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RBA VAP Standard

V8.1 – September 2026

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1. Introduction

1.1 Objective

The mission of the RBA is that members, suppliers, and stakeholders collaborate to improve working and environmental conditions and business performance through leading standards and practices.

Fundamental to the RBA Code of Conduct (hereby referred to as "RBA Code") is the understanding that a business, in all its activities, must operate in full compliance with the laws, rules, and regulations of the countries in which it operates. The RBA encourages companies to go beyond legal compliance, drawing upon internationally recognized standards to advance responsible business conduct.

The RBA Code may be voluntarily adopted by any business, and applied by that business to its direct and indirect supply chain and subcontractors. To adopt the RBA Code and become a participant ("Participant"), a business shall declare its support for the RBA Code and seek to conform to the RBA Code and its Standards in accordance with a management system as set forth in the Code.

For the RBA Code to be successful, it is acknowledged that Participants should regard the RBA Code as a total supply chain initiative. At a minimum, companies shall require their next tier suppliers to acknowledge and implement the RBA Code. The RBA is committed to obtaining regular input from stakeholders in the continued development and implementation of the RBA Code.

This document is intended to provide the minimum conformance requirements to comply with the RBA Code, as well as to serve as a guideline for a deeper understanding of these core requirements by offering companies elements they can implement in their operations to demonstrate compliance to the RBA Code. Throughout the document, the requirements and additional guidelines will be clearly separated to differentiate the obligations from the optional implementation paths.

1.2 Document Format

This document begins with a program and process explanation on the RBA Code and RBA Validated Assessment Program (VAP) and Assessments that utilize the VAP protocol.

The VAP Standard follows the process explanation. The information below explains how the VAP Standard part is formatted:

Each element of the RBA Code is presented in this document covering the following elements:

1- The minimum conformance requirements: These are the implementation requirements that must be met by an Entity to show full conformance to the RBA Code. The requirements are structured as below:

Minimum Conformance Requirements	
Core Requirement Defines the key risk to be controlled and the required outcome	Specific Conditions Defines any non-negotiable specific conditions that must still be met

2- Serious conditions that would be considered as priority risk as per the RBA Code: For each Code element, a list of conditions that would be considered priority risk is provided.

Finally, Annexes are available at the end of the document to support the Entities in further understanding the RBA VAP, as well as in internal evaluations to understand their level of preparedness or compliance against the RBA Code of Conduct and a possible RBA Assessment. These include:

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Annex 1 - Additional Guidance: These are guidelines Entities can follow to support their implementation of the minimum conformance requirements, and where needed, to aspire for leadership-level improvements. Where relevant, the additional guidance annex provides specific clarification on concepts, and provides visuals for better understanding.

- Annex 2 - Required/Relevant Documents List: This list is to support Entities in preparation for a VAP. The Critical Document List within this annex is especially important for Entities to have a smooth start into their activity.
- Annex 3 - Definitions: This annex provides the definitions of the most important concepts used throughout this document.
- Annex 4 - Health and Safety Checklists: These checklists are prepared to support the Entity in understanding their potential gaps compared to the RBA VAP criteria. They can be utilized for continuous monitoring, as well as for pre-assessment purposes.
- Annex 5 - Prison Labor Checklist: This checklist is specifically designed to support the Entity in understanding their potential gaps compared to the RBA VAP criteria if they utilize prison labor. Similar to Annex 4, this checklist can be utilized for continuous monitoring, as well as for pre-assessment purposes.

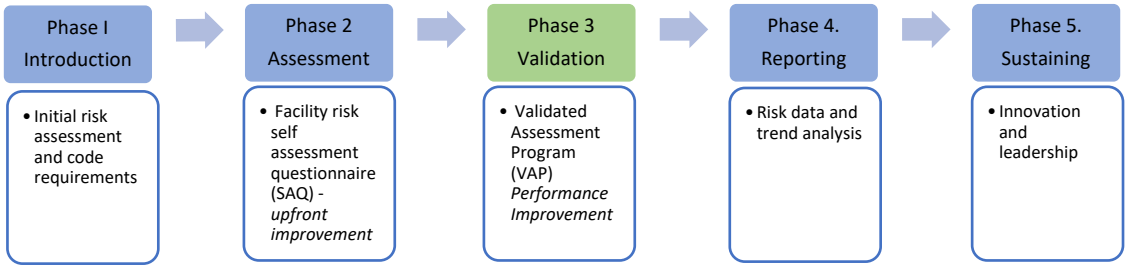
2. Key Links to VAP Resources

- RBA Code of Conduct
- RBA Pulse Assessment Standard
- RBA VAP Indirect Spending Protocol
- RBA Definition of Fees

3. Validated Assessment Program (VAP)

The goal of the VAP is to measure and foster improvement in environmental, social, and governance performance and build capability within the supply chain.

The VAP produces in-depth evaluations of the social, ethical, occupational health and safety and environmental performance of Entities as measured against the assessment criteria. The assessment criteria are based on the stricter of applicable law, the RBA Code of Conduct or customer requirements.



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The objectives of the VAP are to:

- Encourage broad understanding and adoption of leading responsible business practices by all Entities.
- Reinforce the responsible business expectations with Entities and ensure they are working towards improvements.
- Verify conformance with the RBA Assessment Criteria (AC).
- Identify opportunities for improvement in Entity responsible business practices, performance, and management systems.
- Provide Entities with objective information to determine whether responsible business commitment and expectations are being met at the Entity level.

3.1 Assessment Types Using the VAP Approach

There are four types of assessments recognized by the RBA, but only the Validated Assessment Process (VAP) and the RBA Pulse Assessment are endorsed by the RBA:

- VAP – Validated Assessment Program
- RBA Pulse Assessment
- AMA – Auditee (also known as Entity) Managed Assessment
- CMA – Customer Managed Assessment

The RBA Pulse Assessment protocol also uses the VAP protocol; however, it is not fully validated by the RBA and does not lead to a formal recognition. This is why it is not considered equal to a VAP.

3.1.1 Validated Assessment Program (VAP)

The VAP is endorsed by the RBA because it is the only RBA assessment that:

- Compares all VAPs globally to the same assessment protocol,
- Ensures consistency of findings and process globally with all Assessors and Entities,
- Ensures assessment quality through a review by a high-scrutiny Quality Management process, supported by a closed-loop AI system,
- Includes a closed-loop process incorporating feedback, driving improvement in the supply chain,
- Provides feedback to strengthen the RBA processes and programs,
- Measures Assessor implementation of the VAP,
- Ensures independence: No money changes hands between the Entity and the Assessor, the RBA is the proxy,
- Requires minimum three data points (known as Triangulation) to verify conformance or non-conformance,
- Gives possibility for formal recognition based upon assessment performance.

The VAP protocol is applicable to different Entity sites and types:

- Manufacturing: Main activity is manufacturing, assembly, repair, or distribution
- Service Provider (Indirect Spend): Main activity is to provide a service such as logistics, helpdesk, IT Support, Security, Cafeteria, Building Maintenance.

3.1.1.1 VAP for Service Providers – Indirect Spend VAP

This document also acts as the baseline for an Indirect Spend VAP assessment. Any exception is defined in RBA VAP Indirect Spending Protocol

The following Entity types have been identified by RBA members as the most important in their supply chain. If further needs are identified, whereby the indirect supplier type is not listed in this document, please contact the VAP team at vap@responsiblebusiness.org:

a) Security
Refers to a company, organization, or entity responsible for implementing, managing, and maintaining a comprehensive security framework designed to protect the Entity's physical and digital assets, as

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well as its personnel across various industries and settings, including manufacturing facilities, corporate offices, data centers, and more.

b) Cleaning and Janitorial Services
Refers to a company, organization or entity that offers a comprehensive range of cleaning, sanitation, and maintenance services specifically tailored for commercial or industrial environments. This provider is responsible for ensuring that the Entity meets established cleanliness and hygiene standards, thereby contributing to a safe, healthy, and productive work environment.

c) Manufacturing / Logistics / Distribution
Refers to an organization or entity that offers a range of logistics solutions designed to optimize the flow of goods and resources between the point of origin and the point of consumption. This specialized service provider may provide their service on-site or off-site customer premises and may include warehouse activities, collaborating with supply chain stakeholders to enhance efficiency, reduce costs, and ensure timely delivery, thereby contributing to the overall effectiveness and competitiveness of the supply chain.

d) Building and Entity Maintenance and Repair Services
Service provider offers a comprehensive suite of services aimed at ensuring the optimal functionality, safety, and longevity of the Entity's physical infrastructure, secondary services may include cleaning and janitorial. This specialized service provider collaborates with the Entity's management to plan, execute, and manage maintenance and repair tasks that are critical to the uninterrupted operation of manufacturing processes.

e) Cafeteria
Service Provider contracted to manage and operate on-site food and beverage services for employees and visitors. This specialized service provider collaborates to offer a range of dining options that meet the nutritional needs, preferences, and schedules of the workforce, while also adhering to health and safety regulations.

f) Construction
Service provider that offers specialized construction-related expertise tailored to the unique needs and operational complexities of a manufacturing environment. This service provider collaborates closely with the Entity's management and other stakeholders to plan, design, and execute construction projects that may include new builds, expansions, or renovations.

g) Material Packing and Handling
Service provider that offers expert solutions for the efficient and secure management of materials throughout various stages of the manufacturing process. This specialized service provider collaborates with the Entity's management to optimize the flow of raw materials, semi-finished goods, and finished products, ensuring their safe and efficient packing, storage, and transportation.

h) Environmental Related Services (Business Process)
Service provider that offers a range of specialized services aimed at assessing, managing, and improving the environmental performance and sustainability of the Entity. Such as Waste management, chemical management, hazardous substances management, water management and other related activities. This provider collaborates with the Entity's management to develop and implement strategies that align with environmental regulations and industry standards.

i) IT Services

Service provider that offers a range of technology solutions specifically designed to support and optimize the Entity's manufacturing processes, data management, and cybersecurity. A non-exhaustive list of provided services include:

- Call center activities
- IT Infrastructure Management: Designing, implementing, and maintaining the hardware and software infrastructure required to provide a service
- Data Management: Providing solutions for the secure storage, retrieval, and analysis of data
- Cybersecurity: Implementing robust cybersecurity measures to protect sensitive data and control systems from unauthorized access, data breaches, and cyber-attacks

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- Process Automation: Offering solutions for automating repetitive tasks and processes, thereby increasing efficiency, and reducing human error
- Network Management: Overseeing company's internal and external communication networks to ensure reliability and security
- Compliance and Auditing: Assisting the Entity in adhering to industry-specific regulations and standards related to data protection and cybersecurity

Technical Support and Maintenance: Providing ongoing technical support and maintenance services to ensure the optimal performance of IT systems and to address issues as they arise

j) HR Support
Service provider that offers a range of human resources solutions aimed to optimize workforce performance, ensure regulatory compliance, and foster a safe and inclusive work environment. Services may include:

- Recruitment and Onboarding: Assisting in the hiring process by identifying suitable candidates, conducting interviews, and facilitating the onboarding process to integrate new employees into the Entity.
- Training and Development: Offering customized training programs aimed at skill enhancement, safety protocols, and compliance with industry-specific regulations.
- Employee Relations: Providing expertise in conflict resolution, grievance handling, and fostering a positive work culture.
- Compliance Management: Ensuring that the Entity adheres to labor laws, occupational safety standards, and other relevant regulations through regular assessments and policy reviews.
- Compensation and Benefits: Advising on competitive salary structures, benefits packages, and incentive programs to attract and retain skilled labor.
- Performance Management: Implementing performance appraisal systems to evaluate employee productivity, set objectives, and identify areas for improvement.
- Workforce Planning: Assisting in the strategic allocation of human resources to meet production targets and organizational goals.
- Data Management: Utilizing HR software to manage employee records, payroll, and other HR-related data efficiently.
- Legal Advisory: Providing guidance on employment contracts, labor disputes, and other legal matters pertaining to human resources.

k) Freelancer
It is an individual who offers specialized services on a contractual or project-based basis rather than being employed by a single organization. Freelancers operate independently, managing their own schedules, work locations, and client relationships. They are responsible for their own taxes, benefits, and other administrative tasks associated with self-employment.

Within the scope of an Indirect Spend VAP, the total number of workers in the legal entity providing the services is considered to determine the company size.

Company Size Classification

Small (S): Companies with a maximum of 50 workers.

Medium (M): Companies with a minimum of 50 workers and a maximum of 250 workers.

Large (L): Companies with more than 250 workers

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For in-scope workers, the assessment will consider the number of workers assigned to the services or products being provided to the customer either in a single location or in multiple locations.

3.1.2 RBA Pulse Assessment

The RBA Pulse Assessment is a shorter assessment that focuses on the most critical risks in the supply chain. It utilizes a subset of the VAP assessment criteria to evaluate the situation at the time of the assessment. This assessment type is only available to a specific group of Entities that meet the eligibility criteria. The criteria are as below:

Pre-requisite: The Entity has completed the Facility SAQ on RBA-Online.

Conditions for eligibility:

1- The Facility SAQ shows a Medium or Low Risk, OR

2- The total number of in-scope workers for the Entity is maximum 250.

RBA members or their suppliers may prefer the RBA Pulse Assessment for the use cases below:

- First time assessment or new to due diligence
- Low leverage
- As a risk check before entering a contractual agreement/procurement
- N-tier supply chain, beyond tier 1

More information on the RBA Pulse Assessment is available on the RBA Pulse Assessment Standard.

3.1.3 Auditee (also known as Entity) Managed Assessment (AMA)

An Auditee (Also known as Entity) Managed Assessment (AMA) is an assessment that is paid for and overseen by the Entity and conducted on their own Entity. Due to the lack of fourth-party oversight and the lack of global consistency, the AMA is not equivalent to the VAP. An AMA is NOT endorsed by the RBA.

The intention and purpose of an AMA is to allow Member Companies to manage third-party assessments to meet Membership Compliance Program (MCP) requirements.

Member Companies may or may not choose to accept an AMA.

- AMAs may be conducted by an outsourced RBA approved assessment firm and Assessor or by member company employees if those employees are RBA approved Assessors.
- Entities are responsible for ensuring that a CAP is developed, and non-conformances are properly identified and remediated.
- AMAs follow and use the general VAP processes (Assessor qualification, assessment process including but not limited to number of interviews, reviewing documentation, verification of findings, etc.) and tools (e.g. assessment protocol).
- Each Member Company which conducts an AMA is responsible for ensuring that VAP requirements are adhered to when managing and conducting this assessment.

For additional information on the AMA process, please contact the RBA via vap@responsiblebusiness.org.

3.1.4 Customer Managed Assessment (CMA)

A Customer Managed Assessment (CMA) is an assessment of an Entity that is paid for and overseen by an RBA Member Company. CMAs may only be conducted by member companies. Due to the lack of fourth-party oversight and the lack of global consistency, the CMA is not equivalent to the RBA VAP. A CMA is NOT endorsed by the RBA.

A CMA, similar to a VAP, must be managed on RBA-Online. To be considered a CMA and to use the RBA name, the CMA must be on the RBA-Online, using the RBA tools such as the Working Hours Template, the Workforce Composition Survey, along with the standard reporting template.

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- The intention and purpose of a CMA is to allow Member Companies to manage assessments meeting Membership Compliance Program requirements. CMA's are only to be used by Member Companies to assess their own supply chain.
- Member Companies may or may not choose to accept a CMA from other companies.
- CMAs may be conducted by an outsourced RBA Approved Assessment Firm and Assessor or by Member Company employees, if those employees are RBA Approved Assessors.
- The Member Companies are responsible for ensuring that a CAP is developed, and issues are properly identified and remediated.
- CMAs follow and use the general VAP processes (Assessor qualification, assessment process including but not limited to number of interviews, reviewing documentation, verification of findings, etc.) and tools (e.g. assessment protocol).
- Member Companies which conduct a CMA are responsible for ensuring that the VAP Process requirements are adhered to when managing and conducting these assessments.

For additional information on the AMA and CMA processes, please contact the RBA via vap@responsiblebusiness.org.

3.1.5 Assessment Comparison

A comparison of the various aspects of the VAP, CMA and AMA are provided below:

Aspects	Assessment Types				
	Validated Assessment Program (VAP)	Customer Managed Assessment (CMA)		Auditee (also known as Entity) Managed Assessment (AMA)	
Type of Assessor	3rd Party Assessor	3rd Party Assessor	Customer (2nd Party)	3rd Party Assessor	Entity (1st Party)
Assessment quality management	RBA AQM	Audit firm		Audit firm	
Assessor required to be RBA-approved	✓	✓	✓	✓	✓
Fulfils membership requirements	✓	✓	✓	✓	✓
Must be submitted in RBA-Online	✓	✓	Varies	Varies	Varies
Available through RBA-Online	✓	✓	Varies	Varies	Varies
Assessment based on VAP Protocol	✓	✓	✓	✓	✓
Number of assessment days & worker interviews based on number of in-scope workers	✓	✓	✓	✓	✓
Assessment scope includes entire Entity (subject to restricted access areas)	✓	Varies	Varies	Varies	Varies
Assessment report is owned by the Entity	✓	Varies	Varies	✓	✓
Report may be shared	✓	Varies	Varies	Varies	✗
Assessor from RBA Approved Assessment Firm	✓	✓	N/A	✓	N/A

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Aspects	Assessment Types				
	Validated Assessment Program (VAP)	Customer Managed Assessment (CMA)		Auditee (also known as Entity) Managed Assessment (AMA)	
RBA Quality Management	✓	✗	✗	✗	✗
RBA Recognition possible	✓	✗	✗	✗	✗

3.1.6 VAP Variations

The VAP is designed to fulfill the needs of an RBA member in their sustainability journey, ranging from new factory evaluations to special investigations triggered by members, NGO's, or media reports; the programs offered and listed in this section may vary overtime.

3.1.6.1 New Factory Evaluation (NFE)

A NFE is a VAP conducted prior to the commencement of operations at a brand-new Entity: an Entity which has just been built with no implementation records. The NFE is NOT a full VAP. The focus of NFE is the regulatory compliance, as well as policies and procedures related to the RBA Code.

The NFE is intended to be the pre-assessment for a new Entity and is used to determine if an Entity is in compliance with the applicable laws and regulations and the RBA Code of Conduct prior to the commencement of production.

The report for the NFE is valid for one year from the last day of the NFE (i.e., closing meeting).

3.1.6.2 VAP 90

A VAP90 is a full VAP conducted 90 days after the start of operations at a brand-new Entity.

The VAP90 is designed for an Entity which has been recently built and operating for less than 6 months. The VAP90 may also be used as a follow-up to the New Factory Evaluation (NFE) which is conducted prior to production beginning.

It is a full VAP, with the same scope and requirements with one exception. The sample size of the data record is 3X the sample size for the month immediately prior to the assessment. Example: If the sample size is 20 workers the data record to review will be 3x20 (60)

The report for the VAP 90 is valid for one year from the last day of the Assessment (i.e., closing meeting).

VAP90 is performed by RBA third-party approved Assessors, with the same standards as the VAP program.

3.1.6.3 RBA Customized Assessments and Investigations

A Customized Assessment is a limited scope assessment, using a subset of the VAP protocol. The scope of a Customized Assessment is flexible and is decided by the RBA member. The final report is loaded into RBA-Online. The customized assessment is overseen by the RBA and conducted by one of the approved assessments firms, but is not eligible for recognition.

An investigation is an immediate response to an egregious issue, driven by a member or credible source to the RBA. The scope of an Investigation is the elements of RBA Code of Conduct which there are claims of non-conformance (a subset of the full VAP). The investigation report is not available in RBA Online.

For additional information on VAP variations, please contact RBA vap@responsiblebusiness.org.

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3.2 Assessment Report Validity Period

An Assessment Report is valid for two (2) years from the date of the Initial Assessment's closing meeting, unless a major change occurs within the Entity.

3.3 Roles and Responsibilities

3.3.1 RBA Staff

RBA Staff is responsible for VAP oversight, including:

- Providing guidance and direction regarding the VAP Program,
- Managing the RBA Code of Conduct review and revision process,
- Managing associated work groups, stakeholders, Member Companies, and others who have an interest in the VAP,
- Managing the finances associated with the VAP,
- Updating all program tools and documents,
- Providing and maintaining the data system that allows customers and suppliers to share the assessment reports,
- Reporting program metrics and analysis to RBA and relevant RBA working groups,
- Developing appropriate training programs for VAP users and Assessors.

3.3.2 Assessment Program Management (APM)

Assessment Program Management (APM) is an RBA process that coordinates the VAP activities. The RBA Assessment Program Managers' (APMs) responsibilities include:

- Managing Assessment Firm contracts,
- Managing Assessment Firm performance,
- Approving and maintaining the qualification of Assessment Firms and Assessors, including ensuring Assessors have the required work experience, assessing skills, receive the proper training, and appropriate certification to conduct RBA assessments,
- Managing and overseeing the end-to-end administration efforts for each assessment,
- Providing help desk support for Assessments,
- Reporting all priority non-conformances identified during the assessment to Member Companies identified by the Entity,
- Obtaining and reviewing feedback from Entity management after an assessment,
- Managing a continuous improvement model that includes a closed-loop process incorporating feedback, driving improvement in the supply chain,
- Implementing other VAP projects as necessary.

3.3.3 Quality Management (QM)

Quality Management (QM) is a process and service responsible for the integrity and quality of the VAP activities and reports. Assessment Quality Managers' (AQMs) responsibilities include:

- Verifying that non-conformances and ratings meet RBA criteria,
- Managing guidance, issues and escalations during an Assessment from Assessors and Entities during an assessment,
- Coordinating Assessment Report finalization with Assessors and Entities using RBA as an escalation point,
- Reviewing and incorporating relevant Entity feedback in the Assessment Report,
- Reviewing draft Assessment Reports, to ensure quality and consistency with RBA criteria,
- Conducting shadow audits on a sample of Assessors to evaluate on-site performance against the RBA criteria,
- Measuring Assessors and Assessment Firm's performance and consolidating this information with RBA senior management for review with the Assessment Firms,
- Releasing the final Assessment Report in RBA-Online,

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- Implementing other special projects as requested by the RBA.

3.3.4 Assessment Firms

Assessment Firms ensure the assessments are conducted and reported in accordance with the expectations, guidance and timelines defined in this document. They communicate with the APM and the AQM to increase the overall consistency and quality of the assessment and the Assessment Report.

Assessment Firms must assign competent Assessors who act in an ethical and responsible manner. Assessment Firms must confirm that Assessors conducting assessments have received the required training and have the proper experience. All Assessors must be on the RBA Approved Assessor list.

For more information about assessment firm approval and requirements, see the RBA Assessor Guidebook.

4. VAP Process

4.1 Initial Assessments

4.1.1 Assessment Scheduling

Initial assessment can be scheduled at any time the Entity is ready to do so. The time to schedule an assessment varies. Assessments may be scheduled up to 9 months in advance.

Refer to VAP request process for additional reference.

4.1.2 Assessor Selection

All assessment firms with expertise local to the Entity are available for selection by the APM.

The APM selects the assessment firm, and the assessment firm assigns the Assessors to conduct the VAP. The assessment team must meet the requirements noted in the RBA Assessor Guidebook

Assessment assignment is determined by assessment firm performance, performance measures include:

- Assessment Quality
- Accuracy
- Professionalism
- Timeliness
- Availability
- Cost

The RBA, at its discretion, may work directly with assessment firms to assign Assessors as required.

4.2 Priority Closure Assessments

4.2.1 Assessment Scheduling

The scheduling process for a Priority Closure Assessment can be initiated once the Priority non-conformances are confirmed by the QM. Priority Assessments are scheduled by the APM in accordance with the RBA VAP timelines. For Entities owned by RBA members, these should be per the Membership Compliance Guidelines.

Priority Closure Assessments utilize the criteria and protocol used in the Initial Assessment. Exceptions require APM approval.

4.2.2 Assessor Selection

When Priority Assessments are required, if viable, the Assessment Firm which conducted the Initial Assessment will be assigned to conduct the Priority Assessment. Exceptions to this policy may arise when:

- The Assessment Firm is not available during the time window required to conduct the assessment.
- There are ethical issues, or potential ethical issues, with the Assessor or Assessment Firm.

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- There are extenuating circumstances, as determined by the APM, which require a different Assessment Firm (for example, a highly technical issue that requires an Assessment Firm with a specific skill set or knowledge base).

If a different Assessment Firm is needed to conduct a Priority Closure Assessment, the selection process is the same as for an Initial Assessment.

4.3 Closure Assessments

4.3.1 Assessment Scheduling

Closure assessments can be conducted once three months' worth of improvement/closure evidence for a finding is available.

Example: Initial assessment was conducted in January 2025. Excessive working hours finding identified. Entity needs to be able to show at least three months of improved records after January 2025 to be eligible for a Closure Assessment. This means, the earliest Closure Assessment can take place in May 2025, with the improved records of February, March and April reviewed.

If the Closure Assessment is requested after 18 months from the Initial Assessment, it is required that an Initial Assessment be conducted rather than a Closure Assessment. Any exception must be approved by APM.

Closure Assessments utilize the criteria and protocol used in the Initial Assessment. Exceptions require APM approval.

4.3.2 Assessor Selection

If the Closure Assessment occurs within 6 months after the Initial Assessment, the APM assigns the Assessment Firm which conducted the Initial Assessment to conduct the Closure Assessment. Exceptions to this policy may arise when:

- The Assessment Firm is not available during the time window required to conduct the Assessment.
- There are ethical issues, or potential ethical issues, with the Assessor or Assessment Firm.
- There are extenuating circumstances, as determined by the APM, which require a different Assessment Firm (for example, a highly technical issue that requires an Assessment Firm with a specific skill set or knowledge base).

If a different Assessment Firm is required to conduct a Closure Assessment, or if the Closure Assessment occurs later than 6 months after the Initial Assessment, the Assessor selection is the same as for Initial Assessment.

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5. Preparation for the Assessment

Assessments require preparation by the Assessors and the Entities. A successful assessment is an assessment which accurately reports the conformance performance of the Entity to the RBA Code. This requires an understanding of the RBA Code by both the Assessor and the Entity.

5.1 Optional Entity Trainings

It is recommended that an Entity who is new to the VAP process, or those that would like to learn more about the VAP, attend an assessment preparation training class, helping them to learn about the assessment process, the RBA Code of Conduct, RBA expectations, and how to better prepare for the assessment.

Training Options

In person training events featuring our newly formed dedicated Training team:
https://www.responsiblebusiness.org/training-events/code-vap-training/

Factory Lead Certification Program: http://www.responsiblebusiness.org/resources/flcp/

5.2 RBA VAP Overview

For bigger and/or higher-risk facilities, the Assessment is generally a multi-day event with multiple Assessors. For smaller and/or lower-risk facilities, the Assessment may be one day, or conducted with one Assessor. The exact number of person-days and number of Assessors conducting the assessment is determined by the APM, based on the size, location, number of in-scope workers and scope of operations.

The assessment criteria are based on the RBA Code of Conduct and local legal requirements. The criteria cover five main areas:

- Labor
- Occupational Health & Safety
- Environmental
- Ethics
- Supply Chain Management

The Assessment includes:

- Site observations
- Reviews of records, programs, procedures, and policies
- Interviews with management, representative of labor agent (if applicable), third party service providers, representatives from vocational school, contractor's representative, and workers.

5.3 Assessment Scope

For VAP of a manufacturing Entity, the entire Entity is 'in scope.' In scope means that all buildings and sections or areas are subject to the VAP. This includes, but is not limited to:

- All lines of business and all Entity customer's production areas
- Production and supporting non-production areas (equipment rooms, wastewater treatment, maintenance shops, etc.)
- Common areas
- Office areas
- Storage areas (material warehouse, shipping and receiving, chemical and waste storage, etc.)
- Canteens and kitchens
- Dormitories, hostels, and any off-site housing of workers/migrant workers (if company, Entity, or labor agent owns/rents accommodation for workers)

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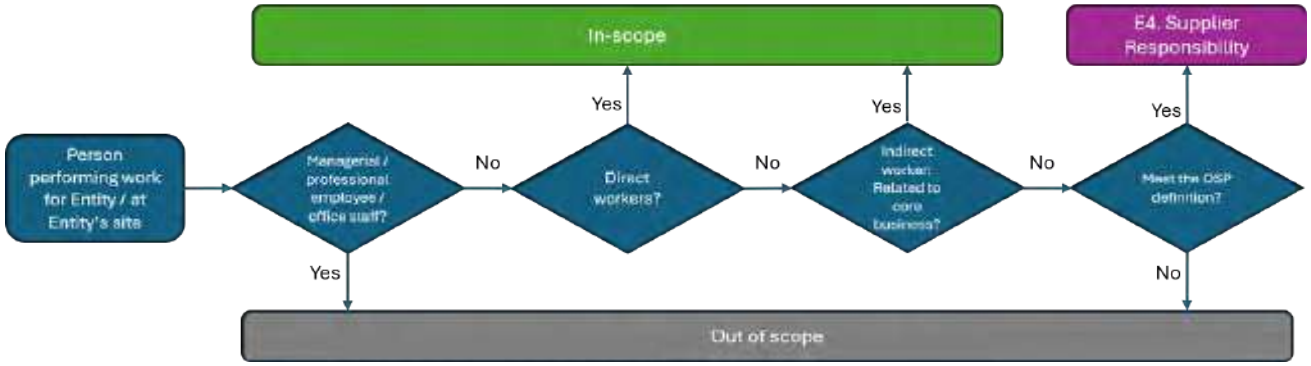
- Security room(s)
- Surrounding land within border of factory property

An Entity may request a reduced-scope VAP for any of the following reasons only, however Entities may choose to proceed with assessments where one or more of the below conditions exist without limiting the scope at their discretion:

- Site has more than 40,000 in-scope workers
- Operations at the site that are not within the industry of the Entity being assessed
- Section(s) of the site are not accessible due to proprietary, or confidentiality reasons and written confirmation must come from the head office (management) of the Customers. However, workers working in these areas will be subjected to the workers interview as per the sampling methodology.
- Site has different companies operating within the same Entity, which must include one or more of the following:
- Operating under a different legal entity or license
- Having different management systems (including tracking of hours and pay) and management teams.
- More than 5 kilometers between facilities, if they are included in one assessment, then APM would include travel time at the scoping stage
- May not share employees (employees cannot go back and forth between companies without resigning from one company and being hired at the next)

To initiate a scope exemption, the Entity or RBA Member Company must submit a written request to the APM during the assessment scoping via vap@responsiblebusiness.org.

5.4 In-scope Workers Decision Tree



In-scope workers are defined by their employment terms at the Entity. The decision tree above will help the Assessor and the Entity decide on the level of inclusion and risk management needed on different types of workers.

5.5 Entity Preparation Requirements

Prior to the assessment, the Entity must:

- Complete the RBA Facility Risk Assessment Questionnaire (SAQ).
- Confirm the assessment dates (start and end) with the assessment firm.
- Provide information on travel logistics, as requested, travel restrictions, and any other special considerations.
- Participate in the pre-assessment meeting (Subsection 9.5) and documentation review.
- Understand the on-site assessment agenda.
- Prepare and provide documents requested by the assessor, if any, prior to the assessment start date.
- Ensure that relevant information is available for the assessors when they arrive, including:
  i. Names, phone numbers and locations of the Entity's key people, as defined by the assessor
  ii. Maps of the site and surrounding area
  iii. Most current manuals, records and documentation required by the assessor

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iv. Ensure that assessors will have access to all areas of the Entity that are considered in scope for the assessment (e.g. dormitories, canteens, manufacturing, assembly, chemical storage areas, …).
v. Ensure that working hours records and wage data are available.
vi. Invite appropriate staff members to the opening meeting, closing meetings, daily wrap-ups, and to accompany the assessors during the site inspection.
vii. Provide the assessors with meeting room(s), preferably with access to a telephone/internet line, printer and copy machine.

During the Assessment, the Entity must:

- Populate the working-hours template after the assessors have selected the samples.
- Make appointments and set the interview schedule, as requested by the assessors.

5.6 Pre-assessment Meeting

After the assessment is assigned to an Assessment Firm, and a Scoping Agreement is finalized, a pre-assessment meeting between the Assessor and Entity must take place for announced and semi-announced assessment only. There will be no pre-assessment meeting for unannounced assessment. This communication may occur by phone, web conferencing (secured network) or through email.

For RBA assessments, the assessment firm is responsible for scheduling and conducting a pre-assessment meeting with Entity management; this pre-assessment meeting should take place between 3 to 10 days prior to

- the announced assessment date, or
- commencement of the assessment 'window' for semi-announced assessment.

NOTE: If the Entity has not been contacted by the Assessment Firm 3 days prior to the Assessment contact RBA APM for assistance vap@responsiblebusiness.org

The following items should be addressed in the pre-assessment meeting:

- Assessor introduction
- APM approved Assessment scope
- Assessment agenda
- Interpretation and translation needs; mainly for worker interviews
- Travel requirements, if there are any, during the Assessment (auxiliary or support buildings, different facilities, …)
- Logistics, if needed (directions, preferred hotels and/or airports, travel restrictions and any special considerations, GPS coordinates of main entry gate to Entity)
- Site safety and security requirements
- Documentation preparation

Documentation preparation:

- Confirm the documents that will be needed and must be ready at the start of the assessment:
  - RBA Workforce Composition Survey
  - RBA Working Hours Template

- Confirm whether there are any additional documents and records that are needed for the assessment team to prepare for the assessment (e.g. organizational chart, key staff members, on-site suppliers, …)

For Indirect Spend VAP, the Assessor shall contact both the management team at the Entity location as well as the sites where the workers are deployed. Worker interviews and a facility tour should be arranged (where possible) at the sites where workers are deployed.

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5.7 RBA Assessment Observer Requirements

Observers who meet the minimum RBA conditions may be present during an assessment. This helps with the quality and integrity of the process, as well as to receive improvement feedback on the performance of the assessment firms and Assessors from another party on-site.

The observer's role is to monitor the assessment process and provide constructive feedback to the RBA on both the methodology of the assessment and the performance of the Assessors.

While the RBA may provide exceptions, the overall requirement is that the observer must be from an RBA Member Company with at least an active Trading Relationship with the Entity, from the Entity company's own workforce, or from an Assessment Firm. The observer must have:

- Social and/or environmental expertise, or
- VAP or relevant assessment experience.

Only 2 internal observers (observers from the Entity company) and only 1 RBA Member Company observer are allowed per assessment. Only 1 Assessment Firm observer is allowed per assessment.

RBA reserves the right to remove any observer from a live assessment if the observer rules are not followed.

5.7.1 Observer Rules

The APM must be:

- Notified of the observer at least 2 weeks before the start of the assessment
- Provided with the name of the observer, company, email address and mobile number

The observer:

- May participate in site observation in the following areas:
  - Common areas (e.g. canteen, dormitories, general staff areas, pollution control, etc.)
  - Production areas specific to the observer's company
- May observe and participate in the document review but may only review documents that either apply to the Entity as a whole or those related to their company's business with the Entity.
- Will not interfere with the Assessment in any way.
- Will not advise or influence the Assessment Firm regarding the findings, process, scoring, or other parts of the Assessment.
- Will not advise, guide, or interfere with the management of Entity.
- Will be introduced by the Assessment Firm as the Observer in interactions with staff during the Assessment.
- Will not participate in any formal interviews and may also be required not to participate in some or all informal interviews.
- Will attend all key on-site assessment meetings, including the opening and closing meetings.

At the end of the Assessment, the Observer completes the Observer Feedback Form and submit to the APM.

The Assessor keeps all information regarding workers, information learned from interviews, and all proprietary information confidential from the Observer.

Exceptions to these guidelines may be given by the RBA.

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6. Assessment Process

The VAP and related protocols are conducted using the following process:

6.1 Assessment Start

Upon site arrival, the Assessors will present identification.

The Assessor(s) must bring with them all assessment tools and equipment necessary for the assessment. Any personal protective equipment (PPE) that the Entity needs to provide to the Assessors must be provided the latest before the Site Tour begins.

6.2 Opening Meeting

All assessments begin with an opening meeting. Assessors are required to use the most up-to-date RBA Assessment Opening Meeting Template, as provided by RBA, as a foundational guide. However, the template may be adapted as necessary to address the specific requirements or situations.

6.2.1 Assessor Requirements

The Assessor discusses the following topics in the opening meeting:

- Purpose and objectives of assessment
- Assessment schedule, scope, and approach
- Discussion of site observations, interviews, record reviews, taking field notes
- Discussion of representative sampling
- Introduction of assessment observers
- Preparation for daily wrap-ups and closing meeting including APM notifications of priority findings

The Assessors should answer any questions the Entity may have.

6.2.2 Entity Requirements

The Entity should discuss the following in the opening meeting, if applicable:

- Visitor safety, security, and escort protocols
- Responsible business program and organizational assignment of responsibilities
- Responsible business goals, performance, and current issues
- Business climate for the Entity
- Review of Entity operations
- Identification of notable site activities occurring during the time of the assessment including the seasonal changes of production load – high, moderate, and low months/seasons.
- Major changes since the last assessment
- Review of the pre-assessment documentation
- Interview schedules
- Identification and location of the Assessor work room(s)
- Phone and internet protocol and support personnel
- Review of site work hours
- Other information relevant to the Assessors and the assessment process

The Entity is free to invite any Entity site staff or employee to the opening meeting.

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6.1 Interviews

Worker interviews are a sensitive topic, and proper management of the interview process is an important element of the Assessment.

There shall be no retaliation (e.g. reduction in pay or benefits, losing jobs, intimidation, or any other penalties) for any information discovered during an interview.

Throughout the assessment, the Assessors interact with workers gathering information in both formal and informal situations. Formal interactions are when the Assessors select and interview certain in-scope workers individuals. Informal interactions occur as the Assessors have brief interactions with workers at their place of work or in other areas of the factory (e.g. dormitories, canteens, common areas, parking area).

Formal and informal interviews are conducted privately, without the presence of Entity managers, other staff, or observers. The workers' identity and comments must remain confidential.

Formal interviews are conducted in two ways: individually or in group settings. Formal individual interviews generally last about 10 minutes. Formal group interviews typically last about 20 minutes, but may take longer, if needed, at the Assessor's discretion.

Interviewees should represent a range of workers including:

- Permanent and temporary
- Both direct hired and indirect hired production workers.
- Direct hired non-production workers (security, cleaners, food preparation)
- Employees and subcontract labor
- New hires and experienced workers
- More and less skilled positions
- Various departments
- All shifts
- All genders
- All nationalities (limited to foreign workers who are not foreign expatriate or skilled staff)
- Worker representatives, if present
- Pregnant woman, nursing mothers, and workers with Disabilities if present

NOTE: *Indirect hired non-production workers (security, cleaners, food preparation) are not included in the group interviews.*

6.1.1 Management Interviews

Gathering information from managers provides the Assessors with an understanding of how the Entity's responsible business programs are managed and intended to be implemented.

Typically, the Assessors interact and talk with the following people (Note: not all of these people may be at the Entity, and may have different titles):

- Site manager(s)
- Production manager(s)
- Maintenance staff
- Environmental, Health & Safety manager(s)
- Quality manager(s)
- Internal assessment manager(s)
- Human Resources manager(s)
- Onsite services staff such as canteen, dormitory supervisors, security staff
- Finance manager/payroll manager(s)
- Procurement manager/supply chain manager(s)
- Warehouse and chemical store manager(s)
- Onsite medical staff
- Legal

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- Other personnel

6.2 Site Observation

The purpose of the site observation is for the Assessors to observe physical conditions and current practices in all areas of the Entity's site.

The Assessor should have access to all areas of the Entity's site and should set the pace and direction of the site observation. During the site observation, the Assessors should endeavor to minimize disruptions to production.

It is the responsibility of the Entity to inform the Assessors of the safety rules and requirements, including the use of personal protective equipment (PPE) in specific areas, and provide the Assessors with necessary PPE where required.

There are two parts to site observation, namely *site tour* and *site assessment.*

6.2.1 Site Tour

Site tour is generally undertaken by the entire assessment team, and it will last for about 30 minutes.

At the start of the assessment, a site tour may be conducted. Portions of this site tour may take place prior to the opening meeting.

The objective of the site tour is to provide context to the Assessors of the Entity's operation and to help the Assessors prepare questions for further investigation.

The site tour may consist of:

- Transportation infrastructure
- Emergency services, such as fire department or outside security services
- Identification of common areas, overview of company operations
- Identification of potential local community and environmental concerns, which may impact or be impacted by the Entity
- Identification of unreasonable restrictions on workers' freedom of movement or rights.
- Any records or documents displayed that might show a discrepancy between operational activities and the protection of human rights
- Workers' noticeboards and information relating to union or worker's committee meetings
- Insights into the size, scope and location of all building and support facilities
- Quality, production, and time records
- Posting of relevant codes of conduct and any information related to their workers' rights

6.2.2 Site Assessment

The site assessment is carried out by the EHS Assessor in a multi-Assessor activity, or the Lead Assessor if the activity has a single Assessor. It may last from 2-8 hours depending on the number of areas / buildings / facilities / dormitories, and canteen to be covered.

During the site assessment, the Assessor typically inspects in detail all the high-risk areas identified during the site tour (note: not all facilities have the following areas):

- Work environment (space, temperature, lighting, …)
- Ergonomics and workstations
- Manufacturing and processing operations
- Fire and emergency equipment
- Machine protection and maintenance
- Emergency procedures
- Personal protective equipment
- First aid equipment and medical center/clinic
- Air emissions and emission control systems
- Hazardous materials storage and handling

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- Hazardous waste generation and storage
- Waste (hazardous and non-hazardous) management
- Fuel, chemical and oil storage, transport, and use
- Toilets and sanitation
- Canteen and kitchen hygiene and safety, when applicable
- Dormitory facilities including hygiene and safety
- Wastewater treatment, discharge, and sludge disposal
- Recreational facilities

Assessors must take photos in the Entity, as agreed by the Entity in the Assessment Agreement (AA). Alternatively, the Entity can take photos as requested by the Assessors and provide them by the end of each day to the assessment team. Photos are not intended to contain or focus on a product, product-related information, brand, or any other proprietary information. Photos must also not include any content that may identify a worker or jeopardize the personal data of anyone in the Entity.
Even though it is agreed during pre-assessment, if the management does not give permission and will not take requested photos or documents (either as a whole, or in certain areas), Assessors will document this in the report.

6.2.3 Document Review

As part of the assessment, the Assessors review relevant records. Examples include:

- Working hour records, payroll, wages, deductions, and benefits
- Employee profiles
- Employment contracts
- Permits/ licenses /approvals
- EHS management system documentation
- Waste management records
- Written policies, programs, procedures, work instructions
- Training records

The records to be reviewed are specified by the Assessors to the Entity during the assessment.

The assessors should be thorough in the review of records; however, this does not mean that every record must be evaluated. The assessor may use representative sampling in the review process. Where the assessor does not review every record and there is a non-conformance finding, the assessor must reflect the sampling method in the statement of finding.

Unless otherwise stated, the documents and records must be available on-site for assessors to review, and must cover at least the 12 months before the assessment. For payroll, wages, deductions and benefits documents and records must be available for 24 months.

Unless otherwise stated, the records shall be available on-site for assessors to review at the start of the assessment and shall cover at least the review period of the assessment. If additional records are requested, they shall be available within 24 hours from the request or before noon on the last day of the assessment, whichever occurs first. If requested records are unavailable as stated, the records shall be excluded by the assessor and result in a finding.

As part of the documentation review, the assessors may need to record some information to complete their evaluation. The assessors will not include any confidential information, such as detailed product information, detailed process steps, or personal identifiers in the Assessment Report.

Unless otherwise noted, references to percentages of workers in conformance or non-conformance in the Assessment Report are based upon the defined sample.

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6.3 Daily Wrap-up Meeting

If the assessment is multi-day, daily wrap-up meetings take place at the end of each day. The wrap-up meetings take approximately 30 minutes. Any alternative arrangements must be mutually agreed by the Assessor and the entity during the opening meeting.

During the meeting, the Assessor should:

- If Priority non-conformances were identified:
  - Discuss any Priority non-conformances, including need for immediate correction and/or containment,
- Inform management that a formal communication of Priority non-conformances will be made to the QM, who will in turn notify the RBA member(s) who are listed as Requesting Company,
- Make the entity aware of any issue, finding, or potential finding where additional information is needed,
- Encourage the entity to present/prepare additional evidence or information on local legal requirements, as needed,
- Discuss preliminary findings, providing the opportunity for the entity to provide additional information in the case of a disputed finding,
- Agree upon the agenda for the remaining onsite assessment,
- Clarify any further needs to ensure the assessment is performed as effectively and efficiently as possible.

6.4 Closing Meeting

The Closing Meeting is held at the end of the last day of the assessment. The same group of entity personnel, including workers that participated in the Opening Meeting, as well as any others who would benefit from hearing from the assessment team, should attend the Closing Meeting.

If the meeting is not conducted or is cut short, entities or the Assessors should notify the QM, depending on which party impacts the meeting.

The Closing Meeting includes the following:

- A discussion of all Major, Minor and Priority non-conformance(s) to provide the entity with rounded information,
- A discussion of items that require further studies (e.g. investigate or review relevant legislation) to establish a finding,
- If Priority non-conformance were noted during the assessment:
  - Communicate that immediate containment actions are expected (unless working hours, recruiting fees and social insurance).
    - Immediate containment actions should be completed by the end of the assessment, or as quickly as possible if the issues were discovered late in the assessment.
    - Status of the immediate containment actions will be noted on the Assessment Finding Acknowledgement (AFA).
- A presentation by the entity regarding additional evidence or clarifications,
- Information to the entity on the next steps of the assessment process, including the draft review feedback process,
- Signature of the AFA by the Assessors and the Entity management at the end of the meeting.

In general, the closing meeting should be conducted at the entity site. Upon agreement between the Assessors and the entity, the meeting can be conducted at an alternative location or remotely. Assessors should document any exception in the assessment report.

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7. Assessment Report

The assessment report is a formal document describing the assessment findings and is the basis for the Corrective Action Plan (CAP).

The assessment team prepares the report and submit it on RBA-Online following . Assessment firms must employ a rigorous internal quality assurance process to ensure that all reports meet the RBA minimum criteria for quality and completeness.

The assessment findings are entered in RBA Online.

- General information about the Entity, assessment team, site characteristics
- Executive summary
- Overall assessment score and assessment score detail
- Findings related to the policies, practices, and conditions for the sections of the RBA Code
- Supporting evidence / data

7.1 Assessment Finding Severity Definition

Findings communicated as part of an Assessment identify good practices and points of improvement. The Assessment Report provides information for the Entity's management team to improve their responsible business programs and performance related to:

- Intent – what the Entity is trying to do
- Implementation – how well the practice meets the defined criteria
- Effectiveness – whether the policies and practices deliver the intended results

Assessors review the evidence gathered during the assessment and evaluate the compliance status for each question on the assessment.

Assessors classify each assessment criteria as one of the following:

- Priority Non-conformance
- Major Non-conformance
- Minor Non-conformance
- Risk of Non-conformance
- Opportunity for Improvement (Applicable for working hours only)
- Conformance
- Not Applicable

Assessors review the evidence gathered during the assessment and evaluate the compliance status for each criterion of the assessment.

Based on the identified risk, the Assessor needs to assign a severity to each finding. A thorough justification must be provided for the assignment of severity. For some criteria and some conditions, the severity is already assigned in the Code Interpretation Guidance. If the Assessor would like to suggest a change to the assigned severity, a justification must also be provided on their reasoning.

The following are examples of risk factors to consider when changing the rating of a finding:

- Health and safety risk to workers
- Significant restrictions or violations of worker rights
- Significant damage or risk of imminent damage to the environment
- Non-conformance to local law
- Reputational risk
- Operational risk

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Assessors classify each assessment criteria as one of the following:

7.1.1 Priority Non-conformance
- Immediate risk of severe or irreversible harm to life or health, Entity, the environment, or the community
  - "Immediate risk" refers to conditions where exposure to severe harm exists at the time of assessment, not merely a potential future risk.
- Egregious ethical breach
  - Including (but not limited to) actions that fundamentally violate ethical or human rights principles

7.1.2 Major Non-conformance
- Violation of applicable law
- System-level process deficiency that results in significant risk or impact, for example same incident multiple times or multiples incidents at the same time.
- System-level process deficiency that causes the system to not work as designed.

7.1.3 Minor Non-conformance
- An isolated implementation failure where the relevant management system is in place and generally effective
- System-level process deficiency that results in low associated risk and impact
  - Assessor shall document a clear justification addressing why the risk is low, the impact is limited, and existing controls prevent the issue from escalating.

