



IMPLEMENTATION GUIDE

FOR V 3.1.0



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Implementation Guideline to *trustea* Standard V 3.1.0

The *trustea* Code Implementation Guide has been developed to support Indian tea estates, smallholders, and Bought Leaf Factories (BLFs) in operationalizing the requirements of the *trustea* Code Version-3.1.0. It provides practical direction on interpreting and implementing the Code's social, economic, agronomic, and environmental criteria in a manner aligned with field realities and contextual challenges.

This guide aims to assist producer units and certification bodies in understanding the intent of the control points, recommended practices, and verification benchmarks, thereby facilitating a step-by-step journey towards improved sustainability performance, compliance with national laws, and alignment with global sustainability frameworks.

The implementation of the Code is phased over a two-year cycle. Verified units are expected to meet progressive milestones each year, beginning with an external verification audit in Year 1, conducted by auditors approved by the *trustea* Secretariat. This is followed by another audit in completion of Year 2 from the date of the previous certification/recertification audit date, alongside mandatory annual internal audits to be submitted to the *trustea* Code Management System.

Version 3.1.0 of the *trustea* Code places enhanced emphasis on critical focus areas such as top management commitment, regenerative agriculture, energy management, fair treatment of workers, awareness on sexual harassment, bondage labour, migrant labour fair treatment policy, improved soil and water management practices, climate resilience, safe use and handling of agrochemicals, and traceability within the supply chain. It also strengthens requirements on gender equity, grievance redressal mechanisms, and adherence to national regulatory frameworks, with the goal of promoting inclusive, responsible, and future-ready tea production systems.

The Implementation Guide is intended as a companion resource to support consistent, credible, and efficient adoption of the Code, ultimately enabling verified units to achieve full compliance by the end of Year 2.

Section-wise criteria Segregation:

BUCKETS	SECTION	ZERO TOLERANCE CRITERIA	MANDATORY CRITERIA	OTHER CRITERIA	NUMBER OF CLIMATE MANAGEMENT-FOCUSED CRITERIA
General Management	G-1	0	12	3	
Environment	E - 1 to E - 6	2	24	10	13 - Highlighted in Green in the standard
Safety	S - 1 to S - 3	3	31	2	
Livelihoods	L-1 to L-2	13	11	0	
Total Section - 12		18	78	15	13

Buckets:

BUCKETS	01	02	03	04	05	06	TOTAL SECTIONS
General Management	G - 1 General Management System						1
Environment	E - 1 Soil Health Management	E - 2 Water Conservation	E - 3 Agrochemical	E - 4 Biodiversity	E - 5 Waste Management	E - 6 Energy Management	6
Safety	S - 1 Traceability - Product Safety	S - 2 Food Safety	S - 3 Occupational Health and Safety				3
Livelihoods	L - 1 Fair Wages and Decent Work	L - 2 Workers' Rights					2

G1 – General Management System

G - 1.1 The verified facility shall have a *trustea* program policy and an objective statement with the documented KPIs which outlines the top management's commitment to comply with the *trustea* code and enables continuous improvement. While creating the policies on workers' rights to freedom of association the Trade Union representatives shall be engaged. Display of all policies in the local language or the language workers understand is mandatory at the unit's entrance.- **MCP**

1. Development of *trustea* Program Policy

Prepare a **written policy document** that clearly states the unit's **commitment to the *trustea* Code**.

The policy must be:

- Approved and signed by **top management**.
- Focused on **compliance, ethical business practices, worker welfare, and sustainability**.

Draft a clear **objective statement** aligned with the policy.

Identify and document **Key Performance Indicators (KPIs)** to monitor performance and ensure **continuous improvement**.

2. Define Objectives and KPIs

Example KPIs:

- Number of workers trained on *trustea* Code
- Reduction in non-conformities in annual audits
- % of grievances resolved within a timeline
- Frequency of internal reviews or audits

Ensure **KPIs are measurable**, reviewed periodically, and used for improvement actions.

3. Engagement with Trade Union Representatives

When creating or updating policies related to **freedom of association and workers' rights**:

- **Engage Trade Union leaders or worker representatives** in consultation.
- Document meeting notes, feedback, and how their inputs were integrated.
- Ensure policies reflect support for **voluntary association and collective bargaining**.

4. Policy Communication and Accessibility

Translate **all key policies** (*trustea* policy, workers' rights, health & safety, grievance mechanism, anti-harassment) into:

- **Local language(s)** or any language commonly understood by all work-

Display policies **prominently** at:

- The **main entrance** of the unit.
- Worker gathering areas (canteen, notice board, muster point).

