential areas of concern, and assess the awareness of workers about relevant issues such as knowledge of their rights and responsibilities. The role of the audit team is not to educate, debate or argue with workers for any reason.

The auditors shall consider the following when conducting any type of interview:

- A. Be respectful in every interview and tailor the interview style to the person being interviewed
- B. Use open-ended questions as often as possible, as opposed to specific "yes/no" questions
- C. Listen closely for items requiring follow-up
  - a. Qualifiers such as "not really," "usually," "normally," "nothing unreasonable," generally require additional clarification
- D. Interviews must be conducted in the native language of the interviewee
  - a. In cases where auditors do not know the native language, the auditor must engage with an interpreter who should be independent of the facility
- E. Emphasize the interview is confidential and the information will not be shared with facility management

#### **11.5 Individual Interviews**

Auditors should follow these guidelines when conducting individual interviews:

- A. Perform the interview in a private location with one worker at a time, away from management and security guards
- B. Recognize the auditor may be perceived as an authority figure, and do not underestimate the impact of this perception on the interview
- C. Be sensitive to the differences between a disgruntled worker and one who has been treated unfairly
- D. In all cases, appropriate body language must be used to put the workers at ease
  - a. For example, the auditor should not sit behind a table or desk but sit on the same side of the table as the interviewees to reduce barriers

Consult the Individual Worker Interview Questions for the questions to be asked. If answers to these questions raise additional concerns, then the auditor should exercise rational judgment in posing other proper questions that gather more information about those concerns.

Auditors should strive to select a diverse sample of interviewees selected from the below criteria:

- A. Age (young- and old-looking workers)
- B. Gender
- C. Different workstations
- D. Different ethnic origins
- E. Pregnant
- F. Different countries
- G. Disabled
- H. Union representatives
- I. Security personnel
- J. Workers next to empty workstations
- K. Nervous looking
- L. Tired looking
- M. Cleaners
- N. Supervisors
- O. Maintenance staff
- P. Agency workers
- Q. Medical staff

### **11.6 Group Interviews**

Depending on facility size, group interviews must be conducted. The aim of the group interview is to determine how the workers feel about working in that facility and how this facility compares with others in the region. Refer to <u>Man-Day</u>, Interview, and Record Review Guidelines (See <u>Appendix 4</u>) to determine if group interviews are required. Consult the Group Interview Questionnaire for the questions that must be asked. When selecting a group for interviews, the auditors should select peers that are comfortable with each other.

Auditors should follow these guidelines when conducting group interviews:

- A. Questions must be general and not about personal details such as wage rates and holiday entitlement
- B. Auditors must watch for dominant interviewees and should be careful not to pressure shy workers
- C. Auditors must bring the views of the entire group into the conversation
- D. At no time should interviewees be made to feel uncomfortable in front of their peers
- E. If the auditor feels the need to pursue a line of questioning with one member of the group, this should be done later in an individual interview
- F. The auditor shall take the names of all the workers in the group to facilitate wages and hours document reviews. Worker names should never be mentioned in the CAP or audit report

A group could consist of workers from:

- A. The facility tour
- B. Women
- C. Men
- D. Service subcontractors (security, canteen, cleaner, etc)
- E. Agency workers
- F. Younger workers
- G. Older workers
- H. Migrant workers
- I. Workers' committee members
- J. Union representatives

## **11.7 Detailed Record Reviews**

- A. Auditors must review written policies and procedures, hours, and compensation to ensure the facility's practices are in compliance with WRAP standards
  - a. Policies and procedures should be reviewed with facility personnel who manage the processes

- B. It is the responsibility of management to produce all necessary records and documents to demonstrate their level of compliance, and auditors may take photocopies of any documents that are relevant to compliance or non-compliance
- C. Information gathered from the facility tour and interviews should be verified via detailed record reviews

Auditors must review these records in detail:

- A. Wages and hours
  - a. The auditor should refer to <u>Appendix 4</u> to determine the minimum number of wages and hours records that must be reviewed to properly respond to questions and complete the charts in the audit report under Principles 5 and 6
  - b. Auditors must consider compensation and benefits records, including overtime and time off (if applicable)
  - c. The auditor should be mindful of certain practices that management might use to cover up areas of interest
    - i. Possible alterations of the records
    - ii. Double (or more) bookkeeping of wages and hours records
    - iii. Whether records are consistent with workers' representations during the interviews
    - iv. Any unusual types of deductions
    - v. Manipulation of piece rate calculations

Other documents auditors must review:

- B. Certificates and permits related to health and safety, and building safety
- C. Insurance policies
- D. Government correspondence, if any
- E. Inspecting environmental certificates and permits
- F. Management systems
  - a. Check that they have been implemented for at least a 90-day period for an initial audit, and 45-day period for a follow-up audit
- G. Any collective bargaining agreements and/or any interaction between registered unions and management to determine any impediments
- H. Records of grievances or grievance systems in the facility and outcomes of such grievances
- I. Facility internal auditing reports

## **11.8 Pre-Closing Meeting**

A. Before the closing meeting, auditors will convene to discuss all findings and identify noncompliances, inconsistencies, observations, and best practices

- B. If there is no audit team, the individual auditor may use this time to compile CAP pages and objective evidence
- C. The CAP must then be presented in full to facility management

## **11.9 Preparing the CAP**

- A. Corrective action findings are completed prior to discussing non-compliances with management
- B. The facility must then write their corrective action plan, along with a proposed date of completion and the person responsible for carrying out the remediation
- C. The auditor may physically write for the facility, but the facility must present their own plan in their own words

For all types of non-compliances and observations raised, the CAP must include the following:

- A. Description of the finding, its frequency, and the number of workers affected
- B. A reference to the specific law and/or WRAP Principle the facility is violating
- C. Objective evidence the auditor used to raise this non-compliance
- D. One non-compliance/observation per box, with a reference number (#1, #2, etc.)
- E. A list of all non-compliances raised and closed onsite during the audit (noted as "closed onsite" in the left column underneath the non-compliance classification) and the action the facility took to remediate the non-compliance and prevent it from recurring
  - a. Note: If a non-compliance was raised during the audit and closed onsite, the facility must still provide the date of completion and the person responsible for carrying out the remediation

1	Principle 12-Security	During the audit we found that there was a factory	A. The facility agreed to station independent security
	WRAP Principle 12.8	located in the same compound with the audited	guards at its production areas without delay.
	WRAP 原则 12.8:	factory; however, the audited	10000000000000000000000000000000000000
	No local/national laws apply	factory had not stationed independent security guards	尽快配备独立安保系统。
		at its production areas to prevent unauthorized access to its production areas.	B. December 30 <sup>th</sup> of 2019 2019 年 12 月 30 日
3&Minor		工厂围墙内共有2家工厂, 被审核工厂没有在生产区设 置独立的安保人员以控制所 有访客进出被审核工厂生产 区。	

#### 11.10 Classification of Findings (Observations and Non-Compliances)

Use the guidelines below to classify the severity of findings:

- A. Major
  - a. Systematic violations of local/national law and/or WRAP Principles, and/or any health and safety condition that might pose significant risk to workers' basic rights and/or safety
  - b. Failure of management systems, including excessive minor non-compliances that reveal an underlying dysfunction
    - i. If there are several minor non-compliances against the same Principle, it may warrant a major non-compliance on internal monitoring (i.e., Q1.3)
  - c. Non-transparency
  - d. Issues that require onsite verification, especially those that can only be fully validated with worker interviews and/or addressed through worker training
  - e. Failure of addressing, within the projected completion date, non-compliances raised during the initial/follow-up audits in this certification cycle
- B. Minor
  - a. Occasional or isolated violations of local/national law and/or WRAP Principles that do not seriously compromise workers' basic rights and/or safety
  - b. Non-compliances that do not require onsite verification, worker interviews and/or worker training
  - c. Minor situations that do not affect a large number of workers
- C. Observations
  - a. Currently not a non-compliance but could potentially become one if timely actions are not taken (internal monitoring can help identify such issues); for example, certificates/permits that are valid during the audit but look set to expire in the near future with no indication that the facility has taken the steps necessary to ensure timely renewal
    - i. In addition, under certain circumstances (outlined in detail under WRAP Principle 6), excessive working hours will also be noted as an observation (instead of a non-compliance)

#### 11.10.1 Issues to be Raised as Observations

- A. Excessive overtime hours under Principle 6
- B. Inward opening emergency doors found to be secured open during working hours but cannot be corrected to outward opening
- C. Rolling/sliding emergency doors found with a mechanism to keep them open during working hours
- D. Subcontracted security guards ONLY for the facilities in Bangladesh
- E. Eligible temporary workers not being converted to permanent status ONLY applies to the facilities in Indonesia

- F. Emergency evacuation drill photos missing date and time stamps
  - a. This also applies to the photos submitted by facilities for desktop review

Auditors can include additional observations worth noting in the CAP Pages.

#### **11.11 Closing Meeting**

- A. Once the auditor has completed the assessment and is confident with the information they have obtained, they shall schedule the closing meeting with the facility management
- B. In this meeting, the auditor has a final opportunity to gain clarity on facility policies and practices, particularly when there have been instances where conflicting information or evidence has been uncovered
- C. The closing meeting should be held with facility management with adequate time given to cover all points on the Closing Meeting Checklist (See <u>Appendix 6</u>)
- D. A signed copy of the Audit Summary should be left with the facility and saved as part of the audit file

#### 11.11.1 Writing the Facility's Corrective Action Plan

- A. Careful attention should be paid to the corrective action plan provided by facility representative(s) to ensure they aim at creating long-lasting, sustainable change that will prevent recurrence through adequate and functioning management systems
- B. The facility must provide their own corrective action plan in their words
  - a. The audit team shall not recommend or suggest any actions the facility "should" take to correct the non-compliance
- C. A responsible person who will carry out remediation is to be assigned to each noncompliance, and the projected correction date must be noted
- D. The audit team should ensure the time projected to remediate the non-compliances is realistic
  - a. If the facility needs additional time to determine their projected completion date, it should be mentioned in the CAP
  - b. The audit team can follow up with the facility within a week after the audit to obtain the projected completion date from the facility
- E. The CAP may be written in the native language of the facility management, but it must be translated into English before being submitted to WRAP

#### 11.11.2 Agreeing on the CAP

- A. Once all parties agree to the findings and the corrective action plan, the lead auditor and one facility representative must sign the CAP page(s)
- B. A copy of the CAP is to be left onsite with the facility for their reference

- C. While it is acceptable for some difference of opinion to exist between the facility and auditors on Principle compliance, the auditor should obtain management's agreement on objective evidence that supports the findings
  - a. If facility management disagrees with the findings of the audit, they must provide evidence supporting their claims
  - b. The audit team can then review the evidence and determine if the non-compliance can be omitted from the CAP
- D. If facility management refuses to sign the CAP, they should state their reasoning at the bottom of the CAP page(s) and provide their signature next to the statement
  - a. WRAP will then follow-up with both the monitoring firm and the facility to have the matter resolved
  - b. This should be a last resort and the audit team should take all measures necessary to provide evidence to the facility to support their findings
- E. It is acceptable if the facility does not know their plan of action or projected completion date at the time of the Closing Meeting; however, this is an exception and should occur rarely
  - a. The auditor must explain the situation on the CAP, but the facility is responsible for updating the auditor within a reasonable amount of time (if that exceeds one week, the auditor must contact WRAP)

## 11.12 Reporting of Serious Violations & Zero Tolerance Issues

- A. If the audit team believes that raising certain issues at the closing meeting will put any parties at risk, the audit team should not raise a non-compliance in the CAP but report the situation directly back to their monitoring firm
  - a. In all cases it should be immediately reported to the Compliance Administration Department (See <u>Appendix 1</u> for contact information) within 24 hours after the audit by email, where the information will be treated as sensitive and confidential
- B. The audit team must provide objective evidence of any serious violations or Zero Tolerance issues to WRAP when the violation is reported
- C. WRAP will launch an investigation that may include further involvement of the auditor or monitoring firm

If at any time WRAP learns that any facility in the WRAP Program is actively participating in or associated with any of the below Zero Tolerance issues, THE FACILITY WILL BE DECERTIFIED (IF APPLICABLE) AND PERMANENTLY BANNED from the WRAP program in all capacities without the option to return or be certified in the future.

