

# SMETA Corrective Action Plan Report (CAPR)

Version 6.1





		Αι	Jdit D	etails			
Sedex Company Reference: (only available on Sedex System)	ZC: 42	20257727		Sedex Site Reference: (only available on Sedex System)  ZS: 420314940			314940
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SMETA Audit Pillars:	SMETA Audit Pillars: \( \sum \text{Labour Standards} \)		Safe	Health &		ment [	Business Ethics
Date of Audit:	July 2	6, 2022					
Audit Company Name & Logo:  Bureau Veritas CPS  BUREAU  VERITAS					Report Owi	ner (payer	<b>)</b> :
		Audit (	Cond	ucted By			
Affiliate Audit Company		Purchaser			Retaile	r	
Brand owner		NGO			Trade l	Jnion	
Multi- stakeholder				Combined Audit (select all that apply)			



# **Audit Content:**

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

### 2-Pillar SMETA Audit

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

# **4-Pillar SMETA**

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



# **SMETA Declaration**

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

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

Any exceptions to this must be recorded here (e.g. different sample size): This audit includes elements beyond the scope of a Social Compliance Audit as defined by the APSCA Competency Framework. The association of the auditor's APSCA number with this report is limited to those elements outlined in the APSCA Competency Framework. APSCA makes no representations with respect to the auditor's competency to professionally evaluate compliance with any other audit elements.

Auditor Team (s) (please list all including all interviewers):

Lead auditor: Lillian Liang (CSCA 21701326)

Team auditor: N/A

Interviewers: Lillian Liang

Report writer: Lillian Liang

Report reviewer: Sophia Wang

Date of declaration: July 26, 2022

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

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



# **Audit Parameters**

	Audit Parameters					
A: Time in and time out	Day 1 Time in: 9:30 Day 1 Time out: 17:30 Day 2 Time in: Day 3 Time Day 3 Time					
B: Number of auditor days used:	One auditor in one day (1 n	nan-day)				
C: Audit type:	Full Initial Periodic Full Follow-up Partial Follow-Up Partial Other If other, please define:					
D: Was the audit announced?	□ Announced     □ Semi – announced: Window detail: weeks     □ Unannounced					
E: Was the Sedex SAQ available for review?	Yes No If No, why not Factory management didn't aware of the SAQ.					
F: Any conflicting information SAQ/Pre-Audit Info to Audit findings?	Yes No If <b>Yes</b> , please capture detail in appropriate audit by clause N/A Factory management didn't provide the SAQ to review.					
G: Who signed and agreed CAPR (Name and job title)	Ms. Lu Liyan/ Sales Superviso	or				
H: Is further information available (if yes, please contact audit company for details)	☐ Yes ☑ No					
I: Previous audit date:	N/A					
J: Previous audit type:	N/A					
K: Were any previous audits reviewed for this audit	☐ Yes ☐ No ☐ N/A					

Audit attendance	Management	Worker Representatives		
	Senior management	Worker Committee representatives	Union representatives	



A: Present at the opening meeting?	⊠ Yes □ No	⊠ Yes □ No	☐ Yes ☒ No		
B: Present at the audit?	⊠ Yes □ No	⊠ Yes □ No	☐ Yes ⊠ No		
C: Present at the closing meeting?	⊠ Yes □ No	⊠ Yes □ No	☐ Yes ⊠ No		
D: If Worker Representatives were not present please explain reasons why (only complete if no worker reps present)	N/A				
E: If Union Representatives were not present please explain reasons why: (only complete if no union reps present)	No union was set up in the factory.				



# Guidance

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

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

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

# Root cause (see column 4)

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

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

## Next Steps:

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



# **Corrective Action Plan**

			Corrective	e Action Plan – nor	ı-compliar	nces			
Non- Compliance Number The reference number of the non- compliance from the Audit Report, for example, Discrimination No.7	New or Carried Over Is this a new non- compliance identified at the follow-up or one carried over (C) that is still outstanding	<b>Details of Non-Compliance</b> Details of Non-Compliance	Root cause (completed by the site)	Preventative and Corrective Actions Details of actions to be taken to clear non- compliance, and the system change to prevent re- occurrence (agreed between site and auditor)	Timescale (Immediat e, 30, 60, 90,180,365)	Verification Method Desktop / Follow-Up [D/F]	Agreed by Management and Name of Responsible Person: Note if management agree to the non- compliance, and document name of responsible person	Verification Evidence and Comments Details on corrective action evidence	Status Open/Closed or comment
Safety and Hygienic Condition s No.1	New	审核员发现工厂没有为生产 楼喷漆车间内在用的 10/30 桶油漆(危险化学品)设置防渗 漏设施/二次容器。 It was noted that there was no anti-leakage facility (e.g. secondary container) in the paint spraying workshop of the production building for 10 out of 30 printing ink (Hazardous chemical) containers.	☐ Training☐ Systems☐ Costs☐ lack of workers☐ Other – please give details:	建议工厂为存放 在喷漆车间的油 漆设置防渗漏设施/二次容器。 It is recommended that management adopt practices and controls to ensure that the anti-leakage facility (e.g. secondary container) is used for chemicals.	30 days	Desktop	Yes/ Mr. Xie Shuangquan / Admin Supervisor		
Safety and	New	审核员发现工厂生产楼喷漆 车间内在用的 15/30 桶盛装		建议所有在工厂 内储存和使用的	30 days	Desktop	Yes/ Mr. Xie Shuangquan		