Ensure new and existing workers are **oriented** to the policy as part of induction or refresher training.

5. Periodic Review and Updates

Conduct annual reviews of the policy and KPIs.

Update the documents based on:

- Audit findings
- Stakeholder feedback
- Changes in legal or *trustea* requirements.

Documentation to Maintain:

- Signed policy document (with date/version)
- Objective & KPI sheet
- Meeting records with Trade Union representatives
- Policy translations
- Photo evidence of policy displays
- Review records and action plans






Sample Policy and SOP attached as annexure – tSTF
TPP01 _ Sample *trustea* Program Policy





G 1.2 - The entity shall have a program risk management plan including risk assessment and mitigation to program implementation addressing the three pillars of *trustea* program. The plan must include the potential risks related to workers' rights to freedom of association and others. - **MCP**

Implementation Requirements for Program Risk Management Plan







1. Develop a Written Risk Management Plan

- Create a documented plan that identifies **risks**, their **likelihood and severity**, and **planned mitigation measures**.
- Ensure the plan covers all aspects of the ***trustea* Code**:
 -  **Safety Pillar** – worker rights, OHS, discrimination, child labor, traceability
 -  **Environmental Pillar** – water use, pesticide misuse, soil degradation, waste disposal
 -  **livelihood Pillar** – recordkeeping, legal non-compliance, freedom of association, internal audits

2. Conduct a Risk Assessment

- Use a standard **risk matrix** (Likelihood × Severity) to categorize risks as Low, Medium, High, or Critical.
- Include risk identification from:
 -  Worker feedback
 -  Field observations
 -  Audit findings
 -  Stakeholder inputs

3. Mandatory Inclusion of Freedom of Association Risks

- Specifically assess potential risks to workers' rights to form or join trade unions, participate in collective bargaining, and express concerns.
- Examples of risks:
 -  Managerial resistance or informal discouragement
 -  Lack of awareness among workers
 -  Fear of retaliation for joining unions
- Document **mitigation measures**, such as:
 -  Awareness training on rights
 -  Policy development with union's/workers' representative's engagement
 -  Mechanisms for anonymous grievance reporting

4. Define Mitigation Actions and Responsible Persons

- For each identified risk, the plan must:
 - Describe the preventive/control measures
 - Assign responsibility to a person or department
 - Include timelines for action
 - Identify any monitoring indicators

5. Monitor and Review the Plan

- Review the risk plan at least once a year or whenever there are:
 - Major operational changes
 - New legal or *trustea* requirements
 - Incidents or audit non-conformities
- Update the plan and communicate changes to relevant staff.

6. Awareness and Accessibility

- Make the risk management plan available to:
 - Management
 - Field supervisors
 - Worker representatives
- Conduct basic training or orientation on key risks and their mitigation, especially those affecting workers.

7. Documentation to Maintain:

- Approved risk management plan with date/version
- Risk register with risk levels and actions
- Records of engagement with workers/Trade Union
- Review and update records



Sample Policy and SOP attached as 'annexure - tSTFRA01_ Sample Risk Assessment Document

G 1.3 Top management shall be accountable for compliance with the program requirements including risk management and timely closure of all non-compliances raised in any internal, external and system assurance audit.- **MCP**

G 1.4 Top management shall be accountable for providing necessary resources and personnel with defined job descriptions and facilitating adequate training to ensure compliance with the program requirements.- **MCP**

Basic Intent of the clauses:

- Senior leadership is responsible for the overall implementation and adherence to the *trustea* program.
- Management must ensure risks are identified, assessed, and addressed through a proper risk mitigation plan.
- All findings from internal audits, third-party (external) audits, and *trustea* system assurance checks must be reviewed.
- Any non-compliance issues raised must be resolved promptly with documented corrective actions.
- Leadership must regularly monitor progress and effectiveness of corrective measures and program compliance.
- A structured mechanism should be in place to track issues and ensure long-term compliance across the unit.

Implementation Requirements

- **Provision of Resources** - Management must allocate adequate financial, human, and material resources for program implementation.
- **Deployment of Personnel** - Qualified personnel should be assigned to carry out specific *trustea*-related responsibilities.
- **Defined Job Roles** - Each staff member involved in program implementation should have a clearly documented job description outlining their duties and accountability.
- **Training and Capacity Building** - Regular and relevant training sessions must be conducted to build staff capacity and awareness on *trustea* code requirements.
- **Compliance-Oriented Support** - Resources and training must aim to strengthen adherence to program goals and ensure operational compliance.
- **Ongoing Support** - Management should continuously assess resource needs and provide ongoing support for effective program functioning.