7.1.4 Risk of Non-conformance
- A condition where no non-conformance is currently identified, but the effectiveness of controls to ensure sustained conformance cannot yet be demonstrated across foreseeable operating conditions or changes.
  - If evidence demonstrates that the management system or controls have already failed to prevent or detect a breach of the requirement under normal operating conditions, the issue shall be evaluated as a non-conformance, not as a risk of non-conformance.
- Insufficient evidence to confirm conformance or non-conformance.

7.1.5 Opportunity for Improvement
- (Only applicable to Working Hours criteria) A situation that is not fully in conformance and can be improved. Corrective Action Plan is optional but recommended.

7.1.6 Conformance
- Conformance is noted when the Assessor determines that anpd9a Entity meets or exceeds the assessment criteria and expectations.

7.1.7 Not applicable
- Not Applicable applies in cases where a specific operation is missing from the site, for example, facilities that do not have dormitories. In addition, the Entity has provided evidence that certain criteria do not apply.

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8. RBA Appeals and Guidance Mechanism

8.1 Appeals Mechanism

At the end of a VAP process, it is possible to appeal against a finding or conclusion, the assessment process, or the overall quality of the assessment report.

An entity can raise an appeal up to 90 days following the release of their assessment report, which means the status of their VAP on RBA-Online is "VAR Released".

An appeal can only be raised when this document, or other relevant supporting documents, does not provide specific or clear information on a criterion.

An appeal can also only be raised if the entity gave the Assessor full access to collect any type of evidence, including photos or documents. This includes photos taken by the entity's management on behalf of the Assessor, and provided to the Assessor before the assessment report is released. If the entity does not allow the Assessor access to collect evidence, even though this is agreed via the Assessment Agreement (AA), then their appeal will not be processed.

To submit an appeal, please follow this link: RBA Appeal Mechanism – Link

To submit any additional evidence to support your appeal, please send an email to appeal@responsiblebusiness.org

8.2 Guidance and Manual Updates

The RBA reserves the right to periodically issue updates to this document and the related processes and guidance documents. All updates are communicated to different user groups via their dedicated connection channels.

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9. Waivers, Exceptions to Applicable Law, and Collective Bargaining Agreements (CBA's)

9.1 Waivers or Exceptions to Applicable Laws

Waivers can only be applicable to an Entity if the issuing office has the legal authority to do so. In most cases this is the national, federal, or state ministry, government body or inspectorate. Local (municipal, provincial) governments typically do not have the authority to give waivers for national regulations or requirements.

When waivers or exceptions, or the authority of the government body who provided the waiver, is in question by the Assessor or the AQM, the Entity receiving the assessment has the burden of proof to prove the waiver or exception is applicable. This includes providing documentation regarding:

- Description of the waiver or exception
- Explanation of why the law does not pertain
- Proof of the authority of the government body that provided the waiver or allowance
- Parameters, if any, which pertain to the exception
- A copy of the letter, ruling, notification or other such documentation of the waiver or exception, which is properly sealed by the government body who provided the waiver or allowance
- Other pertinent information

Waivers must be short-term in nature, i.e. less than or equal to 12-months in duration and approved by the government body that provided the waiver or allowance.

9.2 Collective Bargaining Agreements (CBA's)

In order to be considered valid in the context of an assessment, Collective Bargaining Agreements (CBAs) must be:

- Negotiated in good faith,
- Validated by a competent authority, and
- Within the validity window.

10. Corrective Action Plans (CAPs)

10.1 CAP Definition and Responsibilities

Corrective Action Plan (CAP) is an important part of the assessment and continuous improvement process. The purpose of the CAP is to define corrective actions for resolving any non-conformances identified during the assessment. CAP activities must occur within RBA-specified time frames and using RBA-specified processes on RBA-Online. For members, these should be in accordance to the RBA Membership Compliance Program.

The Entity is ultimately responsible for the completion of the corrective and preventive actions listed within the plan.

The CAP should include:

- Determination of root cause(s)
- Description of the proposed corrective actions to address root cause(s)
- If the Entity determines that no action will be taken or is necessary in response to a non-conformance, the plan must describe the basis for this determination and why no corrective actions is required.
- Application of a preventive action to prevent future recurrence of the problem or related issue(s)
- The date the action is expected to be completed.
- Current status of the action items

For Priority non-conformances, the CAP will be developed and reviewed together with the QM.

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10.2 Priority Non-conformance Containment

Upon receiving notification of any priority non-conformance(s) from the Assessment Team, the Entity reviews the non-conformances and initiates containment immediately. Containment is the act, process, or means of immediately reducing a threat or lowering a risk of the situation identified in the priority non-conformance(s).

10.2.1 Priority Non-conformance Timeline

All corrective actions must be completed within the timeframes provided. Any deviations from the prescribed timelines must be approved by the APM. Priority non-conformances (other than exceptions listed in the priority non-conformance section), must be immediately contained.

Immediate	• Non-conformance identified and communicated to Entity management during on-site assessment	Assessment Team
≤24 Hours	• Lead Assessor to Alert AQM with conclusion, immediate containment, data points and supporting evidence	Lead Assessor
≤48 Hours	• AQM confirms priority finding on RBA-Online, triggers alert to Authorized Recipients (Requesting Company and Attachment B Companies) • Entity completes containment actions (if not already completed since the communication from Assessor)	AQM Entity
≤72 Hours	• Authorized Recipient(s) contact(s) Entity to discuss situation and status	Authorized Recipient(s)
7 days*	• Full CAP with proposed actions on priority non-conformance(s) is submitted for review to AQM (containment in place, Entity puts in place temporary measures to ensure priority non-conformance does not re-occur) • Feedback on proposed actions is communicated to Entity Note: AQM's review of the priority non-conformance CAP does not include an implementation review; only the proposed actions are reviewed. • Adjust priority non-conformance CAP if needed	Entity AQM Entity
10 days*	• Implementation of approved proposed actions on priority non-conformance CAP	Entity
30 days**	• Closure assessment of priority non-conformance(s) Note: The Entity remains the ultimate responsible party to initiate and manage the Priority Closure Assessment. If there is sufficient/legitimate evidence that more time is required, the Entity must inform the APM with the details for further consideration.	Assessment Team Entity

*Exception: Priority non-conformance for working hours where working hours is under 84hr/week and/or social insurance (timeline = timeline above plus 1 week)

**Exceptions:

- Priority non-conformance for working hours where working hours is > 84hr/week = 90 days
- Priority non-conformance for working hours where working hours is under 84hr/week = 180 days
- Priority non-conformance for social security = 180 days
- Priority non-conformance on fees (code provision A1) = 90 days

10.3 Overall CAP Timeline

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The following tables show the rating definitions and associated timelines for non-conformances.

For Priority non-conformances, the timelines below are requirements, and any exception must be coordinated with the RBA. For other non-conformances, the progress/completion timelines are only used as a recommendation.

10.3.1 Priority CAP Timelines for Different Criteria

Rating	Finding	Submit CAP	Approved CAP	Reimbursement Plan	Progress / Complete CAP
Priority	Working Hours (≤84 h/week) and Social Insurance	7 calendar days from discovery	6 weeks from assessment report release	N/A	180 days from assessment report release
	All other criteria		10 calendar days from discovery	N/A	30 days from discovery

For recruitment fee priority non-conformances, there may be steps between these timelines and completion that are required from the Entity. The RBA Compliance team will inform the Entity on all required steps depending on the specific situation.:

Rating	Finding	Submit CAP	Approved CAP	Reimbursement Plan	Progress / Complete CAP
Priority	Recruitment Fees (existing workers)	7 calendar days from discovery	14 calendar days from discovery	Entity submits: 90 calendar days*	90 days from reimbursement plan approval
	Recruitment Fees (departed workers of <6 months)				270 days from reimbursement plan approval

* RBA must approve the CAP and the reimbursement plan. The CAP must include implementation steps for no fees recruitment policy(ies). The RBA compliance team will be involved and will lead the CAP and reimbursement plan review and approval if a priority finding is identified in recruitment fees.

For further information on recruitment fee reimbursement timelines, please refer to the RBA Practical Guide to Due Diligence on Recruitment Fees in International Supply Chains.

10.3.2 Non-Priority CAP Timelines

Rating	Finding	Submit CAP	Approved CAP	Recommended CAP Completion
Major	All criteria	2 weeks from assessment report release	6 weeks from assessment report release	180 days from assessment report release
Minor				270 days from assessment report release

10.4 CAP Management Options for Non-priority Findings

There are 2 options available for CAP management of non-priority findings.

- RBA-Managed CAP (paid service)
- Customer-Managed CAP or Entity-Managed CAP

10.4.1 RBA-Managed CAP

CAP can be managed using the paid RBA Managed CAP service. The communication on the CAP and its progress is managed by the RBA, or a partner assigned by the RBA, directly with the Entity using RBA-Online. This way, only one CAP can be arranged and shared with all of the Entity's Authorized Recipients. An RBA Managed CAP is strongly encouraged for:

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- Entities who are providing a CAP to multiple customers,
- Entities new to the RBA Assessment process, who could use additional guidance on developing or managing their CAP
- Entities that wish to have a quality review by the RBA team.

The RBA is available as a resource, and actions taken suggested in an RBA-approved CAP will likely meet the expectations of an Assessor during the closure assessment.

The option to use the RBA Managed CAP process first appears for the Entity on RBA-Online when the draft Assessment Report is available for their review. If the Entity is not sure of the service request at the time, they can still change their CAP manager via RBA-Online up to 3 months from the release of the Assessment Report.

RBA Managed CAP is two-step process:

i. Review and approval of Root Cause Analysis, immediate containment actions, and management system oriented corrective actions
ii. Monitoring for implementation of corrective actions (monthly updates for 12 months)

Please write to vap@responsiblebusiness.org to request support or more information about this service.

The following steps, timelines and process apply to the RBA Managed CAP process for Major and Minor non-conformances:

Time	Action	Responsible
0 weeks	• Receipt of final Assessment Report and CAP template pre-populated	RBA
2 weeks	• Submit completed CAP version 1	Entity
	• Review and provide feedback on CAP version 1 within 2 days or approve CAP	RBA
4 weeks	• Submit completed CAP version 2	Entity
	• Review and provide feedback on CAP version 2 within 2 days or approve CAP	RBA
6 weeks	• Submit completed CAP version 3	Entity
	• Review and provide feedback on CAP version 3 within 2 days or approve CAP version 3 • Note: If version 3 is not approved then process ends	RBA

Below is the timeline for the follow-up of approved CAP:

Time	Action	Responsible
1 month from CAP approval and every following month until CAP completed or maximum of 12 months from the date of implementation of CAP	• Provide monthly update of non-conformance CAP implementation progress to RBA for a maximum of 12 months	Entity
	• Submit proof for each non-conformance conformance CAP implementation which has been completed	Entity
	• Review of non-conformance CAP implementation progress	RBA
CAP implementation completed to a maximum of 12 months from the date of implementation of CAP	• Closure Assessment process management • Note: The Entity remains the ultimate responsible party for the initiation of a Closure Assessment.	RBA

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10.4.1.1 Escalation

If there is a delay in submission of CAP beyond one week, RBA may inform the relevant RBA members for support (Authorized Recipients). The RBA members can follow up with the Entity and facilitate, if needed, a timely submission of CAP or implementation updates.

10.4.1.2 Approval of Corrective Actions

The Corrective Action Plan should be approved by the RBA before any corrective actions are implemented.

RBA, or its designated partner, will review and approve the CAP for all non-conformances within two days of submission.

Once the CAP is approved, all the implemented actions must also be reviewed and approved by the RBA before they can be closed via a Closure Assessment (please refer to *Monitoring Progress* below). Corrective actions cannot be approved until the Entity provides a complete CAP and proof of implementation. If the Entity skips this process and decides to initiate a Closure Assessment, the RBA Managed CAP service ends.

Note: The objective of obtaining RBA approval is to ensure completeness of CAP, completeness of implementation, and use of correct RBA tools. It is not an approval or statement of conformance. Conformance can only be determined by a qualified third-party assessment firm upon detailed review through a closure assessment (remote or on-site).

10.4.1.3 Monitoring Progress

For CAPs with implementation periods greater than 30 days, the Entity must provide RBA with status updates at monthly intervals. It is the Entity's responsibility to make timely submissions.

Once the Entity confirms internally that the CAP has been fully implemented, the Entity must provide a final status update indicating the non-conformance has been addressed, together with appropriate evidence supporting this position.

The evidence must be provided via RBA-Online, using commonly accepted formats (e.g. JPEG, PDF, Microsoft Word, Microsoft Excel…). It is the responsibility of the Entity to provide evidence in a format that can be accessed by the RBA.

Evidence must have the correct references in and to the CAP template to allow easy navigation between CAP template and proof of implementation.

If the Corrective Action has not been closed in the time specified in the CAP or if the corrective action is inappropriate, the Entity must provide a proposal to address the issue in the CAP management tool.

Any changes to an approved CAP must be reviewed and authorized by the RBA or its designated partner.

10.4.2 Customer-Managed CAP or Entity-Managed CAP

The Customer-Managed CAP process requires that the Authorized Recipients (in this specific case, the Attachment B company) manage the CAP, working directly with the Entity.

A copy of the approved CAP must be uploaded to the RBA-Online. The process should ideally be run directly on RBA-Online, but in case an alternative means is used, the final version of the CAP must be made available via the platform.

Alternatively, the Entity can manage their own CAP process and communicate with their customers. Similar to the Customer-Managed CAP process, it should ideally be run directly on RBA-Online; however, if alternative means are used, the final version of the CAP must be made available via the platform.

In the case of Customer or Entity-Managed CAP, the RBA is NOT available as a resource, nor does the RBA verify the actions taken will meet the expectations of an assessor during the closure assessment.

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10.5 Content of the CAP

10.5.1 Root Cause Analysis

The first step in the CAP process is to conduct a root cause analysis for each non-conformance.

"Root Cause Analysis" is a method used to identify underlying cause(s) of a non-conformance. It is used to correct or eliminate the cause and prevent the problem from recurring. If a root cause analysis is not conducted, or conducted poorly, there is a risk that time and resources may only address the symptoms of a problem, rather than addressing the real issue.

The most common element of a root cause analysis includes asking "Why a particular non-conformance occurred?" and documenting the answer.

When considering "Why" a particular problem occurred, it might be useful to consider the following potential elements to ensure comprehensive analysis:

- Knowledge – Did the problem occur due to lack of awareness or knowledge?
- Assignment – Did the problem occur because responsibility was not clearly assigned?
- Tools – Did the problem occur because appropriate tools were not available?
- Training – Did the problem occur due to lack of proper training?
- Accountability – Did the problem occur because little/no accountability, e.g. in a typical situation nothing happens when the task is not done?
- Resources – Did the problem occur due to insufficient resources?

The steps to identify a root cause often requires the examination of one or more of the above management systems elements for change or improvement. Some of the most common processes used to identify these elements are the 5-Why / 7-Why process and Ishikawa (Fishbone) Diagram. An Entity can always use other effective means as well.

10.5.2 Containment Action

The items below need to be considered for each root cause identified per finding. Depending on the CAP manager, the level of detail required, as well as the dedicated fields, may differ on RBA-Online:

Items to be Considered	Description
Describe action to be taken to immediately reduce threat/lower risk:	Description of the temporary actions taken to minimize the risk of the non-conformance. The description needs to include at least the following components: • Actions taken • Communication to management, supervisors and workers on these actions • Management system for the actions to ensure they remain in place and are effective until a permanent systems correction is implemented.
Accountable Owner	Person(s) responsible at the Entity to ensure overall effective implementation of the Immediate Containment Actions
Target Completion Date	Completion date of the initial implementation of all items. This can be no longer than 3 weeks from receipt of final assessment report. • Progress" listed as: • "On" if progressing on time or fully implemented. • "Off" when implementation is running late. If "off," then additional actions need to be listed in remarks how implementation will be corrected within the timeline.
Actual Close Date	Actual date when all items are successfully implemented.

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10.5.3 Corrective Action

Corrective actions are required to be entered in line with the finding, as well as the root cause analysis determined, that will support a long-term and sustainable closure of the finding. While, depending on the CAP manager, the level of detail required, as well as the dedicated fields, may differ on RBA-Online, the items to be considered for submission are as below:

Items to be Considered	Description
Policy/procedure changes	Describe the details of the changes which will be made to company policy/procedures. Include a reference to the current document number and issue date). The updated policy should contain at least the items required in the RBA code as well as the process to ensure the policy is sustainably implemented.
Communications/training	Describe the details of the communications and training program to ensure that all impacted workers are updated and understand the updated policy and procedures. This may include: • Who received the communication: o Management o Staff o Direct and indirect workers o Onsite contractors/suppliers o Other affected or impacted groups • How the communication was provided: o Newsletter o In-person training o Company blog or intranet o Others • If training is required, who received the training: o Management o Supervisors o Workers o Other affected or impacted groups o Induction or new employee training • If training is required, how the training was provided o In-Person o Webinar o Electronic Training o Other
Activity and impact measurements / KPIs	Describe the indicators/measurements that will be used to monitor and ensure that the implementation of the updated policy/procedure and its communications and training are effective. Measurement should be impact and activity based (e.g. number of trainings = activity, awareness or reduction in occurrence = impact). • At least 3 activity indicators and 3 impact indicators are required for each non-conformance.
Accountable Owner	Person(s) responsible at the Entity to ensure overall effective implementation of the Corrective Actions
Target Completion Date	Completion date of the implementation of each item. This date can exceed the timing as indicated in Timelines for Completion of Corrective Actions section.
Progress	• "On" if progressing on time or fully implemented. • "Off" when implementation is running late. If "off", then additional actions need to be listed in remarks how implementation will be corrected within the timeline
Action Start Date	Proposed start date for each item
Actual Close Date	Actual close dates for each item.

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10.5.4 Evidence

While, depending on the CAP manager, the level of detail required, as well as the dedicated fields, may differ on RBA-Online, the Entity is expected to provide sufficient proof of progress and completion on their corrective actions. This is done in the form of attaching evidence documents on RBA-Online.

For RBA-Managed CAP, the Entity is expected to provide monthly updates on their progress and completion. For other CAP management options, the frequency of sharing evidence depends on the CAP manager.

It is important to note that sharing evidence or information on the closure of a non-conformance as part of the CAP process does not mean that the non-conformance is closed definitively. It is only an indication that the Entity is ready for a Closure Assessment.

11. Closure Assessments

In the VAP process, completing a Corrective Action Plan (CAP) does not signify the closure of a finding. The closure is only verified via a Closure Assessment.

There are two types of Closure assessments:

- Priority Closure Assessment
- Closure Assessment

All Priority non-conformances are expected to be closed through a Priority Closure Assessment. Major and Minor non-conformances, and Risks of non-conformance are closed through a Closure Assessment.

The timing of a Closure Assessment should be based upon the type of findings in the Initial Assessment (Priority, Major, Minor, Risk of Non-conformance and whether there are working hours, recruitment fees, and/or social insurance related findings), and the timeline of completion of the CAP of the entity.

The focus of both Closure Assessment types are the issues identified in the Initial Assessment. However, if an Assessor identifies any new gap during a Closure Assessment, this is to be included as a new finding, following the same process and rules as the Initial Assessment. The entity will be expected to implement a CAP for the newly-identified finding.

11.1 Priority Closure Assessment

The purpose of a Priority Closure Assessment is not to achieve full conformance to the relevant criteria, but to remove the condition which triggers the Priority rating. Of course, if full conformance is observed during a Priority Closure Assessment because the specific situation is remediated with a view of sustainable prevention, the finding can be closed accordingly.

Priority Closure Assessment scheduling can start as of the time the Priority non-conformance is confirmed by the AQM and Assessors, which may be:

- During the assessment
- During the draft report stage (when more data is analyzed or during the AQM review of the draft report)
- When the rating is changed as per the rating guidance (to correct any rating issues in draft assessment report)

The timeline for a Priority Closure Assessment depends on the nature of the finding:

- For all issues other than recruitment fees, working hours and social insurance: 30 days from discovery
- Recruitment fees: 270 days from reimbursement plan approval by RBA
- Working hours and social insurance: 180 days from discovery

Other findings may also be closed during the Priority Closure Assessment. However, to be closed it must be agreed upon with the APM beforehand to ensure the assessment is properly scoped.

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11.2 Closure Assessment

All assessment findings can be closed through a Closure Assessment. Unlike Priority Closure Assessments, Closure Assessments for non-priority findings are not scheduled on a set timeline, rather, these are triggered by the entity or the RBA member.

Closure Assessments can be remote or onsite, depending upon the pre-determined permission level for each finding as stipulated in the assessment criteria. Remote closures are only accepted if 100% of the scoped findings are eligible as per the assessment criteria.

11.2.1 Sampling Period for Closure Assessments

The sampling period for a Closure Assessment may vary depending on the effective date of CAP implementation. In any case, the Closure Assessment cannot use the samples that would have been covered in an Initial Assessment – the timeline of samples must be after the Initial Assessment.

Closure Assessment timing should reflect 3 months of improved implementation as of the CAP completion date and align with the Corrective Action timeframes listed in this document. Especially for Working Hours and Payment criteria, the Closure Assessment is advised to take place following the latest salary payment date of the entity, so that the full improved records can be reviewed.

Example: Working hours CAP was completed in May, the Closure Assessment is completed in October, within same calendar year, then the sampling period for working hours will be from May to September, which is the month immediately prior to the Closure Assessment).

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12. VAP Standard

12.1 General Notes

The following notes apply to all the Standard elements:

- A legal non-conformance is a Major non-conformance unless otherwise stated in a specific provision (e.g., for working hours, if a situation of Entity is below 60h/w but above local law for ≤40% of the workers) or there is another finding which has a higher non-conformance rating for that provision.
- Unless otherwise noted, references to the percentage of workers in conformance or non-conformance are based on the defined sample.
- A Process is not required to be in writing as per ISO. However, all processes shall be verifiably and consistently implemented.
- A Procedure will be required in the Standard if a process must be in writing.
- For specific criteria in the VAP, a process may be established at corporate level, at Entity level, or through a combination of both. It may also be implemented by corporate, the Entity, or both. Assessors will first evaluate where the process is established and which level is responsible for implementation, then verify evidence at the applicable level(s):
    - Corporate-level process: Where the process is established by corporate, the corporate-level process will be verified. Implementation evidence will be reviewed based on who implements the process (corporate, Entity, or both).
    - Entity-level process: Where the process is established by the Entity, the Entity-level process and related Entity-level implementation evidence will be verified. If corporate supports or performs part of the implementation, relevant corporate-level evidence will also be reviewed.
    - Joint or split process: Where different parts of the process are established by corporate and the Entity, the relevant process evidence from each level will be verified. Implementation evidence will be reviewed at the level responsible for each part of the process.

    Corporate-level process and implementation options only apply to:

    - Greenhouse Gas (GHG) Emissions Management and Reporting
    - Materials Restriction
    - Responsible Sourcing of Minerals
    - Supplier Responsibility

12.2 Documentation

With regard to documenting a policy, procedures, control steps, or other documents, Entities do not need to have a separate policy or procedure for each item in this document. The Entity can fit the noted items into your existing policy and procedure structure in a way that allows:

- Responsible staff (e.g., human resources, legal, EHS) to clearly understand what they are expected to execute, monitor, and control; as well as uphold themselves in an efficient and effective manner.
- Workers and suppliers to understand the expectations.

For instance, if the Entity has a single labor policy document, it might be best to integrate the items from the RBA Code provisions in labor into that single labor policy.

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12.3 Applicability

All Standard elements apply to all in-scope workers, including temporary, migrant, student, and contract, directly and indirectly, employed workers that work in the factory/on production/in the warehouse and any other type of worker/employee, including any on-site suppliers and contractors and on-site service providers (OSPs), unless the Standard element specifically states a narrower focus group.

12.4 "Stricter-of"

The RBA expectation is that companies are to follow the "stricter of": Local law, the RBA Code of conduct, the valid Collective Bargaining Agreement (CBA), or customer requirements (if applicable). Conversely, the RBA does not expect a company to violate local law in order to comply with the RBA Code. Carefully consider and determine whether the law is truly requiring the Entity to do something, or rather it is allowing the Entity to do something.

- A Collective Bargaining Agreement may create requirements beyond the RBA Code requirements. The assessment process shall not validate CBA compliance where it is stricter than the RBA Code.

A common example is a workers resignation notice period time. The RBA prohibits requiring in-scope workers (those covered by overtime law or impacted by production levels) from needing to provide and serve more than one month of resignation notice AND this must be documented in their employment agreement. Many countries have laws speaking to longer resignation notice timelines; however, these are typically there to cover situations where the worker was not provided with an employment agreement. In this case then the RBA Code is stricter, and workers should not be required to provide notice of resignation of more than one month in advance.

12.5 Policy Content – Includes Legal Provisions and Customer Requirements

It is not sufficient to verbally say that the Entity follows a particular local law, regulation, statute, or customer requirement. Applicable laws, regulations, statutes, and customer requirements need to be integrated into company policies. For instance, if the minimum hiring age in the country where the Entity is located is 16, then the company policy needs to note that the minimum hiring age is 16 (or higher if the Entity chooses, or if it is required by customers).

12.6 Adequate and Effective

Adequate shall mean appropriate and complete for its intended purpose. In practice, it means all required code compliance elements are covered/addressed in policy, process or procedures.

Effective shall mean successfully achieves its intended goal or outcome. In practice, this means all implementation elements are deployed, and the outcome of process/procedure meets the RBA requirement.

12.7 Valid ISO 45001 or ISO 14001 Certification

If the Entity presents a valid ISO 45001 and/or ISO 14001 certificate as part of their SAQ, a portion of their Assessment effort can be reduced. To enable this, the relevant parts of the SAQ must be filled by the Entity, and the SAQ must be released on RBA-Online.

The relevant SAQ questions for this purpose, as per the 2026 SAQ, are as below:

- ISO 45001: HSC1 (acknowledgement) and HSC1-a (attachment)
- ISO 14001: EVC1 (acknowledgement) and EVC1-a (attachment)

Both the acknowledgement and the attachment must be available for the specific ISO certificate to be considered.

If valid certification is available in the SAQ, during the on-site Assessment, the Assessor will exclude or adjust the review of the relevant management system elements as mapped below:

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Valid ISO 45001		Valid ISO 14001	
B.M.1	If there are customer-specific requirements, verify. Skip the rest of the requirements.	C.M.1	Skip
B.M.2	Skip	C.M.2	Skip
B.M.3	Fully verify the grievance mechanism elements. Skip the rest of the requirements.	C.M.3	Fully verify the grievance mechanism elements. Skip the rest of the requirements.
B.M.4	Skip	C.M.4	Skip
E4	Same rules apply to Supplier Management checks if there is a valid ISO certificate.	E4	Same rules apply to Supplier Management checks if there is a valid ISO certificate.

IMPORTANT: There will be no change to the scoped on-site assessment time.

If the certification was not presented by the Entity as part of the SAQ process, the certificates will not be considered towards assessment scoping or performance.

12.8 Process-Based Management System: Small and Medium Sized Entities

For the purpose of the RBA Assessments, including VAP, Small and Medium Sized Enterprises (SMEs) are Entities with a workforce of less than 250 in-scope workers.

Small and Medium Sized Entities in the supply chain of the RBA members may have less formal management systems. This means less procedures and fewer written directions.

In such cases, Assessors must still triangulate the availability and effectiveness of the management systems in line with the RBA Code requirements. This can be done via triangulating other sources of information, including but not limited to:

- Clear and consistent ownership of tasks
- Consistency of information and instructions amongst management and workers
- Consistent and readily-available implementation records

12.9 Communication and Training

It is important that staff and workers responsible for implementing and conforming to any policies and procedures are aware of them. A communication and training plan, with periodic refreshing should occur.

All communications from the Entity to workers shall be done in a language the worker can understand unless otherwise stated in this Standard. If this is not the case, the relevant aspect is, at minimum, a 'Major' non-conformance.

12.10 Freedom of Association and Collective Bargaining

The reference to "trade union" throughout this guidance refers to trade unions, unions, and other worker representative bodies.

Where applicable laws and regulations restrict the right of freedom of association, workers shall be allowed to elect and join alternate lawful forms of worker representations.

Neutrality statement: The Entity ensures workers can exercise their rights to organize in a climate free of violence, pressure, fear, and threats. The Entity is not required to support workers' efforts to associate or organize actively.

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A. Labor

Code 8.0 Labor Preamble: Participants commit to respect the human rights of workers, and to treat them with dignity and respect as understood by the international community. This applies to all workers including temporary, migrant, student, contract, direct employees, and any other type of worker.

A1. Prohibition of Forced Labor

Code 8.0: Forced labor in any form, including but not limited to, bonded (including debt bondage) or indentured labor, involuntary or exploitative prison labor, slavery or trafficking of persons is not permitted. This includes transporting, harboring, recruiting, transferring, or receiving persons by means of threat, force, coercion, abduction or fraud for labor or services. There shall be no unreasonable restrictions on workers' freedom of movement in the facility in addition to unreasonable restrictions on entering or exiting company- provided facilities including, if applicable, workers' dormitories or living quarters. As part of the hiring process, all workers must be provided with a written employment agreement in their native language, or in a language the worker can understand that contains a description of terms and conditions of employment. Foreign migrant workers must receive the employment agreement prior to the worker departing from his or her country of origin and there shall be no substitution or change(s) allowed in the employment agreement upon arrival in the receiving country unless these changes are made to meet local law and provide equal or better terms. All work shall be voluntary, and workers shall be free to leave work at any time or terminate their employment without penalty if reasonable notice is given, which shall be clearly stated in workers' contracts. Participants shall maintain documentation on all leaving workers. Employers, agents, and sub-agents' may not hold or otherwise destroy, conceal, or confiscate identity or immigration documents, such as government-issued identification, passports, or work permits. Notwithstanding the foregoing, employers can only hold documentation if necessary to comply with the local law. In this case, at no time shall workers be denied access to their documents. Workers shall not be required to pay employers' agents or sub-agents' recruitment fees or other related fees for their employment. If any such fees are found to have been paid by workers, such fees shall be repaid to the worker.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
All work, including overtime, is voluntary. Workers are not forced to work by threat, punishment, withholding of wages or benefits, or any other form of pressure.	
Recruitment and employment practices do not create forced labor risks.	• Prohibited recruitment or hiring fees are not utilized. • Allowed fees are disclosed to the workers. These fees are not misused or overcharged. •
If prohibited fees are identified to be paid, workers are reimbursed as soon as it is discovered.	• Prohibited fees are returned/reimbursed to the worker within 90 days of commencement of employment.
Workers can move freely to use basic facilities during work. When not working, workers can leave the workplace, dormitory, or any designated living area without unreasonable restriction.	
Workers can resign freely with reasonable notice and without unfair penalty or punishment.	• Notice period served by the workers is not longer than 1 month. • Notice period and any specific conditions are stated in the written terms and conditions of employment. • If worker leaves without providing the agreed notice, penalty is less than 60% of 1 month of basic wage.
If loans are provided, they do not create dependency or stop workers from resigning.	• For all types of loans: o Repayment is not more than 10% of the workers' basic wage. o Amount of loan is not more than 60% of the worker's basic wage. o No interest is charged. • For personal loans:

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	○ Loan duration is not longer than 6 months. • For education loans: ○ Loan duration is not longer than 1 year.
Workers receive written terms and conditions of employment in writing and in their native language, or in a language they can understand, before accepting employment, or for migrant workers, before departing from the sending country or region.	• Key components of employment terms and conditions include: ○ Nature of work ○ Working hours, days off, and holidays ○ Leave entitlements ○ Legally required benefits ○ Fees charged to the workers, including specific amounts ○ Wage and deductions, including calculation of each element ○ Living arrangements and conditions, if applicable ○ Resignation and termination terms ○ Other benefits that are provided beyond the legal requirements
The key terms and conditions are explained verbally in a language the worker can understand.	
Employment terms are not changed to materially worse conditions after hiring, or for migrant workers, after arrival in the receiving country or region.	
Workers keep control of their original personal documentation.	• In countries where local law requires employers to hold foreign and internal migrant workers' personal documents, workers can access these documents within 12 hours upon request. • No fee is charged to workers for the safekeeping of government-issued identification, passports, or work permits.
Employers, agents, and sub-agents do not keep, hide, damage, or control workers' original documentation in a way that restricts movement or employment.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Prohibited recruitment and hiring fees that amount to more than 1.5 month's basic wage
- Prohibited recruitment and hiring fees paid by more than 40% of the sampled workers.
- Restricting workers from voluntary employment termination.
- Imposing any penalty for resignation that is >3 months of basic wage.
- Creating a situation that puts workers at risk such as locking exit doors in the working place or dormitories while the workers are inside.
- Any action that would be considered coercive or restrictive to reasonable movement by the use of threats such as firing, "sending home," reporting immigration status to authorities or similarly severe activities.
- Use or employment of non-voluntary labor.
- Changing the terms and conditions of employment to be materially worse than originally agreed.
- Not communicating employment terms and conditions before employment.
- Keeping, destroying, concealing, or confiscating original personal identification documents such as passports, work permits, identity, or travel papers.
- If in the rare case where local law requires an employer to store personal identification documents, tampering with the documents, restricting access for more than 12 hours, or charging a fee to access the documents.

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A2. Young Workers

Code 8.0: Child labor shall not be used in any stage of manufacturing. The term "child" refers to any person under the age of 15, or under the age for completing compulsory education, or under the minimum age for employment in the country, whichever is greatest. Workers under the age of 18 (Young Workers) shall not perform work that is likely to jeopardize their health or safety, including night shifts and overtime. Participants shall ensure proper management of student workers through proper maintenance of student records, rigorous due diligence of educational partners, and protection of students' rights in accordance with applicable laws and regulations. Participants shall implement an appropriate mechanism to verify the age of workers. The use of legitimate workplace learning programs, which comply with all laws and regulations, is supported. Participants shall provide appropriate support and training to all student workers. In the absence of local law, the wage rate for student workers, interns, and apprentices shall be at least the same wage rate as other entry-level workers performing equal or similar tasks. If child labor is identified, assistance/remediation shall be provided.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
No worker is below the legal minimum age, the minimum age defined in the company policy, or the ILO requirement of 15, whichever is stricter.	
If child labor is identified, assistance/remediation is provided.	
Young workers do not perform work that may harm their health of safety.	Young workers' health checks are completed if required by the applicable law.
Young workers do not work night shifts or overtime.	The definition of night shift for young workers, which is a consecutive period of 7 hours of work between 10PM and 7AM, is clearly known to management representatives, and is documented in relevant management system elements.
Where young workers are subject to schooling obligations, their working time does not interfere with those obligations.	
Apprentice, intern, and student worker programs support genuine learning or skill development, and these programs are not used to fill normal labor shortages.	• Apprentice, intern and student worker records are accurately maintained. • Rigorous due diligence is run in educational partner selection. • Working hours do not conflict with worker's school attendance. • Working hours are not in conflict with training period duration and number of times the same worker can be classified as an apprentice/intern/student worker. • Promotion/hiring opportunities are explained to the workers after successful apprenticeship as part of their employment terms and conditions.
Apprentice, intern and student worker terms, wages, deduction, duration, and protections comply with legal and program requirements.	• Period of wages below minimum wage does not exceed 6 months or as per applicable law, whichever is stricter. • If worker is paid below minimum wage, apprenticeship duration is maximum 6 months. • No prohibited fees are charged to, or deducted from, apprentice, intern or student worker wages. • No scholastic penalty is applied to interns or student workers. • Workers are insured against accidents and liability, in addition to any other legal insurance requirements per applicable law. • Apprenticeship, internship or student worker arrangements are not coercive.
For any student worker program, a tripartite agreement is in place between each student worker (and/or legal guardian, where applicable), the school, and the Entity, and the program is understood and acknowledged by all parties.	
No labor agent or non-government intermediary is used to recruit or manage student workers.	

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Serious Conditions that would be Considered as Priority Risk as per the RBA Code:

- Underage workers are present.
- Confirmed historical child labor within the past 12 months, with no remediation.
- Young workers working overtime.
- Young workers performing night work.
- Young workers performing inherently hazardous work.

A3. Working Hours

Code 8.0: Working hours shall not exceed the maximum set by local law. Further, a work week shall not be more than 60 hours per week, including overtime, except in emergency or unusual situations. All overtime shall be voluntary. Workers shall be allowed to have at least one day off every seven days.

Minimum Conformance Requirements
Core Requirement
Working hours in a work week, including overtime do not exceed: • 60 hours,   o Except in a valid emergency or unusual situation, • Or the limits set by the applicable law.
Working time records are accurate and reflect actual hours worked.
Workers receive at least one day, or the number of days set by the applicable law, off after maximum six (6) consecutive days of work.
Working time records are accurate and reflect actual number of days worked.
Workers are allowed mandated breaks, holidays and vacation days with no unreasonable restrictions.
Workers can take time off for illness or maternity/paternity without unfair penalty or job loss, where supported by law or valid medical evidence.
Leave records are accurate and consistent with actual leave taken.

Serious Conditions that would be Considered as Priority Risk as per the RBA Code:

- Excessive working hours beyond 84 hours/week
- Excessive working hours beyond 72 hours/week impacting more than 15% of sample
- 24 or more consecutive days of work
- 12-24 consecutive days of work impacting more than 15% of sample
- Not allowing worker to take time off for illness or maternity when they present a valid medical certificate or recognized notification.

A4 Wages and Benefits

Code 8.0: Compensation paid to workers shall comply with all applicable wage laws, including those relating to minimum wages, overtime hours and legally mandated benefits. All workers shall receive equal pay for equal work and qualification. Workers shall be compensated for overtime at pay rates greater than regular hourly rates. Deductions from wages as a disciplinary measure shall not be permitted. For each pay period, workers shall be provided with a timely and understandable wage statement that includes sufficient information to verify accurate compensation for work performed. All use of temporary, dispatch and outsourced labor shall be within the limits of the local law.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Workers are paid correctly and on time for all regular and overtime hours.	• "Pay equals time worked" is applied in a consistent and robust manner. • Payment is no less than the agreed wage.

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	• Wages, benefits and deductions are accurately calculated and recorded. • Recurring pay is completed maximum two days after agreed payment time. • If a worker is transferred to a different region/country/state, the wage and other benefits are paid according to the legal provisions of the receiving region/country/state.
"Equal pay for equal work and qualification" is applied in a consistent and robust manner.	
Overtime compensation is paid at a higher rate than the regular rate.	Overtime premium is at least 125% of regular rate, or as per applicable law, whichever is higher.
Payments to workers who resigned are made as per applicable law, or by one month after their final day of work, whichever is sooner.	
No prohibited deductions are made.	No deductions for disciplinary reasons, PPE, company required items, maternity or sick leave, amongst others.
Workers receive their wages directly and in full, without third-party control or interference.	The only exception to the third-party requirement is payment through a bank.
Workers receive understandable wage statements for each pay period before or at payment.	Wage statements include, at a minimum: • Regular hours • Overtime hours • Overtime pay • Deductions: o Insurance contributions o Employer contributions • Worker contributions
Wage statements are accurate and allow workers to verify payment for work performed.	
Statutory deductions and contributions are calculated correctly.	Records are available, allowing verification of: • Amount deducted/contributed per worker • Total amount paid per statutory contribution
Statutory deductions and contributions are submitted to the appropriate government agency within the required timeframe.	

Serious Conditions that would be Considered as Priority Risk as per the RBA Code:

- Delaying payments to workers for more than 1 month beyond the regular payment cycle.
- More than 20% of sampled workers are paid below the agreed wage.
- If workers' wages are deducted for payment of the government or regulatory deductions, such payments have not been made or Entity's submission is least 3 months overdue.

A5. Non-Discrimination / Non-Harassment / Humane Treatment

Code 8.0: Participants shall commit to a workplace free of harassment and unlawful discrimination. There shall be no harsh or inhumane treatment including violence, gender-based violence, sexual harassment, sexual abuse, corporal punishment, mental or physical coercion, bullying, public shaming, or verbal abuse of workers; nor is there to be the threat of any such treatment. Companies shall not engage in discrimination or harassment based on race, color, age, gender, sexual orientation, gender identity or expression, ethnicity or national origin, disability, pregnancy, religion, political affiliation, union membership, covered veteran status, protected genetic information or marital status in hiring and employment practices such as wages, promotions, rewards, and access to training. Disciplinary policies and procedures in support of these requirements shall be clearly defined and communicated to workers. Workers shall be provided with reasonable accommodation for religious practices and disability. In addition, workers or potential workers should not be subjected to medical tests, including pregnancy or virginity tests, or physical exams that could be used in a discriminatory way. This was drafted in consideration of ILO Discrimination (Employment and Occupation) Convention (No.111).

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Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
No evidence, or threat of, discrimination, harassment or inhumane treatment exists.	
Employment decisions are based on the worker's ability to do the job, not on personal characteristics unrelated to job requirements, unless required by law or necessary for the job.	No evidence of discrimination related to, at a minimum: • Hiring/recruitment • Wages and benefits • Promotion • Access to training or other work-related opportunities • Disciplinary actions • Termination
Medical tests are not used in a discriminatory way.	
Pregnancy, virginity, or parental status are not used as a basis to refuse employment or terminate employment for non-hazardous work.	
Accommodation provision is not based on discriminatory criteria.	
Disciplinary actions are recorded, communicated with the relevant workers, and reviewed by management.	• Disciplinary records have the signature of workers to signify their acknowledgement and confirmation.
Disciplinary measures are not inhumane, discriminatory or harassing.	
Reasonable accommodation for religious practices is provided where requested, unless there is a justified safety or security reason not to do so, or a significant impact on operations.	• If there are applicable law requirements around the provision of adequate prayer/religious areas, these are provided as per law.
Requests for religious practice accommodation are reviewed, and decisions are communicated timely.	• Communicated decisions on accommodation for religious practices include the reason for accepting or rejecting the request. • Records of requests and decisions on reasonable accommodation for religious practices are tracked and maintained.
Reasonable accommodation for disability is provided.	
Requests for disability accommodation are reviewed, and decisions are communicated timely.	• Communicated decisions on accommodations for disability include the reason for accepting or rejecting the request. • Records of requests and decisions on reasonable accommodation for religious practices are tracked and maintained.
Where accommodations are provided for disability, their effectiveness is reviewed, and corrective actions are taken if necessary.	Disability accommodation assessment records are available, up-to-date, and accurate for all disability accommodation requests.

Serious Conditions that would be Considered as Priority Risk as per the RBA Code:

- Discrimination, harassment, or inhumane treatment case without action taken.
- An inhumane, discriminatory, or harassing disciplinary action.
- Reasonable religious accommodation requests are refused by management without justification.
- Disability accommodation requests are refused by management without justification.

A6 Freedom of Association and Collective Bargaining

Code 8.0: Open communication and direct engagement between workers and management are the most effective ways to resolve workplace and compensation issues. Workers and/or their representatives shall be able to openly communicate and share ideas and concerns with management regarding working conditions and management practices without fear of discrimination, reprisal, intimidation, or harassment. In alignment with these principles, participants shall respect the right of all workers to form and join trade unions of their own choosing, to bargain collectively, and to engage in peaceful assembly as well as respect the right of workers to refrain from such activities. Where the right of freedom of association and collective bargaining is restricted by applicable laws and regulations, workers shall be allowed to elect and join alternate lawful forms of worker representations.

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Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Workers can form or join a trade union or other lawful worker representative organization of their choice, or choose not to do so.	
Workers are not forced or threatened to join, or prevented from joining trade union or other lawful worker representative organization, or treated unfairly because of their choice.	
Management does not control or interfere with the worker representative organization or its activities.	Management contributions are limited to providing meeting space and/or meeting materials.
Worker representatives are not treated unfairly, including in pay, conditions, or other employment decisions, because of their representative role.	
Workers have the right to bargain collectively, or to refrain from doing so.	If a valid CBA is available, the terms and conditions of the CBA are actually implemented.
Management does not refuse to enter into collective bargaining negotiations when requested by the workers or their representatives.	
If applicable, management participates in collective bargaining in good faith.	
Workers' legal right to peaceful assembly, or to refrain from doing so, is respected.	
Management does not interfere with, restrain, or coerce workers in the exercise of lawful peaceful assembly.	The workers' individual and collective rights are respected in terms of expressing, promoting, pursuing and defending their concerns or ideas, or to refrain from doing so.
Workers are not threatened, punished, or retaliated against for lawful peaceful assembly.	

A.M Labor Management System

Code 8.0 Management Systems Preamble: Participants shall adopt or establish a management system with a scope that is related to the content of this Code. The management system shall be designed to ensure: (a) compliance with applicable laws, regulations and customer requirements related to the participant's operations and products; (b) conformance with this Code; and (c) identification and mitigation of operational risks related to this Code. It shall also facilitate continual improvement.

A.M.1 Risk Assessment - Labor

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
A labor compliance process is established to identify, assess, track, and maintain applicable legal, regulatory, and customer requirements on a quarterly basis.	Management can accurately and consistently explain the process in place, especially if they are not documented due to reduced size or complexity of the Entity's operations.
A procedure is established to ensure required permits, licenses, approvals, certificates, tests, reports, and submissions related to labor are maintained, renewed, completed, or submitted as required.	
A due diligence process is established to identify and assess relevant actual and potential labor risks and adverse impacts, including risks related to RBA Code elements and applicable legal, regulatory, and customer requirements, arising from the Entity's: • Activities • Work processes, and • Physical locations.	Management can accurately and consistently explain the process in place, especially if it is not documented due to reduced size or complexity of the Entity's operations.
A robust labor risk assessment is conducted in line with the due diligence process.	• The risk assessment is in writing. • The risk assessment covers: o Every operation/process of the Entity o Every physical location

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	○ All identified stakeholders (refer to the core requirement below) • The relative significance of identified risks is determined.
The risk assessment identifies relevant internal and external stakeholders.	Internal and external stakeholders include, where applicable, at a minimum: • Direct and indirect workers • Young workers • Foreign and internal migrant workers • Worker representatives • On-site service providers • Suppliers • Customers • Stakeholders immediately neighboring the Entity
The due diligence process and risk assessment are reviewed and updated at least when there is a Significant Change.	

A.M.2 Control Process - Labor

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Responsibilities and authorities are defined and assigned for all employee levels, from senior management to workers, for implementation of the management system and for compliance with applicable requirements relevant to labor.	• The assignment of responsibilities is supported by relevant documents. • Responsibilities are defined for: ○ Normal situations ○ Emergency situations
A senior representative is assigned responsibility and authority to oversee conformance with applicable requirements and implementation of the management system.	
Labor policies are established, which: • Are derived from the Entity's Code of Conduct, and Cover all RBA Code Labor requirements.	The Entity's labor policies include: Child Labor, Young Workers and Interns/Apprentices/Student Workers: • Health checks for young workers are completed, if required by law. • If interns/apprentices/student workers are employed, they are only assigned tasks that are related to their status, and not used to fulfil labor shortages. Payment and Benefits: • "Pay equals time worked". Non-Discrimination/Non-Harassment/Humane Treatment • Disciplinary wage deductions are prohibited. • Decisions in hiring, employment or terminating workers are based solely on the person's ability to perform the job's requirements. Freedom of Association and Collective Bargaining • Management is committed to no interference.
Processes are established and implemented to ensure controls are defined, selected, implemented, maintained, and revised as needed to address identified labor risks of adverse impacts, based on their relative significance.	• The controls are based on the compliance process, the due diligence and risk assessment process, and other applicable legal, regulatory, customer, and operational requirements. • Where controls are not yet in place, implementation plans are established, assigned, and tracked to timely completion. • Where hierarchy of controls is relevant, controls are selected and revised in accordance with the hierarchy of controls, and higher-level controls are evaluated before reliance on lower-level controls.