WRAP's Zero Tolerance issues can be found in <u>Appendix 7</u> and are listed below:

- A. Deliberate and ongoing human rights violations
  - a. Child labor including the worst forms of child labor (slavery, forced labor, trafficking, serfdom, debt bondage, prostitution, pornography, work that involves children in illicit activity, or work that is likely to harm the child physically or morally)
  - b. Forced labor (bonded labor, not allowing workers to leave at their own will, forced to work overtime)
- B. Inhumane treatment (the use of threats of physical harm or extreme intimidation, corporal punishment, mental or physical coercion)
- C. Threatening physical harm towards audit team
- D. Bribery (money or favor given or promised to influence the judgment or conduct of a person)
- E. False representations to WRAP (hiding full/partial production floors and/or processes from auditor(s), submitting fake documents during an audit, etc.)
- F. False representation of WRAP certificate or audit report (falsely holding out a facility as being WRAP-certified, submitting altered or fake documents to buyers, etc.)

## 12. Audit Reporting

- A. The full audit report is the most important deliverable once the audit is completed, as it allows the reader and the independent review board to see a complete picture of how the facility's management systems function, what it is like to be a worker at this facility, and any areas the facility is not meeting legal and/or WRAP requirements
- B. Each section of the report must be completed with the requested amount of detail; the general rule is, you cannot include too much information
- C. Findings should be clearly stated in objective terms and provide enough information to paint an accurate picture
- D. No section may be deleted or skipped
- E. The detailed audit report should be completed by the lead auditor in English as soon as possible once the audit has concluded
- F. Monitoring firms are expected to upload audit reports to the Certification Management Platform for any type of audit within 10 days, but no later than 15 business days, from the last day of the audit
- G. If a monitoring firm or a specific region within a monitoring firm systematically submits late reports, sanctions will be taken such as:
  - a. Written warning
  - b. Temporary suspension of accreditation, or
  - c. Permanent suspension of accreditation

The audit report must be combined into a PDF in the order below before uploading to the Certification Management Platform:

- 1. Audit Summary
  - a. The lead auditor must write the facility name exactly as it is given on the facility's business license
    - i. If the facility is in the Greater China region, please also provide a Chinese name.
  - b. The facility address must always include the country and the zip code (where applicable)
  - c. The auditor must include a signed and scanned Signature Page after the CAP Pages, with the signatures of both the lead auditor and the facility representative
    - i. Reports submitted without a signed and scanned Signature Page will be returned to the monitoring firm for revision
- 2. Audit Photo Template
  - a. WRAP provides a photo template that all auditors must use
  - b. Please provide photos of all areas requested *at minimum*; additional photos are appreciated
  - c. If there is no applicable photo according to the template, type 'N/A' into the box
  - d. Ensure all photos are clear and only one photo is inserted into each box for each section:
    - i. Part A: General view of the facility
    - ii. Part B: Health & safety
    - iii. Part C: Principle 12 Security
    - iv. Part D: Non-compliances
    - v. Part E: Proof of non-compliances closure
- 3. Detailed Report
  - a. In/Out times are to be reported accurately and not estimated or inflated
    - i. If there were any significant delays in the audit process, they should be noted in the report
    - ii. The opening meeting should take place within 30 minutes (at maximum) of arrival at the facility
  - b. Total *man-days* are to be calculated from the actual in/out times
    - i. One man-day is equivalent to 8 hours
  - c. If more than two phone numbers or emails are available for the facility personnel, please enter them in the spaces provided
  - d. The auditor should cover all areas as prompted (size, location, age, structure, number of buildings, products being produced, main operations, number of production lines, chemicals either for production, cleaning or fuel used, main equipment used) and any additional information that will provide WRAP with a clear picture of the site and its production processes

- 4. Written Policy and Responsible Person(s) Table
  - a. Indicates that the facility has designated a worker responsible for maintaining compliance with each WRAP Principle
- 5. Non-Compliance Table
  - a. The Non-Compliance Table is a quick reference to identify which Principles the facility was not in compliance with for the audit
  - b. If the facility is not in compliance with the law in any of the areas covered, they are automatically not in compliance with the corresponding WRAP Principle and both "WRAP Principles" and "Local or National Law" boxes should be marked accordingly
- 6. Audit Report Questions
  - a. All 12 Principles are covered in detail in this section with 5 columns: question, option to mark "yes", "no", or "N/A", and a place to provide objective evidence to support the auditor's conclusion of the facility's level of compliance and other relevant comments
    - i. This space is also used to describe a non-compliance in detail (if applicable)
  - b. The auditor must select either Yes, No, or N/A for each question and provide comments in every box provided
    - i. If No to Q8.66a & b, the rest of the questions in this section can be left blank
    - ii. If the auditor selects "N/A" in any other section, they must provide a statement as to why this question is not applicable to the facility
  - c. At the end of each Principle, there is a section where the auditor can describe again in detail any non-compliances observed
    - i. The legal requirement can be mentioned in full in this section as there is more space provided

#### **12.1 Report Review**

- A. An auditor who is familiar with the WRAP program must thoroughly review the report to request any necessary clarifications, request the auditor to provide a more adequate response, or edit and typos and grammatical errors
- B. WRAP recommends reviewers always use the provided Report Review Checklist (See <u>Appendix 8</u>) and reference the audit file during review
- C. The reviewer may point out any areas where the audit team has overlooked a noncompliance
  - a. This must be brought to the attention of the audit team and the facility and treated like all other non-compliances

#### **Best Practices**

- Any inconsistencies between the report and the audit file should be clarified and corrected before the report is sent to WRAP
- The monitoring firm requires the report reviewer to attend WRAP's 5-day Lead Auditor Course to familiarize the reviewer with the WRAP program and expectations for audit and report quality

### **12.2 Report Security**

The monitoring firm may use their discretion in choosing to secure the combined PDF with a password prior to uploading the report. If the monitoring firm chooses to password-protect the report, WRAP should be informed of the password.

#### 12.3 Post-Report Submission

- A. Once the report is uploaded to the Certification Management Platform, the Compliance Administration Department will review the audit report for quality
  - a. If there are any discrepancies noted, the monitoring firm will be asked to revise the report and submit it back to WRAP within three business days for quick processing
  - b. If there are areas where the audit team overlooked an area of the facility, skipped part of the audit, failed to identify obvious non-compliances, reviewed inadequate records, did not complete the minimum required number of man-days, or other areas of identified negligence, WRAP will require the audit team to return to the facility to satisfy all requirements
    - i. In cases such as these, the lead auditor must inform the facility of the delay and the reason for which they must return to the facility and conduct the revisit at no cost to the facility

If the facility was recommended for certification and no discrepancies are identified (i.e., the report passes all of WRAP's checks), WRAP will review the <u>Working Hours Action Plan Report</u> (<u>WHAP</u>) and other additional country-specific or facility documents, such as DEA Reports. After WRAP's internal evaluation of the <u>Recommendation report</u>, a final review is done by WRAP's independent review board to proceed for certification.

The independent review board may:

- A. Approve a report
  - a. The facility will be certified and notified via email with an electronic copy of their certificate
- B. Deny a report, or
  - a. WRAP will follow up with the monitoring firm and facility management as needed
- C. Request more information on a report
  - a. WRAP will follow up with the monitoring firm and facility management as needed

A physical copy of the certificate will be mailed to the facility. Once the facility is recommended to WRAP by the auditor, their application will no longer appear on the monitoring firm's dashboard in the Certification Management Platform.

#### 12.4 Document Control & Audit Files

- A. Monitoring firms are accountable to WRAP for all documents required to obtain and maintain accreditation to the certification program
- B. Likewise, the auditor is required to retain possession of all pertinent documents and reports of onsite facility audits, including but not limited to:
  - a. <u>Objective evidence</u> collected during the assessment
  - b. Completed Individual and Group Interview Questionnaires for each worker and group of workers interviewed
  - c. Corrective action plans, etc. from each facility that it performs an audit at for at least three years

Auditors will conduct <u>follow-up audits</u> in a timely manner to ensure correction in the identified areas of non-compliance. Documented objective evidence of these visits must be maintained in the same controlled way.

WRAP may request a review of the audit files/documents from the audit at any time to ensure the auditor is adhering to WRAP standards, maintaining an organized system for document control, and obtaining proper objective evidence for all sections of the audit.

## 13. Audit Follow-Up Procedure

There are two types of *follow-up audits*: *onsite* and *desktop review*. These are only conducted when there are non-compliances raised during an audit. The lead auditor should inform facility management of the need for a follow-up audit during the closing meeting. If they are not sure what type of follow-up audit needs to be conducted, the auditor may consult their manager and/or WRAP if the below guidelines do not provide enough direction.

### 13.1 Onsite Follow-up Audit Protocol

An onsite follow-up audit is required in the following instances:

- A. The audit team raised an excessive number of non-compliances that reveal an underlying dysfunction of internal management systems
- B. Major non-compliances that require the auditor to verify correction onsite
- C. Non-compliances raised that require worker interviews to verify closure
- D. Any policy or procedural change that require onsite verification

### 13.2 Timeline

The onsite follow-up can occur no earlier than 45 days from the facility's project completion date(s) to correct non-compliances. Prior to executing a follow-up audit, the lead auditor should contact the facility in advance to determine whether management believes the findings documented in the CAP have been corrected (and that the corrected measures have been in place for at least 45 days). If the facility needs more time to correct than what they projected in the CAP Pages, they must inform the audit team of their revised date for non-compliance correction. Additionally, the lead auditor is to review the results of the *initial audit* prior to arriving at the facility. All onsite follow-up audits are unannounced with a 4-week audit window issued to the facility.

An onsite follow-up audit may be conducted before the minimum required 45 days when the non-compliance(s) raised meet the criteria below:

- A. When the non-compliance can be immediately corrected, or
- B. When working hour or wage records do not need to be reviewed, or
- C. When the non-compliance is purely a physical issue that needs onsite verification
  - a. For example, an extension was added to the dining area that previously did not meet minimum legal requirements

If the audit team thinks the onsite follow-up audit can be conducted before the minimum required 45 days, but the non-compliances do not meet any of the criteria above, please contact the Compliance Administration Department for approval (See <u>Appendix 1</u> for contact information).