G1.5 - That top management shall be responsible for the review, and appropriate actions, of the requirement at a minimum of once every year.

- **MCP**

G1.6 - The top management shall review the internal audit report periodically (minimum once every year) as a part of continual improvement. In case of any non-conformity raised, on that occasion Root Cause Analysis (RCA) has to be a part of the NC closure. - **MCP**

Document:

- Management Review Meeting Minutes
- Annual Review Reports
- Action Taken Reports (ATR)
- Audit Reports (Internal/External/System Assurance)
- Corrective Action Records
- Meeting Calendar / Schedule
- Review Sign-off by Top Management

Processes:

- Formal Review Mechanism (SOP/Policy)
- Stakeholder Involvement
- Follow-up Mechanism

Document:

- Internal Audit Reports
- KPI Monitoring Reports
- Policy and Objective Review Notes
- Management Review Meeting Minutes
- Annual Progress Reports

Processes:

- Annual Internal Audit Review Cycle
- Performance Monitoring System
- Top Management Sign-off
- Objective and KPI Evaluation Mechanism

G 1.7 The verified facility shall have a policy outlining its principles on business ethics, applicable legal requirements and vendors' ethics as well especially for disclosing gifts and hospitality. The policy should also address actual, perceived or potential conflict with internal controls in place to monitor and identify potential breaches or fraud and periodic compliance checks.- **OCP**

Basic Intent of the clauses:

- Ethics Policy Document
- Gift & Hospitality quality
- Conflict of Interest Declaration Forms
- Vendor Code of Conduct and Contracts
- Compliance Audit Reports
- Training Attendance Sheets



Sample Policy and SOP attached as annexure - tSTF BEP01_ Sample Business Ethics Policy tSTF SOPBEP01 _ Sample SOP for Business Ethics

G1.8 - The verified facility shall have an overview map covering all the essential elements of the total farming area. All the features, natural or otherwise, outside the periphery of the garden adjoining the boundary shall be indicated on the map. This map must have information about planted areas/farm divisions/production zones, processing facilities, human habitation areas, schools, medical facilities/- first aid sites, natural ecosystems, including water bodies and forests and other existing natural vegetation Govt. notified forest land, buffer zones, agro-forestry systems and protected areas. The tea fields must be identified with a name number or colour on the map.- **MCP**

G 1.9 The map for the Farms should indicate the respective geolocation. (Polygon is desirable)- **OCP**

MAP must have the following:

- | | |
|---|---|
| <ul style="list-style-type: none"> • Planted areas/farm • Divisions/production zones, • Processing facilities, • Human habitation areas, • Schools, • Medical facilities/first aid sites, • Natural ecosystems, • Including water | <ul style="list-style-type: none"> • Bodies and forests, • Other existing natural vegetation • Govt.-notified Forest land, • Buffer zones, • Agro forestry systems and • Protected areas • Properly demarcated Periphery |
|---|---|