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	Control processes are reviewed and revised when risk conditions change, incidents occur, or other relevant information indicates that existing controls are no longer adequate or effective.
Control processes cover and address all RBA Code Labor elements and their specific requirements.	Prohibition of Forced Labor: • If applicable, determine the specific amount of any fees and expenses paid by each individual foreign and internal migrant worker prior to the commencement of work. Child Labor: • Verify the reliability of age records, including visual verification of a government-recognized. photographic identification record. • A reliable ID verification system to control the workers' access to the Entity. • Child labor assistance/remediation process that is designed to provide for the welfare of the child. Working Hours: • Time recording devices are available and all in working order. • Working and non-working hours are accurately determined, recorded, managed and controlled. • Sufficient records and other reliable information, which demonstrate consistent and effective implementation of processes, are maintained.
Documents and records related to labor processes are retained for periods consistent with applicable legal, regulatory, customer, and operational requirements.	
A training process is established for workers, managers, and other relevant personnel on applicable responsibilities, risks and controls relevant to labor.	• Training is provided before the beginning of work and regularly thereafter, based on the training process. • New employees are trained within 30 days of hiring. • Training covers all labor policies and processes, as developed by the Entity and in line with the RBA Code. • Training is provided in a language and form that the intended audience can understand. • The effectiveness of training is evaluated. • Sufficient records or other reliable information are maintained to demonstrate the implementation and effectiveness of the trainings, including but not limited to: o New employee orientation plan o Training needs analysis o Training plan o Training material o Training records o Training frequency o Training efficiency verification o Educational materials

A.M.3 Communications - Labor

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
An ongoing two-way communication and participation process is established with workers and relevant internal and external stakeholders, where relevant or necessary, to obtain feedback on operational practices and conditions and to foster continuous improvement.	• Communication channels are easily accessible to workers and relevant stakeholders, and are provided in a language and form they can understand. • Feedback obtained through the communication process is reviewed and used, where relevant, to support implementation and improvement. • Internal and external stakeholders include, where applicable, at a minimum: o Direct and indirect workers o Young workers

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	○ Foreign and internal migrant workers ○ Worker representatives ○ On-site service providers ○ Suppliers ○ Customers ○ Stakeholders immediately neighboring the Entity • The communication process covers all labor policies and processes, as developed by the Entity and in line with the RBA Code.
A grievance procedure is established and effectively implemented for internal and external stakeholders to raise grievances, concerns and other adverse impacts confidentially and with the option to remain anonymous.	• Grievance channels are easily accessible and clearly communicated to workers and other identified stakeholders. • Reported grievances are assessed, investigated, and addressed in a timely and proportionate manner, and appropriate follow-up communication is provided to the grievant. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

Serious Conditions that would be Considered as Priority Risk as per the RBA Code:

- Grievances not being investigated and addressed within 3 months of being received.
- Not putting in place and actioning a Corrective Action Plan after confirming a grievance.

A.M.4 Performance Review and Continuous Improvement - Labor

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
A labor continuous improvement process is established.	• Labor indicators, objectives, and targets are established and communicated. • Where indicators, objectives, and targets are off track, additional action plans are established.
A management review process is established for senior management to evaluate the performance, adequacy, and effectiveness of the labor management system.	• Management review includes, at a minimum: ○ All policies and processes ○ Relevant compliance status ○ Significant risks ○ Incidents ○ Grievances ○ Audit and self-audit results ○ Corrective and preventive action status ○ Progress toward objectives • Management review is conducted at least once every 2 years, or after a Significant Change. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
A labor self-audit process is established to periodically assess conformance with applicable legal requirements, the RBA Code, the Entity's own policies, standards, and management system, and any other requirements to which the Entity subscribes.	• Findings of self-audit are reviewed by senior management. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
A labor corrective action process is established to address nonconformances, incidents, substantiated grievances and reports, self-audit findings, and other control gaps.	• Corrective actions are based on evaluation of the relevant causes and are designed to address the issue and reduce the risk of recurrence. • Corrective and preventive actions are assigned, tracked, and completed in a timely manner. If actions are off-track, additional actions are defined and completed to rectify. • Closure of corrective actions is based on evidence of implementation and, where relevant, evidence of effectiveness.

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	• Recurring issues trigger reassessment of relevant controls and processes. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

B. Health and Safety

Code 8.0 Health & Safety Preamble: Participants recognize that in addition to minimizing the incidence of work-related injuries and illnesses, a safe and healthy working environment enhances the quality of products and services, consistency of production and worker retention and morale. Participants also recognize that ongoing worker input and education are essential to identifying and solving health and safety issues in the workplace.

B1. Occupational Health and Safety

Code 8.0: Worker potential for exposure to health and safety hazards (chemical, electrical and other energy sources, fire, vehicles, and fall hazards, etc.) shall be identified and assessed, mitigated using the Hierarchy of Controls. Where hazards cannot be adequately controlled by these means, workers shall be provided with appropriate, well-maintained, personal protective equipment, and educational materials about risks to them associated with these hazards. Gender-responsive measures shall be taken, such as not having pregnant women and nursing mothers in working conditions, which could be hazardous to them or their child and to provide reasonable accommodations for nursing mothers.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
All required occupational health and safety regulatory documents are in place and valid, and submitted or reported to the government when required by applicable law.	Professional certificates, where relevant, are in place and verified, including: • External first responders • Internal emergency response team (ERT) members • Medical staff, if employed or utilized • Food worker health tests, if applicable
Accurate and complete accident, injury, and illness logs are maintained, and as required, reported to the government.	
Required occupational health and safety postings are up-to-date and displayed in easily accessible locations where all workers can readily see them.	
Occupational health and safety hazards that workers may be exposed to during routine and nonroutine tasks are proactively identified, appropriately assessed, and effectively controlled in accordance with the Hierarchy of Controls. This includes all general occupational health and safety hazards not otherwise addressed under other assessment criteria, such as hazards related to building integrity, confined spaces, pest control, fire and explosion, electrical and other energy sources, falling, and vehicles.	Working Environment: • Buildings are structurally sound. • Confined spaces and hazardous areas are identified. • Elevated working areas are fitted with fall protection systems (e.g., guardrails, safety nets, fall restraint, fall arrest) to mitigate fall and falling object hazards. • Stairways and elevated work platforms are rated for load capacity • Aisles, stairways, and work areas are free of tripping hazards (e.g., stored materials, electrical cords, etc.). • Workers are provided with appropriate fall protection in elevated areas. • Ventilation systems, dust collection systems and relevant engineering controls are maintained. Fire and explosion: • Combustible storage is minimized and limited to areas with adequate fire detection and protection. • Flammable and combustible materials are properly stored to prevent the accumulation of vapors. Ignition hazards are eliminated in areas where combustible and flammable

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	materials are stored or used, or if there is potential for a flammable atmosphere. Control of hazardous energy : • Precautions and controls for electrical, mechanical, and thermal hazards, such as signage, area markings, locked cabinets, closed panels, and unobstructed access, are in place. • Sources of hazardous energy (e.g., rotating parts, nip points, hot surfaces, hazardous noise, radiation, flying debris, etc.) are controlled by machine guarding, enclosures, and barriers to mitigate risk of accidental contact. All protective methods are in place and working. • Lock-out/tag-out processes are in place for maintenance and working on equipment and machinery to prevent accidental start-up and control all sources of hazardous energy. Vehicles: • In areas where powered industrial vehicles are used, pedestrian walkways are clearly delineated and physically separated from vehicle operation areas, where possible. • Safety inspections are performed on all powered industrial vehicles before each use.
PPE (including ERT PPE) is available, adequate, in good condition, accessible, and used where needed.	• Where occupational health and safety hazards are not eliminated or effectively mitigated by substitution, engineering controls, and/or administrative controls, PPE shall be made available and properly worn to protect workers against occupational hazards. • PPE is appropriately stored and accessible. • ERT PPE storage is clearly marked, visible, and easily accessible.
PPE selection, inventory and maintenance are adequately managed.	
Effective gender-responsive occupational health and safety measures are taken against risks and impacts identified as part of the risk assessment process.	Specific gender-responsive measures are considered for, at a minimum: • PPE selection and fitting • Workstation ergonomics • Reproductive health risks • Risks related to pregnant workers and nursing mothers • Lifting heavy weights, if applicable • Heat exposure, if applicable
Workers who may be exposed to pre-natal risks, pregnant workers, and nursing mothers are protected from work and working conditions that may harm them or their child.	Pregnant workers and nursing mothers are assigned to jobs that are safe for them and their child.
Reasonable accommodation and time are provided for nursing mothers for breastfeeding or expressing milk.	• Nursing mothers are allowed time and breaks as they are needed to breastfeed or express milk. • A location is allocated for nursing mothers to express milk, which meets the criteria below: o Location cannot be a toilet stall or a bathroom. o Location is a private enclosed area (shielded from view and free from intrusion), close to the workspace, clean and secure. o Location has a potable water supply. o Location has hygienic storage. ▪ In case breast milk needs to be stored, refrigerated storage is available.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Not properly reporting occupational accidents, injuries, and illnesses, which are deemed reportable by authorities, to the governing agency as required by law.

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- Delay in mandatory government reporting in excess of 3 months from the due date.
- Workers wearing the wrong type of PPE or not at all AND there is an immediate risk to them.
- Not having PPE available for the ERT
- The ERT PPE is in poor condition, not working, insufficient, not visible nor easily accessible.
- Having pregnant workers/nursing mothers in conditions that pose an immediate risk to them or their child.

B2. Emergency Preparedness

Code 8.0: Potential emergency situations and events shall be identified and assessed, and their impact minimized by implementing emergency plans and response procedures including emergency reporting, employee notification and evacuation procedures, worker training, and drills. Emergency drills shall be executed at least annually or as required by local law, whichever is more stringent. Emergency plans shall also include appropriate fire detection and suppression equipment, clear and unobstructed egress, adequate exit facilities, contact information for emergency responders, and recovery plans. Such plans and procedures shall focus on minimizing harm to life, the environment, and property.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Fire detection, alarm, notification, and suppression systems and equipment are in place, accessible, and fully operational.	Fire alarm: • All buildings have a manual or automatic functioning audible alarm or notification system. • Fire alarm manual call points or pull-stations are provided at or along egress routes to exits. Fire suppression: • Portable fire extinguishers are in place, with unimpeded access and inspection tags. If fire hoses are installed, the same requirement applies. • Fire water tank and pressure are sufficient.
Automatic heat or smoke detection and automatic sprinkler systems are installed and fully operational where required by law or insurance.	
Fire, heat and smoke detection, alarm, notification, and suppression systems and equipment are inspected, tested, and maintained at required frequencies.	Fire detection: • Single unit fire/smoke detectors are inspected at least once every 6 months. Fire alarm: • The fire alarm control system is free of trouble/supervisory signals. • Fire alarm systems are inspected at the frequency specified by the manufacturer or insurance company. Fire suppression: • Portable fire extinguishers are inspected at least on a monthly basis.
Asbestos-containing fire-suppression materials are prohibited.	
Emergency, business continuity, business resumption, and post-emergency arrangements are established and kept current as part of an emergency response plan (ERP) for the Entity's identified fire and other emergency risks.	• Incident reporting, investigation and corrective action processes are available and effective. • The ERP is based on risk assessment results.
An emergency response team (ERT) is established where required by law or as per the risk assessment, available during all working shifts, and is clearly identifiable.	Emergency responders' roles are clearly identified, and current contact information is accessible during emergencies.
Emergency exits, exit access doors, and exit discharge doors are adequate in number and location to enable effective evacuation from all occupied areas and discharge to safe areas.	• Exit discharge doors discharge to safe areas (e.g., open spaces, parking lot) and do not discharge to an enclosed, gated, or locked area. • Emergency exits are inspected and maintained as per the applicable law or the insurance requirements.

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Means of egress are unobstructed, readily accessible, clearly identified, illuminated, and usable without delay or special effort during an emergency.	• All exit access doors: o can be immediately opened from the inside at all times. o can be opened without a key, badge, code, special knowledge or excessive force o are not equipped with any additional locking arrangement that restricts egress or could be used to restrict egress. o can be opened without reliance on any external triggering to release the door for emergency egress. • Exit access doors that serve indoor areas that are either a. designed for high occupancy (≥ 50 persons), or b. hazardous areas, open in the direction of egress and in a single motion. • All exit discharge doors: o can be immediately opened from the inside at all times, in the direction of egress. o can be opened in a single motion. o do not require a key, badge, code, special knowledge, excessive force, grasping or pinching. o are not equipped with any additional locking arrangement that restricts egress or could be used to restrict egress. o can be opened without reliance on any external triggering to release the door for emergency egress. • Exit discharge doors that serve either a. designed for high occupancy (≥ 50 persons), or b. hazardous areas have a Listed Panic Hardware installed. Special Features: • All sliding doors (horizontal) used as exit access doors or exit discharge doors have a manual safety feature that allows the door to swing to a full-open position in the direction of egress. • All rolling doors (vertical) used as exit access doors or exit discharge doors incorporate an egress feature at the door that allows exit in the direction of egress, which can open in a single motion.
Exit routes are clearly identified, illuminated, and supported by functional emergency lighting where needed for safe evacuation.	Exit routes: • Exit routes are appropriately separated, and do not share a common exit. • Exit routes are clear of obstructions and free of material storage. Exit signs: • Exit signs are provided to mark exits on every floor • Exit signs are illuminated or lighted in the event of a power failure • Additional exit or directional signs are provided at main passageways/aisles, long corridors, and other locations where the way to the nearest exit is unclear. Emergency lighting: • Emergency lighting is provided and installed to illuminate means of egress in the event of a power failure. • Emergency lighting is functional and provides adequate illumination in stairs, aisles, corridors, ramps, passageways leading to exits, and other areas as required by applicable laws. • Emergency lighting is powered by either battery or backup generator.
Exit enclosures and fire-rated separation are maintained to preserve safe egress during an emergency.	• Penetrations are limited to sprinkler pipes, standpipes, electrical services, pipe and duct installation serving the enclosures. • Openings into the enclosures are protected by fire-rated doors or windows.

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	• Fire doors are in good condition, self-closing, or automatic closing upon fire alarm or detection of smoke. • Integrity of exit enclosures is maintained.
Safe internal and external muster points are established and maintained.	• Emergency response kits are easily located and accessible near muster points.
Emergency evacuation drills are conducted for fire and other identified emergency risks.	Emergency evacuation drills: • Cover all workers and people on site, all work shifts, and all relevant areas and evacuation routes. • Are executed within 1 month after start of operations or a Significant Change, or as required by local law, whichever is more stringent. • Are conducted at least annually, or as determined by applicable law or risk assessment, whichever is stricter. • Include scenarios representative of identified risks. • Are evaluated for gaps and follow-up action.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Not having firefighting equipment available
- Not having sprinkler or automatic detection systems when they are required by law or insurance.
- Not having alarm and notification system in place.
- The fire alarm control system disengaged, not functioning properly.
- Having firefighting equipment, automatic Detection System or alarm or notification systems are in place, however their function or effectiveness is diminished in such a way that there would be an immediate risk to life during an emergency.
- Not having a comprehensive and up to date Emergency Response Plan (ERP).
- Any emergency support facilities present or poor operating condition such that their function or effectiveness is diminished.
- Emergency exit that is blocked, has restricted egress, or is lacking easy means of egress, posing an immediate risk to life during an emergency.
- No emergency evacuation drill has been held in the last 2 years or within 1 month after the start of operations of the site or a Significant Change.

B3. Occupational Injury and Illness

Code 8.0: Procedures and systems shall be in place to prevent, manage, track and report occupational injuries and illnesses, including provisions to encourage worker reporting, classify and record injury and illness cases, provide necessary medical treatment, investigate cases and implement corrective actions to eliminate their causes, and facilitate the return of workers to work. Participants shall allow workers to remove themselves from imminent harm, and not return until the situation is mitigated, without fear of retaliation.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Workers are not exposed to situations that can cause imminent harm.	
Workers have the right to remove themselves from perceived imminent harm without seeking prior approval or negative consequences, where immediate removal is necessary for their safety.	
Areas with imminent harm are clearly identified and marked, and workers are kept out until the harm is contained.	If a present or past incident is identified, relevant containment plans and actions are available for review. The plans and actions define robust containment plans, and address the issue via Hierarchy of Controls.
Work-related accidents, fatalities, injuries, illnesses, and near misses are reported, accurately recorded, investigated, and addressed to minimize recurrence, regardless of whether they are legally reportable.	

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Occupational injury and illness data, including surveillance data, is current, accurate, and analyzed for trends at least annually.	Structured occupational injury and illness data logs are maintained.
First aid kits and first response equipment needed for site injury and illness risks are available in designated locations, accessible, and ready for use.	First aid kits: • First aid kits are appropriately stocked and have an inventory list. • First aid kits are unlocked, or if locked, the first responder can always access the key.
Trained or certified first responders are assigned as per applicable law or risk assessment.	First responders are clearly identifiable.
First aid kits and first response equipment are stocked, maintained, and inspected at least monthly.	No item in the first aid kit or first response equipment contains asbestos.
Where an on-site occupational medical clinic is provided, it is staffed, supplied, and available to respond to injured or ill workers. Where an on-site occupational medical clinic is not continuously available, alternative medical resources are identified and communicated to workers.	If an on-site occupational medical clinic is provided: • It is inspected monthly to ensure sufficient supplies are available. • An operational log is available and up-to-date.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Perceived or actual imminent harm situation, where workers are not allowed to remove themselves.
- No first response equipment.
- No first aid kits available.
- The in-house infirmary or clinic are missing critical elements.

B4. Industrial Hygiene

Code 8.0: Worker exposure to chemical, biological, and physical agents shall be identified, evaluated, and controlled according to the Hierarchy of Controls. When hazards cannot be adequately controlled, workers shall be provided with and use appropriate, well-maintained, personal protective equipment free of charge. Participants shall provide workers with safe and healthy working environments, which shall be maintained through ongoing, systematic monitoring of workers' health and working environments. Participants shall provide occupational health monitoring to routinely evaluate if workers' health is being harmed from occupational exposures. Protective occupational health programs shall be ongoing and include educational materials about the risks associated with exposure to workplace hazards.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Chemicals (including hazardous substances and Industry Focus Process Chemicals (IFPC) List chemicals) are adequately and effectively managed on-site to minimize health and safety risk and impacts to the workers.	On-site chemicals management is implemented for, at a minimum, the following elements: • Inventory records and tracking methods • Categorization • Safe handling • Storage • Movement within premises • Access management Chemicals management documentation is accurate, up-to-date and maintained.
Worker exposure to chemical, biological, and physical hazards is controlled through measures appropriate to the risk.	• Where workers may be exposed to multiple chemicals, exposure controls address the possibility and risk of combined exposure. • Workplaces are free from obvious uncontrolled fumes, dust, odors, and other conditions indicating harmful exposure.
Worker exposure to IFPC List chemicals is adequately prevented by elimination or substitution, or mitigated by engineering controls, without any administrative controls or PPE.	

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Worker exposure and health are monitored through industrial hygiene monitoring and medical surveillance, and monitoring equipment is maintained and calibrated.	

B5. Physically Demanding Work

Code 8.0: Worker exposure to the hazards of physically demanding tasks, including manual material handling and heavy or repetitive lifting, prolonged standing, and highly repetitive or forceful assembly tasks shall be identified, evaluated, and controlled.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Workers are not exposed to uncontrolled hazards from physically demanding work.	• Processes are in place to establish administrative and engineering controls for physically demanding work. • Administrative controls for physically demanding work are effectively implemented. • Engineering controls for physically demanding work are effectively implemented.

B6. Machine Safeguarding

Code 8.0: Production and other machinery shall be evaluated for safety hazards. Physical guards, interlocks, and barriers shall be provided and properly maintained where machinery presents an injury hazard to workers.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Effective process and administrative controls are in place to ensure workers operate the machines in a safe manner.	• All machines have appropriate and adequate emergency stops. • All machines have appropriate and adequate safeguards. • All workers operate the machines safely. • Work instructions (if necessary or required) and safe machine operation documentation are available at the machine or within proximity.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Any worker operating a machine in a way that has imminent or immediate risk to life or limb.

B7. Food, Sanitation and Housing

Code 8.0: Workers shall be provided with ready access to clean toilet facilities, potable water and sanitary food preparation, storage, and eating facilities. Worker dormitories provided by the facility/factory and/or via a labor agent shall be maintained to be clean and safe, and provided with appropriate emergency egress, hot water for bathing and showering, adequate lighting, and adequate conditioned ventilation, individually secured accommodations for storing personal and valuable items, and reasonable personal space along with reasonable entry and exit privileges.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Worker housing and related sanitary facilities are clean and maintained.	• Effective process and administrative controls for worker housing are in place to ensure cleanliness and maintenance. • Sufficient records or other reliable evidence are available to demonstrate that processes and administrative controls for worker housing are implemented consistently and effectively.

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Worker housing provides basic residential living conditions for workers.	Basic residential conditions are met: • Clear, well-lit stairwells to allow for safe exit • Adequate conditioned ventilation • Windows that provide light and ventilation • Adequate lighting • Safe and sufficient electricity sockets • Sufficient space for each worker • Individually secured storage • Hot water for bathing or showering • Clean potable water
Worker housing layout supports appropriate residential use.	Basic structure and layout conditions are met: • Adequate number of facilities, separated by gender, except for spouse rooms • Separate lodging and cooking facilities • Adequate domestic waste disposal facilities
Workplace restrooms, employee common areas, prayer or religious areas, cafeterias, and food areas are clean and maintained.	• Effective processes and administrative controls for bathrooms, employee spaces, cafeterias and food areas are in place to ensure cleanliness, maintenance, and pest control and prevention. • Sufficient records or other reliable evidence are available to demonstrate that processes and administrative controls for bathrooms, employee spaces, cafeterias and food areas are implemented consistently and effectively.
Workplace restrooms, cafeterias, and food areas have adequate hand-washing facilities and potable water.	
Food service workers use hygiene controls needed to prevent food contamination.	
Food storage and preparation areas are clean, and food is stored properly, including separation of raw and cooked food, covering, refrigeration where needed, and use or disposal before expiration date.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Any of the provided worker housing is unsafe or unhygienic, posing an immediate risk of loss of life or limb or severe health risk.
- Any bathrooms, employee spaces, cafeterias, or food areas are unsafe and pose an immediate risk of serious injury, loss of life or limb, or severe injury.

B.M Health and Safety Management System

Code 8.0 Management Systems Preamble: Participants shall adopt or establish a management system with a scope that is related to the content of this Code. The management system shall be designed to ensure: (a) compliance with applicable laws, regulations and customer requirements related to the participant's operations and products; (b) conformance with this Code; and (c) identification and mitigation of operational risks related to this Code. It shall also facilitate continual improvement.

B.M.1 Risk Assessment – Health and Safety

Note: If the Entity presents a valid ISO 45001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 45001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

Minimum Conformance Requirements		Valid ISO 45001
Core Requirement	Specific Conditions	
A health and safety compliance process is established to identify, assess, track, and maintain applicable legal, regulatory, and customer requirements on a quarterly basis.	Management can accurately and consistently explain the process in place, especially if they are not documented due to reduced size or complexity of the Entity's operations.	If there are customer-specific requirements, verify.

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A procedure is established to ensure required permits, licenses, approvals, certificates, tests, reports, and submissions related to health and safety are maintained, renewed, completed, or submitted as required.		Skip
A due diligence process is established to identify and assess relevant actual and potential health and safety risks and adverse impacts, including risks related to RBA Code elements and applicable legal, regulatory, and customer requirements, arising from the Entity's: • Activities • Work processes, and • Physical locations.	Management can accurately and consistently explain the process in place, especially if it is not documented due to reduced size or complexity of the Entity's operations.	
A robust health and safety risk assessment is conducted in line with the due diligence process, including specific risks of relevant demographics, such as gender and age.	• The risk assessment is in writing. • The risk assessment covers: o Every operation/process of the Entity o Every physical location o All identified stakeholders (refer to the core requirement below) • The relative significance of identified risks is determined. • The risk assessment includes the minimum elements: o Harm to life and property o Fire o Chemical spill, if relevant o Earthquake, if relevant o Severe weather, if relevant o Workplace violence o Strike o Asbestos/lead o All chemical, biological and physical agents, based on associated industrial hygiene sampling and testing ▪ Including risk of exposure to multiple chemicals o Risks related to all machines, including safeguarding needs ▪ Including machine pre-purchase/pre-installation hazard reviews o Pregnant workers and nursing mothers: ▪ Before any pregnancy reported: General risk assessment ▪ After pregnancy reported: Worker-specific pre-natal risk assessment ▪ After mother returns to work: Worker-specific post-natal risk assessment, including possible impact on the baby through breastfeeding • Risks are addressed through the Hierarchy of Controls.	
The risk assessment identifies relevant internal and external stakeholders.	Internal and external stakeholders, where applicable, include, at a minimum: • Direct and indirect workers • Young workers • Foreign and internal migrant workers • Worker representatives • On-site service providers • Suppliers • Customers • Stakeholders immediately neighboring the Entity	

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The due diligence process and risk assessment are reviewed and updated at least when there is a Significant Change.		

B.M.2 Control Processes – Health and Safety

Note: Note: If the Entity presents a valid ISO 45001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 45001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

Minimum Conformance Requirements		Valid ISO 45001
Core Requirement	Specific Conditions	
Responsibilities and authorities are defined and assigned for all employee levels, from senior management to workers, for implementation of the management system and for compliance with applicable requirements relevant to health and safety.	• The assignment of responsibilities is supported by relevant documents. • Responsibilities are defined for: o Normal situations o Emergency situations • An ERT is formed at the Entity, as required and relevant, which is: o Easily identifiable o Available during all shifts o With the obligation and authority to direct emergency response to protect worker health and safety, environment and property. • First responders are assigned that are: o Easily identifiable o Available during all shifts o Trained/certified to complete their tasks	Skip
A senior representative is assigned responsibility and authority to oversee conformance with applicable requirements and implementation of the management system.		
Health and safety policies are established, which: • Are derived from the Entity's Code of Conduct, and • Cover all RBA Code Health and Safety requirements.	The Entity's health and safety policies include: Occupational Injury and Illness: • Workers can remove themselves from imminent harm and return once the situation is mitigated without fear of retaliation. Chemicals: All new chemicals are selected after a thorough evaluation of less hazardous and non-hazardous alternatives, including Greenhouse Gas and ozone depletion impact.	
Processes are established and implemented to ensure controls are defined, selected, implemented, maintained, and revised as needed to address identified health and safety risks of adverse impacts, based on their relative significance.	• The controls are based on the compliance process, the due diligence and risk assessment process, and other applicable legal, regulatory, customer, and operational requirements. • Where controls are not yet in place, implementation plans are established, assigned, and tracked to timely completion. • Where hierarchy of controls is relevant, controls are selected and revised in accordance with the hierarchy of controls, and higher-level controls are evaluated before reliance on lower-level controls.	

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	• Control processes are reviewed and revised when risk conditions change, incidents occur, or other relevant information indicates that existing controls are no longer adequate or effective. • Sufficient records and other reliable information, which demonstrate consistent and effective implementation of processes, are maintained and protected, and retained for periods consistent with applicable legal, regulatory, customer, and operational requirements.	
Control processes cover and address all RBA Code Health and Safety elements and their specific requirements.	Gender-Responsive Measures: • Process aims to minimize the occupational health and safety impact on pregnant women and nursing mothers, as well as the fetus/child. • Process considers and addresses gender-specific risks related to occupational health and safety as per the risk assessment process. • Health checks, if required by applicable law, are provided. • Process allows reasonable break times for nursing mothers up to one year after the child's birth. Occupational Accidents, Incidents, Near-Misses and Illnesses: • Appropriate preventive actions are included in case of medical surveillance or injury: o Worker is immediately removed from current job and offered another position. o Worker's medical surveillance results cannot be used for terminating the labor contract with the worker. o Entity is responsible for providing medical treatment and re-examination to the worker. o Entity must cover the worker's medical treatment, re-examination and rehabilitation costs. Physically Demanding Work: • The process encourages responses to early reporting of discomfort. Worker Housing (if applicable): • The process requires authorized personnel to conduct on-site inspections, and support emergency processes.	
A training process is established for workers, managers, and other relevant personnel on applicable responsibilities, risks and controls relevant to health and safety.	• Training is provided before the beginning of work and regularly thereafter, based on the training process. • New employees are trained within 30 days of hiring. • Training covers all health and safety policies and processes, as developed by the Entity and in line with the RBA Code. • Training is provided in a language and form that the intended audience can understand. • Minimum training coverage includes: o Mechanical, electrical, chemical, fire and physical hazards o Correct use of appropriate PPE	

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	○ Types of potential emergencies, and steps to take in case of an emergency, including muster points ○ Reporting injuries and illnesses ○ Hazardous atmospheres and confined space work process ○ Lock out-tag out process • Specific training requirements for ERT, first responders and medical professionals include: ○ Annual training to ERT ○ Training tailored to responsibilities during an emergency ○ Medical professionals and first responders are trained by external agencies, or if applicable law permits, by internally qualified occupational health professionals such as a medical doctor • The effectiveness of training is evaluated. • Sufficient records or other reliable information are maintained to demonstrate the implementation and effectiveness of the trainings, including but not limited to: ○ New employee orientation plan ○ Training needs analysis ○ Training plan ○ Training material ○ Training records ○ Training frequency ○ Training efficiency verification Educational materials	

Serious conditions that would be considered as priority risk as per the RBA Code:

- If it is required (by law or risk assessment) to have an ERT and it is not in place.
- There are no first responders present.

B.M.3 Communications – Health and Safety

Note: If the Entity presents a valid ISO 45001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 45001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

Minimum Conformance Requirements		Valid ISO 45001
Core Requirement	Specific Conditions	
An ongoing two-way communication and participation process is established with workers and relevant internal and external stakeholders, where relevant or necessary, to obtain feedback on operational practices and conditions and to foster continuous improvement.	• Communication channels are easily accessible to workers and relevant stakeholders, and are provided in a language and form they can understand. • Feedback obtained through the communication process is reviewed and used, where relevant, to support implementation and improvement. • Internal and external stakeholders include, where applicable, at a minimum: ○ Direct and indirect workers ○ Young workers ○ Foreign and internal migrant workers ○ Worker representatives ○ On-site service providers ○ Suppliers ○ Customers ○ Visitors	Skip

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	○ Stakeholders immediately neighboring the Entity • The communication process covers all health and safety policies and processes, as developed by the Entity and in line with the RBA Code.	
Health and safety communications are clearly posted at the workplace or placed in a location identifiable and accessible by workers.	Health and safety communications include, at a minimum: • Appropriate signs, placards and labels identifying chemical, physical, biological, vehicular and other potential workplace hazards • Signs clearly indicating PPE requirements for tasks and areas • Signage showing emergency numbers, emergency team, and emergency evacuation and response plan • Maps throughout the premises, clearly identifying the exit routes and muster points in the correct orientation.	
A grievance procedure is established and effectively implemented for internal and external stakeholders to raise grievances, concerns, and other adverse impacts confidentially and with the option to remain anonymous.	• Grievance channels are easily accessible and clearly communicated to workers and other identified stakeholders. • Reported grievances are assessed, investigated, and addressed in a timely and proportionate manner, and appropriate follow-up communication is provided to the grievant. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	Verify
A mechanism is established for workers to raise safety concerns.	• The mechanism is clearly visible and adequately explained to workers. • Reported safety concerns are received, reviewed and responded in an effective manner. • Workers are encouraged to raise safety concerns, including early reporting of discomfort. • Sufficient records or other reliable evidence are available to demonstrate that safety concerns are received, reviewed and responded consistently and effectively.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Grievances not being investigated and addressed within 3 months of being received.
- Not putting in place and actioning a Corrective Action Plan after confirming a grievance.

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B.M.4 Performance Review and Continuous Improvement – Health and Safety

Note: If the Entity presents a valid ISO 45001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 45001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

Minimum Conformance Requirements		Valid ISO 45001
Core Requirement	Specific Conditions	
A health and safety continuous improvement process is established.	• Health and safety indicators, objectives, and targets are established and communicated. • Where indicators, objectives, and targets are off track, additional action plans are established.	Skip
A management review process is established for senior management to evaluate the performance, adequacy, and effectiveness of the health and safety management system.	• Management review includes, at a minimum: o All policies and processes o Relevant compliance status o Significant risks o Accidents, incidents, medical surveillance and trends analysis o Emergency drill plans o Control effectiveness o Grievances and safety concerns o Audit and self-audit results o Corrective and preventive action status o Progress toward objectives • Management review is conducted at least once every 2 years, or after a Significant Change. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	
A health and safety self-audit process is established to periodically assess conformance with applicable legal requirements, the RBA Code, the Entity's own policies, standards, and management system, and any other requirements to which the Entity subscribes.	• Findings of self-audit are reviewed by senior management. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	
A health and safety corrective action process is established to address nonconformances, incidents, substantiated grievances and reports, self-audit findings, and other control gaps.	• Corrective actions are based on evaluation of the relevant causes and are designed to address the issue and reduce the risk of recurrence. • Corrective and preventive actions are assigned, tracked, and completed in a timely manner. If actions are off-track, additional actions are defined and completed to rectify. • Closure of corrective actions is based on evidence of implementation and, where relevant, evidence of effectiveness. • Recurring issues trigger reassessment of relevant controls and processes. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	

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C. Environment

Code 8.0 Environment Preamble: Participants recognize that environmental responsibility is integral to producing world-class products. Participants shall identify the environmental impacts and minimize adverse effects on the community, environment, and natural resources within their manufacturing operations, while safeguarding the health and safety of the public.

Risk assessments should occur no less than every three years or when there is a Significant Change. A significant change is a change and modification in chemicals (additions and substitutions), chemical uses, chemical quantity, process, modules, tool operation/configuration, and/or facility systems, permit/license conditions or any change/deviation/modification from the current/previous scope of past risk assessments.

C1. Environmental Permits and Reporting

Code 8.0: All required environmental permits (e.g. discharge monitoring), approvals, and registrations shall be obtained, maintained, and kept current, and their operational and reporting requirements shall be followed.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
All required environmental regulatory documents are in place and valid, and submitted to the government per applicable laws and regulations (if required).	Permits/certifications/reports, where relevant, are in place and valid, including: • Operating permit • Air emissions • Wastewater discharge • Stormwater management • Hazardous materials storage, use and labeling requirements • Generation of waste (solid and hazardous), and storage and labeling requirements • Professional certificates, including any required qualifications/certifications for environmental compliance and management
Required environmental postings are up-to-date and publicly visible.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Not properly reporting environmental accidents or incidents, which are deemed reportable by authorities, to the governing agency as required by law.
- Delay in mandatory government reporting in excess of 3 months from the due date.

C2. Hazardous Substances

Code 8.0: Chemicals, waste, and other materials posing a hazard to humans, or the environment shall be identified, labeled, and managed to ensure their safe handling, movement, storage, use, recycling or reuse, and disposal. Hazardous waste data shall be tracked and documented.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Hazardous substances are adequately and effectively managed to minimize environmental risks.	
Hazardous waste is managed responsibly, with the support of engineering and administrative controls.	• Waste is adequately and effectively categorized, handled, stored, labeled, and moved within the premises. • Access to waste management and storage is controlled. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

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Hazardous waste is disposed of using government-approved and/or licensed vendors.	• Sufficient records or other reliable evidence are available to: o Demonstrate documentation maintained on government-approved vendors. o Demonstrate any assessment conducted and improvement points identified for non-government transport and disposal vendors. • Hazardous waste inventory is maintained, tracked and accurate. • Inspection records of hazardous waste and their storage points are maintained and accurate. • Copies of hazardous waste shipping papers are maintained and accurate. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
Transport and disposal vendor approvals, certificates, or licenses are current and valid.	All approvals/certificates/licenses are authorized by applicable regulatory authorities.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Confirmed open dumping of hazardous waste on land.
- Disposing of or handing off hazardous waste to non-licensed transport or disposal vendors.

C3. Solid Waste

Code 8.0: Participants shall implement a systematic approach to identify, manage, reduce, and responsibly dispose of or recycle solid waste (non-hazardous). Waste data shall be tracked and documented.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Solid waste is managed on-site responsibly, with the support of engineering and administrative controls.	• Waste is adequately and effectively categorized, handled, stored, labeled, and moved within the premises. • Access to waste management and storage is controlled. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
Solid waste is disposed of responsibly.	• Accurate waste inventory is maintained, tracked and accurate. • Inspection records of waste and their storage points are maintained and accurate. • Copies of waste manifests and shipping papers are maintained and accurate. • Sufficient records or other reliable evidence are available to demonstrate that solid waste management processes are implemented consistently and effectively.
Transport and disposal vendor approvals, certificates, or licenses are current and valid.	All approvals/certificates/licenses are authorized by the applicable regulatory authorities.

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C4. Air Emissions

Code 8.0: Air emissions of volatile organic chemicals, aerosols, corrosives, particulates, ozone depleting substances, and combustion byproducts generated from operations shall be characterized, routinely monitored, controlled, and treated as required prior to discharge. Ozone- depleting substances shall be effectively managed in accordance with the Montreal Protocol and applicable regulations. Participants shall conduct routine monitoring of the performance of its air emission control systems.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Air emissions are tracked, monitored and treated effectively with the support of engineering and administrative controls.	• Air emissions are treated before discharge in accordance with permit requirements. • List of air emissions is up-to-date and accurate. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
Air emission monitoring and treatment equipment and system are effectively operating and maintained via routine inspections and monitoring for improper function.	• Air emission treatment equipment is identified, appropriate and well-maintained. • Routine preventive maintenance is executed for air emission treatment equipment. • Integrity of air emission systems is evaluated regularly. • Air emission treatment equipment and their discharge points are regularly inspected. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
Ozone-depleting substances are listed and clearly labeled.	List of ozone depleting substances is up-to-date and accurate.
Environmental noise levels are tracked, monitored and kept within regulatory limits with the support of engineering and administrative controls.	No excessive boundary noise identified.
Boundary noise control devices are maintained and routinely monitored.	• Boundary noise control devices are identified, appropriate and well-maintained. • Routine preventive maintenance is executed for boundary noise control devices. • Efficiency of boundary noise control devices is evaluated and inspected regularly. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

C5. Water Management

Code 8.0: Participants shall implement a water management program that documents, characterizes, and monitors water sources, use and discharge; seeks opportunities to conserve water; and controls channels of contamination. All wastewater shall be characterized, monitored, controlled, and treated as required prior to discharge or disposal. Participants shall conduct routine monitoring of the performance of its wastewater treatment and containment systems to ensure optimal performance and regulatory compliance.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Water and wastewater are monitored and managed effectively with the support of engineering and administrative controls.	• Source of water (entry point of water to premises) is clear. • Water and wastewater inventory is maintained and is accurate. • Wastewater storage and discharge point are regularly inspected for integrity and effectiveness, and preventive maintenance measures are taken. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

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Water channels are free from contamination, and are protected from contamination.	• Appropriate emergency response equipment/materials are in place to respond to possible water channel contamination. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
Water withdrawal and discharge points do not appear to heavily impact the local waterbodies.	Management demonstrates a clear understanding of where the municipal or private company service withdraws its water.
Industrial and sanitary wastewater is treated before discharge in accordance with applicable regulatory and permit requirements. Wastewater treatment systems are maintained and operating effectively.	• Equipment such as tanks, piping and storage vessels are compatible with the waste stored and transported. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively. • Wastewater treatment systems are regularly inspected for integrity and effectiveness, and preventive maintenance measures are taken. • All transport and disposal vendors are approved/certified/licensed by local regulatory authorities.

C6. Energy Consumption and Greenhouse Gas Emissions

Code 8.0: Participants shall establish and report against an absolute corporate-wide greenhouse gas reduction goal. Energy consumption and all Scopes 1, 2, and significant categories of Scope 3 greenhouse gas emissions shall be tracked, documented, and publicly reported. Participants shall look for methods to improve energy efficiency and to minimize their energy consumption and greenhouse gas emissions.

Minimum Conformance Requirements	
Core Requirement	Specific Conditions
Energy consumption and Scope 1 and Scope 2 GHG emissions are accurately tracked by source at the Entity level and documented.	• Sources of electricity and other energy are documented, consumption recorded and accurate by source at the Entity level. • Scope 1 and 2 GHG emissions are documented and accurately recorded by source. • Scope 1 and 2 GHG emission boundaries are clearly defined. • No significant source of energy consumption or greenhouse gas emission is omitted from tracking.
Significant categories of Scope 3 GHG emissions are determined through a materiality or similar process, and data is tracked at the corporate level, where applicable. For standalone Entities with no applicable corporate level, relevant Scope 3 data is determined and tracked at the Entity level.	Significant categories of Scope 3 include Category 1 at a minimum.
Absolute corporate-wide reduction goal and performance are publicly, and at least annually, reported.	

C.M Environmental Management System

Code 8.0 Management Systems Preamble: Participants shall adopt or establish a management system with a scope that is related to the content of this Code. The management system shall be designed to ensure: (a) compliance with applicable laws, regulations and customer requirements related to the participant's operations and products; (b) conformance with this Code; and (c) identification and mitigation of operational risks related to this Code. It shall also facilitate continual improvement.

C.M.1 Risk Assessment – Environmental

Note: If the Entity presents a valid ISO 14001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 14001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

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Minimum Conformance Requirements		Valid ISO 14001
Core Requirement	Specific Conditions	
An environment compliance process is established to identify, assess, track, and maintain applicable legal, regulatory, and customer environmental requirements on a quarterly basis.	Management can accurately and consistently explain the process in place, especially if they are not documented due to reduced size or complexity of the Entity's operations.	Skip
A procedure is established to ensure required permits, licenses, approvals, certificates, tests, reports, and submissions related to environment are maintained, renewed, completed, or submitted as required.		
A due diligence process is established to identify and assess relevant actual and potential environmental risks and adverse impacts, including risks related to RBA Code elements and applicable legal, regulatory, and customer requirements, arising from the Entity's: • Activities • Work processes, and • Physical locations.	• Management can accurately and consistently explain the process in place, especially if it is not documented due to reduced size or complexity of the Entity's operations. • The due diligence process covers, at a minimum: o Every environmental medium o Every RBA Code environmental element	
A robust environmental risk assessment is conducted in line with the due diligence process, including specific risks of relevant demographics, such as gender and age.	• The risk assessment is in writing. • The risk assessment covers: o Every environmental medium o Every operation/process of the Entity o Every physical location o Every chemical or material used ▪ Including risk of exposure to multiple chemicals o All identified stakeholders (refer to the core requirement below) • Significant environmental risks and impacts are identified via a materiality assessment, which is the baseline for further monitoring and control steps. • Risks are addressed through the Hierarchy of Controls.	
The risk assessment identifies relevant internal and external stakeholders.	Internal and external stakeholders, where applicable, include, at a minimum: • Direct and indirect workers • Young workers • Foreign and internal migrant workers • Worker representatives • On-site service providers • Suppliers • Customers • Stakeholders immediately neighboring the Entity	
The due diligence process and risk assessment are reviewed and updated at least when there is a Significant Change.		

C.M.2 Control Processes – Environmental

Note: If the Entity presents a valid ISO 14001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 14001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

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Minimum Conformance Requirements		Valid ISO 14001
Core Requirement	Specific Conditions	
Responsibilities and authorities are defined and assigned for all employee levels, from senior management to workers, for implementation of the management system and for compliance with applicable requirements relevant to environment.	• The assignment of responsibilities is supported by relevant documents. • Responsibilities are defined for: o Normal situations o Emergency situations • A specific individual or individuals are assigned within the Entity, who is responsible for the aspects below, as applicable: o Restricted/hazardous substances o Waste o Air emissions o Environmental noise o Water management and wastewater o Energy and GHG o Ozone depleting substances	Skip
A senior representative is assigned responsibility and authority to oversee conformance with applicable requirements and implementation of the management system.		
Environment policies are established, which: • Are derived from the Entity's Code of Conduct, and • Cover all RBA Code Labor requirements.	The Entity's environment policies include: • Commitment to the reduction or elimination of: o Ozone depleting substances o Energy and GHG emissions o Use of natural resources o Raw materials and resulting waste • Commitment to conservation of natural resources	
Processes are established and implemented to ensure controls are defined, selected, implemented, maintained, and revised as needed to address identified environmental risks of adverse impacts, based on their relative significance.	• Corporate GHG reduction and tracking implementation process is in writing. • The controls are based on the compliance process, the due diligence and risk assessment process, and other applicable legal, regulatory, customer, and operational requirements. • Where controls are not yet in place, implementation plans are established, assigned, and tracked to timely completion. • Where Hierarchy of Controls is relevant, controls are selected and revised in accordance with the hierarchy of controls, and higher-level controls are evaluated before reliance on lower-level controls. • Control processes are reviewed and revised when risk conditions change, incidents occur, or other relevant information indicates that existing controls are no longer adequate or effective. • Sufficient records and other reliable information, which demonstrate consistent and effective implementation of processes, are maintained and protected, and retained for periods consistent with applicable legal, regulatory, customer, and operational requirements.	

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An adequate and effective emergency response and investigation process is available and consistently implemented.	• Investigation processes are in place for each environmental incident, resulting in preventive and corrective action plans. • Emergency response process includes clearly defined steps and roles/responsibilities. o The process considers emergencies related to every environmental medium, in line with the risk assessment.	
Control processes cover and address all RBA Code Environment elements and their specific requirements.		

A training process is established for workers, managers, and other relevant personnel on applicable responsibilities, risks and controls relevant to environment.	• Training is provided before the beginning of work and regularly thereafter, based on the training process.
	• New employees are trained within 30 days of hiring.
	• Training covers all labor policies and processes, as developed by the Entity and in line with the RBA Code.
	• Training is provided in a language and form that the intended audience can understand.
	• Minimum training coverage includes:
	  o Reduction efforts
	  o Hazardous waste handling, storage and disposal
	  o Solid waste handling, storage and disposal
	  o Air emissions and control systems
	  o Material restrictions
	  o Water use, discharge, and water channel contamination protection
	  o GHG/energy use and reduction
	  o Specialized training for workers responsible for storing, cleaning up or disposing of hazardous chemicals and waste.
	• The effectiveness of training is evaluated.
	• Sufficient records or other reliable information are maintained to demonstrate the implementation and effectiveness of the trainings, including but not limited to:
	  o New employee orientation plan
	  o Training needs analysis
	  o Training plan
	  o Training material
	  o Training records
	  o Training frequency
	  o Training efficiency verification
	  o Educational materials	

C.M.3 Communications – Environmental

Note: If the Entity presents a valid ISO 14001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 14001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

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Minimum Conformance Requirements		Valid ISO 14001
Core Requirement	Specific Conditions	
An ongoing two-way communication and participation process is established with workers and relevant internal and external stakeholders, where relevant or necessary, to obtain feedback on operational practices and conditions and to foster continuous improvement.	• Communication channels are easily accessible to workers and relevant stakeholders, and are provided in a language and form they can understand. • Feedback obtained through the communication process is reviewed and used, where relevant, to support implementation and improvement. • Internal and external stakeholders include, where applicable, at a minimum: o Direct and indirect workers o Young workers o Foreign and internal migrant workers o Worker representatives o On-site service providers o Suppliers o Customers o Visitors o Stakeholders immediately neighboring the Entity • The communication process covers all environmental policies and processes, as developed by the Entity and in line with the RBA Code.	Skip
Environmental communications are clearly posted at the workplace or placed in a location identifiable and accessible by workers.	Hazard signage and information is available, including but not limited to: • Labels • Safety data sheets (SDS/MSDS) • Hazardous waste characterization	
A grievance procedure is established and effectively implemented for internal and external stakeholders to raise grievances, concerns, and other adverse impacts confidentially and with the option to remain anonymous.	• Grievance channels are easily accessible and clearly communicated to workers and other identified stakeholders. • Reported grievances are assessed, investigated, and addressed in a timely and proportionate manner, and appropriate follow-up communication is provided to the grievant. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	Verify
A mechanism is established for workers to raise safety concerns.	• The mechanism is clearly visible and adequately explained to workers. • Reported safety concerns are received, reviewed and responded in an effective manner. • Workers are encouraged to raise safety concerns, including early reporting of discomfort. • Sufficient records or other reliable evidence are available to demonstrate that environmental concerns are received, reviewed and responded consistently and effectively.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Grievances not being investigated and addressed within 3 months of being received.
- Not putting in place and actioning a Corrective Action Plan after confirming a grievance.

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C.M.4 Performance Review and Continuous Improvement – Environmental

Note: If the Entity presents a valid ISO 14001 certificate as part of their SAQ, the elements that are marked as "skip" under the "Valid ISO 14001" column will be excluded from the Assessment effort. For more information on this process, please refer to Valid ISO 45001 or ISO 14001 Certification.