Hygienic 油漆的容器没有张贴安全标 危险化学品都有 / Admin Condition Systems 张贴安全标签,标 Supervisor ☐ Costs s No.2 It was noted that 15 out of 签的内容要完 ☐ lack of 30 printing ink containers 整。 being used in the paint workers It is Other spraying workshop of the recommended please production building were that give not posted with safety management details: labels. adopt practices and controls to ensure that all hazardous chemicals stored or being used in the factory is posted with safety labels. 审核员发现工厂生产楼喷漆 Safety 建议工厂为相关 30 days Yes/ Mr. Xie Desktop New and 车间内有 3/5 名员工没有佩 的员工提供必要 Shuangquan Hygienic Systems 的个人防护用 / Admin 戴工厂发放的橡胶手套, 防 Condition Costs Supervisor 护服和护目镜。 品,并确保他们 ☐ lack of s No.3 正确佩戴。 It was noted that 3 out of workers 5 employees didn't wear It is Other the factory provided recommended please rubber gloves, protected that give suit and aggales in the management details: paint spraying workshop adopt practices of the production and controls to building. ensure that necessary personal protective

				equipments are provided to relevant employees and measures are taken to ensure that employees use such personal protective equipment appropriately.				
Safety and Hygienic Condition s No.4	New	审核员发现工厂生产楼喷漆车间的洗眼器的水压不足,不能有效地冲洗眼睛。 It was noted that the water flow from eye wash facility in the paint spraying workshop of the production building was insufficient for effective eye washing.	Training Systems Costs lack of workers Other – please give details:	建议工厂在喷漆 车间安装洗眼设施,并确保正常使用。 It is recommended that management adopt practices and controls to ensure that effective / functional eye washing facilities are available in paint spraying workshop.	30 days	Desktop	Yes/ Mr. Xie Shuangquan / Admin Supervisor	



Wages and Benefits No.1	New	审核员发现工厂的社会保险覆盖不足。根据厂方提供的2022年7月社会保险缴费单据显示工厂仅为45/97名员工提供了养老,失业,工伤,医疗和生育保险。备注:工厂为97名员工购买了商业意外伤害保险,有效期从2022年7月1日到2023年6月30日。It was noted that the factory's social insurance coverage was insufficient. According to the social insurance payment receipt provided by factory management, it was noted that only 45 out of 97 employees were provided with pension, unemployment, accident, medical and maternity insurance in July 2022. Remark: Factory had purchased the commercial accident group insurance for 97 employees, valid from July 1, 2022 to June 30, 2023.	☐ Training☐ Systems☐ Costs☐ lack of workers☐ Other – please give details:	建议工厂为员工 提供所有法定的 社会保险福利。 It is recommended that factory management adopt practices and controls to ensure that employees receive all of their statutory welfare entitlements.	60 days	Desktop	Yes/ Mr. Xie Shuangquan / Admin Supervisor	
Working Hours No.1	New	根据厂方提供的工时记录, 审核员发现员工加班时间超 出了法定标准。	☐ Training ☐ Systems ☐ Costs	建议工厂确保员 工的加班时间符 合法律要求。	60 days	Follow- up	Yes/ Mr. Xie Shuangquan / Admin Supervisor	



	审核员从厂方提供的工资记录中抽取 30 个样本(从最近发薪月份 2022 年 5 月抽取 10 个,从 2021 年 12 月抽取 10 个,从 2021 年 10 月抽取 10 个),发现有 30 员工加班时间超出了法定标准,具体为:  • 10/10 名员工在 2021 年 10 月的加班时间为 84-88 小时,超过每月加班时间不能超过 36 小时的法律规定;  • 10/10 名员工在 2021 年 12 月的加班时间为 75.5-78 小时,超过每月加班时间不能超过 36 小时的法律规定;  • 10/10 名员工在 2022 年 5 月的加班时间为 79.5-84 小时,超过每月加班时间不能超过 36 小时的法律规定;  • 10/10 名员工在 2022 年 5 月的加班时间为 79.5-84 小时,超过每月加班时间不能超过 36 小时的法律规定。 It was noted that 30 out of 30 sample population employees worked in excess of the statutory overtime hour limits. A review of 30 sample population employees' time records (10 samples from the October 2021, 10 samples from December	□ lack of workers □ Other – please give details:	It is recommended that factory management adopt practices and controls to ensure that employee overtime hours do not exceed the statutory limits.					
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worked in excess of 36 overtime hours per month (i.e. 84 to 88 hours) in October 2021, which was not in compliance with the legal requirement; • 10 out of 10 sample population employees worked in excess of 36 overtime hours per month (i.e. 75.5 to 78 hours) in December 2021, which was not in compliance with the legal requirement; • 10 out of 10 sample population employees worked in excess of 36 overtime hours per month (i.e. 79.5 to 84 hours) in May 2022, which was not in compliance with the legal requirement.
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	Corrective Action Plan – Observations								
Observation Number The reference number of the observation from the Audit Report, for example, Discrimination No.7	New or Carried Over Is this a new observation identified at the follow-up or one carried over (C) that is still outstanding	<b>Details of Observation</b> Details of Observation	Root cause (completed by the site)	Any improvement actions discussed (Not uploaded on to SEDEX)					
Nil									

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



Confirmation

Please sign this document confirming that the above findings have been discussed with and understood by you: (site management)  If actual signatures are not possible in electronic versions, please state the name of the signatory in applicable boxes, as indicating the signature.						



# **Guidance on Root Cause**

## **Explanation of the Root Cause Column**

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

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

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

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

# Some examples of finding a "root cause"

### Example 1

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

# Example 2

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

### Example 3

A site uses fines to control unacceptable behaviour of workers.

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

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

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

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

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





For more information visit: Sedexglobal.com

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

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

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

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# **Click here for Auditors:**

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