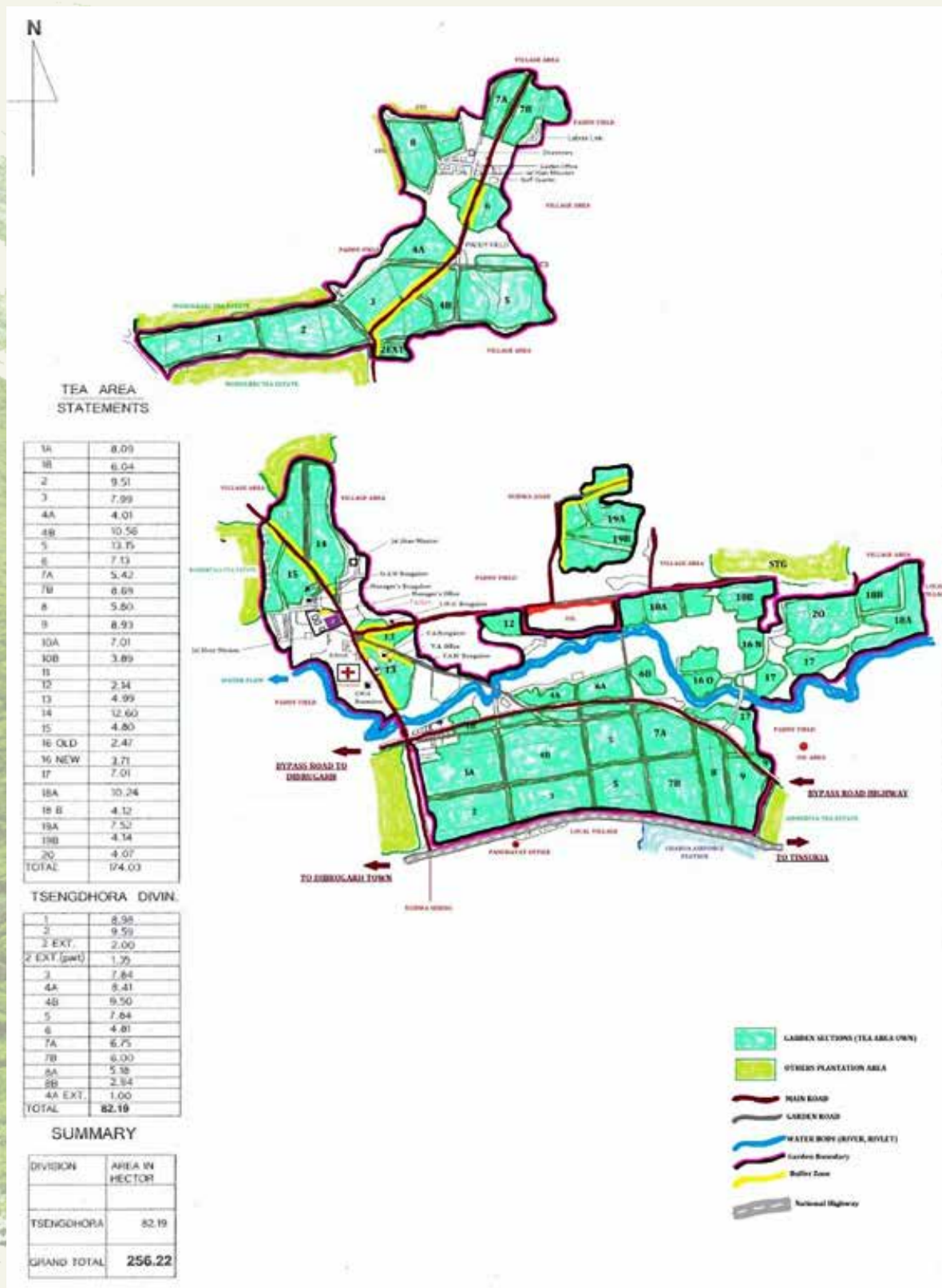
Overview Map - BLF



Polygon Map for STG



Sample Map for Estate:



G 1.10 -The verified facility shall be lawfully doing business as per the statutory requirements. - **MCP**

Required Documents

- Valid business registration/license
- GST registration certificate (if applicable)
- PAN card of the entity
- Factory license or Shop & Establishment Act registration
- Trade license
- Labour law registrations (e.g., PF, ESI)
- Any other applicable statutory compliance certificates

G 1.11 Documents, either electronic or physical shall be retained as per the document retention policy. Security of the electronic data should be ensured as per *trustea* data security policy. The policy must say that the information is protected and that all collected data/documents are processed, stored, transferred, and disposed of responsibly and safely. All the records and documents required by the standard should be up-to-date and accessible to the internal and external verifiers and retained for a minimum period of four years. Legal documents shall be retained as per the relevant requirement.- **OCP**

Required Documents:

- Document Retention Policy (organization-specific)
- Access logs and backups (for electronic records)
- Data Security Policy (or internal IT/data security protocols aligned with it)
- Sample internal and external verification records (last 4 years)
- Register/list of documents maintained under the *trustea* code
- Legal document storage procedures as per applicable laws

G 1.12 The verified facility shall have one or more *trustea* officers and Internal Audit coordinators with accountability for *trustea* program compliance. If the resource is not dedicated for this purpose, then the allotment of responsibility for the *trustea* program should be commensurate with other job responsibilities assigned by the organization.- **MCP**

G1.13 - It is mandatory for *trustea* officers and internal auditors to have *trustea* approved code qualifications. - **MCP**

Required Documents:

- Training certificates showing completion of *trustea*-approved code qualification
- Training attendance records or internal training logs
- Training needs assessment (if available)
- Records of refresher or update trainings (if applicable)