Minimum Conformance Requirements		Valid ISO 14001
Core Requirement	Specific Conditions	
An environment continuous improvement process to minimize or eliminate emissions and discharges of pollutants at the source, generation of waste, and to support the conservation of natural resources established.	• Significant environmental risks and impacts are identified via a materiality assessment. • Clear annual indicators, objectives, and targets for each identified significant emission source, waste, and natural resource use, are established and communicated. • Objectives and targets include, at a minimum: o Reduction of resource consumption o Greenhouse gas impact o Ozone depleting substances impact • Where indicators, objectives, and targets are off track, additional action plans are established.	Skip
A management review process is established for senior management to evaluate the performance, adequacy, and effectiveness of the environment management system.	• Management review includes, at a minimum: o All policies and processes o Relevant compliance status o Significant risks o Accidents, incidents, medical surveillance and trends analysis o Emergency drill plans o Control effectiveness o Grievances and safety concerns o Audit and self-audit results o Corrective and preventive action status o Progress toward objectives • Management review is conducted at least once every 2 years, or after a Significant Change. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	
Adequate and effective processes to identify, manage, minimize or eliminate emissions and discharges of pollutants at the source, generation of waste, and to support the conservation of natural resources are established and implemented.	• Engineering controls are defined and implemented. • Significant environmental risks and impacts are identified via a materiality assessment, which is the baseline for any further monitoring and control steps. • Clear annual objectives and targets are set for each identified significant emission source, waste, and natural resource use, demonstrating annual progress. • Objectives and targets include, at a minimum: o Reduction of resource consumption o Greenhouse gas impact • Ozone depleting substances impact	
An environment self-audit process is established to periodically assess conformance with applicable legal requirements, the RBA Code, the Entity's own policies, standards, and management system, and any other requirements to which the Entity subscribes.	• Findings of self-audit are reviewed by senior management. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	
An environmental corrective action process is established to address nonconformances, incidents, substantiated grievances and reports, self-audit findings, and other control gaps.	• Corrective actions are based on evaluation of the relevant causes and are designed to address the issue and reduce the risk of recurrence. • Corrective and preventive actions are assigned, tracked, and completed in a timely manner. If actions are off-track, additional actions are defined and completed to rectify.	

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	• Closure of corrective actions is based on evidence of implementation and, where relevant, evidence of effectiveness. • Recurring issues trigger reassessment of relevant controls and processes. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.	

D. Ethics

Code 8.0 Ethics Preamble: To meet social responsibilities and to achieve success in the marketplace, Participants and their agents shall uphold the highest standards of ethics including:

D1. Business Integrity and No Improper Advantage

Code 8.0: The highest standards of integrity shall be upheld in all business interactions. Participants shall have a zero-tolerance policy to prohibit any and all forms of bribery, corruption, extortion, and embezzlement. Bribes or other means of obtaining undue or improper advantage shall not be promised, offered, authorized, given, or accepted. This prohibition covers promising, offering, authorizing, giving, or accepting anything of value, either directly or indirectly through a third party, in order to obtain or retain business, direct business to any person, or otherwise gain an improper advantage. Monitoring, record keeping, and enforcement procedures shall be implemented to ensure compliance with anti-corruption laws.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
There is no evidence of bribery, corruption, extortion, embezzlement, or obtaining undue or improper advantage being promised, offered, authorized, given or accepted.	• Public information does not reveal any cases or allegations relevant to business integrity and improper advantage.
There is no evidence of undisclosed or unmanaged conflicts of interest that could compromise business integrity.	Conflict of interest declarations are recorded for all workers, including indirect workers, and management.
No worker suffers from negative consequences for refusing to participate in ethical conduct inconsistent with the RBA Code or the Entity's own ethics policies.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- A confirmed case of bribery, improper advantage, corruption, extortion, or embezzlement without a Corrective Action Plan.

D2. Disclosure of Information

Code 8.0: All business dealings shall be transparently performed and accurately reflected on the Participant's business books and records. Information regarding participant's labor, health and safety, environmental practices, business activities, structure, financial situation, and performance shall be disclosed in accordance with applicable regulations and prevailing industry practices. Falsification of records or misrepresentation of conditions or practices in the supply chain are unacceptable.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
There is no evidence of deliberate or intentional falsification, misrepresentation, omission or communication of materially inaccurate information regarding the Entity's labor, health and safety and	• Records are not falsified, and conditions are not misrepresented. • Supplier and customer communications are accurate.

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environmental practices, business activities, structure, financial situation, or performance.	
If there is publicly communicated company information, it is accurate and not misleading.	

Serious conditions that would be considered as priority risk as per the RBA Code:

- Deliberately misleading records

D3. Intellectual Property

Code 8.0: Intellectual property rights shall be respected. Transfer of technology and know-how is to be done in a manner that protects intellectual property rights, and customer and supplier information shall be safeguarded.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
There is no evidence of unauthorized access to, disclosure of, or loss of control over intellectual property or confidential business information of the Entity or its customers, suppliers or other business partners.	• Adequate and effective process and administrative controls are in place to control access to: o IT systems o Any system/location where intellectual property is stored/managed • Protection agreements are in place for all relevant employees and business relationships.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Intellectual property from any source (own company, customer, other), which the Entity is in possession of, is not protected.

D4. Fair Business, Advertising and Competition

Code 8.0: Standards of fair business, advertising, and competition shall be upheld.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
There is no evidence of inconsistent behavior or conduct against fair business, advertising or competition laws, regulations or other applicable standards.	• Public information does not reveal any cases or allegations relevant to fair business, advertising and competition. • Any allegation against fair business, advertising or competition is investigated, and action is taken if the allegation is substantiated.

D5. Protection of Identity and Non-Retaliation

Code 8.0: Programs that ensure the confidentiality, anonymity, and protection of supplier and employee whistleblowers shall be maintained, unless prohibited by law. Participants shall have a communicated process for their personnel to be able to raise any concerns without fear of retaliation.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
There is no evidence of retaliation against whistleblowers, stakeholders, workers, or other personnel who report grievances, concerns or adverse impacts.	• Grievance, investigation and personnel records, including redundancy records, demonstrate no retaliation.
There is no evidence of reduced protection of the identity or confidentiality whistleblowers, stakeholders, workers,	• Processes and administrative controls are in place to ensure no reduced protection of the identity or confidentiality of

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or other personnel who report grievances, concerns or adverse impacts.	whistleblowers, stakeholders, workers, or other personnel who report grievances, concerns or adverse impacts. • Grievance communication records do not breach the protection of identity.

Serious conditions that would be considered as priority risk as per the RBA Code:

- There are cases of confirmed retaliation of workers.
- There are confirmed breaches of confidentiality of identity of whistleblowers or those who have filed a grievance.

D6. Privacy

Code 8.0: Participants shall commit to protecting the reasonable privacy expectations of personal information of everyone they do business with, including suppliers, customers, consumers, and employees. Participants shall comply with privacy and information security laws and regulatory requirements when personal information is collected, stored, processed, transmitted, and shared.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Personal information is collected, stored, processed, transmitted, and shared only with the individual's approval or as required by applicable law.	• All evidence suggests personal information is effectively protected. • Processes and administrative controls are in place to ensure there is no unauthorized disclosure of personal information.
There is no evidence of unauthorized access to or viewing, disclosure or use of personal information.	• No information is viewable by an unauthorized person.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Personal information is collected, stored, processed, transmitted, or shared without the individual's prior and ongoing approval.

D.M Ethics Management System

Code 8.0 Management Systems Preamble: Participants shall adopt or establish a management system with a scope that is related to the content of this Code. The management system shall be designed to ensure: (a) compliance with applicable laws, regulations and customer requirements related to the participant's operations and products; (b) conformance with this Code; and (c) identification and mitigation of operational risks related to this Code. It shall also facilitate continual improvement.

D.M.1 Risk Assessment - Ethics

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
An ethics compliance process is established to identify, assess, track, and maintain applicable legal, regulatory, and customer requirements on a quarterly basis.	Management can accurately and consistently explain the process in place, especially if they are not documented due to reduced size or complexity of the Entity's operations.
A procedure is established to ensure required permits, licenses, approvals, certificates, tests, reports, and submissions related to ethics are maintained, renewed, completed, or submitted as required.	
A due diligence process is established to identify and assess relevant actual and potential ethics risks and adverse impacts, including risks related to RBA Code	Management can accurately and consistently explain the process in place, especially if it is not documented due to reduced size or complexity of the Entity's operations.

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elements and applicable legal, regulatory, and customer requirements, arising from the Entity's: • Activities • Work processes, and • Physical locations.	
A robust ethics risk assessment is conducted in line with the due diligence process.	• The risk assessment is in writing. • The risk assessment covers: o Every operation/process of the Entity o Every physical location o All identified stakeholders (refer to the core requirement below) • The relative significance of identified risks is determined. • Risks are addressed through the Hierarchy of Controls. • Risk assessment considers business circumstances in the country/region, and includes at a minimum: o Upholding the highest standards of integrity in all business interactions o Conduct against undue or improper advantage being promised, offered, authorized, given or accepted o Intellectual property protection o Fair business, advertising and competition o Non-retaliation or protection of identity o Unauthorized disclosure of personal information
The risk assessment identifies relevant internal and external stakeholders.	Internal and external stakeholders include, where applicable, at a minimum: • Direct and indirect workers • Young workers • Foreign and internal migrant workers • Worker representatives • On-site service providers • Suppliers • Customers • Stakeholders immediately neighboring the Entity
The due diligence process and risk assessment are reviewed and updated at least when there is a Significant Change.	

D.M.2 Control Processes – Ethics

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Responsibilities and authorities are defined and assigned for all employee levels, from senior management to workers, for implementation of the management system and for compliance with applicable requirements relevant to ethics.	• The assignment of responsibilities is supported by relevant documents. • Responsibilities are defined for: o Normal situations o Emergency situations
A senior representative is assigned responsibility and authority to oversee conformance with applicable requirements and implementation of the management system.	
Ethics policies are established, which: • Are derived from the Entity's Code of Conduct, and • Cover all RBA Code Labor requirements.	The Entity's ethics policies include: • Commitment to the highest standards of integrity in all business interactions, and zero tolerance against all forms of bribery, corruption, extortion and embezzlement. • Gifts to or from suppliers and customers are not excessive in cost and frequency. • Commitment to compliance with applicable anti-corruption and anti-competition laws, and sanctions against any violation. • Commitment to fully transparent business conduct.

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Processes are established and implemented to ensure controls are defined, selected, implemented, maintained, and revised as needed to address identified ethics risks of adverse impacts, based on their relative significance.	• The controls are based on the compliance process, the due diligence and risk assessment process, and other applicable legal, regulatory, customer, and operational requirements. • Where controls are not yet in place, implementation plans are established, assigned, and tracked to timely completion. • Where hierarchy of controls is relevant, controls are selected and revised in accordance with the hierarchy of controls, and higher-level controls are evaluated before reliance on lower-level controls. • Control processes are reviewed and revised when risk conditions change, incidents occur, or other relevant information indicates that existing controls are no longer adequate or effective. • Sufficient records and other reliable information, which demonstrate consistent and effective implementation of processes, are maintained and protected, and retained for periods consistent with applicable legal, regulatory, customer, and operational requirements. • IT measures and guidelines are established to ensure safe distribution/dissemination of information, as well as to protect the business information and intellectual property of suppliers and customers.
Control processes cover and address all RBA Code Ethics elements and their specific requirements.	
A training process is established for workers, managers, and other relevant personnel on applicable responsibilities, risks and controls relevant to ethics.	• Training is provided before the beginning of work and regularly thereafter, based on the training process. • New employees are trained within 30 days of hiring. • Training covers all labor policies and processes, as developed by the Entity and in line with the RBA Code. • Training is provided in a language and form that the intended audience can understand. • Minimum training coverage includes: o Upholding the highest standard of integrity in business interactions o Conduct against undue or improper advantage being promised, offered, authorized, given or accepted. o Intellectual property protection o Fair business, advertising and competition o Non-retaliation or protection of identity o Unauthorized disclosure of personal information • The effectiveness of training is evaluated. • Sufficient records or other reliable information are maintained to demonstrate the implementation and effectiveness of the trainings, including but not limited to: o New employee orientation plan o Training needs analysis o Training plan o Training material o Training records o Training frequency o Training efficiency verification o Educational materials

D.M.3 Communications – Ethics

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
An ongoing two-way communication and participation process is established with workers and relevant internal and external stakeholders, where relevant or necessary, to obtain feedback on operational practices and conditions and to foster continuous improvement.	• Communication channels are easily accessible to workers and relevant stakeholders, and are provided in a language and form they can understand.

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	• Feedback obtained through the communication process is reviewed and used, where relevant, to support implementation and improvement. • Internal and external stakeholders include, at a minimum: o Direct and indirect workers o Young workers o Foreign and internal migrant workers o Worker representatives o On-site service providers o Suppliers o Customers o Visitors o Stakeholders immediately neighboring the Entity • The communication process covers all environmental policies and processes, as developed by the Entity and in line with the RBA Code.
A grievance procedure is established and effectively implemented for internal and external stakeholders to raise grievances, concerns, and other adverse impacts confidentially and with the option to remain anonymous.	• Grievance channels are easily accessible and clearly communicated to workers and other identified stakeholders. • Reported grievances are assessed, investigated, and addressed in a timely and proportionate manner, and appropriate follow-up communication is provided to the grievant. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
A mechanism is established for workers to raise ethics concerns.	• The mechanism is clearly visible and adequately explained to workers. • Reported safety concerns are received, reviewed and responded in an effective manner. • Workers are encouraged to raise ethics concerns • Sufficient records or other reliable evidence are available to demonstrate that environmental concerns are received, reviewed and responded consistently and effectively.

Serious conditions that would be considered as priority risk as per the RBA Code:

- Grievances not being investigated and addressed within 3 months of being received.
- Not putting in place and actioning a Corrective Action Plan after confirming a grievance.

D.M.4 Performance Review and Continuous Improvement – Ethics

Minimum Conformance Requirements	
Core Requirement	Specific Conditions
An ethics continuous improvement process is established.	• Ethics indicators, objectives, and targets are established and communicated. Where indicators, objectives, and targets are off track, additional action plans are established.
A management review process is established for senior management to evaluate the performance, adequacy, and effectiveness of the ethics management system.	• Management review includes, at a minimum: o All policies and processes o Relevant compliance status o Significant risks o Incidents o Grievances o Audit and self-audit results o Corrective and preventive action status o Progress toward objectives • Management review is conducted at least once every 2 years, or after a Significant Change.

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	• Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively. • In addition to the regular management review, regular monitoring is conducted on potential breaches of: o Upholding the highest standard of integrity in business interactions o Conduct against undue or improper advantage being promised, offered, authorized, given or accepted. o Intellectual property protection o Fair business, advertising and competition o Non-retaliation or protection of identity o Unauthorized disclosure of personal information
An ethics self-audit process is established to periodically assess conformance with applicable legal requirements, the RBA Code, the Entity's own policies, standards, and management system, and any other requirements to which the Entity subscribes.	• Findings of self-audit are reviewed by senior management. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
An ethics corrective action process is established to address nonconformances, incidents, substantiated grievances and reports, self-audit findings, and other control gaps.	• Corrective actions are based on evaluation of the relevant causes and are designed to address the issue and reduce the risk of recurrence. • Corrective and preventive actions are assigned, tracked, and completed in a timely manner. If actions are off-track, additional actions are defined and completed to rectify. • Closure of corrective actions is based on evidence of implementation and, where relevant, evidence of effectiveness. • Recurring issues trigger reassessment of relevant controls and processes. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

E Supply Chain Management

E1. Company Commitment

Code 8.0: Participants shall establish human rights, health and safety, environmental and ethics policy statements affirming Participant's commitment to due diligence and continual improvement, endorsed by executive management. Policy statements shall be made public and communicated to workers in a language they understand via accessible channels.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
A Code of Conduct is established and endorsed by executive management, covering all elements of the RBA Code.	• The Code of Conduct is: o Appropriate to the nature and scope of the Entity's operations. o Publicly available o Communicated and accessible to the workers in a language they can understand. • Content of the Code of Conduct includes commitment to due diligence, access to remedy where Entity caused or contributed to adverse impacts, and continuous improvement.

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E2. Materials Restrictions

Code 8.0: Participants shall adhere to all applicable laws, regulations, and customer requirements regarding the prohibition or restriction of specific substances in products and manufacturing, including labeling for recycling and disposal.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
A materials restrictions process is established to ensure that materials, packaging, components, and product chemical composition conform to applicable customer and legal requirements.	• Applicable customer and legal materials restrictions requirements are identified, kept current, and relevant specifications, procurement requirements, manufacturing controls, and supplier requirements are established. • Information necessary to support materials restrictions conformance is obtained and maintained. • Received supplier information, product composition information, and internal specifications are evaluated against applicable customer and legal requirements to determine conformance. • Where nonconforming materials, packaging, components, product composition, or supporting conformance information are identified, the issue is addressed through corrective action. • The materials restrictions process is reviewed periodically to verify that it is operating effectively. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

Serious conditions that would be considered as priority risk as per the RBA Code:

- No material restriction program is in place AND a product has been subject to regulatory action.

E3. Responsible Sourcing of Minerals

Code 8.0: Participants shall adopt a policy and exercise due diligence on the source and chain of custody of the tantalum, tin, tungsten, gold, and cobalt in the products they manufacture to reasonably assure that they are sourced in a way consistent with the Organization for Economic Co-operation and Development (OECD) Guidance for Responsible Supply Chains of Minerals from Conflict- Affected and High-Risk Areas or an equivalent and recognized due diligence framework.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
A policy on responsible sourcing of minerals is established to reasonably assure that 3TG+C in the Entity's products are sourced in a manner consistent with the "OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas", or an equivalent and recognized due diligence framework, through due diligence on the supply chain.	• The policy is communicated to suppliers through written agreements and/or contracts, and to the public. • The policy covers all 3TG+C in the Entity's products. • The policy commits the Entity to exercise due diligence on the source and chain of custody of minerals in accordance with the OECD Due Diligence Guidance.
A process is established and implemented to exercise due diligence on the source and supply chain of minerals in accordance with the policy on responsible sourcing of minerals.	• The Entity-level implementation, if applicable, includes: o A senior management representative is assigned responsibility for implementation of the process. o Sourcing requirements and requirements on 3TG+C due diligence are included in written agreements and/or contracts with suppliers. o Where risks are identified in the mineral supply chain, mitigation actions are implemented and tracked. Suspension or termination of business relationships is considered where risks are immitigable or where risk mitigation fails.

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	○ The process is reviewed annually to verify that it is operating effectively. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively. Records must be kept for a minimum of five (5) years.

Serious conditions that would be considered as priority risk as per the RBA Code:

- There is confirmed purchasing of minerals from conflict sources but there is no action plan in place that is being actively managed.

E4. Supplier Responsibility

Code 8.0: Participants shall establish a process to communicate Code requirements to suppliers and to monitor supplier compliance the Code.

Minimum Conformance Requirements	
Core Requirement	**Specific Conditions**
Expectations for all next-tier suppliers, including next-tier major suppliers, to implement the RBA Code of Conduct are communicated through contracts, purchase conditions, or equivalent mechanisms.	• Entity-level implementation, if applicable, includes: ○ Contractual provisions include enforcement terms relating to implementation of the applicable RBA Code of Conduct requirements. ○ Labor agents and contractors, including onsite service providers, which deploy foreign and/or internal migrant labor at the Entity's site are required to comply with legal requirements in both sending and receiving countries/regions. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
If the Entity becomes aware that a next-tier major supplier does not conform with applicable RBA Code of Conduct requirements, a contract enforcement notification is issued in accordance with the applicable contractual terms.	• Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.
A process is established to identify next-tier major suppliers based on defined criteria appropriate to the Entity's operations and supply chain risks.	• Entity-level implementation, if applicable, includes Entity-specific next-tier major supplier identification process • Regardless of level of implementation, next-tier major suppliers always include labor agents, contractors and on-site service providers (OSP).
A process is established to verify implementation of applicable RBA Code of Conduct requirements by next-tier major suppliers.	• Entity-level implementation, if applicable, includes: ○ A process is established to determine the risk level of next-tier major suppliers and whether verification is conducted through audit or self-assessment, unless audits are conducted for all next-tier major suppliers. ○ Next-tier major suppliers with identified possible Priority / Major non-conformance, or allegations of possible non-conformance, are classified as high risk and suppliers are included in audits. ○ VAP, CMA, or AMA audits, or any other verification process approved by the RBA and its initiatives, are conducted for high-risk next-tier major suppliers and labor agents, contractors and on-site service providers. ○ For other next-tier major suppliers, self-assessments or audits are conducted. Self-assessment results are validated through review of objective evidence sufficient to substantiate the results. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

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No non-conformance regarding Working Hours and Wages and Benefits is identified for workers of on-site service providers.	
A process is established to require corrective actions where nonconformances with applicable RBA Code of Conduct requirements are identified at next-tier major suppliers.	• Entity-level implementation, if applicable, includes: o Tracking and follow-up of corrective actions to verify implementation and closure. o A commitment not to terminate sourcing from a next-tier major supplier immediately upon identification of a Priority nonconformance, and to consider termination of sourcing only if the next-tier major supplier fails to implement corrective actions. o Prioritization of actions to achieve closure of Priority findings first, while other identified nonconformances are addressed on a continuing basis in accordance with the Entity's supplier corrective action process. o A closure audit is conducted for Priority Nonconformance after completion of corrective action. • Sufficient records or other reliable evidence are available to demonstrate that processes are implemented consistently and effectively.

Serious conditions that would be considered as priority risk as per the RBA Code:

- For workers of on-site service providers, a priority risk is confirmed regarding working hours or wages and benefits topics.
- No closure audit conducted for priority risks after completion of corrective actions
- A priority risk that was previously confirmed and closed through corrective actions and closure audits is identified again.

-- END OF VAP STANDARD --

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Annex 1. Additional Guidance

A. Labor

A1. Prohibition of Forced Labor

1. Practices that are in place include the elements below:
    a. It is understood that the definition of forced labor includes the elements below as well:
        i. Transporting, harboring, recruiting, transferring, or receiving persons by means of threat, force, coercion, abduction or fraud for labor or services
        ii. Non-voluntary overtime, such as no right for a worker to refuse overtime.
    b. Any fees charged to the workers are in line with the RBA Definition of Fees.
        i. If a fee is not listed explicitly in the Definition of Fees, or does not fit any of the example categories, the following logic is applied: Foreign and internal migrant workers are not required to pay anything that a local worker would not be required to pay.
    c. It is understood that examples of basic liberties include access to the toilets, drinking water and external medical facilities, amongst others.
    d. Further examples and details of the key terms and conditions to be explained to the workers include:
        i. Nature of work, including what PPE is required to be worn
        ii. Working hours - which do not exceed 60 hours, 6 consecutive workdays, personal leave allowance and public holidays
        iii. Benefits, for example housing, transportation, uniforms…
        iv. Fees that are allowed to be charged, and their amounts
        v. Wages and wage deductions
            i. All components of tax and social insurance(s) and how these are calculated
            ii. Premiums for overtime during workdays, rest days and statutory holidays – all of which must be at least 125% of standard pay
        vi. Other legally required and beyond-legally required benefits provided, for example pension and insurances
        vii. Information concerning the general conditions of life and work.
    e. Worker handbook or similar document should include the items above and also:
        i. Grievance mechanism and how to use it
        ii. Discipline process
            i. Note that this cannot include any threat of punishment, fines, violence, or withholding wages.
    f. For Migrant Workers, specific practices include:
        i. Description of repatriation process and specification of the costs to be borne by the employer and the worker.
        ii. Transportation to the receiving country and repatriation as well as between living accommodations and the workplace.
        iii. Ability to return home during annual leave and family emergencies without penalty.
    g. It is understood that workers' personal documentation may include the list below, as well as other relevant documents:
        i. Passport
        ii. Work visa/permit
        iii. Citizenship or residence card
        iv. Identification document
        v. Social insurance card/records
        vi. Birth certificate
        vii. Bank records

2. Controls & Monitoring include:
    a. When engaging with recruiters and labor agents determine the specific amount of any fees and expenses that are required to recruit, hire and onboard each individual (which varies if they are local, internal migrant, or foreign migrant worker) prior to commencement of work and ensure that is part of contract and sub-contracts and paid to reduce risk of workers incurring fees.
    b. Actively verify compliance through monitoring labor recruiters, brokers, and agents.

    NOTE: Reimbursement is not the desired model (no fees to workers is), and therefore it is a non-conformance to the RBA Code of Conduct albeit a lesser one.

3. Records are maintained including:

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a. Personnel files for all workers are maintained and include:
    i. All versions of employment contract / agreement
    ii. All items to ensure regulatory compliance
    iii. They are maintained with appropriate access and retention controls (on and/or off site) and confidentiality to protect privacy
    iv. Documentation on the leaving conditions and end of contract of workers
    v. Workers' documentation must be retained for at least 12 months or as required by law whichever is longer
b. Contracts with service providers, recruiters, labor agents and labor contractors and evidence that they have acted in compliance with the contract/agreement requirements.
c. Records on allowed fees that are maintained and disclosed to the worker.

4. Leading Practices include:
- Contract or offer letter detailing the level of physical work and what personal protective equipment is required to be worn. If this is impractical for a contract or offer letter, a separate document can suffice.
- Contract or employment agreement includes the worker's date of birth.
- Foreign and internal migrant workers are interviewed when they join the company to learn if any of the policies were violated, in which case remedy is provided.

5. Fees Evaluation Criteria:
Scenario 1: Prohibited recruitment and hiring fees that were paid and not reimbursed within 90 days or as soon as practicable upon discovery.

Frequency/Severity in monthly basic wage	0-<5% (<1-month basic wage)	5%-<100% (<1-month basic wage)	100-<150% (1 month – 1.5-month basic wage)	≥150% (>1.5-month basic wage)
≤1% of sample, or 3 workers or fewer (whichever is greater)	Minor	Minor	Major	Priority
>1%-5% of sample, or more than 3 workers but less than 7 workers	Major	Major	Major	
>5%-40% of sample, or more than 7 workers	Major	Major	Priority	
>40%	Major	Priority	Priority	

Scenario 2: Prohibited recruitment fees and related costs that were paid and reimbursed within 90 days before or after commencement of employment

Frequency/Severity in monthly basic wage	0-<5% (<1-month basic wage)	5%-<100% (<1-month basic wage)	100-<150% (> 1 month – 1.5-month basic wage)
≤1% or 3 workers or fewer (whichever is greater)	Minor	Minor	Major
>1% or more than 3 workers	Minor	Major	Major

A2. Young Workers

1. Practices are in place such that:
    a. If child labor is identified, assistance/remediation is provided, which includes:
        1. Health exam and appropriate action if necessary.
        2. Aid to and through completion of compulsory schooling.
        3. Maintaining the child's income until legally eligible to work.
        4. When they exist, and are acceptable by law, to move underage workers into proper apprenticeship positions, restricting their hours and type of work to accommodate educational needs, as required, rather than discharging or fining these workers.
    a. Age verification efforts include inspection and cross-reference to verify the validity of at least two types of official ID and periodically evaluating the documentation for a random sample of workers.
    b. ID types for initial and ongoing verification and cross-reference include:
        i. Matching photographic ID to worker's face
        ii. Verification through third-party resources where available, such as Internet resources or local government offices
        iii. Affidavit from local government representative
        iv. Birth certificate
        v. Government-issued personal identification card

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vi. Driver's license
vii. Voting registration card
viii. Official stamped copy of a school certificate
ix. Foreign or internal work permit or other government recognized record.
x. Finger printing or ID card with owner's photograph to prevent under-age workers entering the Entity by using another person's ID who may have been vetted or hired.

c. If young workers found to be working in prohibited times or in hazardous roles, rather than terminating their employment, immediate containment actions are taken, including putting the worker on a shift pattern which does not conflict with compulsory education, moving the worker to non-hazardous positions, and elimination of future overtime.
d. Any underage workers found working in the Entity is provided assistance, including ways to move them into proper apprenticeship positions, restricting their work hours and type of work as well as accommodating their educational needs. Discharging or fining underage workers would not be considered as assistance.
e. Any children present in the Entity are allowed only in approved areas, separate from the work area, such as day care facilities.
f. If apprentices are employed, there is a clear program for training and promotion, with specific limits on the number of hours worked, duration of training period, and number of times the same worker can be classified as a trainee.
g. The tripartite agreement required between the student workers (and/or legal guardian), school and Entity include:
    i. Student worker's full name
    ii. Student worker's emergency contact information
    iii. The name and address of the student worker's school
    iv. The name and address of the Entity
    v. Living conditions, if applicable
    vi. Wages and benefits
    vii. Costs, if any, for meals and accommodation, which should not be higher than a fair market rate
    viii. Working hours
    ix. Nature of work and workplace
    x. Signed in three copies
h. Intern/Student worker: Scholastic penalty is only allowed if directly related to underperformance on the educational program.
i. Apprentice wages: Agreed apprentice wage increases when the worker meets new skill requirements.
j. Apprentice wages after hiring: If/when an apprentice is hired after a successful apprenticeship period, their promotion is recorded and salary is adjusted as a worker.

3.Controls & Monitoring include:

a. Periodically verify the reliability of age records. Age verification should include visual verification of a government recognized photographic identification record. Maintain a reliable ID verification system to control the workers' access into the Entity.
b. Periodically verify young workers are not working overtime, nights, or in hazardous conditions/roles.
c. Ensure underage labor assistance/remediation process is designed to provide for the welfare of the individual.

4. Records are maintained, accurate and up-to-date, including:

a. Due diligence reports on educational partners
b. Maintain verification of worker age and right-to-work status until at least 12 months after the worker departs the company or as required by law, whichever is longer.
c. Maintenance of student worker/intern or apprentices' records in personnel files (includes agreement if applicable, learning objectives, evaluations, reference to training material, assignment, etc.)
d. Details on promotion/hiring opportunities after successful apprenticeship, eligibility, recruitment, employment agreement, nature of work, working hours, wages, and benefits.

A3. Working Hours

1. Processes & Practices are in place such that:

a. The work hours and time off policy are communicated to workers at the time of hire and in an employee handbook.
b. There is a process to remain aware of and in compliance with local and national laws and regulations regarding working hours.
c. The Entity has obtained any necessary permission from authorities/unions on work schedule (e.g., comprehensive work week / work hour schedule)

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d. There is a process to track and analyze hours over time, including identification of capacity constraints, and is taking action to reduce overtime to target level.
e. The Entity has a work hours management system to ensure that workers do not work overtime in excess of legal limits. Work weeks do not exceed than 60 hours, including overtime, except in Emergency or Unusual Situations.

   NOTE: The RBA recognizes truly unpredictable events that may require overtime in excess of RBA limits. These are Emergency or Unusual Situations which cannot be planned for or foreseen. Such situations are uncommon and do not become standard operating procedure. Examples include:

   i. Equipment breakdown, power failure or other emergency resulting in prolonged shutdown of a production line.
   ii. Unforeseen raw material or component shortages or quality issues shut down production. Excessive overtime is then needed in both situations to recoup lost production time and meet customer commitments.
   iii. In all of these cases evidence of FEWER hours worked before a period of excessive production due to an Emergency or Unusual Situation is present and documented. The site has a documented plan to recover from the emergency situation and bring working hours back into conformance.

   The types of situations are NOT Emergency or Unusual Situations include:

   i. Holidays, peak season production demands and new product ramps. These are predictable and proper planning can minimize overtime requirements.
   ii. Contract change orders that significantly increase order volumes or shorten delivery timelines. This should be negotiated in good faith between the client and the location and should never exceed the capacity of the location at a rate of 60 hours per week or the legal maximum work hour requirement for the location.
f. Workers may refuse overtime without threat of retaliation, penalty, or dismissal.
g. The Entity provides meal breaks, rest breaks, rest days, leave periods, holidays, and vacation days per local legal requirements (most countries require workers to be given a 15-to-30-minute break every so many hours, as well as defined meal breaks).
h. Legal working hours are communicated to workers (worker handbook, notice board, orientation training, and other means).
i. Workers are not required to work on their designated day off.

2.Controls & Monitoring include:

a. A strong tracking and recording system which will allow for accurate reporting, record keeping allowing for investigation, and visibility to those planning workload to avoid going over limits if not actively limit planning work beyond work hour and workday limits.
b. A planning, training, staffing and work assignment strategy to ensure conformance with all requirements.
c. Training and then refresh training for planning and manufacturing staff on limits of working hours and days worked including the limits of any young workers, interns and apprentices present.
d. Actual performance monitoring and active adjustment and control of working hours including overtime and days worked to ensure conformance.
e. Monitoring the working hours of any workers of on-site supplier / subcontractor / agent to ensure they meet the stricter of local law, RBA Code of Conduct, collective bargaining agreement, customer requirements, or company policy.

4. Specific guidance on “on-call time”:

On-call time describes any arrangement where workers are on schedule outside of their regular working hours to respond to workplace demands at any time during a set period.

Although the on-call time can be beneficial to the workers, providing them extra pay or additional time off, the program must be documented and explained to the worker.

a. The Entity should establish clear policies and agreements regarding on-call time, including expectations, compensation rates, procedures for contacting on-call employees, and any limitations on personal activities during that time.
b. If the workers are required to be available, and they have a CBA, it must be included in the CBA.
c. The Entity must follow the local law. If the law has no requirement to pay (or not to pay) for on-call time, then:
   i. The Entity must follow the customer contracts. Different customers may have different contractual requirements. If customer contracts are silent, then,
   ii. The Entity must follow the agreement made in the CBA with the workers. If no CBA is used, then the company may follow their own policy for on-call wages.
   iii. If the on-call time results in actual work, and the worked time goes beyond regular hours, the time worked should be paid at a premium rate of at least 125%.

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Principles that should be used in this arrangement are as below:

a. The International Labor Organization (ILO) requires workers to decide together with management the distribution of their working hours. On-call time hours should be communicated in advance within a fixed time-limit.
b. On-call schedules are not considered as time worked unless they were called into work. This could be in-person or on the phone, computer, or other means of conducting work on behalf of the employer.
c. Time worked equals time paid. If the worker is contacted and required to do a task that is part of their work routine, then the worker needs to be paid for the time worked.

5. Records are maintained including:

a. Accurate and up-to-date records of days, time and overtime worked.
b. Records of exceptional circumstances, which are recorded at the time of the Emergency or Unusual Situation along with the plan to recover, and not after the event.
c. Accurate leave records, consistent with medical certificates, actual leave (including maternity/paternity) and holidays.

6. Evaluation criteria for working hours:

Work Hours / Week	% of Sample				
	≤1%	>1% to ≤5%	>5% to ≤15%	>15% to ≤40%	>40%
>84 h / week	Priority				
>72 h/week to ≤84 h/week	Conformance	Minor	Major	Priority	Priority
>60 h/week to ≤72 h/week	Conformance	Opportunity for Improvement	Minor	Major	Priority
>Local law to ≤60 h/week	Conformance	Opportunity for Improvement	Minor	Minor	Major
<Local law AND ≤60 h/week	Conformance				

6. Evaluation criteria for consecutive days of work:

Consecutive Days	% of Sample			
	≤1%	>1% to ≤5%	>5% to ≤15%	>15% to ≤40%
≥24	Priority			
>12 to <24	Minor	Minor	Major	Priority
>6 (or local law) to ≤12	Conformance	Minor	Minor	Major
≤6 (or local law)	Conformance			

A4 Wages and Benefits

1. Processes & Practices are in place such that:

a. The Entity has a system to pay workers for both regular work hours and overtime in accordance with applicable law.
b. Workers are compensated at the minimum wage or greater for regular work hours, and at a premium rate for work over the number of hours in a standard work week (overtime and holidays) which is the stricter of local law or 125% of standard rate.
c. The Entity does not allow the workers to waive any required mandatory deductions/contributions such as social insurance. The Entity does not offer such an option.
d. Pay (including overtime, others) is timely per published schedule.
e. Medical (including maternity) or sick leave absences do not incur a financial penalty if within the more generous of the law, employment contract/agreement or company policy at the time.
f. Workers are provided with pay slips/receipts which clearly list:
    i. Hours worked in separate categories: Regular, overtime, holiday, rest day, and others.
    ii. Wage rates and wages by category: Regular and overtime/holiday/rest/other rate.
    iii. Legally required withholdings: Taxes, deductions and any other previously agreed upon deductions or contributions (e.g., housing, food, social insurance, etc.).
    iv. Employer contributions.

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g. Pay is shown in a manner which allows workers to check that their pay is accurate.
h. Company, labor agents, and any other 3rd party do not have access to workers' bank or financial accounts even if the workers would allow it.

NOTE: In cases where a worker is permanently transferred to a different state, region, country employment site, the minimum wage and other benefits and entitlements shall be paid according to the legal provisions and standards where workers are now deployed. That is regardless of whether the Entity or a third-party service provider, labor agent, vocational school or sub-contractor is their employer. Longer term but not permanent stays/visits must conform to local law in terms of right to work and workers need to be provided with sufficient wages and benefits to maintain a comparable or better standard of living than they have in their permanent place of employment.

3.Controls & Monitoring include:

a. Ensure wage rates are equal or higher to local law, agreement.
b. Workers (both regular and contract) are provided with information and training at the time of hire to fully comprehend how wages are calculated and what to expect when they receive payment.
c. Entity should monitor pay for any workers of on-site supplier, subcontractor, agent to ensure accurate and timely payment, contributions and deductions are occurring.
d. Workers are made aware of the process to raise a concern over pay. These concerns are reviewed promptly, and workers are provided additional payment / changes to rates when issues.

4. Specific guidance on "equal pay for equal work and qualification":

According to the ILO, equal work is work performed by individuals that is the "same or virtually the same … in equivalent conditions".

Equal qualification describes skillset, educational background, performance, seniority, years of experience, and other qualification of equal value, presented by individuals for the purpose of employment or professional development, including opportunities to receive pay raise.

Minimum practical steps to achieve these requirements are as below:

a. Process:
    i. Ensure that the existing management system supports the "equal pay for equal work and qualification" principle: Risk assessment, control processes, communications, performance review and continuous improvement.
    ii. Integrate "equal pay for equal work and qualification" in recruitment/hiring processes used by the Human Resources department:
        1. Job post descriptions: Clearly define the responsibilities, as well as required and optional qualifications for the position
        2. Final selection: If multiple candidates are offered the same position, offer equal packages to the candidates that bring the same level of experience and qualifications.
        3. Create job descriptions for each position available in the facility, including the nature of work for each position
            i. Minimum education required
            ii. Minimum knowledge/skills required
            iii. Minimum qualifications required other than skillset and experience
            iv. The level of effort the position brings
            v. The level of responsibility the position requires
        4. Create human resources processes to ensure that positions that are of equal value (refer to Example below) are compensated with equal pay.
        5. Create/adapt the internal performance management processes to reflect the payment structure and pay raise opportunities in line with "equal pay for equal work and qualification".
b. Training and Communication:
    i. Train all levels of management and the human resources department on the process.
    ii. Train all employees on the company's payment structure, and provide clear guidance on what "equal work" and "equal qualification" mean.

Best practices to consider in furthering the implementation of "equal pay for equal work and qualification" are as below:

a. Process:
    i. When creating the job descriptions, include the minimum and maximum pay available for the position, i.e. pay grade.

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ii. Create a clear and transparent payment structure for all levels of company, and explain the structure to all employees. A clear and transparent structure includes clear requirements for each position/pay grade, as well as years of experience and minimum skills/qualifications that contribute to each position/pay grade.
iii. With every new position created, put the existing positions in perspective and define whether pay adjustments need to be made.
iv. Create/adapt effective grievance processes that enable employees to report payment inequalities.
v. Create/adapt effective payment remediation processes to ensure equal pay for equal work and qualification is established if inequalities are found or reported amongst the workforce.
vi. If there is a Collective Bargaining Agreement (CBA) in place or under negotiation, consider the "equal pay for equal work and qualification" principle as part of the process.

b. Training and Communication:
i. Train all employees to be able to substantiate and present their skills and qualifications in a manner that will support their placement on the payment structure as well as their performance management.
ii. Train all employees on available grievance routes regarding payment inequalities.
iii. Make the payment structure visible to all employees in the workplace in a language they understand.

Examples of Implementation:

a. Job Description Mapping:[1]

	Position #1	Position #2	Position #3	Position #4
Minimum Education				
No specific education background needed				
High school/vocational school diploma	X	X		
2 years of university/college diploma				
4 years of university/college diploma			X	X
Knowledge/Skills				
Expert knowledge on restricted chemicals	X			
Expert supervisory communication skills			X	X
Fine coordination of fingers				
Working at heights		X		
Licensed heavy machinery use		X		
Follow detailed standard procedures to perform operations with high-risk chemicals	X			
Effort				
Mental effort – visual concentration	X	X	X	X
Mental effort – aural concentration				
Mental effort – mental concentration	X		X	X
Physical effort – explosive effort (weights, etc.)		X		
Physical effort - stamina	X			
High health risk	X			
Level of Responsibility				
Machinery/equipment	X	X		
Facilities/buildings				
Information				
Production	X			
Warehouse		X		
Information				
Decision-making			X	X
Risk taking	X	X		

[1] Inspired by *Different but Equal – Equal Value: A Guide to Comparing Jobs*, University of Strathclyde, Glasgow, 2005

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b. Performance Appraisal (using the same Job Description Map):
Profiles:

	Employee #1	Employee #2
Year hired	2015	2015
Position	Position #3	Position #4
Pay / month (USD)	1500	1500

Performance Reviews in 2023 and 2024:

	Employee #1	Employee #2
2023 Performance	Exceeds expectations	Meets expectations
2024 Performance	Exceeds expectations	Poor

While employee #1 and employee #2 have the same seniority and they work at a position of equal value, their performance shows major differences. This difference in performance means that employee #1 brings more value with his qualifications, so they can be considered for a raise or promotion.

Not providing the same raise or promotion to employee #2, in this case, is justified and does not go against the "equal pay for equal work and qualification" principle, as performance is considered part of an employee's set of qualifications.

5.Records are maintained including:
a. Correctly calculated and accurate wages, benefits, and overtime payment records
b. Records of employee concerns, result of self-assessment and adjustments to pay or rates

Note: the RBA does not accept any agreement with workers that allows for anything except compliance to local law, including social insurance.

A5. Non-Discrimination / Non-Harassment / Humane Treatment

1. Processes & Practices are in place such that:

a. Clear communication with workers happens at the time of hiring and is immediately accessible to all workers (e.g. worker training, handbooks, noticeboard postings, etc.)
b. Provides managers and supervisors with training on the company's policies and procedures for disciplinary action. The training clearly communicates proper treatment of workers and prohibits any and all forms of abuse and harassment.
c. No discrimination or harassment against a worker in eligibility for another position based on the worker's refusal to take a medical test where there is no required medical test for such position.
d. Disciplinary actions are taken if discrimination and/or mistreatment occurs.
e. A humane disciplinary process is established.
f. Disciplinary records do not show inhumane disciplinary measures.
g. There are no groups inappropriately exempted from discipline process (policies applied equally).
h. All records of disciplinary action against workers are reviewed by management and verifiably communicated to them.
i. Adequate compensation is provided for lost income to workers injured at work or suffering from occupational disease, in accordance with local requirements.

2.Controls & Monitoring include:

a. Periodic reviews of hiring practices, compensation records, and benefits to determine that there is no prohibited discrimination.
b. Hiring agents and supplier management are trained in non-discrimination and applicable non-discrimination laws.
c. Ensuring workers are aware of the existing and planned accommodations as well as channel to request accommodations.

3.Records are maintained including:
a. Written job descriptions for worker roles that focus solely on "occupational qualifications," not personal characteristics.
b. Investigations, results, and actions related to allegations and discriminatory actions observed and/or mistreatment of workers.
c. Records of all cases of disciplinary decisions are available and show any disciplinary actions with signature or confirmation of worker.
d. Accommodation records (helps with consistency as well)
    i. Religious accommodation requests and decisions are recorded and maintained.
    ii. Disability access, assessment, and other reports for all identified disabilities

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iii. Disability effectiveness evaluation reports are available for all identified disabilities.
iv. Corrective Action Plans are available for all identified disabilities for any disability accommodation deemed ineffective.

5. Leading Practices include:

a. The disciplinary policy includes the following elements:
   i. Graduated/Progressive – "First time" or small offenses might involve training/retraining or verbal discussions between the worker and supervisor in private - not in front of other workers. Major or re-occurring offenses would involve more serious disciplinary written warning or re-assignment, etc., according to the documented process.
   ii. Constructive- Feedback is timely, targeted, and intended to motivate improvement in worker behavior and performance.
   iii. Balanced - discipline applied consistently to all individuals and groups.
b. Facilities proactively equipped to accommodate disabled persons (e.g., wheelchair ramps; elevators; visual evaluation alarms; etc.).
c. Having policies and taking actions to hire and promote a diverse workforce.

A6 Freedom of Association and Collective Bargaining

1. Processes & Practices are in place such that:

a. Ensure the policies and procedures for freedom of association are communicated to all managers, supervisors, and workers.
b. Do not dismiss, discipline, coerce or threaten workers as a result of exercising their right to freedom of association.
c. Do not discriminate in employment decisions against workers because of their affiliation with any worker groups.
d. Employee representative(s) and other workers are treated equally.
e. Enact, within the scope of national law and practice, a mutually agreed process between the company and workers to facilitate regular discussion on matters of mutual concern.
f. Ensure company management conducts regular sessions with workers to discuss their issues or concerns.
g. Open feedback channels exist for workers to bring issues to the attention of management for resolution. Communications are kept confidential for the protection of workers.
h. Granting religious accommodation should be evaluated against requirements in any CBA and may vary from the CBA. A dialogue with worker representatives is held if there is a difference between an accommodation request and the CBA, if this does not violate the privacy of the Accommodation requestor.

3.Controls & Monitoring include:

a. Management contributions are limited to providing meeting space and/or meeting materials (such as note taking material) unless required by law.
b. Management should not dominate or interfere with the formation or administration of any worker representation body (or alternate lawful forms where the right of freedom of association is restricted by applicable laws and regulations) or contribute support, either financial or human resources. Where legally required, management shall allow the democratic election of worker representatives.
c. Review payroll records to confirm that trade union employees or worker representatives are paid the same as other workers in similar job functions.
d. Get worker feedback as to how communications might be improved between them and management and make adjustment.

4.Records are maintained including:

a. Worker representation body meeting minutes and financial records, if available, to determine source of funding and materials.
b. Records are maintained on freedom of association related grievances and show how the grievance was investigated and acted upon including communication to workers.

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A.M Labor Management System

A.M.1 Risk Assessment - Labor

1. Process, Practices, Controls:

1. The quarterly process should include:
   a. Identification of requirements which apply to the company; be sure to look for emerging and new requirements. This can be done via a legal department with an understanding of the RBA Code, subscriptions to 3rd party reports on regulations, sales & marketing who agree to customer terms, etc.
   b. A means to track these requirements, staying current as
      i. The requirements may change (including the RBA code of conduct).
      ii. Your operations may change and bring the Entity in scope of requirements or create a gap.
   c. Assess Entity operations against these requirements to identify gaps.
   d. Develop updated policy, procedure, training, communication, recording and reporting to close the gaps.
   e. Implement the changes and test them for compliance.

   NOTE: Ensure the Entity adds any new and changed permitting, licensing, testing, reporting and disclosure requirements to the compliance register noting sufficient time to renew or published before they expire or are due.

2. The due diligence process focused on human rights should be designed to identify and assess the most significant actual and potential labor risks where the Entity could cause or contribute to adverse human rights impacts of internal and external rights holders.

2. Records are maintained including:

   a. A compliance calendar or system that defines owners and provides reminders
   b. Summaries of applicable laws and regulations and requirements and how they apply to Entity's operations
   c. Review of the key customer requirements that apply to or have an impact on Entity's operations
   d. Analysis of recent RBA Code of Conduct changes
   e. Minutes from meetings or other that demonstrate the process is conducted quarterly
   f. Stakeholder identification reports
   g. Risk assessment reports
   h. Mitigation plans

A.M.2 Control Process - Labor

1. Process, Practices, Controls:

1. Policies: In addition to the Core Requirements and Specific Conditions noted in the VAP Standard, the elements below should be considered when creating policies:
   a. Prohibition of Forced Labor:
      i. No levies, recruiting, hiring or placement fees or costs, even if allowed by local law.
      ii. No fees or costs charged to workers as defined by the RBA Definition of Fees
      iii. No deposits, mandatory saving, or any other financial obligation are required to obtain or keep a job.
      iv. If fees and costs were found to be charged, workers must be repaid within 90 days.
      v. No holding original identification documents of workers
      vi. Overtime is to be voluntary (i.e., workers can always refuse overtime)
      vii. Resignation must be voluntary, and the required notice period cannot exceed one month.
      viii. The penalty for not serving notice cannot exceed 60% of one month's wages.
      ix. Workers' freedom of movement is not restricted.
   b. Young Workers:
      i. Child labor prohibition: Setting a minimum working age that is no lower than the greater of local law, 15 years of age, or customer expectations.
      ii. Do not refuse a previous applicant if they now meet company policy and the corresponding legal requirements.
      iii. If underage labor is identified, assistance/remediation is provided.
      iv. When young workers are employed, policies should include:
         1. Health checks if required by law.
         2. Identification and assignment of young workers to non-hazardous positions.