#### 13.3 Scope of Onsite Follow-Up Audit

The <u>onsite follow-up audit</u> is an abbreviated version of the <u>initial audit</u> with the goal of closing the open non-compliances and verifying the facility is maintaining its management systems and actively working to remain compliant in all areas. <u>Man-day</u> time should be appropriate to the clearing of the non-compliance(s) and must include the following:

- A. Opening meeting
- B. Facility tour
- C. All actions required to assess that all non-compliances have been sufficiently corrected *a*. Including those that were previously closed through *desktop review*
- D. Wages and working hours record review, as listed below
- E. Worker interviews
  - a. Depending on the nature of the non-compliances, a fewer number of interviews may be conducted unless the non-compliance is worker-related, in which case the same number of interviews from the initial audit is required

It is the responsibility of the lead auditor to use due diligence in verifying that the facility continues to be fully compliant at the time of the follow-up visit. If during the visit the lead auditor deems it necessary, the auditors should re-perform procedures as he/she would do for initial audits in the areas that give the auditor cause for concern.

Where all of the non-compliances that require a follow-up visit are only physical corrections (installing items, cleaning up, etc.), then the scope of the *follow-up audit* is limited to ensuring those corrections have been made, and conducting a facility tour to check health, safety, and environmental requirements. In such cases, half the number of interviews or document reviews is required.

If major non-compliances requiring a follow-up audit were raised under Principles 5 or 6, then the follow-up audit should have the same scope and depth as an initial audit. The number of interviews to be conducted and documents to be reviewed will be the same as for an initial audit.

If during the follow-up visit conditions unrelated to those documented in the CAP are observed, the lead auditor should perform the procedures necessary to determine compliance. For example, if it appears children are now working in the facility, request to see identification. If a new violation is detected, a new finding should be reported.

#### 13.4 Wage & Working Hour Record Review Requirements for Onsite Follow-Ups

Refer to WRAP's Man-Day, Interview, and Record Review requirements to determine the required record reviews based on the number of days from the date the facility remediates all non-compliances on the CAP (See <u>Appendix 4</u>).

#### **13.5 Desktop Review Protocol**

In some instances, the auditor may be able to accept documented evidence of actions taken, thus avoiding the need for an onsite visit. If an *onsite follow-up audit* is not required to prove a non-compliance has been corrected, then the auditor may recommend certification as soon as the proper proof of correction has been received.

The auditor who conducted the *initial audit* must be the one to conduct the *desktop review*.

Desktop reviews should only be conducted when there were minor issues that <u>do not</u> require a review of:

- A. Working hours
- B. Pay/wages, deductions
- C. Training
- D. Child labor or forced labor
- E. Worker interviews
- F. Management behaviour (i.e., verbal abuse, harassment)
- G. Health & safety conditions to be verified in person

The lead auditor should use their best judgement when deciding between an onsite and a desktop review follow-up. If for any reason the non-compliance(s) cannot be closed without onsite verification, worker interviews, etc., then an onsite follow-up must be conducted.

#### 13.6 Timeline

- A. The desktop review must be conducted within 30 days from the date of the last onsite audit
- B. If the facility waits 30 days or longer from the date of the *initial audit* to submit corrective action evidence to the audit team, they may be required to have an onsite follow-up and WRAP will not accept the desktop review report
- C. However, if the facility is waiting on an approval, document, etc. and the only issue is a governmental delay, the facility or the auditor may contact WRAP for an approval to conduct a desktop review after 30 days once the documentation is received
  - a. In these cases, the audit team must review the most recent records for the minimum number of samples required during the initial audit as part of the desktop review process

#### 13.7 Scope of a Desktop Review

Evidence required for a desktop verification includes, but is not limited to:

- A. Written response from facility outlining the corrective action taken and the system they have implemented to prevent the issue from recurring
- B. Photo(s) of the corrected non-compliance(s) with date and time stamps (must portray the same place the non-compliance was raised and not an area that was already in compliance; audit team to compare and verify)
- C. Any documentation evidence of new/updated policies and procedures

## 14. Follow-Up Audit Reporting

The audit report submitted to WRAP after the <u>follow-up audit</u> is an updated version of the report from the previous audit. The audit team must use methods that clearly draw attention to the updates (using colored or highlighted text) for clear distinction. Where several follow-ups took place, WRAP requires different colors for each follow-up. In addition to providing updated information from the onsite follow-up audit, auditors must verify the facility meets all requirements it had previously been meeting.

### 14.1 Updating the CAP Pages

The updated CAP Pages must include (in colored or highlighted text whenever possible):

- A. Description of correction and system implemented to prevent the issue from recurring
- B. Any documented evidence of new/updated policies and procedures
- C. Any new non-compliance(s) raised

Please see the example below:

CA #5 Minor	WRAP Principle 8 – Health and Safety (8.85a)	Annual audit on April 6-7, 2020	A. The facility shall ensure all exit signs are in local language
CLOSED	Local law: Vietnam Standard for Fire Prevention No. 2622:1995, Point 7.5	During the facility tour, it was noted that 01 out of 02 exit signs at 2 <sup>nd</sup> floor of management dormitory was not in local language (Vietnamese). Desktop review on April 18,	(Vietnamese). B. 29 April 2020. C.
		<b>2020</b> This finding has been corrected: The facility provided photos showed that all observed exit signs was in local language.	

Categorization of non-compliances:

A. Closed

a. <u>Objective evidence</u> has been provided to prove correction took place

- B. Open
  - a. Insufficient evidence provided by facility and the non-compliance still exists
- C. Partially Closed
  - a. Evidence provided indicating the facility has taken some action to correct but it is insufficient to fully close the non-compliance

#### **14.2 Reporting Updates**

Any new information that was not included in the *initial audit* report should be highlighted or appear in a different colored text in the updated report.

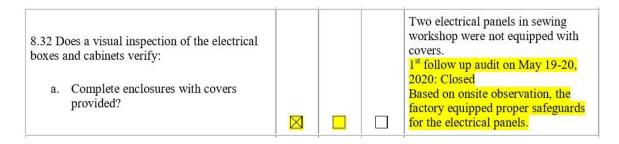
This example of a Non-Compliance Table clearly shows non-compliances that were found in the initial audit, which were corrected during the *follow-up audit* (highlighted box):

		Area of Non-Compliance (Only check box when there is a non- compliance)			
	WRAP Principles	WRAP Principles	Local or National Law		
1	Compliance with Laws and Workplace Regulations				
2	Prohibition of Forced Labor				
3	Prohibition of Child Labor	56			
4	Prohibition of Harassment or Abuse				
5	Compensation and Benefits				
б	Hours of Work				
7	Prohibition of Discrimination				
8	Health and Safety				
9	Freedom of Association and Collective Bargaining				
10	Environment				
11	Customs Compliance				
12	Security				

#### Non-Compliance Table

The updated Detailed Audit Report should include the following in the *COMMENTARY* box next to each question and at the end of the Principle in the "Non-compliances raised against this Principle" box:

- A. Written description outlining remediation and systems implemented to prevent recurrence
- B. Detailed descriptions of any new findings during the follow-up



### PRINCIPLE 8: HEALTH & SAFETY

Non-compliances raised against this Principle: 1. Principle 8 Health and Safety Q8.32a/National Safety Technical Code for Electric Equipment (GB19517-2009) 2.2, 2.2.1, 2.2.3. Two electrical panels in sewing workshop were not equipped with covers. 1<sup>st</sup> follow up audit on May 19-20, 2020: Closed Based on onsite observation, the factory equipped proper safeguards for the electrical panels.

#### 14.3 Updating the Photo Template

When updating WRAP's photo template in the *follow-up audit* report, it is not necessary to add new photos under Part A: General view of the facility, Part B: Health & safety, Part C: Principle 12 Security, and Part D: Non-compliances except in the following instances:

- A. New processes or any other physical additions/changes to the facility
- B. The auditor raises new non-compliances

Corrective actions should be documented under Part E: Proof of non-compliances closure, including photos submitted by the facility for *desktop review*. The photo should show the corrective action that took place in the exact location the original non-compliance was raised. In all sections, ensure only one photo is inserted into each box. If there is documentary evidence, it may be inserted after the photo template and before the Detailed Audit Report when the full report is combined.

## **15. For Facilities that Share a Location**

If the facility shares a building with another business, they must provide for the auditor the following information during the *initial audit*:

- A. The name of the business(es) that operate in each building
- B. Whether the facility and the other business(es) share workers, dormitories, and/or business licenses
- C. Records of joint emergency evacuation drills and risk assessments with the other business(es)
  - a. This is a requirement for facilities in Bangladesh

## **16. Name or Location Change**

### 16.1 Name Change

- A. If the facility's name changes, they must contact the Compliance Administration Department (See <u>Appendix 1</u> for contact information) to request and complete the Name Change form and submit it to WRAP along with relevant legal verification
  - a. Auditors may also share the Name Change form with the facility if applicable (See <u>Appendix 9</u> for the Name Change form)

### **16.2 Relocation**

- A. If a facility relocates, they must notify the Compliance Administration Department (See <u>Appendix 1</u> for contact information)
- B. Auditors have a responsibility to let WRAP know if a facility has moved

## **17. Working Hour Action Plan (WHAP)**

Facilities are required to complete a <u>Working Hour Action Plan (WHAP)</u> and submit it to their selected monitoring firm who will submit them to WRAP. WHAPs will be included in a facility's audit file and they must demonstrate that adequate progress is being made toward the WHAP during each successive audit. WRAP will follow local laws on working hours. In countries that do not have a limit on overtime hours, a WHAP is not required. WRAP's approach to working hours does not allow the violation of other work hour-related laws providing statutory protections aimed at <u>young workers</u>, pregnant women, any other protected groups, or the general health and safety of all workers. Auditors must raise a non-compliance in such cases.

The facilities must adhere to the following conditions when submitting a <u>WHAP</u>:

- A. Being fully transparent about their working hours
- B. Ensuring those hours are all being worked voluntarily, in conditions that protect worker safety and health
- C. Compensating all workers fully in accordance with WRAP's Principle 5 on Compensation and Benefits
- D. Showing progress, from one audit to the next, toward meeting the working hour requirements in local law

Working hours must be evaluated during the *initial audit*, *follow-up audits*, and *Post Certification Assessments (PCAs)*.

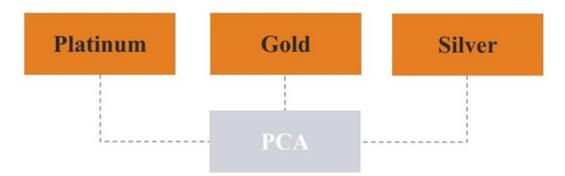
Auditors must check if the WHAP has been filled out completely by the facility before submission of the WHAP report. All WHAPs must be submitted with the <u>*Recommendation*</u> <u>*report*</u>. Please refer to the WHAP 3.0 template in <u>**Appendix 10**</u>.