G1.14 - A grievance redressal mechanism with records of response shall be maintained for all the complaints against the violation of the code requirements by the internal and external stakeholders who are negatively affected by any specific activity covered under the scope of the *trustea* code. This mechanism must be designed in a simplified way so that it is easily accessible to stakeholders with different modes of communication including oral communication and also negative anonymous feedback should be considered for relevance check. The mechanism must ensure that the confidentiality of the individual/ individuals/ organizations is protected. The corrective action of the grievance is to be recorded. - **MCP**

Documents to be Implemented

- Grievance Redressal Policy/SOP
- Grievance Register/Logbook
- Corrective Action Records
- Confidentiality Protocol/Guidelines
- Communication Materials (posters, leaflets, etc.)
- Awareness/Training Records
- Complaint Box/Helpdesk Records
- Grievance Summary/Monitoring Reports (if applicable)

Processes to be Verified

- Grievance Submission Process (including oral and written modes)
- Grievance Recording and Documentation Process
- Confidentiality Protection Process
- Grievance Investigation and Response Process
- Corrective and Preventive Action (CAPA) Process
- Stakeholder Communication and Awareness Process
- Monitoring and Review Process (for tracking and closing grievances)
- Workers' Interview

G1.15 - The top management of the verified facility shall be responsible to respond to any communication from the *trustea* program or any other stakeholder on any adverse public or regulatory event, report, or complaint which may be perceived to have an overall negative impact on the credibility of the program.- **MCP**

Documents to be Implemented

- Record of communications received from *trustea* program or stakeholders
- Official response letters/emails from top management
- Internal escalation or communication logs regarding adverse events
- Public relations or media response documentation (if applicable)
- Corrective/preventive action plans or reports related to the event
- Incident register or compliance report log
- Management meeting minutes referencing external communications

Processes to be Verified

- Stakeholder Communication and Escalation Process
- Incident Reporting and Management Process
- Top Management Review and Response Process
- Corrective and Preventive Action (CAPA) Process
- External Communication and Recordkeeping Process
- Regulatory Compliance Monitoring Process



Sample Policy and SOP attached as annexure-
tSTF GRP01 – Sample Grievance Redressal Policy

E1 – Soil Health Management

E 1.1 - Availability of a verifiable soil health management plan with continuous improvement that shall incorporate soil conservation and soil fertility practices to promote the rehabilitation and enhancement of the farm ecosystem. Sustainable farming practices that nourish soil health such as compost application, planting cover crops, intercropping, mulching, natural methods of soil protection and replenishment, reduction of tillage and other applicable practices of regenerative agriculture are to be made part of the soil management process. **Climate management - MCP**

Documents to be Prepared

- Soil health management plan (documented strategy)
- Records of compost application (dates, quantities, types)
- Crop calendars showing cover crops and intercropping
- Evidence of mulching practices (photos, field records)
- Tillage practice logs (frequency, method)
- Records of training conducted on soil health
- Purchase/production records for organic inputs (compost, mulch)
- Field observation reports or visual documentation
- Soil testing reports (before/after intervention, if available)

Processes to be Verified

- Soil Health and Fertility Management Process
- Compost Preparation and Application Process
- Cover Cropping and Intercropping Process
- Mulching and Organic Matter Application Process
- Natural Soil Replenishment Methods Process
- Tillage and Land Preparation Process
- Monitoring and Continuous Improvement of Soil Practices



Sample Policy attached as annexure – tSTF SHMP01 _ Sample
Soil Health Management Plan

E 1.2 The verified facility should have defined and documented actions to optimize and reduce the application of synthetic and chemical fertilizers. - **MCP**














Documents to be Prepared

- Availability of *trustea* Regenerative Agriculture check list (Entry level at a minimum) (available in tCMS under entity profile – Applicable for Estates)
- Fertilizer management/optimization plan
- Records of synthetic and chemical fertilizer application (dates, types, quantities)
- Fertilizer procurement and usage logs
- Soil testing reports (for nutrient need-based application)
- Evidence of use of organic/natural alternatives
- Training records on safe and efficient fertilizer use
- Visual field records (e.g., images of application method or signage)
- Shade tree density details (year wise shade tree planting record)
- Availability of technical recommendations for shade trees specific to the region.
- Records pf total no. of Weedicide/ Herbicide Rounds applied in the previous year
- Records of manual weeding done in previous year with area covered
- Records pf total no. of pesticide (for pest/ disease control) Rounds applied in the previous year