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3. Restriction on time of day worked (young workers are not allowed night work - any consecutive period of at least 7 hours between 10 PM and 7 AM - or overtime).

v. When employing apprentices, interns or student workers, a policy should include:
   1. A commitment to only providing internships/student workers assignments and apprenticeships that complement their course of study field or learning of a new vocation.
   2. Follow a principle of equal pay for equal work (if performing same/similar work/level as regular workers then the pay should be the same).
   3. Ensure working hours do not conflict with school attendance, if applicable.
   4. Be clear and limit the duration of the training period, and the number of times the same worker can be classified as a trainee.
   5. Do not require and ensure that there is not any placement, onboarding, or other fees paid by the learner to gain or retain employment.
   6. Do not allow deduction for educational fees from the student worker's wages.
   7. If there is a period where wages can be below minimum wage as per law it should be limited and reasonable in duration or not longer than 6 months, whichever is stricter.
   8. Ensure that no agency or intermediary is used in connection with the recruitment, hiring, arrangement, and management of student workers, interns, or apprentices.
   9. Ensure that all work is voluntary (including choice of learning placement assignment).
   10. Do not use student workers, interns, or apprentices to simply fill a labor shortage.
   11. When employing apprentices, the maximum duration of apprenticeship (not more than 6 months if worker is paid below minimum wage).
   12. When employing student workers, policy should include:
      a. A three-way agreement is required between the student workers (and/or legal guardian), school and Entity that includes the terms.
      b. Ensure that the student worker is insured against accidents or liability and that the student worker is fully covered for any other forms of insurance required by law or regulation.
      c. Due Diligence: verify that worker is actively enrolled in a valid program of study at an educational institution.

c. Wages and Benefits:
   i. "Pay equals time worked" applies for any company-required activity (e.g., work, training)
   ii. "Equal pay for equal work and qualification" applies to prohibit discrimination.
   iii. All workers are paid no less than the greater of agreed and legal wage for all hours.
   iv. Overtime and other compensation and benefits are paid and are on top of the agreed wage for regular hours at a rate which is the stricter of local law or 125% of the standard rate.
   v. Prohibit unauthorized deductions, including for disciplinary measures, company assets, tools, PPE, or any other item.
   vi. The wage payment schedule is regular and documented.

Full payment made to leavers (resigned workers) in compliance with the law and not later than one month after the final day on the job.

d. Non-Discrimination/Non-Harassment/Humane Treatment:
   i. No discrimination or harassment based on race, color, age, gender, sexual orientation, gender identity or expression, ethnicity or national origin, disability, pregnancy, religion, political affiliation, union membership, covered veteran status, protected genetic information or marital status in hiring and employment practices such as wages, promotions, rewards, and access to training.
   ii. No harsh or inhumane treatment including violence, gender- based violence, sexual harassment, sexual abuse, corporal punishment, mental or physical coercion, bullying, public shaming, or verbal abuse of workers; nor is there to be the threat of any such treatment.
   iii. Decisions in hiring, employing (such as compensation, promotion, access to training, …), or terminating workers are based solely on the candidate's ability to perform the job's requirements.
   iv. Prohibition of disciplinary wage deductions are in place including "Pay equals time worked."
   v. Health tests, pregnancy testing, or contraception are not used as a condition of employment.

   NOTE: Pregnant and nursing workers should be moved from hazardous to non-hazardous roles or remove the hazards from their roles; in either case while keeping the same pay and all other benefits.
   vi. There should be no termination of a worker's employment based on the worker's pregnancy, virginity, or parental status.

   NOTE: In some cases, health tests are required by local governments for foreign migrant workers prior to issuance of work visas.

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vii. Reasonable accommodation is provided including:
    1. For requested religious practices
    2. For disability including all required by local law.

e. Freedom of Association and Collective Bargaining:
    i. As open communication and direct engagement between workers and management are the most effective ways to resolve workplace issues, where the right of freedom of association is restricted by applicable laws and regulations, workers shall be allowed to elect and join alternate lawful forms of worker representations.

2. Effective procedures and processes:
    a. Processes cover specific elements that address the RBA Code requirements, in addition to the Core Requirements and Specific Conditions noted in the VAP Standard:
    Prohibition of Forced Labor:
        a. No control of or access to workers' banking or financial accounts (direct deposit is allowed).
        b. Signed employment contracts or agreements are in place between the worker and the Entity, to ensure the worker is provided with documentation of their legal rights and responsibilities. All terms required by law, as well as the specific terms noted below, are in the employment contracts:
            i. Name and address of the employer
            ii. Worker's full name
            iii. Workers' start date and duration of contract
            iv. Contract termination requirements, in line with local law or the RBA Code, whichever is stricter
            v. Contract renewal provisions (if applicable)
            vi. Description of the location and nature of work to be performed
            vii. Regular work hours and shifts and anticipated overtime hours with total working hours not to exceed 60 hours per week or local law, whichever is lower
            viii. Regular, overtime, and holiday wage rates and estimated monthly base and total pay
            ix. Any bonuses and conditions for earning them
            x. Any allowances granted (e.g., food, accommodation)
            xi. Full listing of all deductions including specification of the type and amount of each deduction and which, if any, are optional
            xii. Method and frequency of wage payment
            xiii. Description of additional benefits including medical insurance coverage, accident/injury, insurance, holidays, annual leave, sick leave, and/or any other applicable benefits
            xiv. If accommodation is provided include detailed description of living conditions and breakdown of any deductions for accommodations, meals, transportation, or other services provided or offered by the employer and/or their labor agent or other representative or service provider
            xv. Clear prohibition on charging of recruitment or placement fees

        Note: there should be no terms requiring overtime, restricting movements, or restricting a worker's rights to freedom of association and collective bargaining, consistent with applicable law.

        c. Workers are not subject to any deductions from their pay other than legally required deductions and agreed upon fees for meals, lodging, uniforms, etc. The amounts of such deductions are communicated to workers at time of hire.
        d. Original personal identification such as government issued identification, passports or work permits, certifications, or educational documents such as diplomas are in the possession of the workers unless specifically required by local law.
            i. Only copies should be retained to use as verification of age and right-to-work.
            ii. Where holding documents is required by local law it must be done with the full knowledge, permission and participation of the worker and procedures are in place to ensure proper handling and immediate access if requested by the worker.
            iii. It is acceptable for employers to be in temporary possession of original personal documents only for the time when they are helping to obtain or renew work permits and other legal documents. Provide proper documentation receipt stating the reason for holding of passport/ travel document and expected duration to hold such documents.
            iv. In no case shall there be a fee for the possession of government-issued identification, passports, or work permits.
            v. Personal documents shall not be tampered with or damaged in any way.
            vi. Secure personal storage is required when living accommodations are provided directly or indirectly.

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e. Ensure workers are free to use bathrooms, drinking water, and medical facilities, as needed.
f. Reasonable restrictions linked to health and safety, and IP restrictions can exist.
g. Workers are allowed to leave the workplace location or dormitory outside of their normal work hours (i.e., no curfews unless dictated by law).
h. Freedom to enter and leave the site does not apply to prison labor.
i. Doors can be locked from the outside only for normal business and housing security reasons and do not prevent emergency egress.
j. Workers may choose to use external medical facilities for personal health care even when onsite infirmaries or other medical facilities exist.
k. Terminating employment is voluntary with no explicit threat of punishment, fines, violence, or withholding wages.

Working Hours:

a. Meal and rest breaks, overtime policy and limits; in conformance to local law and good safety practices. These include gender-responsive measures and other accommodations.
b. Note limits on
    i. Working hours in the facilities designated standard workweek (e.g. Sunday to Saturday, Monday to Sunday): must not be more than 60 including overtime.
    ii. Consecutive working days after which a day of rest is granted with no company work or obligations (e.g., training, being on call): must not be more than 6
    iii. Overtime.

NOTE: Unless specified otherwise by local legal requirements, this provision does not apply to exempt workers, including those in executive, managerial, or professional positions.

Non-Discrimination/Non-Harassment/Humane Treatment:

a. Formal policies and procedures exist for sick leave and maternity leave.
    i. Workers receive a reasonable amount of time off for sickness without job loss or financial penalty.
    ii. Workers are able to take time off for legally allowable maternity leave without loss of their job or seniority.
b. A confidential communication system is established where workers can raise issues of concern including treatment by their supervisors or coworkers without fear of reprisal.
c. Accommodations:
    i. Establish a process and group to review requests for religious practices and disability accommodation.
    ii. Review and decide upon and provide reason of decision of accommodation (or no accommodation) to the requestor in a timely manner.
d. The religious accommodation element of the process should reasonably accommodate group or individual religious practice requests made to management and may include:
    i. Scheduling Changes
    ii. Voluntary Substitutes and Shift Swaps
    iii. Change of Job Tasks and Lateral Transfer
    iv. Dress and Grooming Standards
    v. Use of Employer Facilities
    vi. Tests and Selection Process
e. Accommodation requests may be refused for safety and security concerns, after seeking alternatives (including off-site options) and/or a significant impact on business operations, operating costs, or other workers.
f. Reasonable accommodation for worker's disability is provided; Perform assessments using legal, customer and worker situations to identify gaps that should be addressed, e.g., missing ramps for those using wheelchairs or insufficient and inappropriate workstation tools.

Freedom of Association and Collective Bargaining:

a. Non-interference with and no financing of a worker representation body unless required by law.
b. Any worker representation body, trade union or lawful alternative, reflects the interests of those workers who chose to be represented without the interference of management.
c. Processes are in place to ensure workers can exercise their rights to organize in a climate free of violence, pressure, fear and threats. Entity is not required to take an active role in supporting workers' efforts to associate or organize.
d. Entity may create processes to define reasonable time, place and matter controls regarding assembly for purposes of maintaining a healthy, safe and productive work environment.

2. Records are maintained including:

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a. Current and past policies and procedures, specifications.
b. Results and reports from review and control steps.
c. Corrective Action Plans, plans for improvement.

A.M.3 Communications - Labor

1. Some examples of a healthy and effective ongoing two-way communication process with workers, other internal and external stakeholders, are as below:

a. Examples of worker participation mechanisms: worker surveys, suggestions boxes, worker focus groups, joint worker-management committees, worker/union representatives, process improvement teams.
b. Examples of two-way communication: face-to-face meetings, town halls, worker focus groups, joint worker-management committees, process improvement team, message groups (WhatsApp, Line, WeChat, etc.), brown bag lunches
c. Examples of stakeholder engagement mechanisms: newsletters with request for feedback, message groups (WhatsApp, Line, WeChat, etc.), social media, neighborhood or community meetings, drop-in sessions, focus groups, feedback, and impact discussions (data/study driven)

NOTE: Submitting SAQ to customers does not qualify as communication with customers

2.Grievance Procedure:

a. Comprehensive functioning process to anonymously report grievances without fear of reprisal, which is internal (for workers and staff) and external (for workers of suppliers, local community, or interested actors and Whistleblowers).
b. Clear grievance channels so anyone is comfortable reporting grievances and so that reporting is encouraged.

3.Investigation and actions:

a. Promptly investigate the validity of any grievance.
b. Ensure the investigation and remediation is impartial, non-discriminatory, and where applicable, consistent with previous actions.
c. Communicate back to those involved, where possible, the outcome of the investigation and next steps, while maintaining appropriate privacy for those involved.
d. Remind participants that there is to be no retribution for making the grievance.

2. Records are maintained including:

a. Communications records include a verification of communication effectiveness.
b. Input/feedback records.
c. Written information to workers on how to provide input/feedback for improvement.
d. Correspondence to supplier management.
e. Communications/Presentations to internal and external stakeholders.
f. Grievance records
g. Investigation records
h. Workers are provided with written information on how to report grievances.

A.M.4 Performance Review and Continuous Improvement - Labor

1. Process, Practices, Controls:

1. Good practices for establishing targets are as below:

a. Target clearly defines the period considered, and each target includes:
    i. Time Period: Forward-looking (between base date and target date)
    ii. Base date: Date from which the target is being measured
    iii. Target date: Date in the future when the target is intended to be achieved
    iv. Baseline: Value of what is being measured at the start
    v. Targeted improvement value: The quantitative value of the target (numeric and greater than 0)

2. Good practices for continuous improvement process include:

a. Objectives and targets are clearly designed to achieve continuous improvement
b. Scope of objectives, targets and indicators:
    i. Consideration of risk assessment results
    ii. Legal and regulatory requirements
    iii. Company standards/requirements
c. Assignment of owners

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d. Implementation plans
e. Completion dates
f. Communication of targets to workers (as appropriate).
g. Frequency of progress review

3. Good practices for management review session records include:

a. Agenda
b. Presentation material (references)
c. Date
d. Attendance list, including the senior manager
e. Progress towards objectives
f. Results of Audits
g. Completion of corrective/preventive actions
h. Risks/issues
i. Agreed preventive/corrective actions

4. Evaluation:
a. Regularly not exceeding 2 years but earlier if there is a Significant Change.
b. Effectiveness of controls (including control processes)
c. Should include every related program whose scope include:
    i. Consideration of risk assessment results
    ii. Legal and regulatory requirements
    iii. Company standards/requirements.
    iv. Achieving continual improvement

3. Corrective action process (CAP) should contain the following:
a. Core elements of root cause analysis, specific corrective actions, owners, due dates, tracking process.
b. Additional actions when a corrective action is off-track.
c. A link demonstrated between the CAP and the performance management objectives and targets.
d. Review action items by management representative after verification by the appropriate person.
e. Any issues/concerns noted in the insurance inspection report regarding people, fire, or Entity have an agreed CAP.

2.Records are maintained including:

a. System review meetings
b. Management review meeting presentation materials/analysis/data
a. Formal target, indicator, and objective tracking
b. Regular progress reporting
c. Evaluation reports for:
    i. Control effectiveness
    ii. Training and Communication
    iii. Grievances related to labor concerns
    iv. HR practices (hiring, compensation, promotion, nondiscrimination and harassment, humane treatment, …)
d. Self-assessment reports
e. Results of management reviews
f. Corrective Action Plans (CAPs)
g. Original non-conformance (as baseline for CAP)
h. CAP for each non-conformance
i. Progress reports
j. Closure verification reports
k. Copies of any regulatory citations/violation notices received in the past three years, including any communications with the agencies, and follow-up review or inspection.

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B. Health and Safety

B1. Occupational Health and Safety

1. Processes & Practices are in place such that:

a. The Entity keeps a registry or inventory of health and safety permits, licenses and certifications including their monitoring and reporting requirements, expiration dates, etc.
b. Permits, licenses, and certifications are kept current and updated as necessary as operations changes occur.
c. If health and safety violations were identified, they have been remediated and are considered closed by the proper authorities.
d. All government reporting is on time and correct.
e. Assessments occur:
    i. An adequate and effective process is implemented to eliminate or reduce worker safety hazards and determine proper PPE for specific job tasks and/or areas of the Entity where it cannot be eliminated.
        1. PPE requirements for entering or working in any production area with open surface tanks of hazardous chemicals where there is a risk of contact with or exposure to the contents of the tank include:
            a. Respirators appropriate to the level and type of inhalation exposure
            b. Safety shoes
            c. Long sleeves
            d. Chemically resistant gloves
            e. Eye protection
        2. Workers have been trained to use PPE as intended.
        3. PPE is free to workers.
        4. PPE is properly maintained and/or replaced at appropriate intervals to ensure effectiveness in reducing exposures.
        5. Use of PPE is enforced.
    ii. A safety hazard assessment is performed for all machinery and equipment before purchase, installation and start up. Controls are implemented for the identified hazards.
    iii. Hazards such as high noise, chemical use, heavy equipment use, awkward positions, work at heights, overhead hazards, etc. should all be evaluated.
    iv. Buildings are structurally sound and conform to local building code requirements.

NOTE: Young workers, expectant and nursing mothers, others should be considered in a separate and unique category.

NOTE: Exposure to multiple chemicals can be either exposure to multiple chemicals by a single route or exposure to multiple chemicals by multiple routes. A route can be inhalation, ingestion, skin exposure, etc.

NOTE: All efforts apply to all types of workers (direct, indirect, dispatched, young, interns, apprentices.

f. In addition to the Specific Conditions noted in the VAP Standard, examples of areas to consider are provided here; however, this is not comprehensive:
    i. Precautions are taken to ensure safety in construction areas, including limiting vehicle speeds, scaffolding to prevent injury from falling objects and controls of electrical hazards.
    ii. Electrical installations and wiring are regularly inspected and maintained to prevent electrical shock hazards (damaged cords and plugs, frayed wiring, missing protective barriers, etc.).
    iii. Hazards are identified by appropriate signs, placards, and labels in the local language of workers.
    iv. Energized parts are protected from accidental contact by enclosures and barriers.
    v. Operating procedures for equipment and machinery posing electrical hazards include electrical safety precautions.
    i. Ignition hazards (e.g. smoking, electrical sparks, open flames, etc.) are eliminated in areas where combustible and flammable materials are stored or used or if there is a flammable atmosphere.
    ii. The Entity controls the risks associated with fire hazards (e.g., replacing frayed electrical wiring, avoiding open flames, containing flammable vapors, etc.).
    iii. A hot work permit system is in place for welding, cutting, brazing, and similar activities.
    iv. Only trained and licensed drivers are permitted to operate industrial powered vehicles.

NOTE: Confined spaces to be considered may include, but are not limited to, tanks, vessels, silos, storage bins, hoppers, vaults, pits, manholes, tunnels, equipment housings, ductwork, and pipelines.

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g. Gender-responsive measures are taken against relevant risks and impacts.
    i. Elements that can be taken into consideration when defining gender-responsive measures are:
        1. Differences in the nature of jobs and tasks completed by different genders, if applicable,
        2. Different societal roles and responsibilities in the specific country, region or culture,
        3. Physical and psychological risks at the workplace that may affect have specific and different impacts on each gender.
    ii. In addition to the Specific Conditions noted in the VAP Standard, the elements below can be considered:
        1. Exposure to infectious diseases
        2. Exposure to lead, organic mercury, other toxic chemicals, radioactive material.
        3. Work-related stress.
        4. Threat of violence in the workplace.
        5. Long working hours and/or night shifts.
        6. Extreme heat and/or noise
    iii. Regarding pregnant workers and nursing mother, when the worker makes their situation known, the following steps are followed:
        1. Pregnant workers: A worker-specific risk assessment of the worker's job to assess risk to the mother and fetus.
        2. The worker is either be moved to a role that has been assessed and determined not to be hazardous to them or their children OR the hazardous elements of their role are removed.
        3. Health checks, if required by law, are conducted for pregnant workers and nursing mothers.
    iv. After the mother returns to work: a worker-specific post-natal risk assessment of the worker's job to assess risk to the mother and possible impacts on the baby through breastfeeding.

NOTE: Workers have the freedom to refuse tasks that the worker believes to be hazardous without penalty or termination.

3.Controls & Monitoring include:

a. Steps to ensure tools, systems and processes are properly tested, calibrated, and otherwise maintained to demonstrate accuracy in measurement, indication, and recording.
b. Site operations are reviewed for compliance with all monitoring, reporting and other permit requirements based on:
    i. Internal monitoring and assessments
    ii. Independent third-party assessments
    iii. Regulatory agency reviews/inspections
c. Ensure minimum monitoring is done including:
    i. A daily safety inspection is performed for all industrial powered vehicles.
    ii. PPE inspections by workers and staff

4.Records are maintained including:

a. All required occupational health and safety permits, licenses and test reports
b. Professional certificates, as required
c. Accurate, complete, and up-to-date risk assessment reports
d. Occupational health / injury and illness logs.
e. PPE verification steps may include, depending on the complexity of the management system:
    i. PPE selection and adequacy evaluation records
    ii. PPE inventory and replacement records
    iii. PPE inspection and maintenance records
    iv. Job-specific PPE matrix
    v. Fit test records for respiratory protection equipment
f. Occupational health and safety testing reports – some examples are below:
    i. Industrial hygiene sampling data
    ii. Drinking water sampling data
    iii. Ventilation flow tests
    iv. Injury and illness logs
    v. Respiratory protection (fit tests, medical evaluations)
    vi. Hearing conservation programs
    vii. Notice of availability of medical records
    viii. Fire safety equipment inspection, testing and maintenance data.
g. Use permits.
h. All machine (safety) permits and licenses and testing reports.

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i. Food, sanitation and housing permits and licenses
j. Canteen/kitchen workers have valid health certificates.
k. If local regulations require Entity health inspections or other tests or certificates, these are available and valid.

NOTE: All permits, licenses, certifications, and reporting data are posted as required by law in required or conspicuous locations

NOTE: Drinking water testing is not required if local water utility company can attest water meets World Health Organization (WHO) Guidelines for Drinking-water Quality or equivalent standard

5. Leading Practices include:

a. Taking efforts, through communication, small group dialogue, other, to encourage expectant and nursing mothers to disclose their situation occur through communication and education.

B2 Emergency Preparedness

1. Processes & Practices are in place such that:

a. Ensure that there is proper budget and staffing allocated to install and maintain the exit, detection, alarm, detection, response, and suppression systems as well as training of individuals and coordination with local authorities.
b. Suggested practice for fire suppression equipment:
    - Foam suppression may be used in solvent rooms, data centers or similar spaces.
    - Electrically non-conducting portable fire extinguishers (i.e. agent FE-36 or similar permissible) may be used in spaces with electronics.
    - Dry powder extinguishers need to be in "Green zone".
    - CO2 typically in clean rooms would be weighed.
c. Fire inspection tags on portable fire extinguishers: If portable fire extinguishers do not have inspection tags on them, there is a robust identification system in place that supports the maintenance and safety of the extinguishers.
d. Entity staff or consultants have performed an assessment of potential emergency situations.
e. Emergency Preparedness
    i. Emergency response plans have been developed and implemented to address the potential emergency events identified in the assessment (e.g., chemical spill, equipment malfunction, occupational injury, fire, earthquake, weather event, violence)
    ii. The Entity has implemented emergency reporting procedures, including training for workers on how to report an emergency.
    iii. The Entity maintains alarms and/or a public address system to notify workers of an emergency.
    iv. The Entity has implemented evacuation and relocation processes, and they are tested on a regular basis.
    v. Workers are trained in emergency reporting, notification and evacuation and relocation.
f. Emergency evacuation drills are conducted regularly for all work areas and shifts. Specifically:
    i. Fire evacuation drills[2]
        1. All workers (direct/indirect) were part of an evacuation drill.
        2. All work shifts were part of an evacuation drill.
        3. At least one evacuation drill is conducted while it is dark outside (this helps to identify access, lighting, and other gaps).
        4. Drills should include every area (including dormitory, cafeteria, warehouse, office areas, production floors, research, development laboratories, shipping/receiving)
    ii. Other identified emergency evacuations: scope, frequency and process should be determined through risk assessment, local law, or customer requirement.

NOTE: When there is a large turnover in staff, heavy growth and/or significant changes to operations (e.g., new building, equipment/warehouse layout change) a new drill should be conducted.

g. Efforts are made to reduce risk such as
    i. Combustible storage is minimized and limited to areas with adequate fire detection and protection.

[2] Fire evacuation frequency is at least every 365 days not "1 time per year."

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ii. Flammable and combustible materials are properly stored to prevent the accumulation of vapors. Ignition hazards (e.g., smoking, electrical sparks, open flames, …) are eliminated in areas where combustible and flammable materials are stored or used or if there is a flammable atmosphere.

h. When considering emergency egress, an indoor hazardous area can be understood as an area that contains materials, processes, or conditions that could harm occupants during an emergency. Examples include:
   i. Indoor areas that contain toxic substances or contents that are likely to burn with extreme rapidity or explode
   ii. Indoor areas with the potential for a hazardous atmosphere, such as:
      1. Flammable gas, vapor, or mist in concentrations above 10% of its lower flammable limit;
      2. Airborne concentration of combustible dust at or above its lower flammable limit;
      3. Oxygen concentration below 19.5% or above 23.5%.

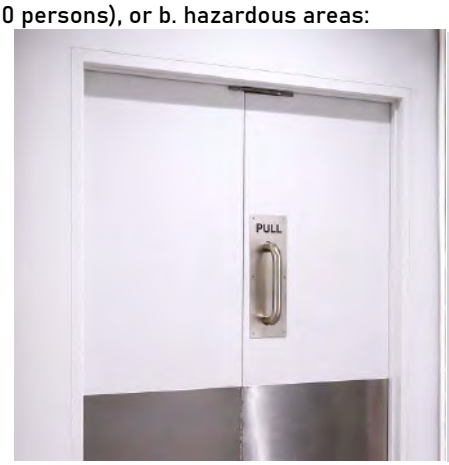
2. Examples of Emergency Exits – Exit Access and Exit Discharge Doors:
Below are examples Entities can refer to in terms of understanding the RBA Code requirements on emergency exits. Please note that these examples are not prescriptive and not exhaustive:

a. Exit discharge doors, and exit access doors if the door serves indoor areas that are either a. designed for high occupancy (≥ 50 persons), or b. hazardous areas, that comply with the RBA's definition of single motion:





b. Exit access or exit discharge doors using "grasping or pinching". These types of doors are not appropriate to be used as exit discharge doors, or as exit access doors if the door serves indoor areas that are either a. designed for high occupancy (≥ 50 persons), or b. hazardous areas:

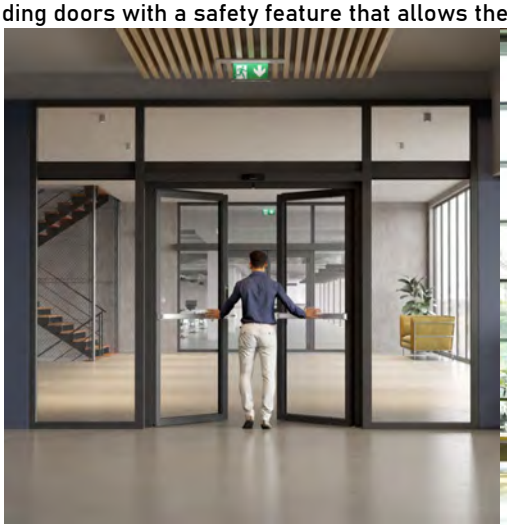




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c. Sliding doors with a safety feature that allows the door to swing to a full-open position in the direction of egress:




d. Rolling doors with an egress feature at the door that allows exit in the direction of egress, which can open in a single motion:




3.Controls & Monitoring include:

a. Inspections, maintenance, testing and replacement to the stricter or local law, insurance, or the following:

NOTE: Portable fire extinguishers are inspected at least monthly, single-unit smoke/fire detectors are inspected and tested at least every 6 months.

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i. All other fire safety equipment, the frequency is not be less than that required/recommended by the manufacturer or insurance company, whichever is more stringent.
ii. All facilities to identify gaps, risks which might lead to an emergency and/or impede the ability to respond and/or evacuate efficiently and safely.

b. Periodically select and follow egress routes out of the building to the assembly/shelter point to confirm conformance.
c. Documenting of evacuation drills followed by analysis and reporting to management on results and plans for improvement.

4.Records are maintained including:

a. Business continuity and business resumption plans are available, current, and adequate.
b. The emergency response plan (ERP) is available, current, adequate, and reflects the risk assessment, including contact information for emergency responders.
c. A post-emergency plan is available, current, and adequate, which includes incident reporting, root cause investigation, and corrective/preventative actions.
d. Inspection, maintenance, test and replacement records of equipment and infrastructure including but not limited to fire extinguishers, smoke/fire detectors, alarm, sprinklers, exits
e. Evaluation drill plans and then reports of the drills including date, time began/ended, shift, area, metrics (e.g., time to evacuate), gaps, Corrective Action Plan that is tracked and reported to completion.

B3. Occupational Injury and Illness

1. Processes & Practices are in place such that:

a. There is a staffed and funded program to reduce and respond to occupational injuries and illnesses, including injury reporting, recording and classification, and provision of medical treatment.
b. Management encourages workers to report all work-related injuries and illnesses to the company and provides them with training on how to report all work-related injuries and illnesses do so to the company.
c. Workers are not penalized or terminated for reporting work-related injuries or illnesses.
d. Workers are not in situations that can cause imminent harm.
e. Areas that can cause imminent harm to workers are free of workers and are signed, and access is restricted.
f. When workers remove themselves from a situation which they perceive to be an imminent harm to them, a corresponding incident report is generated.
g. The Entity provides workers with medical evaluations and treatment for work related injuries and illnesses.
h. The Entity assigns injured workers to their former (or equivalent) job when they are physically able to resume work.

3.Controls & Monitoring include:

a. Adequate and effective first response process indicating the severity of medical emergency and response (first aid, infirmary, local external hospital).
b. An adequate and effective maintenance process is in place for the inspection, maintenance, upkeep, and stocking of all first response equipment and first aid kits.
c. The frequency for all inspections is at least monthly or if there is a Significant Change.

NOTE: If during a regular monitoring cycle, it is determined that there are no changes to the Entity or work setup, a re-assessment is not needed. This "no-change" determination should be recorded.

4.Records are maintained including:

a. On-site occupational medical clinic inventory list
b. First aid kits inventory list
c. Up-to-date inspection tracking records
d. Licenses and permits for facilities such as clinics and staff, including first responders
e. Near misses, first aid events, the number and type of injuries beyond first aid, and any fatalities
f. Results of investigations, reports to authorities
g. Corrective action and improvement plans including communication and training
h. Annual, or more frequent, trend analysis of the occupational injury and illness data
i. Imminent harm reports which are complete and accurate for all instances where workers removed themselves from imminent harm
j. Containment plans for situations where workers removed themselves because of their feeling that they face imminent harm

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k. Assessment reports of containment of the imminent harm situations providing a "no imminent harm" conclusion before workers return to the area

4. Leading Practices include:

a. Providing general health and well-being communication and support via onsite clinic as all workers may not have access to materials and professionals.

B4. Industrial Hygiene

1. Processes & Practices are in place such that:

a. There is proper budget and staffing allocated to conduct risk assessment, medical evaluations, provide PPE as well as training of individuals and coordination with local authorities as appropriate.
b. The Entity has conducted a risk assessment using established methodology to evaluate the risk of exposure to biological, chemical, and/or physical agents at the Entity. This is sometimes referred to as a qualitative exposure assessment to determine if there is a risk of exceeding exposure limits.
c. The need for exposure monitoring/air sampling is based on the results of the qualitative assessment and should occur if appropriate. Some countries require routine exposure monitoring regardless of the level of exposure.

NOTE: Risk assessment should include exposure to multiple chemicals.

d. Where there is risk that the exposure may be significant, or when required by local regulations, the Entity conducts baseline (initial) and routine exposure monitoring/sampling to determine exposure levels to biological, chemical, and/or physical agents at the Entity.
e. The Entity has implemented controls to reduce or eliminate worker exposure to chemical, biological and physical agents:
    i. Engineering controls (e.g. exhaust ventilation, enclosures, etc.) are designed to reduce worker exposure to chemical, biological and physical agents.
    ii. Substitution of less hazardous chemicals and processes.
    iii. Administrative controls (limiting worker exposure time; job rotation) are designed to reduce worker exposures to chemical, biological and physical agents.
    iv. Appropriate Personal Protective Equipment (PPE) is issued to all workers only when engineering or administrative controls do not reduce exposures to acceptable levels.
f. Chemicals (including hazardous substances, IFPCs) are adequately and effectively.
    i. Categorized
    ii. Handled
    iii. Stored
    iv. Moved within a single Entity/ multiple Entities
    v. Access is controlled.
    vi. Potential employee exposure control methods are adequate and effective, such as
        1. Segregation
        2. Secondary containment
        3. Ventilation
        4. Fire protection
        5. Appropriate storage cabinets
    vii. Proper marking of all chemical, biological, and physical agents to the stricter of regulations, GHS, or customer standards.
    viii. SDSs are available in local languages for workers or a language that they can understand.

NOTE: SDSs may be in physical form (e.g., paper) and available near to the area where the chemical is present or online. If they are online, workers must be trained and able to easily access the most current SDS.

3.Controls & Monitoring include:

a. Regular evaluation plan to verify the effectiveness of implemented controls and corrective actions if required. The frequency should be at least every 3 years unless a Significant Change requires re-evaluation.
b. Approval is required for the purchase and use of hazardous chemicals and for all new purchases of hazardous chemicals before use.
c. Evaluations of chemicals (including hazardous chemicals) of less hazardous or non-hazardous alternatives, including Greenhouse Gas and ozone depletion impact.
d. Engineering controls are implemented to mitigate worker exposure effectively and adequately to substances containing IFPC List chemicals, which is demonstrated by industrial hygiene records.

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e. IFPCs
    i. An adequate and effective process for all hazardous chemicals to track, review, approve for use, and approve all new purchases of IFPCs before use.
    ii. An adequate and effective program to control the identified potential hazards to chemical, biological, or physical agents is in place and follows the hierarchy of controls in a documented gated process, demonstrating that each hierarchy level has been fully evaluated.
    iii. A prioritized review and selection process to eliminate, substitute or isolate workers from all IFPCs.
f. Monitoring, testing, alarm, and reporting equipment is available, well-maintained, calibrated, and operational.

4.Records are maintained including:

a. Copies of hazardous substances inventory, manifests, and shipping papers are maintained and accurate.
b. Accurate chemical inventory records are maintained and accurate.
c. Inspection records of hazardous substances and their points of storage and use are maintained and accurate.
d. Worker testing, surveillance records to determine if the worker is being harmed from exposure to agents, respiratory, hearing loss or any other medical concerns related to specific job activities.
e. Equipment monitoring, testing, calibrating, and repair records.
f. Any other testing reports such as sampling records including sampling performed by government agencies as part of a regulatory inspection; all for the last three years.

5. Leading Practices include:

a. Ongoing monitoring / air sampling even if not determined to be necessary or required by law.

B5. Physically Demanding Work

1. Processes & Practices are in place such that:

a. There is proper budget and staffing allocated to conduct risk assessment, re-engineering, equipment and tools, and medical evaluations as well as training of individuals and coordination with local authorities as appropriate.
b. A program is implemented to evaluate worker exposure to the hazards of physically demanding work (e.g., ergonomic risk assessments, worker discomfort surveys etc.)
c. Procedural, physical, and administrative controls are in place to reduce the hazards of physically demanding work.
d. Workers use proper equipment to lift heavy objects (e.g., vacuum hoists; mechanical lift tables; cranes, etc.).
e. Workstations do not require prolonged awkward postures.
f. Assembly tasks are designed to reduce forceful exertions (e.g., use of power tools, jigs, etc.) and highly repetitive motions.
g. Workers are provided with the means to change posture throughout the work shift (e.g., workers can alternate between sitting and standing postures).
h. Management encourages early reporting of discomfort.

3.Controls & Monitoring include:

a. Periodic ergonomic task analyses.
b. An adequate and effective program to control the identified potential hazards of physically demanding work is in place and follows the hierarchy of controls in a documented gated process, demonstrating that each hierarchy level has been fully evaluated and reasons why it could not address the risk fully before proceeding to the next hierarchal level.
c. Review and trend analysis of injuries related to physical demands of job duties.

NOTE: If during a regular monitoring cycle, it is determined that there are no changes to the Entity or work setup, a re-assessment is not needed. This "no-change" determination should be recorded.

4.Records are maintained including:

a. Assessments and analysis reports including worker input, any medical assessments (with proper privacy controls).
b. Identification of roles with residual physically demanding work and the controls and protections in place to minimize worker exposure.
c. Plans to further mitigate risk.

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B6. Machine Safeguarding

1. Processes & Practices are in place such that:

a. The Entity conducts a job safety analysis (task hazard analysis) to identify job-specific hazards. Corrective action is taken for all identified hazards.
b. Entity conducts regular safety inspections of machinery and machine safeguards. Identified problems are corrected immediately or the machine is shut down until repairs can be made.
c. Machinery with non-functioning safeguards is not operated until safeguards are restored to proper operating condition.
d. Entity has a program or process for providing and maintaining machinery safeguards for all dangerous equipment to safeguard operators from injury.
e. Adequate training is provided to ensure safe use of equipment.
f. The use of machine safeguards by workers is required and verified.
g. The Entity performs scheduled preventive maintenance of machinery and machine safeguards.
h. The Entity conducts a pre-purchase/pre-installation hazard review of all machinery and appropriate safeguarding is installed as needed to control the identified hazards.

3.Controls & Monitoring include:

a. An appropriate method is used to ensure that safeguards are installed as needed to control the identified hazards and follows the hierarchy of controls in a documented gated process, demonstrating that each hierarchy level has been fully evaluated and reasons why it could not address the risk fully before proceeding to the next hierarchal level.
b. Regular inspection and preventive maintenance of a machine, its safeguards, and emergency stops.

4.Records are maintained including:

a. Records demonstrating regular inspection and preventive maintenance of machines are available for review.

B7. Food, Sanitation and Housing

1. Processes & Practices are in place such that:

In addition to the Core Requirements and Specific Conditions noted in the VAP Standard, the elements below should be considered regarding:

a. Worker housing:
    i. Adequate pest control measures in place.
    ii. Cold water and clean drinking water are available and easily accessible.
    iii. Hot water is always available and easily accessible or on a convenient schedule.
    iv. An adequate and effective cleaning and sanitation program is in place.
    v. Emergency exit/egress requirements are in line with the VAP Standard Emergency Preparedness criteria.

    NOTE: The worker housing requirements apply regardless of the nature of the contract/location/building (e.g., if rooms are rented by the Entity in nearby residential areas for housing workers, these standards still apply)

b. Bathrooms, employee spaces, cafeterias, and food areas:
    i. The toilet, hand washing, and canteen areas are clean and sanitary.
    ii. Canteens are provided with adequate hand washing facilities.
    iii. Safe food handling processes and hygiene standards (in refrigeration, storage, and preparation areas) are in place and followed in cafeterias.
    iv. Food service workers wear masks, hair nets and gloves as necessary to prevent food contamination.
    v. An adequate and effective cleaning and sanitation program is in place.
    vi. For emergency preparedness purposes, the maximum occupancy requirements are posted.
c. Food and food storage:
    i. An ample amount of healthy food with a varying menu is provided to workers.
    ii. Food storage and preparation areas are clean.
    iii. Food is stored properly (not on the floor; refrigerated if necessary)
    iv. Raw and cooked food are stored separately, food is kept covered.
    v. Food is used or disposed of before the marked expiration date.
d. Drinking water
    i. Water is tested for contaminants assessed to be at risk for the local region and operations.

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ii. Drinking water testing is not required if local water utility company can attest water meets World Health Organization (WHO) Guidelines for Drinking-water Quality or equivalent standard.

NOTE: Entity must have history of evidence of review of water utility test reports and have reviewed for compliance. Merely saying the utility is responsible and/or pointing to their website is not sufficient.

3.Controls & Monitoring include:

a. On-site inspections, testing, emergency process drills and report generation are conducted by authorized personnel.
b. An adequate and effective preventive maintenance program (including emergency response supporting facilities) is in place.
c. For rented apartments, there are regular on-site inspections, assessments and updates made to management. These re-occur if there are complaints, there is a Significant Change, or an incident has occurred.

4.Records are maintained including:

a. Living environments monitoring records on safety, cleanliness, lighting, space, conditioning available, etc.
b. Sanitation program tracking records
a. Pest control log
b. Preventive maintenance program logs
c. Regular monitoring and reporting of safe food handling procedures/hygiene
d. Food, sanitation, and housing testing reports
e. All required food, sanitation and housing permits and licenses are in place, including:
   i. Rented apartments must be permitted by the local government as living accommodations.
   ii. Canteen/kitchen workers have valid health certificates.
   iii. Food, sanitation, and housing testing reports including drinking water, food worker health tests, food sample testing.
   iv. If local regulations require Entity health inspections or other tests or certificates, these are available and valid.

5. Leading Practices include:

Any sleeping / living accommodations/building do not contain storage for operations (e.g., parts/material, chemicals, finished goods, equipment, invoices).

B.M Health and Safety Management System

B.M.1 Risk Assessment – Health and Safety

1. Process, Practices, Controls:

1. The quarterly compliance process should include:

a. Identification of requirements which apply to the Entity. Be sure to look for emerging and new requirements. This can be done via a legal department with an understanding of the RBA Code, subscriptions to 3rd party reports on regulations, sales & marketing who agree to customer terms, etc.
b. A means to track these requirements, staying current as:
   i. The requirements may change (including the RBA Code of Conduct).
   ii. Your operations may change and bring the Entity in scope of requirements or create a gap.
c. Assess Entity operations against these requirements to identify gaps.
d. Develop updated policy, procedure, training, communication, recording and reporting to close the gaps.
e. Implement the changes and test them for compliance.

NOTE: Ensure the Entity adds any new and changed permitting, licensing, testing, reporting and disclosure requirements to the compliance register noting sufficient time to renew or publish before they expire or are due.

2. The due diligence process should include:

a. Specific risks of relevant demographics, such as gender and age, where the Entity may experience, cause, or contribute to adverse health and safety impacts for internal and external stakeholders (including compliance with applicable requirements)
b. Chemical, biological, or physical agents

NOTE: Exposure to multiple chemicals can be either exposure to multiple chemicals by a single route or exposure to multiple chemicals by multiple routes. A route can be inhalation, ingestion, skin exposure, etc.

c. Pregnant workers and nursing mothers:

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i. General and worker-specific risk assessment includes:
    1. Lifting/carrying heavy loads
    2. Exposure to infectious diseases
    3. Exposure to lead, radioactive materials or toxic chemicals
    4. Work-related stress
    5. Ergonomics
    6. Threat of violence in the workplace
    7. Long working hours and night shifts
    8. Excessive heat or noise
ii. Pre-natal risk assessment includes:
    1. Working with organic mercury or radioactive materials

d. Risks are addressed through the Hierarchy of Controls in this order:
    i. Elimination
    ii. Substitution
    iii. Engineering controls
    iv. Process and Administrative controls
    v. Adequate and effective PPE

2.Records are maintained including:

a. A compliance calendar or system that defines owners and provides reminders
b. Summaries of applicable laws and regulations and requirements and how they apply to Entity operations
c. Review of the key customer requirements that apply to or impact Entity's operations
d. Analysis of recent RBA Code of Conduct changes
e. Minutes from meetings or other that demonstrate process is conducted quarterly
f. Stakeholder identification reports
g. Risk assessment reports
h. Mitigation plans

B.M.2 Control Processes – Health and Safety

Records are maintained to support the implementation of the Core Requirements and Specific Conditions noted in the VAP Standard, regarding the Health and Safety management system:

a. Current and past policies and procedures, specifications
b. Results and reports from review and control steps
c. Corrective Action Plans, plans for improvement
d. Training records, including a verification of training effectiveness
e. Educational materials.

B.M.3 Communications – Health and Safety

1. Process, Practices, Controls:

1. Some examples of a healthy and effective ongoing two-way communication process with workers, and other internal and external stakeholders, are as below:

a. Examples of worker participation mechanisms: Worker surveys, suggestions boxes, worker focus groups, joint worker-management committees, worker/union representatives, process improvement teams.
b. Examples of two-way communication: Face-to-face meetings, town halls, worker focus groups, joint worker-management committees, process improvement team, message groups (WhatsApp, Line, WeChat, etc.), brown bag lunches
c. Examples of stakeholder engagement mechanisms: Newsletters with request for feedback, message groups (WhatsApp, Line, WeChat, etc.), social media, neighborhood or community meetings, drop-in sessions, focus groups, feedback, and impact discussions (data/study driven)

NOTE: Submitting SAQ to customers does not qualify as communication with customers

2.Comprehensive functioning process to anonymously report grievances without fear of reprisal, which is internal (for workers and staff) and external (for workers of suppliers, local community, or interested actors and Whistleblowers).

a. Clear grievance channels so anyone is comfortable reporting grievances and so that reporting is encouraged.

2.1 Investigation and actions:

a. Promptly investigate the validity of any grievance.

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b. Ensure the investigation and remediation is impartial, non-discriminatory, and where applicable, consistent with previous actions.
c. Communicate back to those involved, where possible, the outcome of the investigation and next steps, while maintaining appropriate privacy for those involved.
d. Remind participants that there is to be no retribution for making the grievance.

2. Records are maintained including:
a. Communications records include a verification of communication effectiveness.
b. Input/feedback records.
c. Written information to workers on how to provide input/feedback for improvement.
d. Correspondence to supplier management.
e. Communications/Presentations to internal and external stakeholders.
f. Grievance records
g. Investigation records
h. Written information provided to workers on how to report grievances.

B.M.4 Performance Review and Continuous Improvement – Health and Safety

1. Process, Practices, Controls:

1. Good practices for establishing targets are as below:
a. Target clearly defines the period considered, and each target includes:
i. Time Period: Forward-looking (between base date and target date)
ii. Base date: Date from which the target is being measured
iii. Target date: Date in the future when the target is intended to be achieved
iv. Baseline: Value of what is being measured at the start
v. Targeted improvement value: The quantitative value of the target (numeric and greater than 0)

2. Good practices for continuous improvement process include:

a. Objectives and targets are clearly designed to achieve continuous improvement
b. Scope of objectives, targets and indicators:
i. Consideration of risk assessment results
ii. Legal and regulatory requirements
iii. Company standards/requirements
c. Assignment of owners
d. Implementation plans
e. Completion dates
f. Communication of targets to workers (as appropriate).
g. Frequency of progress review

3. Good practices for management review session records include:

a. Agenda
b. Presentation material (references)
c. Date
d. Attendance list, including the senior manager
e. Progress towards objectives
f. Results of Audits
g. Completion of corrective/preventive actions
h. Risks/issues
i. Agreed preventive/corrective actions

4. Evaluation:
a. Regularly not exceeding 2 years but earlier if there is a Significant Change.
b. Effectiveness of controls (including control processes).
c. Should include every related program whose scope includes:
i. Consideration of risk assessment results
ii. Legal and regulatory requirements
iii. Company standards/requirements
iv. Achieving continual improvement
d. Evaluation reports should include:

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i. Accidents, incidents, medical surveillance, and trend analysis
ii. ERP drill plan
iii. Control effectiveness (PPE, physically demanding work, machine safety, chemical, physical and biological agents, etc.)
iv. Training & Communication
v. Grievances related to safety concerns

5.Self-audit process
a. The scope should include:
i. All areas of the Entity
ii. All policies, processes, physical conditions, and work practices
iii. Review of records
iv. Interviews with individuals responsible for compliance and conformance
1. Workers (direct and indirect)
2. Staff and management
3. Supplier management

6.Corrective action process (CAP) should contain the following:
a. Core elements of root cause analysis, specific corrective actions, owners, due dates, tracking process.
b. Additional actions when a corrective action is off-track.
c. A link demonstrated between the CAP and the performance management objectives and targets.
d. Review action items by management representative after verification by the appropriate person.
e. Any issues/concerns noted in the insurance inspection report regarding people, fire, or Entity have an agreed Corrective Action Plan.
f. Specific health and safety elements include:
i. Any issues/concerns noted in the insurance inspection report regarding people, fire, or Entity have an agreed Corrective Action Plan.
ii. Appropriate preventive action because of medical surveillance or injury related to workplace risks and injuries should occur including moving to another role.
iii. In addition, where there are workplace related injuries, the Entity should:
1. Provide medical treatment to the worker
2. Cover the worker's medical treatment, re-examination, and rehabilitation cost
3. Provide a re-examination to the worker
4. Do not terminate the labor contract with a worker due to medical surveillance results.

2.Records are maintained including:

a. System review meetings
b. Management review meeting presentation materials/analysis/data
c. Formal target, indicator, and objective tracking
d. Regular progress reporting.
e. Evaluation reports for:
i. Control effectiveness
ii. Training and communication.
iii. Grievances related to safety concerns
f. Self-assessment reports
g. Results of management reviews
h. Corrective Action Plans
i. Original non-conformance (as baseline for CAP)
j. CAP for each non-conformance
k. Progress reports
l. Closure verification reports
m. Copies of any regulatory citations/violation notices received in the past three years, including any communications with the agencies, and follow-up review or inspection

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C. Environment

C1. Environmental Permits and Reporting

1. Processes & Practices are in place such that:
   a. The Entity keeps a registry or inventory of environmental permits, licenses and certifications including their monitoring and reporting requirements, expiration dates, etc.
   b. Permits, licenses, and certifications are kept current and updated as necessary as operations changes occur.
   c. If environmental violations were identified, they have been remediated and are considered closed by the appropriate authorities.