- A. If excessive overtime is found during regular audits (not PCAs), use the full sample size for all periods for all facilities
  - a. PCAs will continue to use half the sample size
- B. If no WHAP was generated during the initial or follow-up audit, BUT excessive overtime hours are found during the PCA, a WHAP must be generated
- C. If a WHAP has already been submitted, then a new WHAP is NOT needed for the PCA
  - a. Excessive overtime working hours found in PCAs should still be raised as an observation
- D. If excessive overtime hours found during the PCA have not been resolved by the next initial audit, then a new WHAP must be generated during that initial audit
- E. Auditors MUST provide comments under Section III Question 20 of WHAP, for WRAP review.

#### **17.1 Interim Working Hour Action Plan**

- A. During the opening meeting, the audit team must communicate that WRAP will contact facilities mid-certification cycle to check on the progress of reducing excessive overtime hours
- B. Auditors are not required to review or collect the interim WHAP
- C. WRAP sends out warning emails to the facilities who fail to achieve their target and do not implement improvement actions after two WHAPs

# **18. WRAP Certification**



There are three levels of WRAP certification – Platinum, Gold, and Silver. The certificate issued to a facility is determined by WRAP and depends on the extent to which the audit indicates full compliance and management commitment to the WRAP Principles.

#### **18.1 Platinum Certificate**

- A. Valid for two years
- B. Awarded to facilities that have demonstrated full compliance with WRAP's 12 Principles for 3 consecutive certification audits
- C. Facilities must successfully pass every audit with no corrective actions or observations and maintain continuous certification with no gaps between certification periods
- D. Facilities that have non-compliance(s) closed through <u>Desktop Review</u> are not eligible
- E. If a non-compliance is raised during the audit but is closed before the Closing Meeting, the facility will still be eligible for Platinum certification

#### **18.2 Gold Certificate**

- A. Valid for one year
- B. Awarded to facilities that demonstrate full compliance with WRAP's 12 Principles

#### **18.3 Silver Certificate**

- A. Valid for six months
- B. WRAP may issue or a facility may request a Silver certificate if an audit finds it to be in substantial compliance with WRAP's 12 Principles, but identifies minor non-compliances in policies, procedures, or training that must be addressed

- C. Facilities seeking Silver certificates must request them in writing from WRAP's Compliance Administration Department (See <u>Appendix 1</u> for contact information), submitting a corrective action plan that includes any evidence of remediation along with the request
  - a. The WRAP review board may also recommend a Silver certificate if a facility has demonstrated difficulty in achieving full compliance or has other risk factors that may prevent it from sustaining compliance for the full duration of a Gold certificate
- D. Facilities may not have any Zero Tolerance issues or major non-compliances (including child labor; serious health, safety, or environmental issues; prison, forced, or involuntary labor; or harassment or abuse of workers) and must demonstrate that workers are paid at least the legal minimum wage and any required overtime compensation (i.e., no transparency concern)
- E. All Silver-certified facilities are eligible to renew their WRAP registration at a reduced fee of US\$895, provided they reapply prior to the expiration of their certificate
- F. A facility may be awarded no more than three consecutive Silver certificates

## **19. Certified Facilities Map**

- A. Management can search their certified facility on the <u>world map on WRAP's website</u> if management checked 'to be listed upon certification' during the application process
- B. Facilities can expect to be listed on the map no later than 48 hours after they are certified
- C. Facilities can be searched by their WRAP ID or facility name
- D. When a certificate expires, a facility is no longer visible on the world map on WRAP's website

### 20. Post Certification Assessments (PCAs)

<u>Post Certification Assessments (PCAs)</u> are utilized by WRAP to ensure that certified facilities are maintaining compliance with WRAP Principles and local/national law, and are demonstrating a safe, humane, and ethical workplace. WRAP aims to have third-party monitoring firms revisit 15% of facilities certified per quarter. The monitoring firm will bear the cost of these PCAs and they should not, by any means, be passed on to the facility. However, if there are minor or major findings that require follow-up by the monitoring firm, they may charge the facility for costs incurred to perform the follow-up assessment(s).

#### **20.1 Process of Allotment**

PCA requests will be sent out to monitoring firms at the beginning of each quarter. WRAP totals the number of audits (*initial* and *onsite follow-up*) conducted by each firm from the previous quarter and selects 15% of the facilities to be revisited for a PCA.

With each request an official WRAP authorization letter will be issued to the auditor as proof that the PCA has been requested by WRAP. Auditors must present the PCA authorization letter to facility management upon arriving to the facility to conduct the PCA.

### **20.2 Process of Selecting Factories**

WRAP selects factories for a PCA using the following criteria:

- A. Recommended by independent review board
- B. History of facility with WRAP
- C. Level of risk by country
- D. Other indicators such as buyer findings, negative press, etc.
- E. Suspicious indicators found in the audit report
- F. Certification period length
- G. Random selection

### 20.3 WRAP-Paid PCAs

WRAP may choose to request a PCA from a different monitoring firm than the one who conducted the certification audit. Reasons for this include but are not limited to: the original monitoring firm is no longer accredited with WRAP, auditors are not available within the original monitoring firm, allegations or suspicions were raised were against original monitoring firm, or to ensure accountability of all auditors and monitoring firms.

When WRAP requests a WRAP-paid <u>PCA</u>, the <u>man-day</u> requirement, specific areas to be audited, and information about the facility will be shared with the monitoring firm selected to conduct the PCA. WRAP's man-day rate is \$550/day; the fee includes travel and/or lodging and will be paid to the monitoring firm. Invoices should be sent to WRAP's Payment and Registration Department (See <u>Appendix 1</u> for contact information).

#### 20.4 Scope of PCA

The audit team should allow adequate time when planning the PCA man-days to complete the following:

- 1. Opening Meeting
- 2. Facility walk through/tour
- 3. Full review of Principles 1, 2, 3, 4, 5, 6, 8, and 12
- 4. Review of previous non-compliances from the most recent certification audit(s), verifying the facility has maintained full compliance
- 5. Review ½ the size of wage and hour records than what is required based on facility size from three sampled months: one month from the certification audit, one current month, and one random month (See <u>Appendix 4</u> for WRAP's Record Review Guidelines)
- 6. Conduct  $\frac{1}{2}$  the number of interviews than what is required based on facility size
- 7. Closing Meeting

Neither the monitoring firm nor the audit team should have any contact with the facility until the audit team arrives onsite. Any information about the PCA or the date it will be conducted is to remain confidential and protected by the monitoring firm. If the audit team needs assistance in gathering information about the facility, they should conduct a web search of the facility or contact the Compliance Administration Department (See <u>Appendix 1</u> for contact information).

#### 20.5 If Access is Denied

- A. If an auditor is denied access to all or part of the facility premises during a PCA, the monitoring firm must notify WRAP within 24 hours
- B. The auditor must obtain a signed statement from the facility explaining why access was denied
- C. WRAP will issue an Alternative-to-Decertification letter to the facility
- D. If extenuating circumstances prevented the facility from granting full access to their premises, WRAP will consider those circumstances and determine if the PCA could be re-scheduled

#### 20.6 Preparing the PCA Report

- A. Once the <u>PCA</u> report is completed, a combined PDF of the report should be *emailed* to the Compliance Administration Department (see <u>Appendix 1</u> for contact information)
- B. The facility will not be visible on the monitoring firm's dashboard as they automatically disappear once the facility is certified, therefore the report should be emailed and labelled as a "PCA" in the subject line of the email
  - a. For quick processing, PCAs must be submitted *within 10 days but no later than 15 business days* from the date of the closing meeting.
- C. In the case that serious violations or zero tolerance issues are found, please follow the same protocol as listed under "Reporting of Serious Violations & Zero Tolerance Issues"

### 20.7 Follow-up on Findings (if applicable)

Once the PCA report is submitted to WRAP, the report will be reviewed, and next steps determined. If there were no findings raised during the PCA, then the facility passes the PCA and no follow-up will be necessary. If the auditors raised non-compliances during the PCA, WRAP will select one of the following outcomes (depending on the severity of the non-compliances):

- A. <u>Desktop review</u>
- B. <u>Alternative-to-Decertification letter</u>
- C. Decertification

### 20.8 Desktop Review

- A. WRAP will email the facility and ask them to submit their corrective action plan and evidence to the monitoring firm for the non-compliances to be closed through desktop review
- B. The auditor must follow the desktop review guidelines for *follow-up audits*
- C. Once the auditor is satisfied with the facility's corrective action(s) and the report has been completed, they should submit the report to WRAP via email within 10 business days

### 20.9 Alternative-to-Decertification

WRAP will issue an Alternative-to-Decertification (Alt-to-Decert) letter to the facility via email and copy the auditor(s), so they are aware of the decision. Facilities must sign and return the letter to WRAP within two weeks to acknowledge agreement with the required <u>onsite follow-up</u> <u>audit</u>.

When the facility signs and returns the <u>Alt-to-Decert letter</u>, they agree to:

- A. Correct the non-compliances found during the PCA
- B. Receive a PCA *follow-up audit* conducted by the monitoring firm within 90 days from the date of the letter
  - a. The audit will be fully unannounced audit at a time determined by the monitoring firm
- C. Bear the expenses through arrangements with the monitoring firm in advance a. Failure to do so will result in immediate decertification

When the facility agrees to the Alt-to-Decert letter, the monitoring firm must coordinate with the facility to arrange payment for the PCA follow-up audit and receive confirmation from the facility that they have taken proper corrective action before the follow-up audit takes place. If the facility delays or denies payment of the audit to the auditor, WRAP should be notified as soon as possible.

If the facility does not agree to the conditions of the Alt-to-Decert letter, they will be decertified for a period of 12 months.

The PCA follow-up audit must not take place until after 45 days from the date the facility confirms they have corrected all non-compliances raised during the PCA. If this requires the follow-up audit date to take place more than 90 days from the date the letter was signed, notify the Compliance Administration Department (See <u>Appendix 1</u> for contact information). WRAP may require facility to send two management personnel to attend Internal Auditor Training if facility does not pass the PCA follow-up audit.

#### 20.10 Scope of PCA Follow-Up Audit

<u>Man-day</u> time spent at the facility for the PCA follow-up should be appropriate to verify closure of the non-compliances and complete the following:

- 1. Opening meeting
- 2. Facility tour
- 3. Review ½ the size of wage and hour records required based on facility size (See **Appendix 4** for WRAP's Record Review Guidelines)
- 4. Conduct <sup>1</sup>/<sub>2</sub> the number of interviews required based on facility size
  - a. No interviews are required if the non-compliances raised during the PCA only require physical verifications
- 5. Closing meeting

#### 20.11 PCA Follow-Up Audit Reporting

The auditor should report the findings of the <u>PCA</u> follow-up audit in the same way as the follow-up audit report. The report should then be emailed to WRAP within 10 days but no later than 15 business days.

WRAP will then determine how to proceed with the facility based on the results of the followup. If there are still major non-compliances present in the facility, they will be decertified for a period of 12 months and their buyers will be notified. After 12 months, the facility will be eligible to apply for recertification. If there are minor non-compliances still open, a <u>desktop</u> <u>review</u> may be recommended at WRAP's discretion.

### 21. Additional Information on WRAP Requirements

The following sections provide more detail on selected WRAP requirements that auditors are responsible for checking during an audit. Questions about other WRAP requirements can be directed to the Compliance Administration Department (See <u>Appendix 1</u> for contact information).