Processes to be maintained

- Fertilizer Application Monitoring Process
- Nutrient Management and Soil Testing Process
- Chemical Fertilizer Reduction and Optimization Plan
- Alternative/Organic Fertilizer Usage Process
- Training and Capacity Building on Fertilizer Practices
- Procurement and Inventory Control Process for Fertilizers
- Creation of diversion channels / drains and micro-catchments in newly planted areas. Records for area in Ha under Re/New plantation in the previous year










On- farm composting program & Compost. Analysis Report for the below and if the compost is tested then the below parameters should be considered

 pH	 C/N ratio
 EC (dS/m)	 Bacteria (c.f.u. per g moist compost)
 Organic Carbon (%)	 Fungi (c.f.u. per g moist compost)
 Available-N (kg/ha)	 Actinomycetes (c.f.u. per g moist compost)
 Available P (kg/ha)	 Stability (mgCO ₂ -C/gOM/day)
 Available K (kg/ha)	 Weed Seeds (No.)
 Available S (kg/ha)	

Composting Guideline

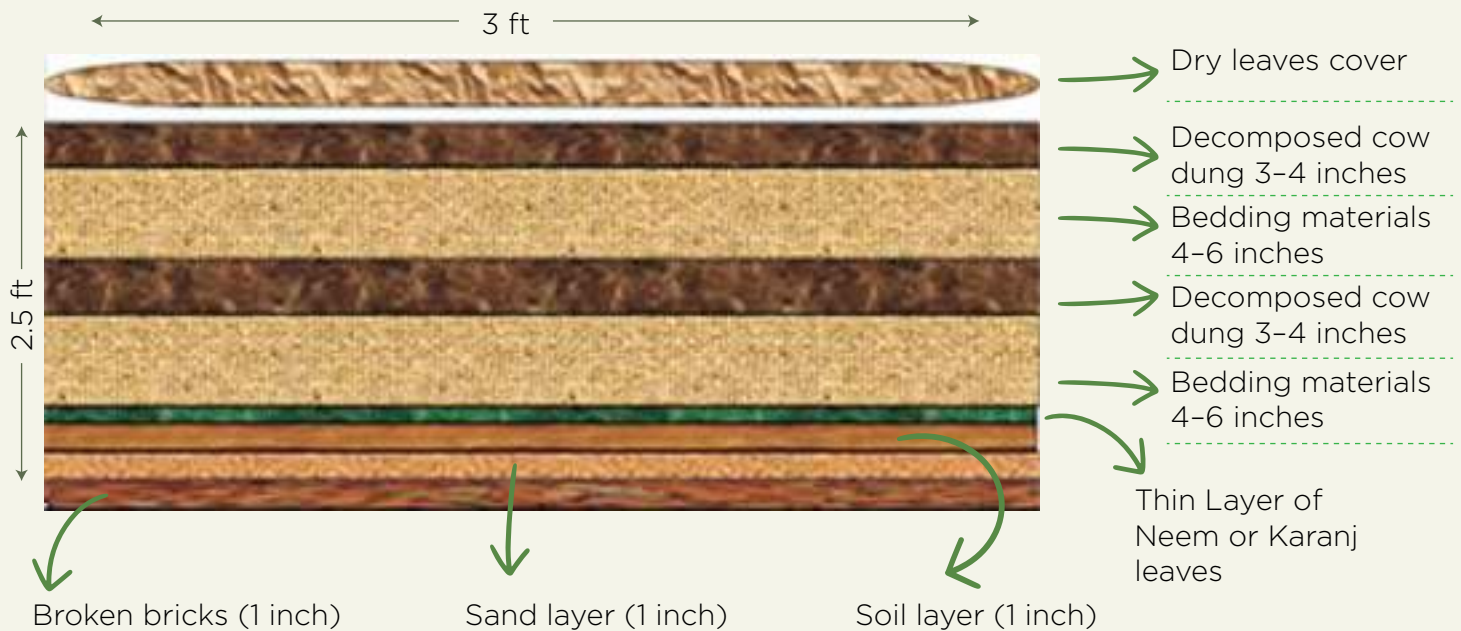
There are various type of compost that can be produced on farm using various type of biodegradable raw materials. Below are some of the examples of different type of compost with basic guidelines.