2. Controls & Monitoring include:
   a. Tools, systems, and processes are properly tested, calibrated, and otherwise maintained to demonstrate accuracy in measurement, indication, and recording.
   b. Entity operations are in compliance with all monitoring, reporting and other permit requirements based on:
      i. Internal monitoring and assessments
      ii. Independent third-party assessments
      iii. Regulatory agency reviews/inspections

3. Records are maintained including:
   a. All the environmental permits required by law
   b. Certifications as required by law

C2. Hazardous Substances

1. Processes & Practices are in place such that:
   a. The Entity has an up-to-date inventory of chemicals and hazardous materials on site.
   b. The Entity takes the necessary steps to ensure workers understand what hazardous substances they are working with, the risks involved and how to protect themselves.
   c. Hazardous substances are adequately and effectively: Categorized, Handled, Stored, Moved
      i. All chemicals are stored in properly designed and maintained cabinets or storerooms.
      ii. All chemicals are stored in appropriate containers that are properly labeled.
      iii. Chemicals and other hazardous materials are properly handled, transported, used, and stored by appropriately trained personnel.
      iv. Adequate control of temperature, security, ventilation, and fire risk is maintained in chemical use and storage areas.
   d. Worker education and protection
      i. Hazardous material information [labels and safety data sheet (SDS formally MSDS)] or characterization in the case of hazardous waste) is available at the points of use and storage in a language understood by the worker.
      ii. Personal protective equipment appropriate to the materials being handled is provided to workers.
      iii. Workers are trained on the proper use, maintenance, and storage of personal protective equipment.
      iv. Workers have the freedom to refuse tasks that the worker believes to be hazardous without penalty or termination.
      v. Emergency eyewash and shower stations are available to workers in areas where chemicals and hazardous materials are used or stored.
   e. Disposal
      i. Chemical and hazardous wastes are disposed of on-site in accordance with local environmental laws or the Entity uses a licensed hazardous waste transporter to ship waste offsite to a licensed waste disposal facility.
      ii. Where practical, waste chemicals are processed for re-use or recycling.
   f. Disposal vendor assessment
      i. A periodic assessment and Corrective Action Plan process to evaluate whether the vendor (hazardous waste handler or transporter) is complying with contract terms and conditions.
      ii. Assessments occur at least when there is a significant change
      iii. The assessment occurs before a new vendor (hazardous waste handler or transporter) is selected.

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g. The Entity has emergency response plans in the event of a release of a chemical or material that poses a hazard to the environment. The plan includes the following elements:
    i. Identification and assessment of release hazards (e.g. spills and leaks)
    ii. Qualification and training of emergency responders (e.g. spill response teams)
    iii. Who to contact in the event of a release
    iv. List of emergency response equipment
    v. Evacuation processes
    vi. Processes for proper clean-up and disposal of released materials
    vii. Decontamination processes
    viii. Reporting requirements
h. An adequate and effective reduction/replacement program with
    i. Annual objectives
    ii. Regular objective tracking
    iii. Progress monitoring
    iv. Adjustments made if off track

NOTE: Reduction programs should not harm workers and the expectation is not something that is done at "any cost"/excessive cost such that the operations are uncompetitive.

i. Engineering and administrative systems for improved resource efficiency adhere to the hierarchy of resource efficiency, reducing the use of hazardous substances, when feasible, showing preference (in order) for the following functions:
    i. Prevention: Unnecessary consumptive processes are eliminated
    ii. Minimization: Process efficiency is improved
    iii. Substitution: Using a more environmentally benign or renewable resource
    iv. Reuse, recycling, recovery: In that order, in order to maximize the benefit of resource consumption.

2. Records are maintained including:
    a. Risk assessment results
    b. Mitigation plans for all significant actual and potential risks identified
    c. Inspection records of hazardous substances and their points of storage and use
    d. Accurate and up-to-date hazardous waste inventory records
    e. Copies of hazardous waste shipping papers
    f. Certificates/licenses/approvals for non-government transport and disposal vendors
    g. Assessments, visit minutes, or assessment reports, with possible areas for improvement, for each non-government transport and disposal vendor
    h. Investigation reports of each environmental incident (e.g., spill, etc.)
    i. Preventive and Corrective Action Plans for any environmental incident
    j. Annual reduction targets, progress monitoring and corrective actions plans, if applicable.

C3. Solid Waste

1. Processes & Practices are in place such that:
    a. Solid waste is adequately and effectively categorized, handled, stored, moved:
        i. Solid waste is stored in properly designed and maintained cabinets or storerooms.
        ii. Solid waste is stored in appropriate containers that are properly labeled.
        iii. Solid waste is properly handled, transported, used, and stored by appropriately trained personnel.
        iv. Adequate control of temperature, security, ventilation, and fire risk is maintained in solid waste storage areas.
    b. Worker education and protection:
        i. Hazard signage and information and waste characterization and response information is posted and provided.
        ii. Personal protective equipment which is appropriate to the materials being handled is provided to workers.
        iii. Workers are trained on the proper use, maintenance, and storage of personal protective equipment.
        iv. Workers have the freedom to refuse tasks that the worker believes to be hazardous without penalty or termination.
        v. Emergency eyewash and shower stations are available to workers in areas where chemicals and hazardous materials are used or stored.
    c. A documented, fully audited, waste management plan for proper disposal of all waste materials is in place. All waste is handled and disposed of under proper permits by persons authorized by law to handle such materials.
    d. An adequate and effective reduction program with:

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i. Annual objectives
ii. Regular objective tracking
iii. Progress monitoring
iv. Adjustments made if off track.

NOTE: Reduction programs should not harm workers and the expectation is not something that is done at "any cost"/excessive cost such that the operations are uncompetitive.

e. Engineering and administrative systems for improved resource efficiency adhere to the hierarchy of resource efficiency, reducing the generation of solid waste, when feasible, showing preference (in order) for the following functions:
   i. Prevention: Unnecessary consumptive processes are eliminated.
   ii. Minimization: Process efficiency is improved.
   iii. Substitution: Using a more environmentally benign or renewable resource.
   iv. Reuse, recycling, recovery: In that order, to maximize the benefit of resource consumption.
f. The Entity sorts solid waste by type and sends recyclable materials offsite for reuse and recycling.
g. The Entity treats industrial and/or sanitary wastewater onsite in accordance with local laws and permit requirements.
h. Treated wastewater is discharged to a municipal treatment system or to surface water (if allowed by local laws and regulations).
i. Wastewater treatment equipment is included in a routine preventive maintenance program,
j. Workers responsible for operating and maintaining wastewater treatment systems have received all necessary training.

2. Records are maintained including:
   a. Risk assessment results
   b. Mitigation plans for all significant actual and potential risks identified
   c. Accurate and up-to-date waste inventory records
   d. Inspection records of waste and their points of storage
   e. Copies of waste manifests and shipping papers
   f. Documents showing that only vendors approved and/or licensed by the local regulatory authorities for transporting are used
   g. Annual reduction targets, progress monitoring and corrective actions plans, if applicable.

C4. Air Emissions

1. Processes & Practices are in place such that:
   a. The Entity has fully characterized its air emissions (type, nature, quantity, etc.)
   b. The Entity has all required emissions permits and is in compliance with all permit requirements and local environmental standards. Results are regularly reported.
   c. Treatment
      i. Air emissions are treated prior to discharge in accordance with permit requirements.
      ii. Where required, the Entity has exhaust ventilation systems designed to capture emissions and pollution treatment systems (i.e. scrubbers, catalytic removal, thermal oxidation, etc.,), which reduce emission to an acceptable level before discharging,
      iii. The Entity has exhaust ventilation systems designed to capture emissions at the source and pollution treatment systems (i .e. scrubbers, catalytic removal, thermal oxidation, etc.), to remove or reduce the concentration of emissions before discharge, as required by local laws and regulations.
   d. Reduction
      i. An adequate and effective reduction program with:
         1. Annual objectives
         2. Regular objective tracking
         3. Progress monitoring
         4. Adjustments made if off nominal.
      ii. Engineering and administrative systems for improved resource efficiency; reducing emissions, adhere to the hierarchy of resource efficiency when feasible, showing preference (in order) for the following functions:
         1. Prevention: Unnecessary consumptive processes are eliminated
         2. Minimization: Process efficiency is improved
         3. Substitution: Using a more environmentally benign or renewable resource
         4. Reuse, recycling, recovery: In that order, in order to maximize the benefit of resource consumption.

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NOTE: Reduction programs should not harm workers and the expectation is not something that is done at "any cost"/excessive cost such that the operations are uncompetitive.

e. Noise
   i. Adequate and effective processes are in place for environmental noise control including boundary noise sources are identified, evaluated, routinely monitored, and controlled.
   ii. Boundary noise levels are evaluated per the permit conditions upon changes to zoning or land use permits about the Entity or if there are any community noise complaints, and boundary noise–level criteria are set accordingly.
   iii. Adequate and effective process to track and review environmental noise.
   iv. Appropriate boundary-noise-control devices are installed and maintained to control boundary noise levels include:
      1. A routine preventive maintenance program
      2. System efficiency monitoring program
      3. A program to evaluate the integrity of existing boundary-noise-control devices.

2. Records are maintained including:
   a. Inspection records of air emissions
   b. Testing and reporting records
   c. Accurate and up-to-date inventory
   d. Accurate and up-to-date list of air emissions and Ozone Depleting Substances

C5. Water Management

1. Processes & Practices are in place such that:
   a. Water source
      i. Source of water may be:
         1. On-site, for example via surface withdrawal or aquifer via well
         2. Off-site via municipal or private company service.
   i. A water use baseline and adequate and effective annual reduction plan is implemented with objectives and Corrective Action Plans if the implementation is off track.
   ii. Annual reduction program should not harm workers or entail excessive cost.
   b. Water discharge
   i. Adequate and effective process to track, review, and approve the discharge of all water.
   ii. Wastewater characterization and response information is available at the points of use and storage in a language understood by the worker.
   iii. Appropriate wastewater treatment systems are installed and maintained that minimize the pollutant contribution of each of its facilities include:
      1. A routine preventive maintenance program
      2. System efficiency monitoring program
      3. A program to evaluate the integrity of existing wastewater systems.
   iv. Emergency response actions are defined in case the on-site wastewater treatment system exceeds its capacity or if it malfunctions.
   v. When reviewing impact to local waterbodies, elements to consider include, but are not limited to:
      vi. Strongly colored discharge
      vii. Acrid smell
      viii. Floating debris
   c. At least one person responsible for all aspects of wastewater process discharge including treatment, water channel contamination prevention and water-related emergency response and reporting activities.
   d. Engineering and administrative systems for improved resource efficiency; reducing emissions, adhere to the hierarchy of resource efficiency when feasible, showing preference (in order) for the following functions:
   i. Prevention: Unnecessary consumptive processes are eliminated
   ii. Minimization: Process efficiency is improved
   iii. Substitution: Using a more environmentally benign or renewable approach or resource
   iv. Reuse, recycling, recovery: In that order, in order to maximize the benefit of resource consumption.

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2. Records are maintained including:
   a. Identified water channel contamination sources
   b. Description of spills/water channel contamination for past 3 years
   c. Preventive/Corrective Action Plan for past spills/contamination
   d. Accurate and up-to-date wastewater inventory records
   e. Inspection records of wastewater and their points of storage
   f. Copies of wastewater manifests and shipping/discharge papers
   g. Documents showing that only vendors approved and/or licensed by the local regulatory authorities for transporting are used
   h. Annual reduction targets, progress monitoring and corrective actions plans, if applicable.

3. Leading Practices include:
   a. Understanding where the municipal or private company service withdraws its water.
   b. A water risk assessment that considers competitive use, water quality, and scarcity has been conducted in the last 3 years for the Entity's location using reference tools such as:
      i. WWF Water Risk Filter
      ii. WRI Aqueduct
      iii. WBCSD Global Water Tool
      iv. The Water Footprint assessment Tool
      v. GEMI Local Water Tool

C6. Energy Consumption and Greenhouse Gas Emissions

1. Foundation: If responsibility for Green House Gas emissions is at the Corporate-level then a Corporate-level implementation should exist which includes:
   a. Documented corporate policy.
   b. Documented corporate processes and controls.
   c. Assigned responsibility
   d. Proof of implementation
      i. Entity-level implementation for Scope 1 and 2
      ii. Significant categories of scope 3 GHG are determined through a materiality or similar process, documented and up-to-date
      iii. Significant categories of scope 3 GHG are tracked, documented, and up-to-date
      iv. Significant scope 3 categories must at least include category 1 (purchased goods and services)
   e. Absolute corporate-wide reduction target and performance are publicly reported at least annually

If there is no Corporate-level implementation, then there should be a full Entity-level implementation.

2. Essential Elements as per the RBA Code Requirements

Based on the language of the Code of Conduct, a greenhouse gas management system must contain the following essential elements:

   a. Corporate level measurement for Scope 1 and 2 emissions with energy and/or fuel consumption values; and significant categories of Scope 3 emissions
   b. Absolute corporate level goal(s) to reduce Scopes 1 and 2 greenhouse gas emissions
   c. Publicly reported goals/targets, annual progress on goals, and annual emissions
   d. Demonstration of efforts to reduce emissions or energy consumption

Essential Element 1: Corporate level measurement for Scope 1 and Scope 2 emissions with energy/fuel consumptions, and significant categories of Scope 3 emissions.

   a. Boundaries: An operational boundary must be set to define the scope of emissions for company-wide operations. The operational boundary is set at the corporate level and then applied uniformly to identify and categorize direct and indirect emissions at each operational tier.

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i. Boundary setting requires companies to consolidate emissions, using either the equity share approach or the control approach. Refer to the GHG Protocol Corporate Standard for more information.
    1. Equity Share Approach: A company accounts for GHG emissions from operations according to its share of equity in the operation.
    2. Control Approach: A company accounts for 100% of the GHG emissions from operations over which it has control.
ii. Entity-level measurement and reporting can contribute to corporate wide values but are insufficient alone.

b. Measured and Reported Values: Values for Scopes 1, 2 and significant categories of Scope 3 emissions must be represented clearly.
    i. Emission values must be presented as a quantitative value of total emissions (i.e., metric tonnes CO2e). A percentage (e.g., 90% of last year's emissions) is unacceptable.
    Emission values for Scopes 1, Scope 2, and Scope 3 should be separated and must represent annual emissions.
        1. Annual reporting can follow a calendar or fiscal year, but mut be defined and consistent.

c. Scope 1 Coverage: Measured and reported value must at a minimum include Scope 1 emissions as defined by the GHG Protocol along with values for related energy/fuel consumption.
    i. Definition: Direct emissions occurring from sources that are owned or controlled by the company
        1. GHG emissions not covered by the Kyoto Protocol, e.g. CFCs, NOX, etc. should not be included in Scope 1 but may be reported separately.
    ii. Sources could include the following categories:
        1. Stationary Combustion: e.g. owned or controlled energy generation and furnaces
        2. Mobile Combustion: e.g., vehicles
        3. Refrigeration and AC
        4. Fire Suppression
        5. Purchased Chemical Gases
    iii. Reported values must include emission value (i.e., metric tonnes CO2e) and unit of consumption (e.g. liters fuel)
        1. These can include on-site combustion: oil, coal, diesel, natural gas, propane, etc.
        2. Copies of records of the total quantity of fuel combusted on-site, like fuel bills and other purchased records, can help generate these values.

d. Scope 2 Coverage: Measured and reported value must at a minimum include all Scope 2 emissions as defined by the GHG Protocol along with values for related energy consumption and/or purchase.
    i. Definition: Emissions from the generation of purchased and consumed electricity, steam, heat, or cooling (here referred to as "electricity").
        1. Purchased electricity is defined as electricity that is purchased or otherwise brought into the organizational boundary of the company.
        2. Scope 2 emissions physically occur at the facility where electricity is generated.
    ii. Scope 2 emissions must be reported as location-based, market-based, or both.
        1. Definition: Location-based method quantifies Scope 2 GHG emissions based on average energy generation emission factors for defined geographic locations, including local, subnational, or national boundaries.
            1. Application: All electricity grids
        2. Definition: Market-based method quantifies the Scope 2 GHG emissions of a reporter based on GHG emissions emitted by the generators from which the reporter contractually purchases electricity bundled with contractual instruments, or contractual instruments on their own.
            1. Application: Possible for emissions of operations/facilities in any markets providing consumer choice of differentiated electricity products or supplier-specific data, or in the form of contractual instruments.
    iii. Reported values must include a unit of energy (e.g. kWh) and emissions value (i.e., metric tonnes CO2e)
        1. Providing the emissions factors applied to each unit of energy is not required but is considered best practice.

e. Scope 3 Coverage: Measured and reported values must include significant Categories of Scope 3 emissions and align with accepted methodologies like the GHG Protocol Scope 3 Standard.
    i. Definition: All indirect emissions (not included in Scope 2) that occur in the value chain of the reporting company, including both upstream and downstream emissions. This includes 15 subcategories:
        1. Category 1: Purchased goods and services
        2. Category 2: Capital goods
        3. Category 3: Fuel- and energy-related activities (not included in scope 1 or scope 2)

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4. Category 4: Upstream transportation and distribution
5. Category 5: Waste generated in operations
6. Category 6: Business travel
7. Category 7: Employee commuting
8. Category 8: Upstream leased assets
9. Category 9: Downstream transportation and distribution
10. Category 10: Processing of sold products
11. Category 11: Use of sold products
12. Category 12: End-of-life treatment of sold products
13. Category 13: Downstream leased assets
14. Category 14: Franchises
15. Category 15: Investments

ii. At minimum, Category 1: Purchased Goods and Services, must be considered "significant" under the RBA Code of Conduct unless another category of emissions is significant based on determination below. Other categories may also be considered significant. A materiality assessment is a best practice to determine which categories are significant but is not required. Assessment for significance should align with the GHG Protocol Scope 3 Standard, which provides criteria to identify relevant Scope 3 activities:

1. Size: Activities contribute significantly to the company's total anticipated Scope 3 emissions
2. Influence: Activities with potential emissions reductions that could be undertaken or influenced by the company.
3. Risk: Activities that contribute to the company's risk exposure (e.g. climate change related risks such as financial, regulatory, supply chain, product and technology, compliance/litigation, and reputational risk).
4. Stakeholders: Activities that are deemed critical by key stakeholders (e.g., customers, suppliers, investors or civil society).
5. Outsourcing: Activities that were previously performed in-house or activities outsourced by the reporting company that are typically performed in-house by other companies in the reporting company's sector.
6. Sector Guidance: Activities that have been identified as significant by sector-specific guidance
7. Spending or revenue analysis: Activities that require a high level of spending or generate a high level of revenue (and are sometimes correlated with high GHG emissions).

iii. Reported value should be in metric tonnes CO2e; best practice is to provide additional supporting data at the highest level of granularity possible.

Essential Element 2: Absolute corporate level goals to reduce Scopes 1 and 2 greenhouse gas emissions.

a. Boundaries: See guidance under Essential Element 1 Section 1 above. Boundaries for targets must reflect the same boundaries as measurement, and must be at a corporate level.
   i. Boundary for GHG emissions measurement/reporting and GHG reduction goals must be the same
b. Coverage: Reduction goal must at a minimum include Scopes 1 & 2 emissions as defined by the GHG Protocol.
c. Absolute Reduction: Goals must reflect an absolute methodology as defined by the GHG Protocol, or be aligned to a climate data based methodology.
   i. Absolute: Absolute emissions goals reduce absolute emissions over time.
      1. Specify reductions measured in metric tonnes or percentage
      2. Relative only to a historical baseline that is at least 5 years from target year.
      3. For example: Reduce 1000 tonnes of CO2e below 2015 levels by 2025; or reduce CO2e by 15% below 2015 levels by 2025.
   ii. Climate Data Based: Goals based on climate or scientific data usually align to limit global warming to 1.5°C above pre-industrial levels, or net zero emissions. This type of goal is not required but if used must demonstrate compliance to RBA target guidance.
      1. Many climate data based goals follow a public and well defined methodology, and require approval or verification from a third party. This is not an exhaustive list, but some of the more widely recognized organizations with goal-setting methodologies include:
         a. Science Based Targets Initative (SBTi)
         b. The Climate Pledge
         c. Race to Net Zero

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d. Other Race to Zero recognized members

2. Older and more mature climate based goals might align to 2°C, which is acceptable.
3. In rare instances, a recognized climate based goal will include relative reductions, for example some SBTi approved targets. These are acceptable so long as they are verified/approved by the relevant governing body and up to date.
4. Third party recognition/approval is not necessary for climate based goals but is a best practice. Non-recognized or self-developed climate data base goals are acceptable as long as they are absolute.

iii. Intensity: Not Accepted -- Greenhouse gas intensity goals specify emissions reductions relative to productivity or economic output, for instance, tonnes CO2e/million dollars revenue. Reduction goals based on GHG intensity do not conform to the Code of Conduct v8.

iv. Carbon Offsets: A target can include target offsets as one of several efforts to achieve a target, but offsets cannot be the target themselves (e.g., 100 tonnes CO2e offset by 2025), or the primary means of achieving a target (i.e., target should be achieved primarily through reductions due to operational procedures and efforts).

d. Timeline: Goals must clearly define the period of time considered aligned to the GHG Protocol.

i. The following timeline elements are required as part of a goal:
   1. Base year: Year from which the goal is measured.
   2. Target year: Year in which the goal is intended to be achieved.

ii. Target span (between base year and target year) must be a minimum of 5 years.
   1. Year-over-year targets (i.e., annual, or 1 year goals) are not acceptable unless they are incremental to a long-term goal.

iii. Timespan must be forward looking (i.e., in the future) and not based on current or past performance.
   1. For example: a statement of what has been achieved posited as a goal is not acceptable. (e.g. company achieved x% reduction last year)

e. Targeted Reduction Value: Goal must state the desired reduction based on the base year and target year.

i. Goal must be a numeric value that is greater than zero (i.e., set as a positive reduction).

Essential Element 3: Publicly reported goals/targets, annual progress on goals, and annual emissions

a. Progress on Goals: Goals must regularly report on their progress toward objective reductions.

i. Progress must be annually reported against the goal.

ii. Progress could be reported in many formats but must be a comparison of current footprint against goal. For example:
   1. Given as % reduction from baseline or % of progress towards goal reduction
   2. Annual footprint against targeted footprint

iii. Progress towards meeting the goal does not have to demonstrate reduction, but must be reported.

b. Measured Emissions Values: Values for Scopes 1, 2 and significant categories of Scope 3 emissions must be clearly represented.

i. See guidance for Scopes 1, 2, and 3 coverage under Essential Element 1 above.

ii. Emission values must be presented as a quantitative value of total emissions. A percentage (e.g., 90% of last year's emissions) is unacceptable.

iii. Emission values for Scopes 1, Scope 2, and Scope 3 must be separated and must represent annual emissions.
   1. Annual reporting must follow either a calendar or fiscal year. Dates must be defined.

c. Publicly Reported: Values for goal, annual progress on goal, and annual emissions must be publicly reported or easily available without requiring specific request or payment.

i. Public reports may include:
   1. Third party reporting, disclosure, or survey platforms, which can require registration but cannot require payment, for example CDP or SBTi.
   2. Company published materials like websites and sustainability reports.
   3. The RBA Emissions Management Tool is not an acceptable public reporting platform because it requires membership, but can be used to generate values that are published elsewhere.

ii. All of the elements of a goal, as outlined in this document, must be included in the public disclosure.

iii. The fulfillment of a customer request for information (e.g., the goal is provided to customers who make a request) is inadequate for this public reporting requirement.

Essential Element 4: Demonstration of efforts to reduce emissions or energy consumption

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a. Documentation of emission or energy reduction efforts: Formal or informal documentation that demonstrates efforts taken or considered by the company to meet reduction targets, reduce emissions, reduce energy consumption, and/or increase energy efficiency.
    i. Examples of documentation can include:
        1. Stories or examples of corporate actions taken that are published on company websites or reports.
        2. On-site examples of changes to facility equipment, practices, or other actions that are intended to reduce emissions.
        3. Facility level certifications to emission reduction programs like Energy Star
        4. Reports or research that explores methods or equipment to reduce emissions
        5. Proof of renewable energy or carbon offset purchases
        6. Interviews with facility managers or workers on considerations or actions taken
        7. Emissions and/or energy hotspot analysis and actions or priorities
    ii. Efforts to reduce emissions do not need to take place at a specific Entity. Corporate wide, or other Entity-level activities are acceptable.
    iii. The majority of reductions, especially reductions in order to meet corporate level targets, should not be attributed to carbon offsets. Reductions due to operational practices should be the primary means of achievement.
    iv. Actions do not have to be implemented. Demonstrating consideration or intent is acceptable.

3. Useful Resources and Trainings:
    a. WRI GHG Protocol Corporate Accounting and Reporting Standard (Scopes 1 and 2): https://ghgprotocol.org/corporate-standard
    b. GHG Protocol, Corporate Value Chain (Scope 3) Accounting and Reporting Standard: https://ghgprotocol.org/corporate-value-chain-scope-3-standard
    c. WRI GHG Protocol Technical Guidance for Calculating Scope 3 Emissions: https://ghgprotocol.org/scope-3-calculation-guidance-2
    d. RBA GHG Management Guide and Learning Pathway: Available at no cost to RBA members and their suppliers through the RBA e-Learning Academy, the GHG Management Guide provides technical how-to guidance and training videos on the following topics:
        i. Boundary Setting
        ii. Measurement
        iii. Reporting
        iv. Target Setting
        v. Reduction
        vi. Other Emissions and the Montreal Protocol
        vii. Scope 3 Emissions

4. Records are maintained including:
    a. Copies of records of the total quantity of fuel combusted on-site (or easily extrapolated from fuel bills and other purchased fuel records)
    b. Purchased energy, electricity, steam, heating, and cooling records.
    c. Current and historic Scope 1, 2 and significant categories of Scope 3 data with calculations with associated assumptions.

C.M Environmental Management System

C.M.1 Risk Assessment – Environmental

1. Process, Practices, Controls:

1. The quarterly process should include:

a. Identification of requirements which apply to the Entity. Be sure to look for emerging and new requirements. This can be done via a legal department with an understanding of the RBA Code, subscriptions to 3rd party reports on regulations, sales & marketing who agree to customer terms, etc.
b. A means to track these requirements, staying current as
    i. The requirements may change (including the RBA Code of Conduct).
    ii. Your operations may change and bring the Entity in scope of requirements or create a gap.
c. Assess Entity operations against these requirements to identify gaps.

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d. Develop updated policy, procedure, training, communication, recording and reporting to close the gaps.
e. Implement the changes and test them for compliance.

NOTE: Ensure the Entity adds any new and changed permitting, licensing, testing, reporting and disclosure requirements to the compliance register noting sufficient time to renew or published before they expire or are due.

2. The due diligence process focused on the environment should be designed to identify and assess the most significant actual and potential environmental risks where the Entity could cause or contribute to adverse environmental impacts of internal and external stakeholders.

a. The scope of risks and impact should include at a minimum:
    i. Greenhouse Gas impact
    ii. Ozone depleting substances (ODS) impact
    iii. Exposure to and release of multiple chemicals
b. Risks are addressed through the Hierarchy of Controls in this order:
    i. Elimination
    ii. Substitution
    iii. Engineering controls
    iv. Process and Administrative controls

2. Records are maintained including:
    a. A compliance calendar or system that defines owners and provides reminders
    b. Summaries of applicable laws and regulations and requirements and how they apply to Entity operations
    c. Review of the key customer requirements that apply to or impact Entity's operations
    d. Analysis of recent RBA Code of Conduct changes
    e. Minutes from meetings or other that demonstrate process is conducted quarterly
    f. Stakeholder identification reports
    g. Risk assessment reports
    h. Mitigation plans

C.M.2 Control Processes – Environmental

Records are maintained to support the implementation of the Core Requirements and Specific Conditions noted in the VAP Standard, regarding the Health and Safety management system:

a. Current and past policies and procedures, specifications
b. Results and reports from review and control steps
c. Corrective Action Plans, plans for improvement
d. Training records, including a verification of training effectiveness
e. Educational materials.

C.M.3 Communications – Environmental

1. Process, Practices, Controls:

1.Some examples of a healthy and effective ongoing two-way communication process with workers, and other internal and external stakeholders, are as below:.

a. Examples of worker participation mechanisms: worker surveys, suggestions boxes, worker focus groups, joint worker-management committees, worker/union representatives, process improvement teams.
b. Examples of two-way communication: face-to-face meetings, town halls, worker focus groups, joint worker-management committees, process improvement team, message groups (WhatsApp, Line, WeChat, etc.), brown bag lunches
c. Examples of stakeholder engagement mechanisms: newsletters with request for feedback, message groups (WhatsApp, Line, WeChat, etc.), social media, neighborhood or community meetings, drop-in sessions, focus groups, feedback, and impact discussions (data/study driven)

NOTE: Submitting SAQ to customers does not qualify as communication with customers

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1.1 Environmental communication is clearly posted in the workplace or placed in a location identifiable and accessible by workers including:
   a. Feedback channels are clearly communicated and visible (suggestion box, …)
   b. Environmental communication is clearly posted in the Entity or placed in a location identifiable and accessible by workers.
   c. Hazard signage and information [labels and safety data sheet (SDS formally MSDS) or characterization in the case of hazardous waste)
   d. Emergency number(s), emergency team, and emergency evacuation and response plan.

2. Public Environmental reporting:

   a. Publicly report a corporate-wide GHG footprint (total scopes 1 & 2 and relevant scope 3) as a quantitative value of total emissions. A percentage (e.g., 90% of last year's emissions) is not acceptable.
   b. The value represents annual emissions.
   c. Refer to the guidance under criterion C6 for more information.

3. Grievance mechanism:

   a. Comprehensive functioning process to anonymously report grievances without fear of reprisal, which is internal (for workers and staff) and external (for workers of suppliers, local community, or interested actors and Whistleblowers).
   b. Clear grievance channels so anyone is comfortable reporting grievances and so that reporting is encouraged.

3.1 Investigation and actions:

   a. Promptly investigate the validity of any grievance.
   b. Ensure the investigation and remediation is impartial, non-discriminatory, and where applicable, consistent with previous actions.
   c. Communicate back to those involved, where possible, the outcome of the investigation and next steps, while maintaining appropriate privacy for those involved.
   d. Remind participants that there is to be no retribution for making the grievance.

4. Records are maintained including:

   a. Communications records include a verification of communication effectiveness
   b. Input/feedback records
   c. Written information to workers on how to provide input/feedback for improvement
   d. Correspondence to supplier management
   e. Communications/Presentations to internal and external stakeholders
   f. Grievance records
   g. Investigation records
   h. Written information provided to workers on how to report grievances.

C.M.4 Performance Review and Continuous Improvement – Environmental

1. Process, Practices, Controls:

1. Good practices for establishing targets are as below:
   a. Target clearly defines the period considered, and each target includes:
      i. Time Period: Forward-looking (between base date and target date)
      ii. Base date: Date from which the target is being measured
      iii. Target date: Date in the future when the target is intended to be achieved
      iv. Baseline: Value of what is being measured at the start
      v. Targeted improvement value: The quantitative value of the target (numeric and greater than 0)

2. Good practices for continuous improvement process include:

   a. Objectives and targets are clearly designed to achieve continuous improvement
   b. Scope of objectives, targets and indicators:

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   i. Consideration of risk assessment results
   ii. Legal and regulatory requirements
   iii. Company standards/requirements
c. Assignment of owners
d. Implementation plans
e. Completion dates
f. Communication of targets to workers (as appropriate).
g. Frequency of progress review

3. Good practices for management review session records include:

a. Agenda
b. Presentation material (references)
c. Date
d. Attendance list, including the senior manager
e. Progress towards objectives
f. Results of Audits
g. Completion of corrective/preventive actions
h. Risks/issues
i. Agreed preventive/corrective actions

4. Evaluation:

a. Regularly not exceeding 2 years but earlier if there is a Significant Change.
b. Effectiveness of controls (including control processes).
c. Should include every related program whose scope include:
   i. Consideration of risk assessment results.
   ii. Legal and regulatory requirements.
   iii. Company standards/requirements.
   iv. Achieving continual improvement.

5. An adequate and effective self-assessment process to periodically assess conformance with:
a. Applicable legal regulatory requirements.
b. Customer requirements.
c. RBA Code requirements.

6. Efforts related to conservation of natural resources include, but are not limited to:
a. Modifications to production, maintenance or other processes
b. Material substitution
c. Re-use and recycling campaigns

7. Efforts related to reduction of resource consumption, greenhouse gas impact and ozone depleting substances include, but are not limited to:
a. Building automation technology, programmable thermostats, lighting controls, or energy-efficient heating, cooling, lighting, and ventilation technology.
b. Use of on-site combustion or vehicles that are fuel efficient or use of a less GHG-intensive source.
c. Purchasing or installing on-site renewable energy.
d. Use of highly efficient collection/treatment systems to absorb/treat cleaning agents.
e. Use of refrigerants with low global warming potential (GWP) in Heating, Ventilation, and Air Conditioning (HVAC) systems.

3. Corrective action process (CAP) should contain the following:
a. Core elements of root cause analysis, specific corrective actions, owners, due dates, tracking process.
b. Additional actions when a corrective action is off-track.
c. A link demonstrated between the CAP and the performance management objectives and targets.
d. Review action items by management representative after verification by the appropriate person.

2. Records are maintained including:
a. System review meeting
b. Management review meeting presentation materials/analysis/data. Ideally includes:
c. Formal target, indicator, and objective tracking

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d. Regular progress reporting
e. Evaluation reports for:
    i. Control effectiveness
    ii. Training and communication
    iii. Grievances related to environmental concerns
f. Self-assessment reports
g. Results of management reviews
h. Corrective Action Plans
i. Original non-conformance (as baseline for CAP)
j. CAP for each non-conformance
k. Progress reports
l. Closure verification reports
m. Copies of any regulatory citations/violation notices received in the past three years, including any communications with the agencies, and follow-up review or inspection.

D. Ethics

Foundational guidance for D. Ethics:

The core of records that are maintained is similar for the Ethics sections D1-D6. Include these and consider any other topic-specific items:

- Confirmation in Entity and personnel records that the policy was communicated in an understandable form including staff, employees, indirect workers, and on-site suppliers and their staff along with materials used, shared, posted
- Investigation reports on alleged violations
- Records recording the non-conformance
- Communication of outcomes of investigation to stakeholders
- Sanctions in files (personnel, corporate or other] for proven/confirmed violations
- Closure verification reports which include management confirmation that they were made aware and approved of actions
- Regulatory citations/violation notices received in the past three years, including any communications with the appropriate agencies
- Detailed self-assessment / self-assessment / monitoring / risk control:
    - Plan
    - Reports / results
- Adequate, complete, and up-to-date Preventive and Corrective Action Plans for all significant actual and potential ethics risks identified, and improvement objectives in a documented with
    - Root cause analysis of the finding to ensure the system gap is addressed
    - Specific corrective actions
    - Owners of the action
    - Due dates are established to address all assessment issues.

    NOTE: Ensure appropriate retention (on and off site) and appropriate levels of access to ensure privacy conforming to legal and customer requirements.

Other elements such as Policy, Procedures/Processes and Practice, Controls can often overlap. For this reason, there is more detail in D1 Business Integrity which is critical to all D – Ethics sections.

D1. Business Integrity and No Improper Advantage

2. Processes & Practices are in place such that:

a. A formal set of "standards of business conduct", signed by senior management, is in place. Among those standards are policies and procedures with zero tolerance for staff, workers or suppliers engaging in bribery, corruption, conflict of interest, anti-competitive behavior, embezzlement, falsifying documents, mishandling IP and other sensitive and private data including personnel files, allegations, and investigations.
b. Staff, workers, and suppliers have the right to refuse doing anything in non-conformance to the 'highest standard of integrity" policy and do not experience any retribution for such refusal.

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c. The highest standards of integrity in all business interactions are implemented, with zero tolerance to any and all forms of bribery, corruption, extortion, embezzlement, etc. as noted in the policy.
d. Workers and managers are provided with information and training on the Entity's business conduct standards.
e. Staff and contractors are provided with information to make them aware of their ethical and legal requirements.
f. Staff and workers report, investigate and take action on suspected cases of ethical breach including corruption, extortion, embezzlement, etc.
g. Workers, supervisors, and managers are prohibited if not also prevented from soliciting or accepting kickbacks, bribes, commissions, or other unlawful payments for the purpose of receiving favorable treatment contracts or sales from others through education, role-modelling.

3. Controls & Monitoring include:

a. Adequate and effective monitoring, investigation, and sanctions program
    i. Regularly monitor its business to ensure:
        1. Workers or agents do not make or accept improper offers, bribes, or undue/improper advantage.
        2. Records are accurate and not falsified (financial, production, quality, etc.).
        3. Fair business including advertising and competition.
        4. Protection of identity and non-retaliation
        5. Protection of personal information
b. Appropriate investigation process when there is an alleged violation including misrepresentation by workers, managers, and their agents.
    i. The process must ensure staff, workers, and supplier workers' privacy is protected and they do not face any retaliation for cooperating with the investigation.
    ii. Process should be timely and appropriate parties informed of outcomes and Corrective Action Plans.

NOTE: Do not allow investigations or Corrective Action Plans to become dormant.

c. Appropriate sanctions when a violation is confirmed/proven and preventive action plan.
d. Adequate and effective procedure is in place to protect workers/employees from retribution for refusing to do anything in non-conformance with the "highest standard of integrity" policy and communicate/volunteer their decision.
e. Assessment, monitoring, assessment, and investigation findings are reviewed by senior management.
f. The Entity regularly monitors its business practices to ensure its workers or agents do not make or accept improper offers of payments or gifts.

D2. Disclosure of Information

1. Processes & Practices are in place such that:
    a. All business dealings should be done transparently and accurately performed with stakeholders.
    b. Non-public company information is only communicated through approved company spokespersons.
    c. Reports provided to government agencies are accurate and complete.
    d. There are good accounting policies, procedures, and record keeping, and conduct periodic data and financial assessments to confirm that accounts are in order.
    e. Job posting and recruitment information is accurate and not misleading.

2. Controls & Monitoring include:
    a. A system of internal controls is maintained to ensure the accuracy of information created, maintained, shared, and reported including to suppliers, customers, community, and government.
    b. Information regarding business activities, financial situation and performance is appropriately audited and verified by external organizations.
    c. Inspect/assess/assessment records verifying they are not falsified and accurate.
    d. Any misrepresentation by workers, managers, and their agents is investigated.

3. Records are maintained including:
    a. Financial and annual reports of Entity's operations
    b. Publicly communicated Entity information (job posting, product details, promotional materials (booklet/flyer), commercial advertising, press releases, website, etc.)

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D3. Intellectual Property

1. Processes & Practices are in place such that:
    a. The Entity establishes non-disclosure and protection of information about its customers, partners, suppliers, workers, and other business partners in accordance with applicable laws and regulations.
    b. The Entity has a means to protect its suppliers' and customers' confidential information and ensure it is not disclosed to third parties.
    c. Commercial non-disclosure agreements are a part of all customer and supplier contracts to protect the intellectual property rights of all parties.
    d. Investigations of unauthorized disclosures and/or loss of IP information are undertaken.
    e. Customers/suppliers are notified if violations should occur.
    f. Personal information protection agreements (NDA, confidentiality…) are in place for staff, workers, suppliers, and customers.

D4. Fair Business, Advertising and Competition

1. Processes & Practices are in place such that:
    a. The Entity has a program to ensure advertising statements about their products and services are not false or misleading and they meet fair business and advertising legal requirements.
    b. The responsible person understands and can describe how the Entity ensures that its advertising meets legal requirements.

2. Controls & Monitoring include:
    a. Safeguards are in place to prevent collusion with other companies on product pricing or other factors that could reduce competition.
    b. Monitoring processes related to fair business, advertising and competition are in place.
    c. Allegations of fair business, advertising, or competition are investigated, and action is taken if the allegation is substantiated.

D5. Protection of Identity and Non-Retaliation

1. Processes & Practices are in place such that:
    a. The gathering, follow-up, and investigation of reports of misconduct are done while protecting the identity of the reporting source.
    b. There are clear communications channels so that workers are comfortable reporting violations or issues of concern without fear of reprisal.
    c. Reporting violations is encouraged.
    d. There is adherence to policies that prohibit retaliation for worker reporting.
    e. Workers can anonymously report suspected violations of business conduct standards in a manner that prevents possible retaliation.
    f. Workers understand how the process works.
    g. External stakeholders such as sub-tier suppliers understand how the process works and can make use of it. Workers and external stakeholders have written information from the Entity on how to report ethical or legal concerns.

2. Controls & Monitoring include:
    a. Investigations are conducted in a manner to not breach the protection of identity.
    b. Records created, maintained and access controlled so as not to breach the protection of identity.
    c. Communication and records and access to them are reviewed to ensure that this is upheld.

D6. Privacy

1. Controls & Monitoring include:

    a. Safeguards are in place to prevent unauthorized disclosure of personal information.
    b. Monitoring procedures related to the protection of personal information are in place.

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D.M Ethics Management System

D.M.1 Risk Assessment - Ethics

1. Process, Practices, Controls:

1. The quarterly process should include:
   a. Identification of requirements which apply to the Entity. Be sure to look for emerging and new requirements. This can be done via a legal department with an understanding of the RBA Code, subscriptions to 3rd party reports on regulations, sales & marketing who agree to customer terms, etc.
   b. A means to track these requirements, staying current as
      i. The requirements may change (including the RBA Code of Conduct).
      ii. Entity operations may change and bring the Entity in scope of requirements or create a gap.
   c. Assess Entity operations against these requirements to identify gaps.
   d. Develop updated policy, procedure, training, communication, recording and reporting to close the gaps.
   e. Implement the changes and test them for compliance.

2. A due diligence process focused on ethics. It should be designed to identify and assess the most significant actual and potential ethical risks where the Entity could cause or contribute to adverse ethical impacts of internal and external stakeholders.

   a. It should include specific risks of relevant demographics, such as gender and age, where the Entity may experience, cause, or contribute to adverse ethics impacts for internal and external stakeholders (including compliance with applicable requirements).
   b. Risk assessment considers business circumstances in the country/region of operations.
   c. The risk assessment is updated when there is a Significant Change

2. Records are maintained including:

   a. A compliance calendar with owners and reminders
   b. Summaries of applicable laws and regulations and requirements and how they apply to Entity operations
   c. Review of the key customer requirements that apply to or impact Entity's operations
   d. Analysis of the recent RBA Code of Conduct changes
   e. Minutes from meetings or other that demonstrate the process is conducted quarterly
   f. Stakeholder identification reports
   g. Risk assessment reports
   h. Mitigation plans

D.M.2 Control Processes – Ethics

1. Process, Practices, Controls:
1. Policies: Aligned with law, the RBA Code of Conduct and Entity policy statements are in place including:
   a. Uphold the highest standards of integrity in all business interactions with zero tolerance for all forms of bribery, corruption, extortion, and embezzlement.
   b. Gifts to or from suppliers and customers are not excessive in cost and frequency.
   c. Bribes or other methods of obtaining undue or improper advantage are not being promised, offered, authorized, given, or accepted.
   d. No conflicts of interest.
   e. Ensure compliance with anti-corruption laws.
   f. Appropriate sanctions when a violation is confirmed/proven and a preventive action plan.
   g. All business dealings are performed transparently and accurately reflected in the Entity's business books and records.
   h. No misrepresentation by workers, managers, and their agents.
   i. Public information does not make false or misleading statements about the Entity's products, services, opportunities, position, or any other relevant aspect
   j. Information received from suppliers and customers as part of the contracting process is protected.
   k. Intellectual Property (IP) ownership and IP are protected.
   l. Ensuring fair business, advertising, and competition standards are upheld.
   m. No collusion with other companies on product pricing or other factors that could reduce competition.
   n. Protection of identity and non-retaliation.

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o. Protection of whistleblowers and/or users of the grievance mechanism(s) (internal and external).
p. Preventing unauthorized disclosure of personal information.

NOTE: If labor agents are used, then this process also needs to be implemented at the labor agent level.

2. Policies & Procedures/Processes in place such that:

a. There is a mitigation process for all significant actual and potential ethics risks identified, tracking implementation, and resulting adverse impact.
b. Formal program to ensure company public statements are not false or misleading.
c. Adequate and effective process for every policy element.
d. IT measures and guidelines are in place regarding the distribution and dissemination of information to protect information from suppliers and customers and IP.
e. There is appropriate retention (on and off site) and appropriate levels of access to ensure privacy conforming to legal and customer requirements.
f. Appropriate investigation process when there is an alleged violation, including misrepresentation by workers, managers, and their agents.
g. Appropriate sanctions when a violation is confirmed/proven and a preventive action plan.

2. Records are maintained including:

a. Current and past policies and procedures, specifications
b. Results and reports from review and control steps
c. Corrective Action Plans, plans for improvement
d. Training materials
e. Training records include a verification of training effectiveness

D.M.3 Communications – Ethics

1.Some examples of a healthy and effective, ongoing two-way communication process with workers, other internal and external stakeholders, are as below

a. Examples of worker participation mechanisms: worker surveys, suggestions boxes, worker focus groups, joint worker-management committees, worker/union representatives, process improvement teams.
b. Examples of two-way communication: face-to-face meetings, town halls, worker focus groups, joint worker-management committees, process improvement team, message groups (WhatsApp, Line, WeChat, etc.), brown bag lunches
c. Examples of stakeholder engagement mechanisms: newsletters with request for feedback, message groups (WhatsApp, Line, WeChat, etc.), social media, neighborhood or community meetings, drop-in sessions, focus groups, feedback, and impact discussions (data/study driven)

NOTE: Submitting SAQ to customers does not qualify as communication with customers

2.Feedback channels are clearly communicated and visible.

3. Comprehensive functioning process to anonymously report grievances without fear of reprisal, which is internal (for workers and staff) and external (for workers of suppliers, local community, or interested actors and Whistleblowers).

a. Clear grievance channels so anyone is comfortable reporting grievances and so that reporting is encouraged.
b. Workers shall be encouraged to raise safety concerns.

3.1 Investigation and actions:

a. Promptly investigate the validity of any grievance.
b. Ensure the investigation and remediation is impartial, non-discriminatory, and where applicable, consistent with previous actions.
c. Communicate back to those involved, where possible, the outcome of the investigation and next steps, while maintaining appropriate privacy for those involved.
d. Remind participants that there is to be no retribution for making the grievance.

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2. Records are maintained including:

a. Communications records include a verification of communication effectiveness
b. Input/feedback records
c. Written information to workers on how to provide input/feedback for improvement
d. Correspondence to supplier management
e. Communications/Presentations to internal and external stakeholders
f. Grievance records
g. Investigation records
h. Written information provided to workers on how to report grievances.

D.M.4 Performance Review and Continuous Improvement – Ethics

1. Process, Practices, Controls:
1. Good practices for establishing targets are as below:
a. Target clearly defines the period considered, and each target includes:
i. Time Period: Forward-looking (between base date and target date)
ii. Base date: Date from which the target is being measured
iii. Target date: Date in the future when the target is intended to be achieved
iv. Baseline: Value of what is being measured at the start
v. Targeted improvement value: The quantitative value of the target (numeric and greater than 0)

2. Good practices for continuous improvement process include:

a. Objectives and targets are clearly designed to achieve continuous improvement
b. Scope of objectives, targets and indicators:
i. Consideration of risk assessment results
ii. Legal and regulatory requirements
iii. Company standards/requirements
c. Assignment of owners
d. Implementation plans
e. Completion dates
f. Communication of targets to workers (as appropriate).
g. Frequency of progress review

3. Good practices for management review session records include:

a. Agenda
b. Presentation material (references)
c. Date
d. Attendance list, including the senior manager
e. Progress towards objectives
f. Results of Audits
g. Completion of corrective/preventive actions
h. Risks/issues
i. Agreed preventive/corrective actions

4. Evaluation:

a. Regularly not exceeding 2 years but earlier if there is a Significant Change.
b. Effectiveness of controls (including control processes).
c. Should include every related program whose scope include:
i. Consideration of risk assessment results
ii. Legal and regulatory requirements
iii. Company standards/requirements
iv. Achieving continual improvement
d. Evaluation reports should include:
i. Upholding the highest standards of integrity in all business interactions
ii. Obtaining undue or improper advantage being promised, offered, authorized, given, or accepted
iii. Intellectual property protection
iv. Fair business, advertising, and competition

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v. Non-retaliation or protection of identity
vi. Unauthorized disclosure of personal information

5. Corrective action process (CAP) in place should contain the following:

a. Core elements of root cause analysis, specific corrective actions, owners, due dates, tracking process.
b. Additional actions when a corrective action is off-track.
c. A link demonstrated between the CAP and the performance management objectives and targets.
d. Review action items by management representative after verification by the appropriate person.