#### 21.1 Consecutive Working Days

- A. Facilities cannot work more than six consecutive working days and the seventh day must be a rest day, except under urgent business needs
- B. Auditors must raise a non-compliance if consecutive working days of more than six are noted and there are no *urgent business needs*

#### 21.2 Urgent Business Needs (UBN)

- A. Defined as temporary and the facility has no control over it
- B. Back-to-back urgent business needs must be raised as a non-compliance
- C. WRAP allows facilities to work up to 13 consecutive working days only under urgent business needs
  - a. The 14th day must be a rest day
  - b. Auditors must follow local law for number of consecutive days allowed in the country
- D. Should there be a <u>WHAP</u> report for UBN?
  - a. If the facility is within legal working hours, then a WHAP is not needed
  - b. Auditor should check other periods to see if facility worked excessive overtime hours, which would require a WHAP

#### 21.3 Facility-Provided Housing

- A. Facility-provided housing includes, but is not limited to, dormitories or apartments
- B. If dormitories or apartments are provided to workers, other workers, and/or management, they become part of the audit scope
- C. If dormitories are outside the facility premises but workers are referred by management, then they are part of the audit scope
- D. If dormitories for management are outside the facility premises, then they are NOT part of the audit scope
- E. Rest areas for workers (security guards or management) should be covered during the audit but should not be marked as dormitory

### 21.4 CCTV Records

WRAP recognizes the United States Customs and Border Protection (CBP)'s <u>CTPAT (Customs</u> <u>Trade Partnership Against Terrorism)</u> Guidelines for Foreign Manufacturers Minimum Security Criteria (MSC) as minimum requirements and has adopted those guidelines under WRAP's Principle 12 Security.

Collection of CCTV records is part of CTPAT's requirements. If CBP changes their requirements for CCTV records, WRAP will update this Handbook accordingly.

The following are WRAP's CCTV requirements:

- A. CCTV located at the following sensitive areas:
  - a. Entrance/Exits
  - b. Packing areas
  - c. Cargo handling and storage areas
  - d. Yard and storage areas for containers, trucks, and trailers
- B. WRAP does not have a requirement for the number of cameras facility must install to fully collect CCTV records of the sensitive areas
- C. At least 30 consecutive days of CCTV records must be available for review
- D. 24/7; all production and non-production hours, nights, weekends, and holidays

If facilities do not export internationally, then CCTV is not required, and the facility must provide evidence to the auditor(s) of how the sensitive areas are secured. Facilities should expect a *follow-up audit* if a non-compliance is raised under CCTV requirements.

#### **21.5 Grievance Mechanisms**

- A. Facilities must demonstrate an established grievance system such as a worker's committee or a union; only having a suggestion box is not acceptable
- B. Proper policies, procedures, and person(s) responsible should be in place to address worker grievances
- C. During the audit, the audit team must document in the audit report the person responsible for addressing worker grievances and how the complaints are resolved, as applicable
- D. A representative from the grievance committee can also be part of other committees in the facility like health and safety committee, but the existence of a health and safety or other committee cannot, by itself, replace a formal grievance mechanism

### 21.6 Emergency Exit Doors

- A. Inward opening emergency doors are a major non-compliance except if:
  - a. Inward opening emergency doors are verified to be secured open during working hours
  - b. Inward opening emergency doors are CORRECTED to outward opening during the audit; will be raised as a non-compliance but marked as closed onsite
    - i. If inward opening emergency doors are found to be secured open during the audit, but cannot be corrected to outward opening doors, it will be raised as an observation in the audit report
- B. Rolling/Sliding Emergency Doors
  - a. Facility must have a mechanism to keep these doors secured open during working hours, and it should be raised as an observation in the audit report
- C. Doors that are not Emergency Exits do not have to be outward opening

### 21.7 Emergency Evacuation Drill

- A. Facilities must conduct emergency evacuation drills every six months, or more frequently if local law requires it, and have a planned date for the next emergency evacuation drill. A non-compliance must be raised if emergency evacuation drills are not conducted a minimum of once every six months (with a one-month grace period)
  - a. For example, if an emergency evacuation drill was conducted on February 15, 2018, the next drill MUST be on or before August 15, 2018
  - b. A grace period of one month is allowed so the facility would have up to September 15, 2018 to conduct the emergency evacuation drill

- B. Facilities must provide documentation of latest emergency evacuation drill date(s) for each *follow-up audit* that takes place, including *desktop reviews* 
  - a. Facilities must keep proper documentation including pictures with date and time stamp for each emergency evacuation drill conducted
- C. WRAP recognizes that the time taken to fully evacuate workers to meeting points outside the facility will vary depending on the size of the workforce and the premise but suggests that the evacuation time for a typical facility should not be longer than 4 minutes; if facility fails to achieve the 4-minute evacuation time, the audit team must note it in the report and provide the facility's explanation

#### **21.8 Drill Dates and Times**

All facilities must show proof of the last two and one planned emergency evacuation drill dates in their facility. For every past drill, facilities must record and provide for the auditor the time it took for all personnel to evacuate and photo evidence that the drill took place. All photos must have a date and time stamp. These requirements differ between <u>new</u> and <u>renew</u> facilities and must be met to be certified.

- A. New
  - a. New facilities to WRAP that have been operating for less than 12 months are required to show proof of at least one past emergency evacuation drill and two planned drills; photos and the recorded time it took for all personnel to evacuate are required evidence to prove the first emergency evacuation drill took place
  - b. New facilities to WRAP that have been operating for more than 12 months are required to show proof of the last two emergency evacuation drill dates and one planned drill date
- B. Renew
  - a. Renew facilities are required to show proof of the last two emergency evacuation drill dates and one planned drill date; photos and the recorded time it took for all personnel to evacuate are required evidence to prove the last two emergency evacuation drills took place

#### **21.9 Licenses/Permits**

All licenses must be current. Facilities should regularly check the validity of their licenses and renew when necessary. If a required license is expired, it will be raised as a non-compliance during the audit if the facility has not started the renewal process before the audit takes place. If the facility started the renewal process before the audit, but does not have the valid license yet, auditors must raise an observation. New facilities will not be certified without valid licenses.

Facilities are required to have the following types of licenses, in addition to those required by law:

- Business licenses
- Building Safety-related licenses
- Health and Safety-related licenses
- Canteen Health licenses (2 varieties)
  - a. License for food preparation
  - b. Health license for workers

#### 21.10 Canteen

All facilities with an operating *canteen* must have the necessary licenses as required by law. Facilities that provide canteen services for workers should follow these guidelines at a minimum:

- A. Canteen must be open during production hours, or as required by local law
- B. Display canteen rate list in a public area
- C. Conduct a health check-up for workers involved in preparation and distribution of food
- D. Monitor pest control issues and maintain a periodic cleaning schedule of store and eating area
- E. Connect wastewater to ETP (Effluent Treatment Plant) for effective recycling and reuse of water
- F. Maintain adequate health and safety arrangements

#### **21.11 Subcontracted Workers**

- A. Subcontracted workers must be included in the interview process and documents review
- B. Auditors must include name of the company or the person providing the subcontracting service in Questions 1.5 through 1.6
  - a. Auditors must include address of the subcontracting company
  - b. Auditors must translate subcontractor's information in English

### 22. Extenuating Circumstances

When forces outside of WRAP, facilities, and the monitoring firm's control present barriers to conducting audits as per WRAP guidelines, WRAP will issue a statement on the alternative procedure(s) in a timely manner. Monitoring firms should expect to receive the statement and corresponding instructions from WRAP via email.

# 23. Country-Specific Issues

#### 23.1 Bangladesh

- A. Structural Integrity:
  - a. Must be able to verify whether the facility is approved as a residential, commercial, or industrial building
  - b. Detailed Engineering Assessment (DEA) report should be provided by an accredited engineering company approved by the Accord or Alliance, a legitimate engineering firm approved by government, or by Bangladesh University of Engineering and Technology (BUET)
  - c. Must be able to provide floor plans and licenses
  - d. Structural, Fire, and Electrical Safety Reports should be sent to WRAP for internal review
- B. Boilers:
  - a. Must be able to provide valid boilers' operator license
  - b. Boilers must be located on ground floor and separated from production/office space
  - c. If boilers are located on upper level/production floor facility must provide a corrective action plan to correct boilers' location
  - d. WRAP accepts mini boilers less than 22 liters on the production floor
- C. Security guards:
  - a. Subcontracted security guards will be noted as an observation in the audit report due to the industry-wide practice
  - b. Must provide security guards contracts for working hours, wages, and benefits
  - c. Facilities should take steps to convert subcontracted security guards to permanent workers
- D. Rooftops:
  - a. At least 25% of the rooftop must be vacant
  - b. Fully covered rooftop facilities will be marked as a non-compliance
- E. <u>Canteen</u>:
  - a. Must be open during production hours
  - b. Auditor(s) must note an observation if the canteen is not open during all production hours
- F. Cleaners and Loaders:
  - a. Temporary/subcontracted cleaners and loaders are permissible as long as the contracts are signed and regularly reviewed
  - b. Auditors must raise observations for facilities who subcontract cleaners and loaders

- G. Basements:
  - a. No production activities may occur in a basement
  - b. Auditors will raise basement production activity as an observation starting January 1, 2020
  - c. After a second certification cycle, basement production will be raised as a non-compliance
- H. Shared Building:
  - a. Facilities that share a building with other business operations must conduct joint emergency evacuation drills

#### 23.2 China

- A. Facilities must cover 100% of work-injury insurance
  - a. Can be a combination of national insurance and commercial insurance

#### 23.3 Jordan

- A. Facilities must pay at least the same local minimum wages to foreign migrant workers
- B. These wages should be distributed fairly when compared to permanent Jordanian workers

#### 23.4 Indonesia

A. Facilities must convert eligible temporary workers to permanent status

## 24. Frequently Asked Questions

- Who performs WRAP audits?
  - WRAP audits are primarily carried out by our accredited monitoring firms, though we do use WRAP's own staff auditors to carry them out from time to time.
- How much does a WRAP audit cost?
  - The price of WRAP audits is set by the monitoring firms that carry them out and are largely a function of the size of the facility and its location. WRAP does not have a set pricing schedule for audits.
- How often are factories audited?
  - There is no limit on how many times a facility can be audited, meaning that they can be inspected as many times as it takes for them to pass as long as they maintain a valid registration with WRAP. Successive audits must generally be conducted at least 45 days apart, however. For certified facilities, the frequency of audits depends on the certification level. Silver facilities are inspected at least every 6 months, Gold facilities are inspected at least every year, and Platinum facilities are inspected at least once every two years. All certified facilities, regardless of certification level, are also subject to random, unannounced <u>Post</u> <u>Certification Assessments (PCAs)</u> that can occur at any time and have no limit on how often they can be performed.
- Are WRAP audits announced to the factories?
  - No. All of our audits are unannounced. Certification audits take place within a four-week window while PCAs are conducted at random and can occur at any time.
- What qualifications do WRAP auditors have?
  - WRAP uses only experienced auditors who are employed by our accredited monitoring firms. All WRAP auditors must undergo our IRCA-certified Lead Auditor Training Course and attend regular refresher training sessions.
- Why are audits important to WRAP?
  - Audits are a vital part of WRAP's multi-faceted, collaborative approach to social compliance. We understand that a production facility cannot simply be "audited into compliance," therefore our audits serve more as a starting point for us to begin a collaborative dialogue with our facilities about what it takes to get them to a compliant state. Our audits also go beyond simple facility walk-throughs in that they are designed to look for objective evidence that effective management systems are in place to maintain a facility's compliance through its day-to-day operations.
- How do I become a WRAP auditor?
  - You must be an experienced auditor employed by one of our accredited monitoring firms to begin training as a WRAP auditor.