VERMICOMPOSTING

-  **Standard size of 1 pit that will provide a yearly output of about 3000 kg assuming 4 refills**
-  **Pit size : 10ft. x 4 ft. x 3 ft.**
-  **Raw material source - Cow dung only / Green matter - Cow dung mix**
-  **Material Quantity Requirement for each fill:**
 - 1) If only cow dung is used - 2000 kg
 - 2) If Mixture is used - 800 kg cow dung + 1200 kg green matter
 - 3) Earthworms required - 2.0 to 2.5 kg per pit
-  **Final Recovery - 35 to 40%**
-  **8 such beds will provide a yearly output of 25,000 to 30,000 kg**
-  **Area required for 8 Beds about 700 sq. ft**
-  **Recommended dosage - 2 ton/ha**
-  **Areas of Interest - Young Tea, weak patches, disease prone sections, planting pit**



Heap compost made using Tea Waste and Cow dung in 80:20 ratio



Cross - section of vermicompost pit

FARM YARD MANURE

- 🌱 **Standard heap size that will provide a output of about 2000 kg**
- 🌱 **Heap size : 10ft. (l) x 8ft. (b) x 6 ft. (h)**
- 🌱 **Raw material source - Cow dung only / Green matter - Cow dung mix**
- 🌱 **Material Quantity Requirement for each fill:**



- 1) cow dung- 1000 kg
- 2) green matter - 3800 kg

- 🌱 **Final Recovery - 40% - 50%**





E 1.3 Testing of soil shall be carried out by a competent agency to ensure optimum fertilization in line with the test results of soil conditions that include other elements like micronutrients. The recommendations are to be relevant to the specific region and formulated by competent institutions/experts. - **OCP**

- Availability of Soil test reports that includes date of last analysis report. Testing Criteria: 1) pH, 2) EC, 3) Organic Carbon/ Organic Matter, 4) Available-N, 5) Available-P2O5, 6) Available-K2O, (For 1st cycle of certification)
- Availability of Soil test reports that includes the testing criteria: 1) pH, 2) EC, 3) Organic Carbon/ Organic Matter, 4) Available-N, 5) Available-P2O5, 6) Available-K2O, 7) Available- SO4, 8) Total count of Bacteria, Fungi, Actinomycetes (each) - This test report with additional factors is only needed for those sections which are identified for compost application - For Estates
- To create a base line of soil health for those section where compost application is planned, require to have a soil test report with 1) pH, 2) EC, 3) Organic Carbon/ Organic Matter, 4) Available-N, 5) Available-P2O5, 6) Available-K2O, 7) Available- SO4, 8) Total count of Bacteria, Fungi, Actinomycetes (each) - For Estates
- Records of frequency and timing of soil testing
- Recommendations issued by experts/institutions (with regional relevance)
- Documentation of fertilizer use aligned with test recommendations

Processes to be Verified

- Selection and Engagement of Competent Soil Testing Agencies
- Fertilizer Recommendation Integration Process
- Region-Specific Nutrient Management Planning
- Capacity Building on Soil Health and Nutrient Requirements



1) Cow Dung – Cow Urine – Lime Concoction for Plant Stress Management, Concoctions for plant health rejuvenation

- Large number of microbes present in the cow dung and urine are useful in controlling many fungal diseases
- Nutrients present in the solution are useful for effective plant growth
- This can be applied for two to three times in a crop period

Required Material

Fresh Cow dung – 5 Kg; Cow urine – 5 L; Lime – 50 gms

Method of Preparation:

- Store 5 Kg cow dung, 5 L of cow urine and 5 L of water in a tub
- Cover the tub and allow the solution to ferment for 4 days
- Stir the solution with a stick every day
- After 4 days filter the solution and add 50 gms of lime to it
- Add 100 L of water to the solution to spray it in 1 acre

Precautions:

- As this solution is thick, use a mesh or gunny bag to filter the solution (first time)
- After that add water and filter through a thin cloth
- We can store the solution for 1 or 2 days (farmer's experience)

2) Panchagavya (PLANT REJUVENATOR) – Improves Plant Physiological Functioning



Panchagavya, an organic product has the potential to play the role of promoting growth and providing immunity in plant system. Panchagavya consists of nine products viz. cow dung, cow urine, milk, curd, jaggery, ghee, banana, tender coconut and water. When suitably mixed and used, these have miraculous effects.

Cow dung – 7 kg

Cow ghee – 1 kg

Mix the above two ingredients thoroughly both in morning and evening hours and keep it for 3 days

Cow Urine – 10 liters

Water – 10 liters

After 3 days mix cow urine and water and keep it for 15 days with regular mixing both in morning and evening hours. After 15 days mix the following one panchagavya will be ready after 30 days.