2. Records are maintained including:

a. System review meetings.
b. Management review meeting presentation materials/analysis/data
c. Formal target, indicator, and objective tracking
d. Regular progress reporting
e. Evaluation reports for:
   i. Control effectiveness
   ii. Training and Communication
   iii. Grievances related to ethical concerns
f. Self-assessment reports
g. Results of management reviews
h. Corrective Action Plans
i. Original non-conformance (as baseline for CAP)
j. CAP for each non-conformance
k. Progress report
l. Closure verification reports
m. Copies of any regulatory citations/violation notices received in the past three years, including any communications with the agencies, and follow-up review or inspection.

E Supply Chain Management

E1. Company Commitment

1. Policy: A Code of Conduct covering all elements of the RBA Code (Labor, Health and Safety, Environment, Ethics and Management Systems) is established.

NOTE: The words do not necessarily have to exactly match but are aligned to the principles of the RBA Code at a minimum.
Senior management actively supports and ensures implementation of the Code of Conduct, including compliance with laws and regulations.

NOTE: If equivalent policies are used to endorse the RBA code, then they should contain all policy requirements in the RBA Code of Conduct

E2. Materials Restrictions

1. Processes & Practices are in place at the corporate or, as applicable, the Entity level:

a. Assigned responsibility
b. Adequate and effective processes to measure and/or document the chemical composition of products including:
   i. A process for comparing customer requirements to own specifications.
   ii. A process to ensure materials, packaging and components procured are in conformance with customer requirements.
   iii. Documented requirements for conformance with the Material Restrictions required to its material/parts suppliers.
c. The Entity provides documented requirements for compliance with the product content restrictions to its material suppliers/parts suppliers.
d. Analytical data from material/parts Suppliers is requested/required.

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e. The Entity obtains specifications, statements and/or certificates of conformance from its suppliers and these documents are available for customer review.
f. The Entity requires analytical data from its material suppliers/parts suppliers, and the data is available for customer review.

2. Controls & Monitoring include:
   a. The Entity performs random analytical testing of material suppliers/parts suppliers to ensure compliance with restriction on substances, and the data is available for customer review. Testing methods comply with applicable codes, regulations, and customer requirements.
   b. A formal process is in place to address discovery of non-compliant materials or components, and corrective actions are tracked and implemented.
   c. Additional actions are taken to ensure completion by the due date if corrective actions are not on track.

3. Records are maintained including:
   a. Chemical composition of products
   b. Specifications, statements and/or certificates of conformance from suppliers
   c. Monitoring & reporting records from the past three years
   d. Statements and/or certificates of conformance and analytical data to be able to share with customers and authorities as required/requested.

NOTE: Records need to be carefully maintained and made accessible during a corporate or entity-level assessment. Evidence of the entire effort regardless of where it occurs will be required to be shown in an RBA VAP.

E3. Responsible Sourcing of Minerals

Records are maintained to support the implementation of the Core Requirements and Specific Conditions noted in the VAP Standard:

a. Records related to 3TG+C due diligence for a minimum of two (2) years.
b. Annual review and improvement plan of the policy, process and roles and responsibilities to ensure conformance and improve where process improvements have been identified.
c. Mitigation plans with suppliers if any risk is identified including additional actions taken to ensure completion by a specified date if mitigation actions are not on-track.

NOTE: Records need to be carefully maintained and made accessible during a corporate or Entity-level assessment. Evidence of the entire effort regardless of where it occurs will be required to be shown in an RBA VAP.

E4. Supplier Responsibility

Foundational guidance for E4. Supplier Responsibility:

1. Supply chain management responsibility framework
   a. If responsibility for supply chain management (in particular, supply chain Responsibility) is at the Corporate-level then a Corporate-level implementation should exist which includes:
      i. Corporate policy
      ii. Corporate processes and controls
      iii. Assigned responsibility
      iv. Proof of implementation internally and with suppliers
      v. Any Entity-level processes, responsibility, and implementation, if responsibility is shared.

If there is no corporate-level or joint implementation, then there should be a full Entity-level implementation.

2. Processes & Practices are in place such that:

   a. Contracts are in place for all next-tier suppliers and/or for every single Purchase Order (PO).
      i. Contract terms and conditions requiring suppliers to conform to the RBA Code of Conduct.
      ii. Enforcement language on the implementation of the RBA Code of Conduct provisions applicable to the type of supplier.
      iii. Labor Agents and Contractors: Compliance with legal requirements in both home and sending country/region (if foreign and internal migrant labor is used).

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b. Establish and utilize a definition of what is Major next-tier supplier.
c. VAP, CMA, or AMA audits, or any other verification process approved by the RBA and its initiatives, are conducted for high-risk next-tier major suppliers and labor agents, contractors and on-site service providers.
    i. Contact the RBA to receive the most up-to-date information on other verifications processes approved by the RBA and its initiatives.
d. Work with company suppliers to develop a CAP which includes:
    i. Containment steps of priority items
    ii. Determination of root cause(s)
    iii. Description of the proposed corrective actions to address root cause(s)
    iv. Application of a preventive action to prevent future recurrence of the problem or related issue(s)
    v. Responsible person(s)
    vi. The date the action is expected to be completed
    vii. Current status of the action items.
    viii. When there is sufficient confidence that corrective actions are in place, re-verify (e.g., RBA VAP Closure)
    ix. Closely monitor progress and make adjustments and/or escalate to senior supplier management should the CAP become off track.
    x. Do not immediately de-source when priority non-conformance or similar are discovered. Per the UNGP's company is expected to build and apply leverage. De-sourcing is a last resort.

NOTE: If during an RBA assessment of the Entity, the Assessor identifies findings at on-site suppliers or labor agents, which have not already been identified by the Entity, then a finding will be warranted.

3. Controls & Monitoring include:

a. Contract enforcement notifications are issued to the next-tier supplier if the Entity becomes aware of a contract violation, including a violation of the RBA Code of Conduct provisions.
b. Report plans and progress to management on due diligence of Major next-tier suppliers.

4. Records are maintained including:

a. Contract and PO language noting the expectation of compliance with the RBA Code of Conduct
b. Communication materials to Major next-tier suppliers, including labor agents/contractors and on-site service providers on the expectation of compliance with the RBA Code of Conduct.

NOTE: This may be a combination of corporate and Entity-level effort. Evidence of the entire effort regardless of where it occurs will be required to be shown in an RBA VAP.

c. Review or assessment of agent and on-site supplier worker records as support that an assessment occurred:
    i. Review of the records related to Working Hours for on-site service provider workers as appropriate
    ii. Review of the records related to Wages and Benefits for on-site service provider workers as appropriate
d. CAPs for identified supplier non-conformance areas
e. Verification evidence of CAP implementation (e.g., RBA VAP Closure report)

5. Leading Practices include:

a. Use tools which follow the OECD Due Diligence Guidance.
b. Your assessment of labor agents and on-site suppliers should include a very strong focus on:
    i. A1: Prohibition of Forced labor including understanding from workers if they paid fees to get or keep their job, signed comprehensive contracts, or offer letters which were properly explained to them, possess their passports (if they are foreign migrant workers), if they can resign without penalty.
    ii. A3: Working Hours including gathering of working hour and consecutive workday data
    iii. A4: Wages & Benefits including review of payroll processes, wage slip comparison to working hours
    iv. B7: Food, Sanitation, and Housing including visiting the workers' living accommodations if at all provided or connected with the agent, supplier, or subcontractor.
c. Maintain records from review of labor agents and on-site suppliers
    i. Fees, passports, contract terms and resignation clause (Code provision A1)
    ii. Working hours, consecutive workdays (Code provision A3)
    iii. Wages and benefits (Code provision A4).
    iv. Housing (Code provision B7)

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Annex 2. Required/Relevant Document List

The following tables list the records and documents that the Assessors may review during the assessment. Be aware that these are minimum lists and may not cover all the documents that may be needed to come to informed conclusions. The Assessor may request other related documents and records for review either before or during the assessment.

- The items in the Critical Document List should be assembled in advance. The Lead Assessor may request an advance copy of any of those items.
- The second table lists the relevant documents and records that must be made available for the Assessors when they arrive on site. If some documents are not relevant to the entity due to lack of complexity in their management system, alternative evidence may need to be arranged to demonstrate conformance.
- Documents may be uploaded into RBA-Online using the Audit Preparation tab of the specific assessment, at the discretion of the entity.

General Notes

- Electronic personnel/time/payment records are acceptable.
- Original permits and licenses under Health & Safety and Environment should be seen in hard copy on-site.
- Assessors retain the right to ask to see hard copies of all documentation. Printed copies of electronic records may constitute a hard copy.
- In accordance with global personal data protection law requirements, documents should be submitted ensuring that personal information is redacted for the purposes of document submission.

Critical Document List
☐ Business license
☐ Entity layout and floor plan
☐ Description/diagram of process
☐ Changes at Entity in last 12 months
☐ Overview of production/services of last 12 months, volume, new equipment
☐ Organization chart with responsibilities
☐ Collective Bargaining Agreement (current and valid if in place)
☐ Employee Handbook
☐ New worker training material
☐ Blank employment contract
☐ Workers register/roster including as much information as possible (Employee breakdown – by position, nationalities, terms of employment (direct-hire, via labor agencies, student worker, intern, …), accommodation provided
☐ ALL legal permits, licenses, authorizations

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☐ Waivers from government agencies

☐ Valid management system certificates

☐ Last government submitted report (Labor, Ethics, Health & Safety, Environment)

☐ Risk Management Process (Labor, Ethics, Health & Safety, Environment)

☐ Emergency Response (all emergencies) and Business Continuity and Resumption plan

☐ Hazardous material inventory

☐ Hazardous waste inventory

☐ Corrective Action Plans (completed in last 12 months or in progress)

Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Provision
General Info	General Entity information ☐ Facility layout and drawings ☐ Description of process and buildings within Entity ☐ Changes at Entity in last 12 months ☐ Overview of production/services of last 12 months, volume, new equipment, new licenses ☐ Communication to workers of RBA Code provisions ☐ Communication with suppliers regarding RBA Code conformance ☐ Contract requirements with suppliers regarding RBA Code conformance ☐ Proof of verification suppliers' implementation of RBA Code requirements

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Provision
A1 – Prohibition of Forced Labor	☐ Contracts with labor agencies, labor brokers, labor service providers ☐ Example of a worker (labor) contract ☐ Permanent employee ☐ Salaried employee ☐ Hourly paid, employee ☐ Temporary staff/worker ☐ Seasonal (if applicable) worker ☐ Juvenile employee ☐ Apprentice ☐ Foreign Migrant Worker (FMW) ☐ Vocational employee (if applicable) ☐ Records of employment including proof of age, identity, and government worker permits ☐ Termination notice policy ☐ Recruitment/hiring process/procedure ☐ Documentation of employee loan and credit schemes ☐ Records of fees paid by workers (if applicable) for the last 24 months
A2 – Young Workers	☐ Company policy for young worker protection and appropriate hours/shifts ☐ Minimum hiring age policy ☐ Procedure for obtaining and validating proof of age documentation ☐ Records of training and apprenticeship programs ☐ Child labor assistance/remediation process ☐ Juvenile worker protection procedures

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Provision
A3 – Working Hours	☐ Non-traditional work hour permits, or overtime waivers issued by government agencies ☐ Information provided to workers describing legal requirements for working hours and overtime ☐ Working hours policy ☐ Process for allocating and controlling overtime hours ☐ Work time registration process/procedure ☐ Worker timecards or timesheets (most recent 12-month period) ☐ Evidence that employees have voluntarily agreed to overtime (e.g., signed statement) ☐ Evidence of communication of overtime
A4 - Wages and Benefits	☐ Information provided to workers describing wages, deductions, calculations, and benefits ☐ Information / examples of how wages were set for each job code ☐ Disciplinary wage deductions and bonus award practices ☐ List of allowances, e.g. food, accommodations, and procedure ☐ Procedure for piece rate determination and calculations (if applicable) ☐ List of worker contributions and procedure ☐ Local minimum wage definition ☐ Wage records or pay slips covering the last 12 months showing all deductions, contributions, earnings, and money transfers for workers ☐ Records of contributions to the worker insurance schemes ☐ Payment records of contributions to worker insurance schemes ☐ Proof of purchase of all applicable insurance for workers ☐ Proof of maternity/paternity leave policy for workers

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A5 - Non-Discrimination/Non-Harassment/Humane Treatment	☐ Facility rules and regulations on acceptable worker practices and disciplinary measures ☐ Disciplinary process/procedure ☐ Records of disciplinary actions ☐ Pre-employment, pre-placement medical examination requirements ☐ Medical confidentiality procedure and practice ☐ Information on workers population (type (contract/temporary/permanent), gender, function, ethnicity (place of origin), age, ...) ☐ Current job advertisements and qualifications ☐ Procedure for workers to request reasonable religious accommodation ☐ Religious accommodation records ☐ Procedure for workers to request reasonable accommodation for disability ☐ Disability accommodation records

A6 - Freedom of Association and Collective Bargaining	☐ Information provided to workers describing local laws and regulations pertaining to freedom of association and labor unions ☐ Minutes of worker meetings and/or union-management meetings ☐ Evidence of regular communications and feedback channels with workers to hear their issues and bring appropriate resolutions ☐ Records of workers complaints and actions taken (and communicated to workers)

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Provision
B1 - Occupational Health and Safety	☐ Occupational Health and Safety procedures (e.g., lockout-tag out, confined space, hot-work permit) ☐ Occupational health and safety permits, licenses, and test reports. ☐ Personal protective equipment program and list of PPEs required for various tasks ☐ Risk assessment records (mitigation evaluation, process, and administrative controls) ☐ Certificates of medical personnel and on-site clinic, if applicable ☐ Records regarding measures taken to protect pregnant workers and nursing mothers
B2 - Emergency Preparedness	☐ Fire protection plan, maintenance records for fire protection, firefighting system, and fire alarm system ☐ Fire/evacuation drill records ☐ Chemical spill response drill records ☐ Maintenance records for emergency exits ☐ Emergency response, Business continuity and resumption plans ☐ Emergency Response Team (ERT) organization
B3 - Occupational Injury and Illness	☐ Accident/occupational illness investigation and follow-up reports ☐ Injury / Illness logbook for the last 12 months ☐ "Near miss" log, analysis and follow up ☐ Absenteeism register

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B4 - Industrial Hygiene	☐ Industrial hygiene monitoring results for potential hazards in the Entity (noise, chemical, and physical agents.) ☐ Medical surveillance results for workers involved in hazardous work ☐ Hearing and respiratory protection programs ☐ Records of communication of industrial hygiene data to exposed workers ☐ Chemical inventory records (including Industry Focus Process Chemicals IFPC)

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B5 - Physically Demanding Work	☐ Records of evaluation of workers exposed to physically demanding work ☐ Records of modifications made to work area or equipment installed to alleviate manual stress to the worker ☐ Ergonomic risk assessment/manual handling risk assessment for frequently repeated operations
B6 - Machine Safeguarding	☐ Preventive maintenance records ☐ Records of machine safety risk assessments ☐ Process and procedures for evaluating worker exposure to the hazards of manual handling, repetitive tasks, awkward postures, …
B7 - Sanitation, Food, and Housing	☐ Canteen operation license and food handler health check records ☐ Food sample log ☐ Records of evacuation drills held in dormitory ☐ Records for monitoring of lightning, and conditioned environment.

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	**Provision**
C1 - Environmental Permits and Reporting	☐ Copies of permits for the Entity's operations and records of inspections or citations ☐ Official exemptions from permit requirements, issued by government agencies ☐ Records of monitoring, inspections and maintenance required by environmental permits ☐ Environmental release registers (volume of water, air, waste) for last 2 years ☐ Pollution prevention and reduction plans and results ☐ GHG initiatives and results ☐ Water conservation initiatives
C2 - Hazardous Substances	☐ Inventories of chemicals and other hazardous materials ☐ Spill control plan and procedures ☐ MSDS's for all hazardous materials on site ☐ Hazardous substance licenses/registrations ☐ Tank integrity inspection and test reports ☐ Records of hazardous waste shipping papers ☐ Waste vendor audit reports
C3 - Solid Waste	☐ List of solid wastes (hazardous and non-hazardous) generated on site ☐ Consignment notes / disposal records (manifests, receipts, invoices) ☐ Waste vendor licenses ☐ Waste permits or registrations and monitoring / inspection reports

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C4 - Air Emissions	☐ Air monitoring reports ☐ Air emission permit and reports submitted to regulatory agencies ☐ Air pollution abatement equipment maintenance records ☐ Environmental noise monitoring reports

C5 - Water Management	☐ Facility map that includes outlines of storm water drainage areas; locations of nearby bodies of water; location of storm water collection and conveyances systems; outline of impervious areas of the Entity; location of where materials are exposed to precipitation. ☐ Monitoring results of storm water discharges ☐ Wastewater treatment plant maintenance records and as- built drawings ☐ Water quality analyses from water supply or groundwater monitoring wells
C6 - Energy Consumption and Greenhouse Gas Emissions	☐ Annual consumption/use of the following greenhouse gas emission by type (Scope 1 and 2) ☐ Materiality assessment for significant scope 3 GHG categories ☐ Annual consumption of significant scope 3 categories

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Provision
D1 - No Improper Advantage	☐ Policy that ensures gifts to or from suppliers and customers is not excessive in cost and frequency and hospitality, expenses or promises ☐ Effective procedures for addressing its workers or agents suspected of making or accepting improper offers of payments or gifts and attempted bribery in all forms ☐ Investigation procedures and subsequent sanctions are applied are in place ☐ Disciplinary procedures/policy ☐ Disciplinary records
D2 - Disclosure of Information	☐ Non-disclosure agreement template/form ☐ Non-disclosure agreements with suppliers and customers ☐ Non-disclosure agreements with service providers
D3 - Intellectual Property	☐ Intellectual property review and protection policies
D4 - Fair Business, Advertising and Competition	☐ Annual financial report independently audited by financial audit firm ☐ Fair business / anti collusion policy ☐ Advertising policy/communications policy ☐ Advert/job advert
D5 - Protection of Identity and Non-Retaliation	☐ Policy/procedure on “whistle blowing” ☐ Clear communications to workers/employees on non-retaliation. ☐ Procedures to investigate possible retaliation allegations.
D6 - Privacy	☐ A formal policy and program to protect privacy: ☐ Training material and training records on privacy protection

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Relevant Documents and Records Available to Assessors On-Site (Start of the Assessment)	
Section	Management System Provisions – The documents under these provisions may not be fully available for entities with less complex management systems. Assessors may need additional/alternative evidence to triangulate the conformance elements.
X.M.1	Risk Assessment (and Risk Management)
	Legal and Customer Requirements ☐ Copy of customer requirements (e.g., RBA) ☐ Tracking system for monitoring of Social and Environmental Responsibility (SER) laws, regulations, and implementation or distribution logs. ☐ Copy of applicable laws
	Risk Assessment and Risk Management ☐ Procedure to identify, evaluate and rank risks ☐ Records on risk assessment when a Significant Change occurred ☐ Listing of identified risks for the Entity and risk assessment review records ☐ Action plans addressing highest identified risks
X.M.2	Control Processes
	Management Accountability and Responsibility ☐ Organizational chart ☐ Roles and responsibilities for the management system representative, managers with human resources, ethics, labor, health & safety, and environment responsibility ☐ Records of management system reviews
	Policies and Control Processes ☐ Company policies for corresponding section ☐ Control Procedures Implemented ☐ Training analysis ☐ Training calendar ☐ Training records ☐ Training evaluations

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X.M.3	Communications
	Communication ☐ Factory rules (for example, Employee Handbook) ☐ Process for communicating company SER performance and expectations to workers, suppliers, and customers
	Worker Feedback, Participation and Grievance ☐ Information provided to workers and external stakeholders on how to confidentially report business ethics issues of concern ☐ Policy/procedure on “whistle blowing” ☐ Procedure for confidential investigation and resulting actions on a “whistle blow” ☐ Statistics on “whistle blowing" ☐ Description of formal ways for workers to participate in program development and implementation (for example, committees, task forces,) ☐ Records of workers grievances, disciplinary investigations and actions taken (and communicated) ☐ Worker surveys, complaints, and feedback provided by management
X.M.4	Performance Review and Continuous Improvement
	Improvement Objectives ☐ Current year performance objectives and targets, including results of periodic reviews of the implementation and status of meeting the objectives ☐ Current improvement initiatives and progress status
	Audits and Assessments ☐ Audit process and procedure ☐ Copies of Audits carried out in last 3 years Corrective Action Process ☐ Corrective Action management procedure ☐ Copies of corrective action plans of Audits carried out in last 3 years and current status against these corrective action plans

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	☐ Records of Nonconformance tracking, closure, status, and management reviews ☐ Legal compliance records of citations, penalties for violations of labor / ethics laws and regulations ☐ Legal compliance records of EHS citations or penalties received in the past 3 years

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Annex 3. Definitions

Numbers

3TG+C: 3TG: Tin, Tantalum, Tungsten and Gold + C = Cobalt.

A

Absolute GHG Reduction Goal: A GHG reduction goal stated in the quantity of GHG emissions that will be reduced over a specified period irrespective of business conditions or other normalizing factors.

Adequate Conditioned Ventilation: A measure of thermal comfort of a space. Six environmental and personal factors are temperature, thermal radiation, humidity, air speed, activity level (metabolic rate), and occupant clothing (degree of insulation). The comfort zone is sufficiently comfortable if at least 80% of its occupants can be expected to not object to the ambient condition. Reference standards are ISO7730, ISO 7243, ISO 7933 and ASHRAE 55.

Adequate Lighting: Lighting is adequate for reading, writing and other off-work activities.

Administrative Controls: Work practices that reduce the duration, frequency, or intensity of exposure to hazards. This may include:

- Work process training
- Job rotation
- Ensuring adequate rest breaks
- Limiting access to hazardous areas or machinery
- Adjusting line speeds

(Source: US National Institute for Occupational Safety and Health (NIOSH))

AFA - Assessment Finding Acknowledgement: A document/ preliminary record of any findings, including Priority or Major Assessment findings (can include other findings if Assessor details them). The Entity is required to sign the AFA at the end of the closing meeting.

APM - Assessment Program Manager: The role assigned to the RBA internal staff team which manages the RBA VAP program including contracting, scoping, costing, scheduling and appointment of Assessment Firms and Assessors.

Applicable Requirements: All applicable legal and customer requirements.

Apprentice: A person participating in a work-based training arrangement that is governed by externally defined training standards and designed to develop an intermediate occupational skill.

Routine onboarding, probationary training, company-designed trainee programs, or ordinary job training does not qualify as apprenticeship.

Assessment: An Assessment is an evidence-gathering process. Assessment evidence is used to evaluate how well Assessment Criteria are being met. Assessments are objective, impartial, and independent, and the Assessment process is systematic and documented. In this document, Assessment shall mean any activity carried out within the requirements of the RBA.

AA - Assessment Agreement: Entity-signed agreement to allow the Assessment to occur.

AC - Assessment Criteria: Policies, procedures, and requirements of the Assessment.

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Assessment Evidence: Records, visual observations, factual statements, and other verifiable information that is related to the Assessment criteria being used.

Assessment Findings (Finding): Results from the Assessment that evaluates Assessment evidence and compares it against Assessment Criteria. Findings can show that Assessment Criteria are being met (conformity or conformance) or that Assessment Criteria is not being met (non-conformity or non-conformance).

Assessment Firms: The third-party firms that provide Assessors who conduct RBA Assessments and ensure that Assessments are conducted in accordance with the expectations defined by the RBA.

AP - Assessment Protocol: An Assessment Protocol assists the Assessors in executing the Assessment at the Entity to evaluate their conformance to the requirements of the RBA Code.

Assessment Report: The report issued resulting from an RBA Assessment, available on RBA-Online.

Assessor: Individuals qualified to perform RBA Assessments, and are approved by the RBA. In the context of RBA, an Assessor is a person who collects evidence in order to evaluate how well an Entity's performance meets RBA requirements.

Attachment B: Document which details Entity's authorized recipients (RBA members only).

Attachment B Company: Member Companies who have been approved by the Entity to view and or receive the Entity's final Assessment Report.

Availability: Assessors are available during that time and in the location where the Assessment is requested.

Average Month: A month which is considered 'typical', in terms of hours worked by workers at an Entity.

B

Basic Wage: Total gross remuneration, excluding regular bonuses, received by employees during a specified period of time for time worked as well as time not worked, such as paid annual leave and paid sick leave. Essentially, it corresponds to the concept of "base cash remuneration". It excludes employers' social insurance contributions, and benefits bonuses of any kind. See definition of regular bonus and wage. (Source: ILO, Resolution concerning the International Classification of Status in Employment (ISCE) 1993)

Bonded Labor: Another form of debt bondage, it often starts with the worker agreeing to provide labor in exchange for a loan, but quickly develops into bondage as the employer adds more and more "debt" to the bargain. (Source: ILO Jurisprudence).

Bonus (Regular Bonus): A monetary payment made to an employee over and above their regular wage or compensation package. Bonuses immediately reward outstanding achievement. (Source ILO Jurisprudence).

Boycott: A collective refusal by an employer or their management to express the disapproval with force of a workers' or worker representatives' request or action, putting direct pressure on the workers or their representatives to intimidate or coerce in order to force the withdrawal of the request or the end of the action.

Business License: An official, government-issued permit that allows a business to operate legally within the specified jurisdiction.

C

CAP – Corrective Action Plan: Plan approved by the APM to close non-conformances identified during the Initial Assessment.

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CBA - Collective Bargaining Agreement: A voluntary process through which employers and workers discuss and negotiate their relations, in particular terms and conditions of work. It can involve employers directly, or as represented through their organizations; and trade unions or, in their absence, representatives freely designated by the workers. (Source: ILO Helpdesk)

Chemical: Chemical elements and compounds, and mixtures thereof, whether natural or synthetic. (ILO, 1990)

Child: All persons (boys and girls) under the age of 18. (ILO Convention 182, Article 2)

Closure Assessment: Assessments conducted after the Initial Assessment to close findings identified during the Initial Assessment.

Coercion: Includes

- Threats of serious harm to or physical restraint against any person.
- Any scheme, plan, or pattern intended to cause a person to believe that failure to perform an act would result in serious harm to or physical restraint against any person; or
- The abuse or threatened abuse of the legal process.

(Source: US code – title 22: foreign relations and intercourse – chapter 78: trafficking victims' protection)

Commencement of Work: Commencement of work is when an individual officially starts their duties based on a work contract. It combines the start date in the contract, which sets the beginning of work, and the date the contract is signed, symbolizing mutual agreement. It marks the shift from pre-work negotiations to actively fulfilling work obligations. In absence of a start date specified in the contract then commencement of work will be considered as the date the contract is signed.

Communications: Delivery of information. It can take many different forms such as an announcement, a quick meeting, blog, e-mail, poster at the employee entrances, and a notice in a break room on a bulletin board or a presentation.

Confined Space: A space with limited or restricted entry or exit means and is not designed for continuous occupancy. Confined spaces contain or has the potential to contain one or more of the following:

- A hazardous atmosphere
- Material that has the potential to engulf an entrant
- Has walls that converge inward or floors that slope downward and taper into a smaller area which could trap or asphyxiate an entrant

Any other recognized safety or health hazard, such as unguarded machinery, exposed live wires, or heat stress.

Conformance: Rating assignment used when the Assessment team determines that an Entity is in conformance with an RBA Code requirement or a specific Assessment Criterion.

Conservation of the Use of Natural Resources: Practices such as modifying production, maintenance and Entity processes, materials substitution, re-use, conservation, recycling or other means to reduce natural resource use.

Containment: The act, process, or means of immediately reducing a threat or lowering a risk of the situation identified in the priority non-conformance(s). Containment is kept in place until more permanent corrective actions are implemented.

Contract Extension: When both employer and worker mutually agree to extend the employment contract beyond the term of the original contract where there is no break in between the employment period.

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Contractor: A business, or an individual, that performs work for the Entity under an agreement other than an employment agreement. The contractor does not supply labor to the Entity and retains responsibility for managing and supervising its own workers' day-to-day work (if any). Only the workers of a contractor working at the Entity's site are considered within scope.

Core Business: The business activity that is the main source of a company's enterprise, revenue and profit. A core business for manufacturing, transport, janitorial and security services are all different from one another. Core Business is NOT referring to making products only, it could be in the form of services, knowledge, etc.

Correction: Any action that is taken to eliminate a non-conformance. However, corrections do not address causes.

Corrective Action: Steps that are taken to remove the causes of an existing non-conformity or undesirable situation. The corrective action process is designed to prevent the recurrence of non-conformities or undesirable situations. It tries to make sure that existing non-conformities and situations don't happen again. It tries to prevent recurrence by eliminating causes. Corrective actions address actual problems. Because of this, the corrective action process can be thought of as a problem-solving process.

Customer: Organizations or individuals that directly receive products or services under a commercial arrangement. Depending on the business relationship, customers may include clients, purchasers, retailers, consumers, end-users, or other recipients of the products or services.

Customer Requirements: Those requirements are agreed between the Entity and their customer(s) in writing either through contract, addendum to a contract, purchase order or other type of official trading relationship agreement document.

D

Day of Rest: No less than 24 consecutive hours without work. Work includes any training, being on call.

Day Off: When workers are scheduled not to work. This does not include medical leave and vacation days.

Debt Bondage: The status or condition of a debtor arising from a pledge by the debtor of his or her personal services or of those of a person under his or her control as a security for debt if the value of those services as reasonably assessed is not applied toward the liquidation of the debt or the length and nature of those services are not respectively limited and defined. (Source: US code – title 22: foreign relations and intercourse – chapter 78: trafficking victims' protection)

Defined Worker Group: A type of worker defined by the type of contract the worker has with the employer. Local labor law limits some worker groups in contract duration, or percent total workforce. Examples of worker groups are temporary workers, student workers, apprentices, dispatch workers, permanent workers or workers with definite or fixed contract duration.

Desktop Closure Assessment: Corrective actions are reviewed remotely by an approved Assessment Firm for Assessment Criteria specifically approved in the Assessor Guidance.

Direct Workers: Workers who have a formal employment relationship with the Entity.

Disability: Can be physical, emotional and/or mental (e.g., ADHD, dyslexia, PTSD, diseases, social disorder).

Discrimination: Different treatment of people based on race, color, age, gender, sexual orientation, gender identity and expression, ethnicity or national origin, disability, pregnancy, religion, political affiliation, union membership, covered veteran status, protected genetic information or marital status. This includes actions for hiring and employment practices such as wages, promotions, rewards, and access to training.

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Draft Assessment Report: The Assessment Report completed after an Assessment, which is not yet in its final AQM-approved version.

Due Diligence: An ongoing, proactive, and reactive process to identify and address actual or potential risks to prevent or mitigate risks of contributing to adverse impacts associated with their activities.

E

Effectiveness: The degree to which a planned result is achieved. Planned activities are effective if these activities are realized. Similarly, planned results are effective if these results are actually achieved.

Efficiency: A relationship between results achieved (outputs) and resources used (inputs). Achieving more with the same or fewer resources can enhance efficiency. The efficiency of a process or system can be enhanced by achieving more or getting better results (outputs) with the same or fewer resources (inputs).

Emergency or Unusual Situations: Situations that are unpredictable events that require overtime in excess of legal or RBA limits. Such events cannot be planned for or foreseen. Examples of such situations include:

- Equipment breakdown, power failure or other emergency resulting in prolonged shutdown of a production line.
- Unforeseen raw material or component shortages or quality issues that shut down production.
- Excessive overtime may then be needed in both situations to recoup lost production time and meet customer commitments.

In all of these cases evidence of FEWER hours worked before a period of excessive production in Emergency or Unusual Situation is present and documented. The site has a documented plan to recover from the emergency situation and bring working hours back into conformance. During the implementation period of the documented recovery plan the site will be deemed in conformance.

Situations that are NOT “Emergency” or “Unusual” include, but are not limited to:

- Peak season production demands and new product ramps.
- Contract change orders that significantly increase order volumes or shorten delivery timelines.

Engineering Controls: Reduce or prevent hazards from coming into contact with workers. Engineering controls can include modifying equipment or the workspace, using protective barriers, ventilation, and more. Include exhaust ventilation, enclosures, etc. (source: US National Institute for Occupational Safety and Health (NIOSH)

Environmental Medium: Soil, water, air, biota (plants and animals), or any other parts of the environment that can contain contaminants.

Entity: A company whose Entity site is the subject of the Assessment.

Entity Feedback Survey: A survey provided to the Entity after the Assessment has been completed in order to get their feedback on the Assessment process and the Assessors’ conduct.

ERT: Emergency Response Technician, a qualified first responder assigned by the Entity with appropriate training, tools, and PPE.

ERT Members: Staff and/or Workers, usually part of a team, involved in controlling, cleaning up, and disposing of hazardous materials or other emergency response processes (e.g., firefighting). An ERT might not exist in some cases, but the justification shall be available and valid.

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Exit: The portion of an exit route that is generally separated from other areas to provide a protected way of travel to the exit discharge. An example of an exit is a two-hour fire resistance-rated enclosed stairway that leads from the fifth floor of an office building to the outside of the building.

Exit Access: Portion of an exit route that leads from any occupied portion of a building or structure to an exit. An example of exit access is a corridor on the fifth floor of an office building that leads to a two-hour fire resistance-rated enclosed stairway (the Exit).

Exit Access Door: A door along the exit route such as where the exit route enters another intervening room, corridor, stairway or ramp.

Exit Discharge: The part of the exit route that leads directly outside or to a street, walkway, refuge area, public way, or open space with access to the outside. An example of an exit discharge is a door at the bottom of a two-hour fire resistance-rated enclosed stairway that discharges to a place of safety outside the building.

Exit Discharge Door: A door that is at the end of an exit route that discharges to a place of safety outside the building. In other words, a door that serves as the exit discharge.

Exit Route (or Means of Egress): A continuous and unobstructed path of exit travel from any point within a workplace to a place of safety (including refuge areas). An exit route consists of three parts: The exit access; the exit; and the exit discharge.

Exploitative Prison Labor: Exploitative means taking advantage unfairly of a situation to gain benefit, Exploitative Prison Labor means working conditions which prisoners have to accept even though they do not meet acceptable standards. In the context of RBA exploitative prison labor shall mean any working condition which does not meet the minimum RBA code provisions and which a prisoner has to accept given his or her condition.

External Observer: An individual from a customer or HQ/regional office of the Entity who is present during the Assessment.

F

Feedback Surveys: Surveys provided to a specific party to gain their feedback on the Assessment.

First Response Equipment: First response equipment is those tools and equipment used to respond to serious work accidents or incidents. These include eye washing stations, emergency showers, fire blankets, defibrillators.

Forced or Compulsory Labor: All work or service that is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily. The term forced or compulsory labor shall not include (a) any work or service exacted in virtue of compulsory military service laws for work of a purely military character; (b) any work or service which forms part of the normal civic obligations of the citizens of a fully self-governing country; (c) any work or service exacted from any person as a consequence of a conviction in a court of law, provided that the said work or service is carried out under the supervision and control of a public authority and that the said person is not hired to or placed at the disposal of private individuals, companies or associations; (d) any work or service exacted in cases of emergency, that is to say, in the event of war or of a calamity or threatened calamity, such as fire, flood, famine, earthquake, violent epidemic or epizootic diseases, invasion by animal, insect or vegetable pests, and in general any circumstance that would endanger the existence or the well-being of the whole or part of the population; (e) minor communal services of a kind which, being performed by the members of the community in the direct interest of the said community, can therefore be considered as normal civic obligations incumbent upon the members of the community, provided that the members of the community or

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their direct representatives shall have the right to be consulted in regard to the need for such services. (Source: ILO Convention (No. 29) concerning Forced or Compulsory Labor)

Foreign Migrant Worker: A worker who migrates from their habitual place of residence to another country, for specific purposes of employment. Foreign migrant worker includes (but not limited to) worker who:

- is recruited from their habitual place of residence for employment, or
- presents themselves for employment in a country other than their habitual place of residence.

Formal Interview: When the Assessors select and interview certain individuals, typically in a conference room.

G

GDPR - General Data Protection Regulation: A regulation in EU law on data protection and privacy for all individuals within the European Union and European Economic Area. It also addresses the export of personal data outside the EU and the EEA areas.

GHG - Greenhouse Gas: A gas in an atmosphere that absorbs and emits radiation within the thermal infrared range. This process is the fundamental cause of the greenhouse effect. Greenhouse gases are carbon dioxide, methane, water vapor, and nitrous oxide but also include the chlorofluorocarbons (CFCs), hydrofluorocarbons (HFCs), and Perfluorocarbons (PFCs), as well as sulfur hexafluoride (SF6).

GHS – Globally Harmonized System of Classification and Labeling of Chemicals: The United Nations (UN) adopted the Globally Harmonized System of Classification and Labeling of Chemicals (GHS). The GHS includes criteria for the classification of health, physical and environmental hazards, as well as specifying what information should be included on labels of hazardous chemicals as well as safety data sheets.

GWP – Global Warming Potential: GWP is expressed as a factor of carbon dioxide (whose GWP is standardized to 1). For example, the 20-year GWP of methane is 86, which means that if the same mass of methane and carbon dioxide were introduced into the atmosphere, that methane will trap 86 times more heat than the carbon dioxide over the next 20 years.

H

Habitual Place of Residence: The place where the worker lives regularly, or deemed to have long-term residence, prior to employment. The worker holds citizenship, permanent residency, or other legal status permitting long-term residence and employment in the country. It may or may not be the place of birth of the worker.

Hazardous Chemical: The term hazardous chemical includes any chemical which has been classified as hazardous in accordance with applicable national or international standards or for which relevant information exists to indicate that the chemical is hazardous. Systems and specific criteria appropriate for the classification of all chemicals according to the type and degree of their intrinsic health and physical hazards and for assessing the relevance of the information required to determine whether a chemical is hazardous shall be established by the competent authority, or by a body approved or recognized by the competent authority, in accordance with national or international standards. The hazardous properties of mixtures composed of two or more chemicals may be determined by assessments based on the intrinsic hazards of their component chemicals. (ILO, 1990)

Human Rights: In the context of RBA Assessments, it means, at a minimum, the respect and protection of workers' rights within the Entity, its service providers, suppliers, and customers.

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HVAC: Heating, Ventilation, and Air Conditioning: The technology of indoor and vehicular environmental comfort. Its goal is to provide thermal comfort and acceptable indoor air quality.

I

IFPC - Industry Focus Process Chemicals: Includes chemical mixtures that contain any of the following ingredients:

- Bromopropane (CAS No. 106-94-5)
- Benzene (CAS No. 71-43-2)
- Dichloromethane (CAS No. 75-09-2)
- Methanol (CAS No. 67-56-1)
- n-Hexane (CAS No. 110-54-3)
- N-Methyl-Pyrrolidone (NMP) (CAS No. 872-50-4)
- Tetrachloroethylene (CAS No. 127-18-4)
- Toluene (CAS No. 108-88-3)
- Trichloroethylene (CAS No. 79-01-6)
- Cumene (CAS No. 98-82-8)
- 1,2-Dichloroethane (CAS No. 107-06-2)
- Diethylene Glycol Dimethyl Ether (CAS No. 111-96-6)
- Dimethylformamide (CAS No. 68-12-2)
- Ethoxyethanol (CAS No. 110-80-5)
- Ethoxyethyl Acetate (CAS No. 111-15-9)
- Ethylbenzene (CAS No. 100-41-4)
- 2-Methoxyethanol (CAS No. 109-86-4)
- Methyl Isobutyl Ketone (CAS No. 108-10-1)
- Nitromethane (CAS No. 75-52-5)
- Pentachloroethane (CAS No. 76-01-7)
- 1,1,1,2-Tetrachloroethane (CAS No. 630-20-6)
- 1,1,2,2-Tetrachloroethane (CAS No. 79-34-5)
- Tetrahydrofurfuryl Alcohol (CAS No. 97-99-4)
- Trichloromethane (CAS No. 67-66-3)
- Xylenes (CAS No. 1330-20-7)

Illness: For the purpose of RBA Assessments, illness shall mean occupational illness, which is a disease resulting from exposure during employment to conditions or substances that are detrimental to health.

Immediate Containment Actions: Immediate steps taken to ensure control and safety in situations where findings have been deemed dangerous.

Imminent Harm: Situations where a worker believes that death or serious physical harm could occur within a short time, for example before a responsibly person or authority could investigate and correct the problem. The harm caused by the hazard does not have to happen immediately, however the threat must be immediate or imminent.

Indirect Workers: Workers who have a formal employment relationship with a labor agent or contractor or is an individual contractor, and performs work or provide services to the Entity.

Individually Secured Storage: Storage for personal and valuable items protected from unauthorized access and accessible to the workers at any time.

Industrial Air Emissions: The gases and particles which are put into the air or emitted by industrial facilities, known as point sources. (EPA, 2023)

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Industrial Relations: Relationships and processes between a worker and/or their representative and the employer and/or management related to the organization of work, employment contracts, human resource management, employment relations, conflict management and attitudes and behaviors at work.

Industrial Wastewater: Used water of reduced quality discharged from a site. It is usually contaminated in its raw state, but should be treated, either on site, or delivered (by pipe or truck) to an authorized wastewater treatment Entity. Treated wastewater should be legally compliant and of a high enough quality to present no risk to the receiving water body (or land where applicable). Safe or treated wastewater may be re-used on site, or by other users to reduce original water demand and/or wastewater discharge volumes. (Stewardship, 2023)

Informal Interview: When the Assessors have brief interactions with individuals at their place of work or in other areas of the Entity, typically during the walk through.

Initial Assessment: RBA Assessments that are conducted either as a first Assessment, when their Assessment expires, or as required by companies, as opposed to Closure Assessments.

Inhumane Treatment: Includes any form of harassment, violence, gender-based violence, sexual harassment, sexual abuse, corporal punishment, mental or physical coercion, bullying, public shaming or verbal abuse, as well as withdrawal of basic physical comforts provided to other workers or isolation of families.

Injury: Injury means damage caused to the body of a worker/employee.

Inspection: Observation, measurement, testing and judgment to evaluate conformity.

Intern: A person participating in a practical work placement that is required or formally credited toward licensing, professional qualification, or an educational institution's program by the relevant institution or qualification body, but is not assigned, formally approved, monitored, or otherwise administered by the educational institution.

Routine onboarding, probationary training, company-designed trainee programs, or ordinary job training does not qualify as internship.

Internal Audit: A process by which an organization demonstrates independent assurance that their own organization's risk management, governance and internal control processes are operating effectively.

Internal Migrant Worker: A worker who, for employment purposes, relocates from their habitual place of residence to another location within the same country, and as a result, establishes temporary residence in the new location. Internal migrant worker includes (but not limited to) worker who:

- is recruited from their habitual place of residence for employment in another locality within the country, or
- is displaced or assigned employment in another locality within the country, or
- presents themselves for employment in another locality within the country other than their habitual place of residence.

Internal Observer: An individual from the Entity who is present during the Assessment.

Interviews: When the Assessors speak to Entity workers in an attempt to gather information about the Entity, the working conditions, worker treatment, etc.

Involuntary Servitude: A condition of servitude induced by means of (a) Any scheme, plan, or pattern intended to cause a person to believe that, if the person did not enter into or continue in such condition, that person or another person would suffer serious harm or physical restraint; or (b) the abuse or threatened abuse of the legal process. (Source: US code – title 22: foreign relations and intercourse – chapter 78: trafficking victims' protection)

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IP - Intellectual Property: Intellectual property (IP) refers to creations of the mind, such as inventions; literary and artistic works; designs; and symbols, names and images used in commerce. (World Intellectual Property Organization – WIPO)

Irrelevant Sensitive Information: Confidential information that is not necessary to evaluate conformance against an Assessment Criterion. This may include names or other identifying information of company or brands with whom the Entity currently does, has done, or may do business with, brand/company specific product information, product designs, research and development projects, third-party confidential information, business plans, or business opportunities.

J

Juvenile Worker: See Young Worker.

K

Key People: Individuals of the Entity management team that may be interviewed during the Assessment and may be present during the opening and closing meeting. These may include HR Staff, ESH Staff, GM, Operations Lead, etc.

KPI - Key Performance Indicator: A metric or measure. KPIs are used to quantify and evaluate organizational success. They measure how much success has occurred and how much progress has been made relative to the objectives. KPIs are also used to set measurable objectives, evaluate progress, monitor trends, make improvements, and support decision-making. KPIs should be quantifiable and appropriate and should collect information that is useful to the organization and relevant to the needs and expectations of interested parties. Examples of KPIs include the following: employee turnover rate, average hours worked per week, average time to closure of non-conformities, lost workday case rate, employee satisfaction survey score, and energy costs per unit of production.

L

Labor Agent: A business that supplies workers to the Entity under an agreement. These workers have an employment relationship with the labor agent, but their day-to-day work is under the direction, supervision, or control of the Entity.

Labor Agent/Contractor and Service Provider Audits: Audits conducted at Labor Agents or Service Providers. These audits may have a different scope and may utilize a different audit protocol.

Lead Assessor: Assessors who have the qualifications/meet the requirements defined by the RBA that supervise all Assessors and the Assessment process while the Assessment is being conducted.

Listed Panic Hardware, or Panic Hardware: Devices used on exit route doors (i.e., Exit Access Doors, Exit Discharge Doors) that are designed to provide building occupants fast and easy egress in an emergency. An example would be a door-locking assembly that can be released quickly by pressure on a horizontal bar. These devices must be 'listed' which means they are certified to conform to an international and / or the local standard which at least, requires all exit discharge doors to be a single motion exit, or have Listed Panic Hardware installed which is pushed open in a single motion standard such as UL 305 – a Standard for Panic Hardware or equivalent. Panic hardware that is installed on fire rated doors (aka Fire Exit Hardware) must also be listed in accordance with an international and / or the local standard, such as UL 10C - a Standard for Positive Pressure Fire Tests of Door Assemblies or equivalent.

Local Worker: A worker who works in their habitual place of residence.

Low Month: The month in which the fewest hours are worked by employees of an Entity. For a manufacturing environment, typically, this is the month is which the least amount of product is produced.

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M

Major Change: A change to the Entity which invalidates the Assessment due to the fact that there is a high probability that impact that workers may be different from what the previous Assessment indicated.

Examples of a 'major change' may include, but are not limited to:

- Significant change in machinery, operation or product
- Change of management
- Change of ownership
- Change of management system
- Change of site/location

Management: All the activities that are used to coordinate, direct, and control an organization. In this context, the term management does not refer to people, it refers to activities (the term top management refers to people).

Management Review: The overall purpose of a management review is to evaluate the suitability, adequacy, and effectiveness of an organization's labor, health and safety, environment and ethics management system, and to look for improvement opportunities. Management reviews are also used to identify and assess opportunities to change an organization's policies and objectives, to address resource needs, and to look for opportunities to improve its responsible business performance.

Management System: A set of interrelated or interacting elements that organizations use to implement policy and achieve objectives.

Membership Compliance Program: The requirements and duties that companies must adhere to as members of the RBA.

Member Companies: Organizations that are members of RBA. These companies are held accountable to a common Code of Conduct and utilize a range of RBA training and assessment tools to support continuous improvement in the social, environmental and ethical responsibility of their supply chains.

Mitigation Plan: The planning process for identifying and implementing actions to reduce or eliminate adverse impacts.

Muster Point (or Emergency Assembly Point or Assembly Point): A designated, indoor or outdoor safe place or area where all building occupants assemble in case of an emergency.

N

Natural Resources: Includes water, fossil fuels, minerals, and virgin forest products.

Night Work: All work which is performed during a period of not less than seven consecutive hours, including the interval from midnight to 5 a.m. (ILO Convention 171)

Night Work for Young Workers: In the case of young persons under sixteen (16) years of age, this period shall include the interval between ten o'clock in the evening and six o'clock in the morning. (ILO Convention 90). In the case of young persons who have attained the age of sixteen years but are under the age of eighteen years, this period shall include an interval prescribed by the competent authority of at least seven consecutive hours falling between ten o'clock in the evening and seven o'clock in the morning.

Non-compliance: Findings related to legal requirements.

Non-conformance: Findings related to the RBA Assessment Criteria.