- What training courses does WRAP offer?
  - We currently offer 4 different courses: Internal Auditor Training, Lead Auditor Training, Fire Safety Awareness, and CTPAT for Foreign Manufacturers. See our <u>Training page</u> for more information.
- Who can take a WRAP training course?
  - Our Internal Auditor, Fire Safety Training, and CTPAT courses are open to anybody; however, our Lead Auditor Course is intended only for our accredited auditors.
- How much do WRAP's training courses cost?
  - The cost varies depending on the course. See our <u>Training page</u> more information.
- What qualifications do WRAP trainers have?
  - All of our trainers are WRAP staff members with extensive experience administering social compliance education programs.

## **25. Glossary of Terms**

- Alternative to Decertification (ATD) Letter: In an ATD letter, the facility agrees with outcome of the PCA audit and will pay for the monitoring firm/WRAP to conduct an onsite follow-up audit.
- Association of Professional Social Compliance Auditors (APSCA): APSCA is an industry association of social compliance auditors that seeks to enhance the professionalism, consistency, and credibility of the individuals and organizations performing independent social compliance audits. All monitoring firms and auditors conducting WRAP audits must be members of APSCA.
- **Business License**: A legal document from local government authorities that certifies a facility's permission to operate under their name and at their address.
- **Canteen**: A facility's canteen is where food is prepared and served. It must have relevant canteen licenses required by WRAP and by local law.
- **CAPTCHA**: Stands for Completely Automatic Public Turing Test to Tell Computers and Humans Apart. It is a program set in place to differentiate human from robot input, and it is used to ward off spam and automated data theft.
- **Corrective Action Plan (CAP) report**: An audit report submitted to WRAP by the auditor(s) if there were non-compliances found during the audit. A CAP report can be issued before a facility is certified or after a PCA.
- **CTPAT** (**Customs Trade Partnership Against Terrorism**): "A voluntary publicprivate sector partnership program which recognizes that CBP can provide the highest level of cargo security only through close cooperation with the principle stakeholders of the international supply chain such as importers, carriers, consolidators, licensed customs brokers, and manufacturers. The Security and Accountability for Every Port Act of 2006 provided a statutory framework for the CTPAT program and imposed strict program oversight requirements." <u>CTPAT: Customs Trade Partnership Against Terrorism | U.S.</u> <u>Customs and Border Protection (cbp.gov)</u>
- **Desktop Review**: A follow-up to an initial audit in which the facility management can send the auditor(s) proof to close non-compliances without the auditor(s) revisiting the facility. This must take place within 30 days from the initial audit date.
- **Follow-Up Audit**: Any audit in the current certification cycle that is conducted after an initial audit in which non-compliances were found. Multiple follow-up audits can occur within the six-month period the facility is given before payment expires.
- **Initial Audit**: In any given certification cycle, the first audit conducted at a facility after they have applied.
- **Interim WHAP**: A follow-up conducted six months after the facility submitted a WHAP. WRAP contacts the facility to monitor their progress on reducing working hours according to the plan outlined in the WHAP.

- **Lapsed Facility**: Facilities that have been WRAP-certified before but have not had any audit activities take place in the year after their last certificate expired.
- **Man-Days**: The number days the auditor(s) will be at the facility to complete the audit multiplied by the number of auditors conducting the audit.
  - For example, if two auditors conduct an initial audit at your facility that lasts two days, the total number of man-days at the facility is 4.
- **New Facility**: Facilities going through the certification process for the first time, or that have previously been certified by WRAP but have since moved to a new address/location.
- **Objective Evidence**: Proof a facility presents to a monitoring firm to close noncompliances and reasonably assure that the non-compliance will not be raised again. Can be submitted for Desktop Review as a photo with a date and time stamp or a document. Can be visually assessed by the auditor(s) during an onsite follow-up audit.
- **Onsite Follow-Up Audit**: A follow-up to an initial audit that requires the auditor(s) to revisit the facility to assess evidence to close the non-compliances raised in the facility's CAP report. It may not occur sooner than 45 days after the initial audit date.
- **Post Certification Assessment (PCA)**: An unannounced audit that occurs after a facility is certified, led either by WRAP staff or the facility's auditor(s) during the certification cycle.
- **Pre-Audit Self-Assessment (PASA)**: The Pre-Audit Self-Assessment is a document WRAP requires all facilities to complete before they choose a monitoring firm and their initial audit is conducted. It is used to show that facilities have been implementing socially compliant practices for a continuous period of time. New facilities are required to demonstrate at least three consecutive months. Renew facilities are expected to have been compliant throughout their preceding certification period.
- **Recommendation report**: An audit report submitted to WRAP by the auditor(s) if there were no non-compliances found during the audit. A recommendation report will be issued before a facility is certified.
- **Renew Facility**: Facilities that have previously been certified or audited in the last 12 months. Their current certificates may still be valid while in the process of being audited.
- **Urgent Business Needs**: A temporary situation the facility cannot control (e.g., strike, power outage, flood) that requires workers to work more than six consecutive days to meet production deadlines, not to exceed 13 consecutive days.
- Working Hour Action Plan (WHAP): A WHAP is a roadmap document that outlines an actionable, verifiable plan for a production facility to gradually come into compliance with their country's local working hour laws.
- Young Worker: A worker in a facility who is under the age of 18 and older than the legal youngest age for a worker or 14, depending on which age is higher.

• **4 by 4**: A work schedule in a facility in which one shift (e.g., Shift A) works for four days, then has four days off. When Shift A is off, the second shift (e.g., Shift B) works for four days.

# **Appendix 1: WRAP Contact Information**

WRAP Contact Information				
Payment and Registration				
Dawn Williams	vn Williams <u>dwilliams@wrapcompliance.org</u>			
Paulette Smith <u>psmith@wrapcompliance.org</u>				
Compliance Administration				
Srishti Sharma	ssharma@wrapcompliance.org			
Bryanna Weedeman	bweedeman@wrapcompliance.org			
Lauren Watrobsky	lwatrobsky@wrapcompliance.org			
Compliance Assurance				
Hong Mei	hmei@wrapcompliance.org			

For Country Specific contacts, please refer to <u>http://www.wrapcompliance.org/en/contact-wrap</u>.

### **Appendix 2: WRAP's 12 Principles**

The WRAP Principles are based on generally accepted international workplace standards, local laws and workplace regulations, and include the spirit or language of relevant conventions of the International Labor Organization (ILO), the United Nations Guiding Principles on Business and Human Rights, and the Organization for Economic Cooperation and Development (OECD)'s Guidelines for Multinational Enterprises. The Principles encompass human resources management, health and safety, environmental practices, and legal compliance including import/export and customs compliance and security standards.

The Principles are meant to promote responsible business practices and sustainability in supply chain management, and contribute to the advancement of the United Nations Sustainable Development Goals (SDGs), in particular SDG 8 (Decent Work and Economic Growth) and SDG 12 (Responsible Consumption and Production).

The WRAP Certification Program's objective is to independently monitor and certify compliance with these standards, to ensure that sewn products are being produced under safe, lawful, humane and ethical conditions. Participating facilities voluntarily commit to ensuring that their manufacturing practices will meet these standards, and further commit to passing along, on their part, the expectation that their contractors and suppliers likewise comply with these standards.

#### 1. Compliance with Laws and Workplace Regulations

Facilities will comply with laws and regulations in all locations where they conduct business.

All facilities will comply with the legal requirements and standards of their industry under the local and national laws of the jurisdictions in which the facilities are doing business, along with any applicable international laws. This will cover all labor and employment laws of those jurisdictions, as well as laws governing the conduct of business in general, including rules and standards of ethics dealing with corruption and transparency, and any relevant environmental laws.

#### 2. Prohibition of Forced Labor

Facilities will not use involuntary, forced or trafficked labor.

Facilities will maintain employment strictly on a voluntary basis. Facilities will not use any forced, prison, indentured, bonded or trafficked labor. This will include ensuring that any workers they hire will be under labor contracts that fully comply with all relevant legal requirements and do not impose any form of coercion (including imposing substantial fines or loss of residency papers by workers leaving employment or restricting a worker's ability to voluntarily end his/her employment). In addition, workers should not be employed subject to any financial or collateral guarantee or debt security; any recruitment fees involved should be borne by facilities, not workers. Further, facilities will ensure that the workers' travel documents are not withheld, and that all written contracts are in a language understood by the workers.

#### 3. Prohibition of Child Labor

Facilities will not hire any employee under the age of 15 (14 in less-developed countries) or under the minimum age established by law for employment, whichever is greater, or any employee whose employment would interfere with compulsory schooling.

Facilities will ensure they do not engage in any form of child labor, including, but not limited to, the internationally recognized worst forms of child labor. Consistent with ILO Convention 138, facilities may not employ any person at an age younger than the law of the jurisdiction allows and in any case not below the age of 15 (14 in less-developed countries), even if permitted by local law. In addition, facilities will adhere to local legal requirements regarding mandatory schooling. Further, if, where permitted by local law, a facility employs young workers (defined as workers whose age is between the minimum age of employment and 18 years), the facility will also comply with any applicable legal restrictions on the nature and volume of work performed by such young workers, as well as any other requirements imposed by law, including limitations related to working hours and to ensuring that such young workers do not perform any hazardous work (e.g., chemical handling or operating heavy machinery).

#### 4. Prohibition of Harassment and Abuse

Facilities will provide a work environment free of supervisory or co-worker harassment and abuse, and free of corporal punishment in any form.

Facilities will ensure a workplace that is respectful of a worker's rights and dignity. This includes ensuring that no corporal punishment or physical coercion be used. Facilities will not engage in or tolerate – either at the workplace or in residential quarters provided by facilities or labor brokers acting on their behalf – any sexual harassment or abuse, indecent or threatening gestures, abusive tone or language or any other kind of undesired physical or verbal contact, such as bullying. In particular, facilities will ensure proper training at all levels - including management, supervisors and workers - to secure a workplace free of harassment and abuse.

#### 5. Compensation and Benefits

Facilities will pay at least the minimum total compensation required by local law, including all mandated wages, allowances and benefits.

Facilities will ensure proper compensation for their employees for all the work done, by providing in a timely manner all the wages and benefits that are in compliance with the local and national laws of the jurisdiction in which they are located. This will include any premiums for overtime work or work done during holidays, as well as any other allowances or benefits, including any mandatory social insurance, required by local law.

#### 6. Hours of Work

Hours worked each day, and days worked each week and each month, should not exceed the limitations of the country's law. Facilities will provide at least one day off in every sevenday period, except as required to meet urgent business needs.

Facilities are required by local law to adhere to any limits set on regular working hours as well as any limits set on overtime work. Long term participation in the WRAP Certification Program is contingent upon meeting the limitations set by local law. WRAP recognizes that this can be a particularly challenging requirement, especially when taking into account local enforcement norms and customs. In light of this reality, WRAP will permit full compliance with local laws on working hours to be achieved incrementally, provided that a given facility meets the following conditions: is fully transparent about its working hours; ensures that those hours are all being worked voluntarily, in conditions that protect worker safety and health; compensates all employees in keeping with WRAP Principle 5; and shows improvement toward meeting the working hours' requirements from one audit to the next.

#### 7. Prohibition of Discrimination

Facilities will employ, pay, promote, and terminate workers on the basis of their ability to do the job, rather than on the basis of personal characteristics or beliefs.

Facilities will ensure that all terms and conditions of employment are based on an individual's ability to do the job, and not on the basis of any personal characteristics or beliefs. Facilities will ensure that any employment decision - involving hiring, firing, assigning work, paying or promoting - is made without discriminating against the employees on the basis of race, color, national origin, gender, age, sexual orientation, religion, disability, or other similar factors (pregnancy, political opinion or affiliation, social status, etc.).

#### 8. Health and Safety

Facilities will provide a safe and healthy work environment. Where residential housing is provided for workers, either directly by facilities or through labor brokers, facilities will ensure it is safe and healthy housing.

Facilities will provide a safe, clean, healthy and productive workplace for their employees. Facilities shall prioritize worker health and safety above all else, and proactively address any safety issues that could arise. This will include a wide variety of requirements, such as, ensuring, among other things, the availability of clean drinking water (at no charge to workers), adequate medical resources, fire exits and safety equipment, well-lighted and comfortable workstations, clean restrooms. Further, facilities shall adequately train all their workers on how to perform their jobs safely.

#### 9. Freedom of Association and Collective Bargaining

Facilities will recognize and respect the right of employees to exercise their lawful rights of free association and collective bargaining.

Facilities will respect the freedom of each employee to choose for him- or her-self whether or not to join a workers' association. Facilities cannot discriminate against workers based on whether or not they choose to associate. Both the facility and the workers shall ensure they conduct themselves in accordance with all relevant laws in this regard. Facilities will ensure an effective mechanism is in place to address any workplace grievances.

#### **10. Environment**

Facilities will comply with environmental rules, regulations and standards applicable to their operations, and will observe environmentally conscious practices in all locations where they operate.

Facilities will ensure compliance with all applicable legally mandated environmental standards, and should demonstrate a commitment to protecting the environment by actively monitoring their environmental practices. In particular, facilities will ensure proper waste management, including monitoring the disposal of any waste material - whether solid, liquid or gaseous - to ensure such disposal is done safely and in a manner consistent with all relevant laws. Facilities are encouraged to minimize their impact on the environment by applying the principles of reduce, reuse and recycle throughout their operations.

#### **11. Customs Compliance**

Facilities will comply with applicable customs laws, and in particular, will establish and maintain programs to comply with customs laws regarding illegal transshipment of finished products.

Facilities will ensure that all merchandise is accurately marked or labeled in compliance with all applicable laws. In addition, facilities will keep records for all materials and orders, as well as maintain detailed production records.

#### 12. Security

Facilities will maintain appropriate procedures in order to ensure proper corporate security, transportation security, and people and physical security at the facility.

Facilities will ensure adequate controls are in place to safeguard against introduction of any non-manifested cargo. In this regard, WRAP recognizes the United States Customs and Border Protection (CBP)'s CTPAT Guidelines for Foreign Manufacturers as minimum requirements and has adopted those guidelines under this Principle.

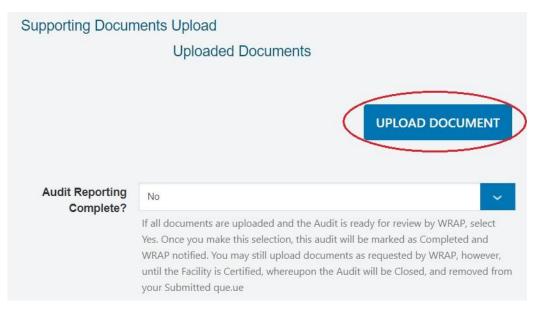
# **Appendix 3: Document Uploading Instructions**

Step 1: Click on the WRAP ID for which you would like to upload a document.

Open Audits	Submitted to WRAP	PCA Assignments	Contacts	Addresses	Notes	Orders	
WRAP ID		Facility		Туре		Country	Pmnt Exp
12345	ABC Company			Initial		Vietnam	3/19/2020
123456	ABCD Company			Initial		Vietnam	3/6/2020
				Initial		Vietnam	3/6/2020
				Initial		Vietnam	3/8/2020

Step 2: Complete the Audit Submission form as before, including all required fields.

Step 3: Click on Upload Document – the document upload link will take you to a new page.



## Auditors' Handbook

Step 4: Select the correct Document Type and Choose File and click Submit.

Document Type *	✓
WRAP ID	126025
Application ID	82315
Audit ID	28755
Upload Document	Choose File No file chosen
	Overwrite existing files
	SUBMIT RETURN

Step 5: Clicking Submit will take you back to the Audit Submission form and allow you to upload additional documents.

*Note – You will now be able to upload revised reports for facilities that have already moved to the Submitted to WRAP tab.* 

If you have any questions or concerns, please email the Compliance Department.

# Appendix 4: WRAP Man-Day, Interview, and Record Review Requirements



### **Worldwide Responsible Accredited Production**

### **Certification Program**

### Effective January 1, 2021

## Minimum Man-Day\* Requirements

Number of Workers**	Minimum Man-Days
1 - 50	1
51 - 100	2
101 - 500	3
501-1000	3.5
1000+	4

\* The man days in the above chart are WRAP's minimum requirements. One-man day equals 8 hours, including lunch time but excluding travel time.

\*\* The total number of workers does not include management & admin staff but does include onsite contract workers.

Number of Workers	Individual Interviews	Group Interviews	Records from Interviewed Workers	Records from Non- Interviewed Workers	Total # of Records for Three Reviewed Periods
1-10	3	0	3	0	3 × 3 = 9
11-25	5	0	5	0	5 × 3 = 15
26-30	8	0	8	0	8 × 3 = 24
31-50	10	0	10	0	$10 \times 3 = 30$
51-80	10	1×5	10	5	15 × 3 = 45
81-100	10	2×4	10	8	18 × 3 = 54
101-250	10	2×5	10	10	20 × 3 = 60
251-500	15	2×5	15	10	25 × 3 = 75
501-1000	15	3×5	15	15	30 × 3 = 90
100 <mark>1</mark> +	17	3×6	17	18	35 × 3 = 105

### **Interview and Record Review Requirements**

Document Name: WRAP Minimum Man-Days, Interviews & Record Review Requirements January 2021 Edition

#### **Record Review Period Requirements**

New Facilities: The records of the past 90 days are required to be reviewed. Re-certification Facilities: three periods, peak period, current period and random period, are required to be reviewed.

Number of Workers	Individual Interviews	Group Interviews*	Approximate Time (Minutes)
1-10	3	0	60
11-25	5	0	100
26-30	8	0	160
31-50	10	0	200
51-80	10	1×5	230
81-100	10	2×4	260
101-250	10	2×5	260
251-500	15	2×5	330
501-1000	15	3×5	360
1001 +	17	3×6	430

### **Workers Interview Guidelines**

As stated in the above chart, group interviews must take place for the facilities with more than 50 workers.

When selecting workers for the interview, select a sample of workers from various locations of the facility/departments, various shifts, different nationalities/ethnicities (if applicable), different age groups (including young-looking workers), union and non-union workers, workers' committee members, security guards, canteen workers, isolated workers, etc. If a region/country is prone to certain risks, auditors must make sure the worker selections would include representatives from those groups potentially affected by the risks.

Note: Sample sizes are minimums and should be increased as necessary (at least 5 new selected samples) to address any suspected non-compliances that cannot be concluded from existing samples.

AUDITS AND AUDIT REPORTS THAT DO NOT FOLLOW THESE REQUIREMENTS WILL NOT BE ACCEPTED.

Document Name: WRAP Minimum Man-Days, Interviews & Record Review Requirements January 2021 Edition

# **Appendix 5: Opening Meeting Checklist**



## Worldwide Responsible Accredited Production Certification Program

## **Opening Meeting Checklist**

Facility WRAP ID:	Audit date(s):	
Facility name:		

The purpose of this document is to ensure that the facility is fully aware of the audit process, procedures, and their role during the audit.

ITEM	ACTIVITY	DONE
1.	Introduce to facility management the audit team member(s) and their role(s) during	
	the audit	
2.	Discuss the purpose of the visit, including the scope of the audit and an overview of	
6	WRAP 12 Principles	
3.	Explain the audit process, including keeping facility informed of findings	
4.	Emphasize that the audit is conducted on a sampling basis	
5.	Explain and have management sign WRAP's Zero Tolerance Policies, Transparency	
	Policy, and Working Hour Action Plan	5
6.	Ensure confidentiality of the audit and of the workers' interviews	
7.	Emphasize to management that interviewed workers should not face any	
-	repercussions from management	
8.	Confirm availability and privacy of office space	
9.	Confirm facility's main contact for the audit and for document requests	
10.	Ask for the peak production period and explain the record requirements	
11.	Arrange for a facility tour and confirm attendees	
12.	If not sent prior to the audit, obtain a floor plan of the facility and	
	dormitory(ies)/apartment(s)	
13.	Ask facility's permission to take photos during audit	
14.	Obtain a list of chemicals used or stored in the facility, including any hazardous	
G	chemicals that auditors should be aware of	
15.	Ask for a copy of internal monitoring and a copy of documented risk assessments.	
	Use these during the facility tour and management interviews	
16.	Inquire if any fire drill is scheduled to take place during the audit	
17.	Ensure management understands that there will be a closing meeting at the end to	
-	discuss the result of the audit	
18.	Agree to a tentative time for closing meeting. Ensure there will be enough time to re-	
	investigate non-compliances if challenged (or verify if already addressed), e.g. find out	
	what time the workers leave as it may be necessary to re-interview to verify a response	
19.	Inform facility that they can contact WRAP directly for any feedback, complaints or	
	appeals	
20.	Ask the management team if they have any questions	

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# **Appendix 6: Closing Meeting Checklist**



## Worldwide Responsible Accredited Production Certification Program

## **Closing Meeting Checklist**

Facility WRAP ID:	Audit date(s):	
Facility name:		

ITEM	ACTIVITY	DONE
1.	Thank management for their time and patience	
2.	Tell them about the good things you observed during the audit	
	NOTE: document the best practices in audit report	
3.	If applicable, explain that you have observed some instances where the	
	facility is not in compliance with WRAP Principles (clarify issue/date status)	
	and local law	
4.	Explain that the audit was based on a sample examination of their facility and	
	there may be some non-compliances that were not observed	
5.	If facility does not agree with any findings, ask for evidence proving that the	
	finding is inaccurate	
6.	Ask management to suggest corrective actions specific to each non-	
	compliance and projected completion dates for each corrective action	
7.	If relevant evidence is produced, a non-compliance may be closed prior to	
	the closing meeting	
8.	Ask management to sign the CAP	
9.	Remind management that they may challenge findings. If they disagree with	
	them, they can contact WRAP directly and explain their position	
10.	Explain that the full report will be sent to the facility within 10 business days	
	after the audit. Facility can also download the report, including the revised	
	version if any, from WRAP's platform	
11.	Emphasize to management that interviewed workers should not face any	
	repercussions from management	
12.	Ask the management team if they have any questions	

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# **Appendix 7: WRAP's Zero Tolerance Policy**



# WRAP's Zero Tolerance Policy

#### Zero Tolerance Policy - Factories

If at any time WRAP learns that any factory in the WRAP Program is actively participating in or associated with any of the below Zero Tolerance issues, the factory will be automatically decertified (if applicable) and banned from the WRAP Program in all capacities without the option to return nor be certified in the future.