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O

Objective Evidence: Data that shows or proves that something exists or is true. Objective evidence can be collected by performing observations, measurements, tests, or by using any other suitable method.

Observer Feedback Survey: A survey provided to the observer of an Assessment in order to get their feedback on the Assessors and the general Assessment process.

ODS - Ozone Depleting Substances: Substances or materials containing Chlorofluorocarbons (CFCs), Hydrochlorofluorocarbons (HCFCs), Hydrobromoflurocarbons (HBFCs), Halons, Methyl bromide, Carbon tetrachloride and Methyl chloroform. They can mostly be found in refrigerants, foam blowing agents, components in electrical equipment, industrial solvents, solvents for cleaning (including dry cleaning, Aerosol spray propellants, fumigants.

OECD: Organisation for Economic Co-operation and Development

Off Limits: Areas of the Entity that have been pre-approved to be excluded during the Assessment.

OSP - On-site Service Provider: A third-party company or individual contractually engaged to perform services, not related to the Entity's core business, physically at the Entity's premises in support of ongoing business operations.

An on-site service provider is within Assessment scope when all of the following conditions are met:

1) Contractual obligation exists between the service provider and the Entity.
2) Service is physically delivered onsite at the Entity's location.
3) Service is delivered in a regular, fixed, and ongoing manner, by dedicated staff.

Services may include, but are not limited to, security, janitorial, canteen, medical, landscaping, waste management.

Exclusions – The following are not considered on-site service providers within Assessment scope:

- One-time, ad-hoc or project-based activities, such as:
    - Facility demolition, new building construction, renovation, or temporary maintenance
    - Tool or equipment installation and related technical support
    - Logistics setup, electrical projects, painting, or HVAC projects
- Professional consultants and other services performed only by professional employees

Outsourced Process: Any process that is part of an organization's management system but is performed by a party that is external to the organization.

Overtime Hours: Paid work hours that are in addition to the standard number of work hours per day or week specified by local or country law. Some laws define overtime as any time beyond the standard number of work hours per day, while others consider overtime to be only the number of work hours that exceed the standard number of work hours per week. Workers must be paid at a premium rate of at least 125%, or as defined per applicable law.

P

Peak Month: The month in which the most hours are worked by employees of the Entity. For a manufacturing environment, typically, this is the month in which the most product is produced.

Person Days: The number of days required for the Assessor to conduct the Assessment.

Physically Demanding Work: Prolonged standing, heavy lifting, monotonous and awkward working postures, lifting of heavy loads, vibrations, etc. (Source: UN)

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Policy: An organization's policy defines top management's commitment to labor, health and safety, environment and ethics. A policy statement should describe an organization's general labor, health and safety, environment and ethics orientation, and clarify its basic intentions. Policies should be used to generate objectives and should serve as a general framework for action. Policies can be based on the RBA Code of Conduct and should be consistent with the organization's other policies.

Preventive Action: Steps that are taken to remove the causes of potential non-conformities or potential situations that are undesirable. The preventive action process is designed to prevent the occurrence of non-conformities or situations that do not yet exist. It tries to prevent occurrence by eliminating causes. While corrective actions prevent recurrence, preventive actions prevent occurrence. Both types of actions are intended to prevent non-conformities. Preventive actions address potential problems, ones that haven't yet occurred.

Priority Closure Assessment: Closure Assessment for Priority Findings.

Prison Labor: The contracting out of prison labor or forcing prisoners to work for profit- making enterprises. (Source: ILO Jurisprudence)

Procedure: A way of carrying out a process or activity. Procedures may or may not be documented. However, in the context of RBA Assessments, procedures must be documented. Otherwise, the requirement will refer to a Process.

Process: A set of activities that are interrelated or that interact with one another. Processes use resources to transform inputs into outputs. Processes are interconnected because the output from one process becomes the input for another process. In effect, processes are "glued" together by means of such input output relationships. For example, the output from a risk assessment process is the input to an organization's objective setting process. Organizational processes should be planned and carried out under controlled conditions. An effective process is one that realizes planned activities and achieves planned results.

Process Based Management System: Uses a process approach to manage and control how its labor, health and safety, environment and ethics policies are implemented and how its improvement objectives are achieved. A process-based management system is a network of interrelated and interconnected processes.

Process Approach: The process approach is a management strategy. When managers use a process approach, it means that they manage the processes that make up their organization, the interaction between these processes, and the inputs and outputs that tie these processes together.

Process Chemical: Includes chemicals (individual chemicals or mixtures) used during the manufacture of a product and/or maintenance of related production equipment that are not intentionally fully incorporated into the product. Examples of process chemicals include cleaning agents, solvents, lubricants, photo chemicals, plating agents, refrigerants, hydraulic fluids, adhesives, inks, coatings, etc.

Professional Employee: Employees who are engaged in work that is predominantly intellectual and varied in character as opposed to more routine mental, manual or physical work.

Professionalism: The Assessors are following the Assessment protocols and are using the correct tools, are treating the Entity with respect, and are responsive to all pertinent requests.

Program: A program is a collection of organizational resources that is geared to accomplish a certain major goal or set of goals. A program is also defined as an ongoing set of activities, processes and procedures internal to the organization.

Q

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QM - Quality Management: An RBA process which monitors the integrity of the Assessment and the Assessment Report, as well as the quality and consistency of the Assessment Report issued.

R

RBA - Responsible Business Alliance: A coalition of companies driving sustainable value for workers, the environment and business throughout the global supply chain.

RBA Code - RBA Code of Conduct (RBA Code): A set of standards defined by the RBA on social, health and safety, environmental and ethical issues.

Receiving Country: Country in which the Entity is located.

Record: A type of document. Records provide evidence that activities have been performed or results have been achieved. Records can, for example, be used to show that traceability requirements are being met, that verification is being performed, and that preventive and corrective actions are being carried out.

Recruitment Agent: A business that identifies and refers suitable workers for employment with the Entity. These workers do not have an employment relationship with the recruitment agent.

Rehiring: When a worker's contract ends but is then re-hired by the same company after a break in employment.

Relevant Sensitive Information: Confidential information necessary to evaluate conformance against an Assessment Criterion. This may include production processes and equipment, descriptions of raw materials and components, or financial information.

Remedy: Actions to reverse adverse impacts, returning rights holders, the community and/or environment to its prior state.

Remote Closure Assessment: Assessments where the findings have been classified by the RBA as those that can be closed remotely and do not require an on-site visit from an Assessor.

Remote Assessment: Assessment activities conducted remotely by an approved Lead Assessor using real-time electronic audio-visual link(s) to the Entity.

Requirement: A need, expectation, or obligation. It can be stated or implied by an organization, its customers, or other interested parties. A specified requirement is one that has been stated (in a document for example), whereas an implied requirement is a need, expectation, or obligation that is common practice or customary. There are many types of requirements. Some of these include RBA requirements, customer requirements, management requirements, product requirements, and legal requirements.

Responsible Minerals Initiative (RMI): Responsible Business Alliance sponsored Responsible Minerals Initiative.

Retaliation: To repay like for like. There are three essential elements of retaliation: 1) Protected activity (e.g., opposition to discrimination, opposition to non-ethical behavior, or participation in a grievance process), 2) Adverse action taken by Entity or its agents, 3) Causal connection between the protected activity and the adverse action.

Risk Assessment: A systematic process of identifying hazards and evaluating any associated risks.

Root Cause Analysis: A method used to identify underlying cause(s) of a non-conformance. It is used to correct or eliminate the cause and prevent the problem from recurring. If a root cause analysis is not conducted, or conducted poorly, there is a risk that time and resources will be wasted addressing the symptoms of a problem, rather than addressing the real issue.

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S

SAQ - Self-Assessment Questionnaire: A tool used to determine a company's potential corporate responsibility risk.

Scope 1 GHG Emissions: All direct GHG emissions.

Scope 2 GHG Emissions: All indirect GHG emissions from consumption of purchased electricity, heat or steam. This does not include transportation, waste generated in operations, travel, commuting, use, or end-of-life product treatment (Scope 3).

Scope 3 GHG Emissions: All indirect GHG emissions resulting from a company's value chain.

Scope 3 GHG Emission Categories: There are 15 categories of GHG emissions:

- Category 1: Purchased goods and services.
- Category 2: Capital goods
- Category 3: Fuel- and energy-related activities
- Category 4: Upstream transportation and distribution
- Category 5: Waste generated in operations.
- Category 6: Business travel
- Category 7: Employee commuting
- Category 8: Upstream leased assets
- Category 9: Downstream transportation and distribution
- Category 10: Processing of sold products.
- Category 11: Use of sold products.
- Category 12: End-of-life treatment of sold products.
- Category 13: Downstream leased assets
- Category 14: Franchises
- Category 15: Investments

SDS: Safety Data Sheets, formally MSDS or Material Safety Data Sheets.

SEG - Similar Exposure Group: A group of workers having the same general exposure profile for the agent(s) being studied because of the similarity and frequency of the tasks they perform, the materials and processes with which they work, and the similarity of the way they perform tasks.

Semi-Announced Assessments: Assessments that are completed within 90 days after initial communication to the Entity, to whom the exact Assessment dates are not disclosed.

Sending Country: A country from which a Foreign Migrant Worker migrates for specific purposes of employment with the Entity.

Shadow Audits: Audits in which the APM or RBA has one of their own team members to observe an RBA Assessment conducted by third-party Assessors.

Significant Change: Term applied in risk assessment. A significant change is a major change of conditions, management, management system or implementation within the Entity and/or any change/deviation/modification from the current/previous scope of past risk assessments. Examples of significant change include:

- Change in process chemical concentrations or mixtures
- Change/modification in the Entity waste storage and/or treatment systems.
- Changes in an environmental permit condition
- Changes in chemicals used, hazardousness of chemicals used
- Changes in type of machinery that modify worker's risk exposure

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- Changes in site layout (e.g., internal moves, construction, expansion…)
- Changes in the senior management team of the Entity as the result of merger, acquisition, take-over, …
- Changes in organization (e.g., significant managerial re-organizations, …)

Single Motion: Within the context of emergency exits, single motion means that the door can be opened by performing one simple continuous action (e.g., pushing hardware in the direction of travel – not up or down).

- No additional steps (e.g., multiple locks or sequential latches) are permitted.

Slavery: A physical abduction followed by forced labor. (Source: ILO Jurisprudence)

Social Insurance: A system of compulsory contribution to enable the provision of state assistance in sickness, unemployment, retirement, etc.

Stakeholder / Interested Party: A person or group that has a stake in the success or performance of an organization. Interested parties may be directly affected by the organization or actively concerned about its performance. Interested parties can come from inside or outside of the organization. Examples of interested parties include customers, suppliers, owners, partners, employees, NGOs, unions, bankers, or members of the general public.

Stakeholder Identification Reports and Mapping: The activity to gain full understanding of those who may be impacted by the operations of the Entity AND how they would be impacted. When you perform a risk assessment it might be typical to only consider the workers however, there needs to:

- First there will be an understanding of all stakeholders who may be impacted (e.g., employee, staff, community, supplier, customer).
- That is followed by noting how each stakeholder might be impacted taking the form of some sort of matrix or heat map.

Student Worker: A worker enrolled in an educational institution who performs work at an Entity under a placement assigned, formally approved, monitored, or otherwise administered by the educational institution.

Substitution: Is using a safer alternative to the source of the hazard. An example is using plant-based printing inks as a substitute for solvent-based inks. (source: US National Institute for Occupational Safety and Health (NIOSH).

Suppliers: Organizations or individuals that directly provide products or services under a commercial arrangement.

Sustained Success: An organization achieves sustained success when it meets its objectives and continues to do so over the long term. Objectives can only be achieved if the organization consistently meets the needs and expectations of interested parties (stakeholders).

Surveillance Data: Pre-job, on-the-job, post-job, and post-emergency medical data.

Systems Approach: When managers use a systems approach, it means that they treat the interrelated processes that make up an organization as an integrated system and then they use this system to achieve its objectives. A system is a set of elements that are interrelated or interact with one another.

T

Time Off: Days on which workers are not required to work. Time off may be paid or unpaid, depending on the type of time off, local law and company policy.

Time Recording Device: A mechanism or system that tracks employees' time. Generally, this is an electronic system in which employees note when they start and end work. Examples include, but are not limited to,

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time clocks, software system (i.e., SAP), biometric scans, etc. This system must be accurate and reflect the number of hours worked by employees.

Timeliness: The Assessors meet all required deadlines.

Trafficking: The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery. (Source: US code – title 22: foreign relations and intercourse – chapter 78: trafficking victims' protection)

Training: Organized class or instruction on a subject such as expectations, operating machinery, policy, processes, rights, skills or safety. To be considered training there must be a record of those workers who have attended the training.

U

Unannounced Assessment: Assessments that are completed within 180 days after initial communication to the Entity, to whom the exact Assessment dates are not disclosed.

Use of Chemicals at Work: The term use of chemicals at work means any work activity which may expose a worker to a chemical, including the production, handling, storage, and transport of chemicals as well as the disposal and treatment of waste chemicals, the release of chemicals resulting from work activities, and the maintenance, repair and cleaning of equipment and containers for chemicals (ILO, 1990)

V

Validation: A process that uses objective evidence to confirm that the requirements that define an intended outcome have been met. Whenever all requirements have been met, a validated status is achieved.

Values: The general principles and beliefs that are important to an organization.

VAP - Validated Assessment Program: The flagship Assessment program of the RBA that evaluates compliance against the RBA Code requirements, applicable laws and customer requirements.

VAP Assessor Guidance: The document which explains the procedures and Assessment Criteria of the VAP.

Verification: A process that uses objective evidence to confirm that specified requirements have been met. Whenever specified requirements have been met, a verified status is achieved. There are many ways to verify that requirements have been met.

Vulnerable Worker: A worker who, because of personal circumstances, employment arrangement, legal status, economic dependence, social position, or other practical barriers, has reduced ability to protect their rights, refuse unfair treatment, access remedy, or leave abusive conditions compared to other workers.

W

Wage: Total gross remuneration, including regular bonuses, received by employees during a specified period of time for time worked as well as time not worked, such as paid annual leave and paid sick leave. Essentially, it corresponds to the concept of "total cash remuneration", which is the major component of income related to paid employment. It excludes employers' social insurance contributions. See definition of regular bonus and basic wage (ILO, Resolution concerning the International Classification of Status in Employment (ISCE) 1993).

Wage is defined as compensation for actual work performed, including piece rate and productivity allocations. Bonus is defined as an extra compensation in addition of wages for special above-normal expectation performance. Adhering to company rules or performing duties as expected cannot constitute

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being rewarded through a bonus. A payment that applies equally to all workers such as “annual bonus” will be considered as part of wage, not bonus.

Waiver: A written relinquishment of a national authority for a legal entity to comply with a specific requirement of applicable law.

Whistleblower: Any person who makes a disclosure about improper conduct by an employee or officer of a company, or by a public official or official body.

Work Environment: Working conditions. It refers to all of the conditions and factors that influence work. In general, these include physical, social, psychological, and environmental conditions and factors. Work environment includes lighting, temperature, and noise factors, as well as the whole range of ergonomic influences. It also includes things like supervisory practices as well as reward and recognition programs. All of these things influence work.

Workers (including local workers) (for other definitions, see also Foreign Migrant Workers and Professional Employee): Direct or indirect worker dedicated to the production of a good or delivery of a service.

Worker Accommodation: Accommodation provided to the workers which include:

- Purpose-built dorms
- Rented apartments or other, as permitted by the local government.

Working Hours or Hours of Work: Period of time that an individual spends performing paid occupational labor. This means the actual hours of paid “work” by an employee. What is included in Working Hours is defined in the applicable law. If what is included in Working Hours is not defined in the applicable law, then RBA accepts that breaks where workers are free (to have lunch/dinner, refreshment, rest,) and do not involve company- imposed activities such as training, or admin duties are non-working time.

Working Hours Template: Document filled out by the Entity detailing the workers’ working hours which is then verified by the Assessor during the Assessment.

Y

Young Worker: Worker aged 16 (inclusive) to 18 (exclusive) not in a work arrangement to support learning (and no arrangements with any educational institution.)

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Annex 4. Health and Safety Checklists

This Annex includes five optional checklists which expand upon the guidance provided above.

Note: These checklists are NOT assessment criteria. These are support tools for an Entity to guide their implementation of an appropriate system towards conformance to the RBA Code of Conduct.

Areas covered by the Health and Safety Checklists are:

- B1 Occupational Health Safety: Pregnant and Nursing Mothers
- B2 Emergency Preparedness: Fire Detection, alarm, and suppression
- B2 Emergency Preparedness: Fire Exits
- B4 Industrial Hygiene: Hierarchy of Controls
- B7 Food, Sanitation, and Housing: Checklist on worker Accommodations
- B.M.3: Communication – Health and Safety

- Each checklist addresses different aspects of health and safety, and each aspect is addressed under its own title and set of questions.
- For each question, three options to answer are available: Y (Yes), N (No) and N/A (Not Applicable), followed by the option to add comments.

B1 Occupational Safety – Pregnant and Nursing Mothers Checklist

Gender-responsive measures shall be taken, such as not having pregnant women and nursing mothers in working conditions, which could be hazardous to them or their child and to provide reasonable accommodations for nursing mothers.

General Policy:

	Question	Y	N	N/A	Comments
a	Adequate policies and adequate and effective processes are in place to minimize the Health & Safety impact on pregnant woman.				
b	Adequate policies and adequate and effective processes are in place to minimize the Health & Safety impact on nursing mothers.				
c	Applies to all types of workers (direct, indirect, dispatched, young, interns, apprentices, …)				

Risk assessment:

	Question	Y	N	N/A	Comments
a	Adequate and effective risk management process is in place to:				
	• Before a pregnancy is reported: assess the potential hazards to expecting mothers				
	• After pregnancy is reported: a worker-specific risk assessment of the worker's job to assess risk to mother and fetus				
	• After mother returns to work: a worker-specific post-natal risk assessment of the worker's job to assess risk to mother and possible impacts on the baby through breastfeeding				
	• All reasonable efforts must be made to minimize the risk identified in each of the 3 risk assessments				
b	General and specific to worker risk assessment must include assessment of:				

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	• Lifting/carrying heavy loads;				
	• Standing or sitting still for long lengths of time;				
	• Exposure to infectious diseases;				
	• Exposure to lead;				
	• Exposure to toxic chemicals;				
	• Work-related stress;				
	• Workstations and posture;				
	• Exposure to radioactive material;				
	• Threat of violence in the workplace;				
	• Long working hours;				
	• Extreme heat; and				
	• Excessive noise.				
c	Ante-natal risk assessment must include:				
	• Working with organic mercury;				
	• Working with radioactive materials; and				
	• Exposure to lead.				

Reasonable Accommodation:

	Question	Y	N	N/A	Comments
a	Provide reasonable or legally required break time for a worker to express breast milk for her nursing child each time such worker has need to express the milk.				
b	Provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk.				
c	Location for breastfeeding activities:				
	• Not be a toilet stall or a bathroom;				
	• Private and enclosed;				
	• Close to the workspace;				
	• Clean;				
	• Secure;				
	• Has a water supply (e.g., a sink);				
	• Has hygienic storage (e.g. a closed clean cupboard); and in case milk needs to be stored, has refrigerated storage.				

Records:

	Question	Y	N	N/A	Comments
a	Personnel files contain specific to worker pre- and ante-natal risk assessment and actions taken in line with policy				
b	General risk assessment for pregnant workers reports and actions taken (if any needed) are available for review				

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B2 Emergency preparedness – Fire Detection, Alarm and Suppression Checklist

Adequate and effective fire detection, alarm and suppression systems are in place.

Detection:

	Question	Y	N	N/A	Comments
a	Automatic heat and/or smoke detection is installed as required by insurance company or local law.				
b	Detector devices and system are in function which give relevant staff notice and allows time to evacuate.				

Alarm:

	Question	Y	N	N/A	Comments
a	All buildings have a manual or automatic fire alarm and notification system to notify people that there is an emergency in the Entity using audible and visual notifications.				
b	Fire alarm control system is free of trouble/supervisory signals. (Trouble/supervisory signals are usually indicated by orange LED lights; Yellow lights may mean a trouble or supervisory notification in the panel; Red is something in alarm or where an alarm has been silenced rather than reset).				
c	Fire alarm manual call-points or pull-stations are provided at or along egress routes to exits.				

Fire suppression:

	Question	Y	N	N/A	Comments
a	Portable fire extinguishers				
	• Installed, present, visible, and accessible.				
	• In their designated locations, fully charged and free of signs of tampering.				
	• Have a defined distance to place them based upon extinguisher type, size, and use.				
	• Inspected and fire extinguisher inspection tags are present. (Inspection record may be at the extinguisher or if the unit has a bar code / ID, then look at central records.)				
b	Automatic fire sprinklers				
	• Installed as required by insurance company or local law.				
	• Clear space (based on law / insurance company requirement, or at least 36" if there is no law / insurance company requirement) is maintained under sprinkler head in manufacturing and warehouse spaces, with nothing hanging from it.				
	• Large ducts or objects (based on law / insurance company requirement, or > 48" in a single dimension if there is no law / insurance company requirement) does not obstruct sprinkler heads.				

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	• Valves are locked in their normal position (open or closed). Normally open sprinkler control valves are locked in the fully open position. There should be process during work/construction for ensuring properly off or on (e.g. hot work) and after ensuring the sprinklers are back on.				
	• Fire pumps are set to run automatically.				
c	Fire hose inspection tags are present that indicate they have been inspected. (Inspection record may be at the hose/valves etc. or if the unit has a bar code / ID, then look at central record)				
d	Fire water tank and water pressure are normal.				
e	Asbestos-containing fire-suppression materials—for example, blankets—are prohibited.				

Process

	Question	Y	N	N/A	Comments
a	Automatic fire sprinklers (if required by law or insurance company), portable fire extinguishers, heat, and smoke detection (if required by law or insurance company), and an alarm and notification system are inspected, tested, and maintained for good state of operation on a regular basis, as required by insurance company or common practice.				

Records:

	Question	Y	N	N/A	Comments
a	Inspection for portable fire extinguishers				
	• Inspection frequency is not less than monthly to check if they are present, visible, and accessible				
	• A schedule for inspections, testing and maintenance is present and there must be verification that it is followed. It should be immediately available.				
b	Inspection frequency for single unit smoke detectors is not less than every six (6) months.				
c	All other fire safety equipment				
	• Inspection, testing, and maintenance frequency is not less than that required/recommended by the manufacturer, local code or insurance company whichever is more stringent.				
	• A schedule for inspections, testing and maintenance is present and there must be verification that it is followed. It should be immediately available.				

	• The inspection, testing and maintenance procedure, frequency and results are documented				

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B2 Emergency Preparedness – Fire Exits Checklist

Effective emergency exit access, exits, and exit discharge are adequate in number and location, readily accessible, and properly maintained. Clear and unobstructed egress (i.e. Exit access, exit, and exit discharge):

	Question	Y	N	N/A	Comments
a	Exit routes:				
	• Adequate in number from every area and effective.				
	• Separated by an appropriate distance and do not share a common exit.				
	• Clear of obstructions				
b	Exit discharges:				
	• Discharge to open space/parking lot, and do NOT discharge to an enclosed/gated/locked area				
	• Open out to the public way and do not exit into a courtyard, tank farm, etc.				
	• All exit discharge doors have listed panic hardware installed or able to be pushed open in a single motion.				
c	Exits				
	• Are free of material storage; and enclosures are not used for any other purpose except for egress				
	• If an exit has a dual use (e.g. moving materials), a process is present to ensure the goods going through are not hazardous and the exit is not obstructed.				
	• Evacuation maps show locations of exit routes, exits, and exit discharges, and are consistent with their actual locations.				
d	Exit access doors and exit discharge doors				
	• Open in the direction of fire egress if they serve high occupancy (>50) or hazardous areas (include chemical and electrical room)				
	• Are sufficient in number (based on law requirement; if there is no law requirement, it is suggested to have at least 2 exits for >50 occupants, and more exits required for higher number of occupancy)				
	• Are not blocked, and the path is clear.				
	• Open without using a key, badge, code, special knowledge, or effort, and available at all times (i.e. not just during an alarm).				

	• Do not require multiple steps to open.				
	• Do not require a tight grasp to open.				
	• Are not equipped with any additional locking arrangement that restricts egress or could be used to restrict egress.				
	• Can be opened without reliance on any external trigger to release the door for emergency egress.				
	• Are not rolling doors that open vertically, except with an egress feature at/next to it that opens in the direction of egress if the rolling doors have to act as an exit.				
	• Are not sliding doors, except with a safety feature that allows the door to swing full open in the direction of egress.				

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e	Any door labeled as "Exit" follows the requirement of exit access doors / exit discharge doors.				

Exit Signs & Lighting:

	Question	Y	N	N/A	Comments
a	Exit signs				
	• Are provided to mark exits on every floor.				
	• Additional exit and/or directional signs (e.g. sign or arrow on the floor) are provided at a regular frequency at main passageways/aisles, long corridors and at other locations where the way to the nearest exit is not clear.				
	• Are not required if a door is not a required exit.				
	• Are illuminated and/or lighted in the event of a power failure				
	Note: There are times when the path is not intuitive, and a door may need labeled "NOT AN EXIT."				
b	• Emergency lighting				
	• Provided and installed to illuminate means of egress in the event of a power failure.				
	• Provides adequate, functional emergency lighting in stairs, aisles, corridors, ramps, and passageways leading to exits, and in other areas as required by applicable laws.				
	• Generally supposed to have ~1 foot-candle of light along the pathway.				
	• Either battery or backup generator may power emergency lighting.				
	• Random testing of 3 – 4 emergency lights shows that they are functioning.				

Separation:

	Question	Y	N	N/A	Comments
a	Penetrations are limited to sprinkler pipes, standpipes, and electrical services, pipe and duct installation serving the enclosures				
b	Inspection of pipes going through a wall confirm that there is fire-stopping material/putty (typically brick-red in color) are used at through-penetrations and joints, and there are no voids in construction. A process to ensure sealing through-penetrations and joints is included as part of a post construction checklist.				
c	Openings into the enclosures are protected by fire-rated doors or window.				
d	Fire doors are in good condition, self-closing, or automatic closing (upon fire alarm or detection of smoke) .				
e	Random testing of fire doors shows that the latching is functioning. If door is normally closed, then pull open and release / let go and see if it closes and latched by itself. If door is normally held open (e.g. magnetic) then pull it away and see if it closes and latches.				
f	Inspection procedure / records of fire doors shows that latching is tested regularly.				
g	The integrity of exit enclosures is maintained. A firewall is usually a masonry wall or distinctly separating unique areas (or through a				

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	floor). The Health and Safety person responsible is able to point out which one is the firewall.				

Process:

	Question	Y	N	N/A	Comments
a	Adequate and effective process in place to ensure effective emergency exit access, exits and exit discharge with unobstructed egress in place.				
b	The process includes an assessment of emergency exits after making even minor modifications, tool movements and/or construction in the Entity.				

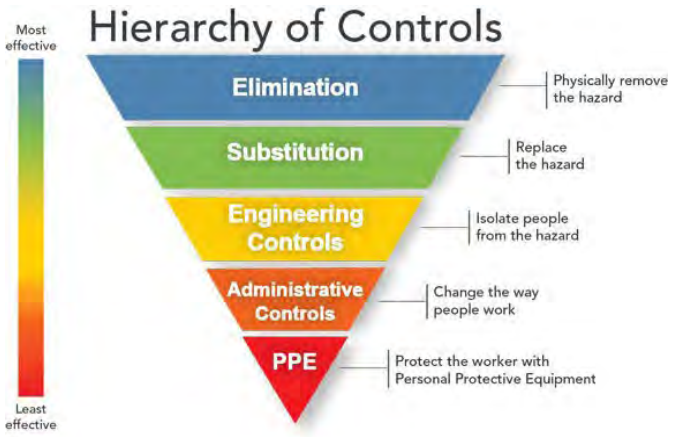
Records:

	Question	Y	N	N/A	Comments
a	Inspection records for emergency support facilities (emergency lighting, emergency exit signs, evacuation paths, exit enclosures, etc.) are maintained showing when / where / how it is done / inspected / maintained / tested / replaced.				
b	Inspection records for emergency support facilities show that these are inspected as per insurance requirements, or local practice whichever is stricter.				
c	Review of insurance companies and local authorities visit reports (if applicable, usually visit conducted annually, or if occupancy changed or if building construction / renovation affects over a certain area e.g. >200 ft^2) shows no nonconformance issues				

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B4 Industrial Hygiene – Hierarchy of Controls Checklist

Worker exposure to chemical, biological, and physical agents shall be identified, evaluated, and controlled according to the Hierarchy of Controls. When hazards cannot be adequately controlled, workers shall be provided with and use appropriate, well-maintained, personal protective equipment free of charge.



Source: NIOSH.

Site Observation:

	Question	Y	N	N/A	Comments
a	Adequate controls to reduce or eliminate worker exposure to chemical, biological and physical agents are in place and effective including:				
	• Proper design (elimination and/or substitution)				
	• Engineering controls (e.g. exhaust, ventilation, enclosures etc.)				
	• Administrative controls (e.g. limiting worker exposure time; job rotation etc.)				
	• Adequate and effective PPE				
b	Controls are implemented based on applicable legal requirements and result of risk assessments.				
d	During normal working hours, workplace is free from obvious odor, visible fumes, dust, and other conditions leading to potential unhealthy feelings (e.g. irritating chemical smell, eye irritating fume, etc.).				

Risk assessment:

	Question	Y	N	N/A	Comments
a	Adequate and effective risk assessment with associated industrial hygiene sampling and testing is in place to identify and assess the potential hazards of chemical, biological, or physical agents.				
b	Significant Change has been defined in the risk assessment policy and procedure (e.g. introduction, elimination or change of a chemical).				

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c	The risk assessment is updated when a Significant Change occurs.				
d	Risk assessment includes exposure to multiple chemicals:				
	Risk of combination effects of chemicals mixture are assessed.				
	Risk of chemicals by a single route as well as multiple routes are assessed. A route can be inhalation, ingestion, skin exposure, etc.				

Control program:

	Question	Y	N	N/A	Comments
a	Adequate and effective program to control the identified potential hazards to chemical, biological, or physical agents based on applicable legal requirements and result of risk assessment is in place.				
b	The program to control identified potential hazards follows the hierarchy of controls from most effective to least effective.				
c	Regular evaluation plan to verify the effectiveness of implemented controls and corrective actions if required.				
d	Frequency to evaluate effectiveness of implemented controls is at least every three (3) years unless a major change or applicable law requires re-evaluation.				

Records:

	Question	Y	N	N/A	Comments
a	Medical surveillance records are available for review pertaining to:				
	• Respiratory evaluations to determine if worker is being harmed from exposure to agents				
	• Determining hearing loss				
	• Any other medical concerns related to specific job activities, such as skin contact, hearing loss, radiation				

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B7 Food, Sanitation and Housing – Worker's Accommodation Checklist

Worker dormitories provided by the Entity and/or via a labor agent shall be maintained to be clean and safe, and provided with appropriate emergency egress, hot water for bathing and showering, adequate lighting, and adequate conditioned ventilation, individually secured accommodations for storing personal and valuable items, and reasonable personal space along with reasonable entry and exit privileges.

General regulatory framework:

	Question	Y	N	Comments
a	Have the international / national / local regulatory frameworks been reviewed?			
b	Are mandatory provisions on workers' accommodation identified and implemented?			

Standards for workers' accommodation:

	General living facilities	Y	N	Comments
a	Is the location of the facilities designed to avoid flooding or other natural hazards?			
b	Is workers' accommodation located within a reasonable distance from the worksite?			
c	Is transport provided to worksite safe and free?			
d	Are the living facilities built in adequate material, kept in good repair, and maintained clean and free from rubbish and other refuse?			
	Drainage			
a	Is the site adequately drained?			
	Heating, air conditioning, ventilation, and light			
a	Depending on climate are living facilities provided with adequate heating, ventilation, air conditioning and light systems?			
	Water			
a	Do workers have easy access to a supply of clean/potable water in adequate quantities?			
b	Does the quality of the water comply with the national / local requirements or WHO standards?			
c	Are tanks used for the storage of drinking water constructed and covered as to prevent water stored therein from becoming polluted or contaminated?			
	Wastewater and solid waste			
a	Are wastewater, sewage, food, and any other waste materials adequately discharged in compliance local or World Bank standards and without causing any significant impacts on camp residents, the environment, and the surrounding communities?			

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b	Are specific containers for rubbish collection provided and emptied on a regular basis?			
c	Is pest extermination, vector control and disinfection conducted throughout the living facilities?			
	Rooms/dormitories facilities			
a	Are the rooms/dormitories kept in a clean and good condition?			
b	Are the rooms/dormitories aired and cleaned at regular intervals?			
c	Are the rooms/dormitories built in easily cleanable flooring material?			
d	Are the rooms / dormitories and sanitary facilities located in the same buildings?			
e	Are residents provided with enough space?			
f	Is the ceiling height high enough?			
g	Is the number of workers sharing the same room/dormitory minimised?			
h	Are the doors and windows lockable and provided with mosquito nets when necessary?			
i	Are mobile partitions or curtains provided?			
j	Is suitable furniture such as table, chair, mirror, bedside light provided for every worker?			
k	Are the rooms/ dormitories adequately lit?			
l	Are separate sleeping areas provided for men and women?			
	Bed arrangements and storage facilities			
a	Is there a separate bed provided for every worker?			
b	Is the practice of “hot-bedding” prohibited?			
c	Is there a minimum space of one meter between beds?			
d	Is the use of double deck bunks minimised?			
e	When double deck bunks are in use, is there enough clear space between the lower and upper bunk of the bed?			
f	Are triple deck bunks prohibited?			
g	Are workers provided with comfortable mattresses, pillows and cleaned bed linens?			
h	Are the bed linen washed frequently and applied with adequate repellents and disinfectants (where conditions warrant)?			
i	Are adequate individually secured facilities for the storage of personal belongings provided?			
j	Are there separate storages for work clothes and PPE and depending on condition, drying/airing areas?			

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	Sanitary and toilet facilities	Y	N	Comments
a	Are sanitary and toilet facilities constructed of materials that are easily cleanable?			
b	Are sanitary and toilet facilities cleaned frequently and kept in working condition?			
c	Are toilets, showers/bathrooms and other sanitary facilities designed to provide workers with adequate privacy including ceiling to floor partition and lockable doors?			
d	Are separate sanitary and toilet facilities provided for men and women?			
	Toilet facilities			
a	Are there an adequate number of toilets and urinals?			
b	Are toilets facilities conveniently located and easily accessible?			
	Showers/bathrooms and other sanitary facilities			
a	Are the shower facilities flooring made of anti-slippery hard washable materials?			
b	Is there an adequate number of hand wash basins and showers / bathrooms facilities provided?			
c	Are the sanitary facilities conveniently located?			
d	Are shower facilities provided with adequate supply of cold and hot running water?			
	Canteen, cooking, and laundry facilities	Y	N	Comments
a	Are canteen, cooking and laundry facilities built in adequate and easy to clean materials?			
b	Are the canteen, cooking and laundry facilities kept in clean and sanitary condition?			
	Laundry facilities			
a	Are adequate facilities for washing and drying clothes provided?			
	Canteen and cooking facilities			
a	Are workers provided with enough space in the canteen?			
b	Are canteens adequately furnished?			
c	Are places for food preparation adequately ventilated and equipped??			
d	Are kitchen floors, ceiling and wall surfaces adjacent to or above food preparation and cooking areas built in non-absorbent, easily cleanable materials?			
e	Are wall surfaces adjacent to cooking areas made of fire-resistant materials and food preparation tables equipped with smooth imperious washable surface?			

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	Standards for food safety	Y	N	Comments
a	Is there a special sanitary process such as the WHO "5 keys to safer food" implemented in relation to food safety?			
b	Does the food provided contain appropriate nutritional value?			

	Medical facilities	Y	N	Comments
a	Are first aid kits provided in adequate numbers?			
b	Are first-aid kits adequately stocked?			
c	Is there an adequate number of staff/workers trained to provide first-aid?			
d	Are there any other medical facilities/services provided on site? If not, why?			
	Leisure, social and telecommunication facilities	Y	N	Comments
a	Are basic social collective spaces and adequate recreational areas provided to workers?			
b	Are workers provided with dedicated places for religious observance?			
c	Can workers access a telephone at affordable/public price?			
d	Are workers provided with access to internet facilities?			

Managing workers' accommodation:

	Management and staff	Y	N	Comments
a	Are there carefully designed a worker camp management plans and policies especially in the field of health and safety (including emergency responses), security, workers' rights, and relationships with the communities?			
b	Where contractors are used, have they clear contractual management responsibilities and duty to report?			
c	Does the person appointed to manage the accommodation has the required background, competency, and experience to conduct his mission and is he/she provided with the adequate responsibility and authority to do so?			
d	Is there enough staff to ensure the adequate implementation of housing standards (cleaning, cooking, and security in particular)?			
e	Are staff members recruited from surrounding communities?			
f	Has the staff received basic health and safety training?			
g	Are the persons in charge of the kitchen particularly trained in nutrition and food-handling and adequately supervised?			

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	Charging fees for accommodation and services	Y	N	Comments
a	Are the renting arrangements fair?			
b	Are food and other services provided for free or reasonably priced below the local market price?			
c	Is the payment in kind for accommodation and services prohibited?			

	Health and safety on-site	Y	N	Comments
a	Have health and safety management plans including electrical, mechanical, structural and food safety been designed and implemented?			
b	Has the accommodation manager a duty to report to the health authority specific diseases, food poisoning or causalities?			
c	Is there an adequate number of staff/workers trained in providing first aid?			
d	Has a specific and adequate fire safety management plan been designed and implemented?			
e	Is guidance on alcohol, drug and HIV/AID and other health risk related activities provided to workers?			
f	Do workers have an easy access to medical facilities?			
g	Have emergency plans on health and fire safety been prepared?			
h	Depending on circumstances, have specific emergency plans (earthquakes, floods, tornadoes) been prepared?			

	Security on workers' accommodation	Y	N	Comments
a	Has a security plan including clear provisions on the use of force been designed and implemented?			
b	Have security staff background been checked against previous crimes or abuses?			
c	Has security staff received clear instruction about their duty and responsibility?			
d	Has security staff been adequately trained in the use of force?			
e	Does security staff have a good understanding about the importance of respecting workers' rights and the rights of the surrounding communities and adopt an appropriate conduct?			
f	Do workers and communities have specific means to raise concern about security arrangement and staff?			

	Workers' rights, rules, and regulations on workers' accommodation	Y	N	Comments
a	Are limitations on workers' freedom of movement limited and justified?			

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b	Is an adequate transport system to the surrounding communities provided?			
c	Is the practice of withholding workers ID papers prohibited?			
d	Is freedom of association expressly respected?			
e	Are workers religious, cultural, and social backgrounds respected?			
f	Are workers made aware of their rights and obligations and provided with a copy of the accommodation's internal rules, procedures, and sanction mechanisms in a language or through a media they understand?			
g	Are house regulations non-discriminatory, fair, and reasonable?			
h	Are regulations on alcohol, tobacco and third parties' access to the camp clear and communicated to workers?			
i	Is a fair and non-discriminatory procedure to implement disciplinary procedures including the right for workers to defend themselves set up?			

	Consultation and grievance mechanisms	Y	N	Comments
a	Have mechanisms for workers' consultation been designed and implemented?			
b	Are workers provided with adequate processes and mechanisms to articulate their grievances?			
c	Are there fair conflict resolution mechanisms in place?			
d	In case where serious offences occur, are there mechanisms to ensure full cooperation with police authorities?			

	Management of community relations	Y	N	Comments
a	Have community relation management plans addressing issues around community development, community needs, community health and safety and community social and cultural cohesion have been designed and implemented?			
b	Do community relation management plans include the setting up of liaison mechanisms allowing a constant exchange of information and consultation of the surrounding communities?			
c	Is there a senior manager in charge of implementing the community relation management plan?			
d	Is there a senior manager in charge of liaising with the surrounding communities?			
e	Are the impacts generated by workers accommodation periodically reviewed, mitigated, or enhanced?			
f	Are community representatives provided with easy means to voice their opinions and lodge complaints?			

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B.M.3 Communications – Health and Safety

Site Observation

	Question	Y	N	N/A	Comments
a	Health and Safety communication clearly posted in the workplace or placed in a location identifiable and accessible by workers.				
b	Appropriate signs, placards and labels identifying hazards (chemical, physical, biological, vehicular, …) are in place.				
c	A mechanism to raise safety concerns is clearly visible.				

Record Review

1) Language

	Question	Y	N	N/A	Comments
a	All communications and training are in a language understood by the workers, including foreign migrant workers.				

2) Training

	Question	Y	N	N/A	Comments
a	Adequate and effective training program for all identified potential workplace hazards is in place following good training program practice.				
b	Health and safety training needs analysis is conducted (covers both general awareness and task specific) and is documented. It includes what the worker is expected to do with regards to workplace hazard control and in what ways.				
c	A training matrix or equivalent showing what types of training are required for various job roles or specific employees has been developed following the training needs analysis (including but not limited to mechanical, electrical, chemical, fire, and physical hazards).				
d	A training plan is in place, building on the training matrix.				
e	A training program with materials and training records is in place, adequate and up to date.				
f	Training program is up to date and maintained through a compliance calendar, work-order systems, and computer-based email/calendar system.				
g	Refresher training schedules are established and implemented as per schedule.				
h	Training program include:				
	• The correct use of appropriate PPE where applicable.				
	• Types of potential emergencies that may occur at their work location and what to do during an emergency, including internal and external muster points.				
	• Machine safety and the use of safeguards and emergency stops, where applicable.				
	• Reporting injuries and illnesses.				
	• Hazardous atmospheres and confined space work procedures prior to entry of confined spaces, if applicable.				
	• Lock out-tag out procedures, if applicable.				
i	Training is provided to all workers prior to the beginning of work.				

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j	Training is provided to all workers regularly thereafter as per the training program's refresher training schedules.				
k	Workers responsible for storage, clean up or disposal of chemical releases should receive specialized training.				
l	Occupational health professionals and first responders are trained by external agencies or trained and certified by internal qualified occupational health professionals such as medical doctor where permitted by local law.				

3) Communication

	Question	Y	N	N/A	Comments
a	Adequate and effective communication program to workers/employees is in place for all identified potential workplace hazards.				
b	Updates are made whenever new operations, chemicals, machines or process are added in the workplace or change significantly.				
c	Potential workplace hazards that workers are exposed to are clearly posted in the workplace or placed in a location identifiable and accessible by workers.				
d	Hazard communication process (all hazards present at the site and action promoting of an H&S workplace) is in place.				
e	Internal and external muster points are communicated to all employees and visitors.				

4) Safety concern notification

	Question	Y	N	N/A	Comments
a	Adequate and effective program to receive, review and respond to safety concerns reported is in place.				
b	Workers are encouraged to raise safety concerns (e.g. incentive systems, etc.).				

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5) Evaluation

	Question	Y	N	N/A	Comments
a	The training, communication and safety concern notification programs are evaluated on a regular basis not exceeding 3 years.				
b	The training, communication and safety concern notification programs are evaluated if there is a Significant Change				

6) Records

	Question	Y	N	N/A	Comments
a	Training records include a verification of training effectiveness to demonstrate that workers have understood training and aims of training are achieved (i.e. demonstrate that workers have understood training and aims of training are achieved e.g. through a post training test, or worker interviews on the training).				
b	Safety concern logs, evaluation records and action plans are in place.				
c	Communication records, logs and materials are in place.				
d	Training, communication and safety concern notification evaluation reports and corrective action if required are in place.				
e	Educational materials (e.g. safe work instruction, operating instruction, etc.) about the risks associated with the hazards for their positions and the corresponding controls are provided to workers to ensure safe execution of the function. Examples of controls include personal protective equipment (safety glasses, gloves, and ear plugs), operating procedures (lock-out/tag-out, chemical mixing), and engineering controls (ventilation, point of operation machine guarding, building sprinkler systems).				

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Annex 5. Prison Labor Checklist

Context: The use of prison labor is addressed in the ILO Forced Labor Convention (No. 29), 1930.

Forced labor is work undertaken involuntarily under threat of a menace or penalty. The requirement of free consent also applies to prisoners. An Entity engaging prison labor should ensure that if a prisoner refuses the work offered there is no menace of any penalty, such as loss of privileges or an unfavorable assessment of behavior which could jeopardize any reduction in his or her sentence. The conditions of work offered to the workers should be similar to work outside the prison.

Assessors, as well as Entities themselves, can evaluate prison labor conditions using this checklist to determine whether the consent and working conditions are in line with the RBA Code provisions.

For each element, two options to answer are available: Y (Yes) and N (No), followed by the option to add comments.

Checklist Element	Y	N	Comments
• Each worker receives and signs a standardized consent form from the Entity, indicating that they agree to work. The form indicates the wages and conditions of work.			
• Wages are comparable to those of free workers with similar skills and experience in the relevant industry or occupation, taking into account factors such as productivity levels and any costs the enterprise incurs for prison security supervision of the workers.			
• Wages are paid directly to workers. Workers receive clear and detailed wage slips showing hours worked, wages earned and any deductions authorized by law for food and lodging.			
• The daily working hours are in accordance with the law and with the RBA Code, whichever is stricter.			
• Safety and health measures respect the law and the RBA Code, whichever is stricter.			
• Workers are included in the social security scheme for accident and health coverage.			
• Workers obtain benefits such as learning new skills and the opportunity to work cooperatively in a controlled environment enabling them to develop team skills.			
• Workers have the possibility of continuing work of the same type upon release.			
• Workers may withdraw their consent at any time, subject only to reasonable notice requirements.			

All of these factors should be taken as a whole when considering whether the consent to work has been freely given. Formal, written consent should be attained by each individual prisoner before engaging him or her to work.

Practical application of these provisions may be difficult and require verification to ensure that abuse does not occur.

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References

The following references were used in preparing the RBA Code of Conduct (up to version 8.0) and may be useful sources of additional information:

Standards and Conventions:

- ILO Fundamental Conventions
    - Freedom of Association and Protection of the Right to Organize Convention, 1948 (No.87)
    - Right to Organize and Collective Bargaining Convention, 1949 (No.98)
    - Forced Labour Convention, 1930 (No.29)
    - Abolition of Forced Labour Convention, 1957 (No.105)
    - Minimum Age Convention, 1973 (No.138)
    - Worst Forms of Child Labour Convention, 1999 (No.182)
    - Equal Remuneration Convention, 1999 (No.100)
    - Discrimination (Employment and Occupation) Convention, 1958 (No.111)
    - Occupational Safety and Health Convention, 1981 (No.155), and the Promotional Framework, 2006 (No.187)
- OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas
- OECD Guidelines for Multinational Enterprises
- United Nations (UN) Guiding Principles on Business and Human Rights
- Universal Declaration of Human Rights
- United Nations Convention Against Corruption
- United Nations Convention on the Rights of the Child
- United Nations Convention on the Elimination of All Forms of Discrimination Against Women
- United Nations Global Compact

Other Useful References:

- Dodd-Frank Wall Street Reform and Consumer Protection Act
- Eco Management & Audit System
- Ethical Trading Initiative
- ILO Code of Practice in Safety and Health
    - ISO 14001 and related standards – Environmental management
    - ISO 45001:2018 - Occupational health and safety management systems
    - National Fire Protection Association
    - Social Accountability International (SAI) SA 8000
    - United States Federal Acquisition Regulation
    - UNGPs: United Nations Guiding Principles on Business and Human Rights https://www.ohchr.org/documents/publications/guidingprinciplesbusinesshr_en.pdf

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Document Control

Document Title	RBA VAP Standard	Rev. Number	Doc. Code
		8.1	TBA
Responsible	Yakut Oktay yoktay@responsiblebusiness.org	Executive Owner	Deborah Albers

Review History		
Rev. Number	Date	Summary of Changes
V8.0.1	12/23/2023	Document created
V8.0.2	3/10/2025	Changes made 1. Deleted the requirement to have a refrigerator as part of reasonable accommodation for nursing mothers to be consistent with VAP operations manual 2. Updated requirements for GHG emissions as per new criteria in C6 3. Added definitions for adequate and effective (2.5) 4. Footnote added to list IFPC's
V8.1	9/27/2026	Major changes: 1. Alignment of content and language in line with the VAP v8.1 changes. 2. Addition of further procedural information on the VAP and RBA Assessments that use the VAP Protocol. 3. Addition of core requirements and specific conditions that are aligned with the Code Interpretation Guidance. 4. Additional and updated Annexes.