- 1. Deliberate and ongoing human rights violations
  - Child labor including the worst forms of child labor (slavery, forced labor, trafficking, serfdom, debt bondage, prostitution, pornography, work that involves children in illicit activity, or work that is likely to harm the child physically or morally)
  - Forced labor (bonded labor, not allowing workers to leave at their own will, forced to work overtime)
  - Inhumane treatment (use of threats of physical harm or extreme intimidation, corporal punishment, mental or physical coercion)
- 2. Unethical actions that encourage the auditor(s) to compromise their integrity
- 3. Threatening physical harm towards audit team
- 4. False representation of certificate or audit report (i.e. altered or fake certificates or reports)
- False representation of production processes (i.e. hiding full/partial production floors and/or processes from auditor)

#### Zero Tolerance Policy – Auditors/Monitoring Firms

If at any time WRAP learns that any WRAP accredited auditors or monitoring firms have been or are practicing any of the below Zero Tolerance issues, WRAP will conduct a full investigation, demanding full cooperation of all parties involved.

If an investigation culminates in a reasoned conclusion that an accredited auditor or monitoring firm has or is/are violating the Zero Tolerance policy, they will be deaccredited and no longer allowed to conduct WRAP audits. Auditors who are deaccredited will *not* be approved to conduct WRAP audits if they join another monitoring firm. There may be additional consequences to the monitoring firm itself based on the culpability of the mismanagement of an auditor or the involvement in any of the below:

- 1. Unethical actions that encourage the factory, consultants, other auditors, WRAP staff, etc. to compromise their integrity
- 2. Solicitation or receipt of gifts, services, unpaid meals, money, or other items of value from persons involved with WRAP audits
- 3. Threatening physical harm towards factory, other auditors, WRAP staff, etc.
- 4. Flagrant oversight of production processes and sections of factory building(s) or an entire building(s)
- 5. Flagrant misreporting of actual time in and out at the factory on the audit report and/or the number and names of auditors attending an audit
- 6. The revealing of an audit date(s), whether explicitly or implicitly, to a factory, consultant, friend, or anyone who is not involved in the execution of the audit
- 7. Flagrant oversight or misreporting of any Factory Zero Tolerance issues as listed above

WRAP's Zero Tolerance Policy

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# **Appendix 8: WRAP Report Review Checklist**



#### WRAP Guidelines for Report Review 1. **EVERY** question must have a box checked as YES, NO, or NA with the appropriate commentary 2. Do NOT remove ANY text from the report or make changes to formatting Audit Report Cover Page 3. Facility name and address should be consistent with I, II, Q1, Q9 and the platform. If not, clarify with the monitoring firm 4. WRAP ID# matches with QIII and Q2 5. Report Type matches with QIV and Q8 6. CAP Pages are entirely filled out and complete. If no local laws apply, it should be noted under WRAP clause number. (Part A must be specific and concise, a specific date/ timeframe noted for part B and the same person cannot be designated for every non-compliance under part C.) 7. Non-compliances raised on the CAP Pages given the appropriate rating (Refer to Observation Memo) FULL scanned and signed signature page inserted in the report after the CAP pages 8 Audit Photos 9. Photos cannot be blurry, and include a clearly printed date and time stamp **Detailed** Report 10. Q4, if an audit is conducted at a facility that has not been certified in the last 12 months without any audit activity, it should be marked as lapsed and treated as a new facility for minimum man days and interviews conducted 11. Q6, should be YES. If NO, they should have informed WRAP prior to or during audit. 12. Q23, Lead auditor must be WRAP accredited with an APSCA auditor # 13. Q37, to ensure facility is in WRAP scope as sewn product industry 14. Q42, if shared building(s), list all tenants in the building and specify which floors/sections are covered by this audit. 15. Q50, noted as months, can be marked NA with an explanation such as "evenly distributed", "not obvious" 16. Q54, must match answers provided for questions 8.73-8.93 17. Q55, can be blank if Q54 is marked NO 18. Q61, noted as months, can be marked NA 19. "Personnel Information" is thoroughly filled out 20. Q62-70, noted as numeric value 21. Workforce Composition table 22. Q93, total # of employees, update the platform values do not match 23. Non-Compliance table, if box is checked under local or national law it should be marked under WRAP Principles 24. 1.1a, to be in compliance, the answer must be YES 25. 1.3a and 1.3b, if the facility conducts internal monitoring, the answer should be YES with commentary noting any past/corrected non-compliances 26. 1.7-1.11, subcontracting questions, checked for thoroughness and must match answers provided for 11.5. Names and addresses must be in English. 27. 1.12, include names of raw material suppliers in commentary, subcontractors noted in 1.7-1.11 are normally NOT suppliers 28. 2.15b and 2.15c, checkboxes match commentary 29. 2.19-2.21, must be marked NO to be in compliance 30. 2.22a, must be marked YES to be in compliance 31. Wage Analysis table under Principle 5 Thoroughly filled out, # of record reviews meets WRAP requirements For Social Insurance Analysis table: If 100% of workers are not covered, must have detailed explanation. 32. Insurance under Principle 5 (country specific) For China: Must cover 100% of workers for work injury insurance If not 100% for other types of insurance, must have a waiver attached at the end of this Principle. 33. 6.5, must be NO to be in compliance, unless factory work under UBN. In which case, details must be provided. 34. 6.7a, must be YES to be in compliance 35. 6.9, must be YES to be in compliance 36. Hours of Work Analysis table under Principle 6 (3rd sample size can be 20% less), periods reviewed and sample size must match Wages Analysis table under Principle 5

April 18, 2019

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37.	7.13, must be YES to be in compliance
38.	8.4a, must be marked YES to be in compliance
39.	8.10e, NC must be raised if fire drills are not conducted at a minimum once every six months (with a one-month grace period)
40.	8.13 and 8.14, must be NO to be in compliance
41.	8.19, must be YES to be in compliance
42.	8.42a-d, must be YES to be in compliance. If 8.24c is No, review explanation.
43.	8.63, must be NO to be in compliance. This question can only be answered NA if simple air tanks are used or the facility does not use boilers/compressors.
44.	
45.	8.73 (if NO, the rest of the questions can be left BLANK)
46.	8.77 (if the facility has dorms)
47.	9.6, a suggestion box cannot be the ONLY grievance mechanism
48.	9.7, if <b>YES</b> the name of the union, association, workers' committee or collective representation's name should be noted in commentary. If there is not a specific name, the <b>name of the person responsible</b> must be noted in commentary.
49.	10.8, must be NO to be in compliance
50.	11.2c & 11.5k: if NO or N/A, must provide explanation. If facility is not exporting but sending goods to exporting facility, factories still need to have documents
51.	12.3a and b, must be YES to be in compliance
52.	12.5a and b, must be YES to be in compliance
53.	12.25b, exporting facilities must have 30 days of CCTV records

# **Appendix 9: Name Change Form**



### WRAP Facility Name/Address Change Form

Original Name of the Facility			
Facility's WRAP ID			
Facility's Contact Person Name			
Title of Contact Person			
Phone/Email			
	Street Address		
Original Facility Address	City	State	
	Zip/Postal Code	Country	

## Facility's New Name (If Applicable)

|--|

### Facility's New Address (If Applicable)

	Street Address		
New Address	City	State	
	Zip/Postal Code	Country	

Name and Title:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Document Name: WRAP Facility Name/Location Change Form Issue Date: September 5, 2018 1

# Appendix 10: WHAP 3.0 Template



### Worldwide Responsible Accredited Production

Working Hours Action Plan 3.0 (Effective July 20, 2020)

Working Hours Action Plan (WHAP) is a tool to help facilities that experience challenges with excessive working hours define an action plan to systematically reduce overtime hours. The overall goal is to work towards attaining full compliance with the local laws.

The facility fills out Sections I & II below. The auditor assesses them and provides comments in Section III. WRAP has issued a separate guidance document. Please refer to it on how to fill out or assess a WHAP.

1. Facility name:			
2. Facility WRAP ID #:		3. Country:	
4. Facility type:	□ New certification	□ Renew Certification	□ Lapsed
5. Latest onsite audit date(s): e.g.: July 18 - 19, 2019		6. WHAP from last certification cycle:	□ Yes □ No

Section I. Working Hours, Observations Noted, and Reduction Target

	a. Regular working hours	b. Legally allowed overtime hours	c. Any excessive overtime hours raised as observation (Yes, No or N/A)	d. Highest hours observed (Taken from Principle 6 in initial audit report)	e. Reduction target (choose ONE target only)
7. Daily:					
8. Weekly:					
9. Monthly:					
10. Quarterly:					
11. Yearly:					
12. Others:					

#### Section II A. Top Three (3) Main Processes with HIGHEST Working Hours for Reduction Target (No need to list the processes if the hours do not exceed legal limit.)

	a. Processes	b. List HIGHEST working hours of the target chosen in Section I e above:	c. Provide two periods with highest working hours in b:
13. Process 1:			
14. Process 2:			
15. Process 3:			

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16. Root Causes	17. Improvement Actions (Actions must be specific. e.g., management will hire about 15 sewing workers within 30 days to reduce the hours in sewing department.)
a.	
b.	
с.	
18. Facility responsible person(s)' name & date:	

### Section II B. Root Causes for Excessive Hours and Improvement Actions

Section III. Auditor's Assessment

		a. Target Set in Last WHAP	b. Target achieved (Yes, No, or N/A)
	Daily		
19. Has facility achieved the recertification	Weekly		
target(s) set in last WHAP, if applicable?	Monthly		
	Quarterly		
	Yearly		
	Other		
20. a. Provide any comments on the improvement actions taken by facility (as compared with last WHAP), if applicable:			
b. If this is the facility's first WHAP, are the improvement actions proposed in <b>Q17</b> acceptable?	<ul> <li>Yes</li> <li>Provide reas</li> <li>No</li> <li>Provide reas</li> </ul>		
21. What is the facility's average weekly working hours (data should be taken from Principle 6 in initial audit report)?			
22. Auditor's name and date reviewed:			

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# Section IV. Facility Interim WHAP Status

## (TO BE COMPLETED BY FACILITY 6 MONTHS AFTER CERTIFICATION)

Complete whichever that applies	a. Interim status on highest working hours during the past 6 months	b. Date of Reporting
23. Daily:		
24. Weekly:		
25. Monthly:		
26. Quarterly:		
27. Yearly:		
<b>28</b> . Other:		

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