Cow dung – 7 kg

Cow ghee – 1 kg

Cow milk – 3 liters

Cow curd – 2 liters

Tender coconut water – 3 liters

Jaggery – 3 kg

Well ripened poovan banana – 12 nos.

Preparation: All the above items can be added to a wide mouthed mud pot, concrete tank or plastic can as per the above order. The container should be kept open under shade. The container is to be stirred twice a day both in morning and evening. The Panchagavya stock solution will be ready after 30 days. The odourless and oil breeds don't go to stir to have jaggery, ripe ghee beads). It should be kept in the shade and covered with a wire mesh or mosquito net to avoid mosquitoes from laying eggs and the formation of maggots in the solution. If jaggery is not available, a solid (500 g) of jaggery dissolved in 3 liter of water.

ORGANIC GROWTH PROMOTER

Organic Plant Growth Promoter is a liquid solution made from enzymes produced from vegetable waste and jaggery. It helps in improving the yield and better crop quality. It also helps in arresting fruit dropping and further prolongs shelf life of the crop.

1. Materials Required

- 3-4 Kg Organic Kitchen wastes like vegetables, etc.

2. Procedure

1. Crush, dilute 1Kg jaggery in 1 litre of water and pour into a container
2. Add 3-4 kg of chopped vegetables in the container.
3. Add about 10 litre of water & mix thoroughly by stirring the mixture clock & anti-clock wise, twice a day for 15 days
4. Close the container every time after stirring.
5. After 15 days close the container tightly & leave it for about 40 days.
6. Yeast formation at the surface of the mixture will be seen after 40 days.
7. Filter the solution and store in a cool place for future usage. The container should be tightly closed.



OGP-Vegetable
Waste Enzyme

3. Precaution

- Stir the mixture twice a day for 15 days continuously
- Close the container tightly
- Do not dilute the jaggery by boiling
- Fruits & skin of fruits can also be added along with vegetables but not lemon

4. Application

- Add 1 Litre of solution in 500 litres of water
- May be sprayed for all kinds of crops
- During the crop life cycle, the solution may be sprayed every 2 or 3 weeks
In case of rain after spray, the solution may be applied the next day.

Prophylactic for Broad Spectrum Pest Management

NEEMASTHRAM



Used against small and sap sucking pests

Mix 10 kg of grinded Neem leaves into 200 L water. Add 10 L cow urine and 2 kg of fresh cow dung to this mixture and mix well. Let it ferment for 24 hrs to 48 hrs and filter through a cloth. Spray the solution directly on the crop without mixing the water in the fields.

E 1.4 - The identification process of new tea production areas is based on a documented and technical review of climatic, soil, and topographic conditions subject to the approval of the concerned authority and in compliance with the non-deforestation mandate as per clause no E4.2 - **MCP**

Documents:

- Approvals from **concerned authorities** (e.g., Tea Board, Forest Department, Panchayats)
- **Compliance declaration** or checklist confirming alignment with **non-deforestation** clause E4.2

E 1.5 The producer shall use relevant measures to prevent soil erosion and run off around the erosion-prone areas including river banks, natural water bodies and irrigation ditches. - **OCF**

Documents to be Prepared

- **Soil conservation plan or erosion control strategy**
- Map or site plan identifying **erosion-prone areas**
- Records of **erosion control structures** (bunds, vegetative barriers, check dams, etc.)
- **Maintenance records** of physical structures (e.g., contour trenches, silt traps)

Processes to be Maintained

- Regular **field monitoring and assessment** of erosion-prone zones
- Implementation and upkeep of **barriers/cover crops/ground cover**
- Use of **eco-friendly engineering methods** to stabilize slopes and ditches

Soil Erosion and mitigation



Stone Riveting



Contour Planting



Vegetative cover
along water bodies



Vetiver grass
planting

E 1.6 - Pruned tea litters shall be utilized for mulching to improve soil health and fertility. – **MCP**

Documents to be Prepared

- Pruning **schedules/logbooks**
- **Mulching plans** or SOPs indicating use of pruned litter
- Records of **field-wise mulch application** (manual or mechanized)

Processes to be Maintained

- Observation of mulched fields with visible application of pruned tea litter
- Method of collection, distribution, and coverage of litter post-pruning
- Evidence of **improvement in moisture retention or weed control**



Retention of pruning litter in sections

E 2 – Water Conservation

E 2.1 - The farms and factories should formulate and implement a plan to conserve water in their operations. Irrigation techniques should be evaluated for optimal usage of water and energy. Training and awareness campaigns and collaboration with the community on water conservation should be a part of the water management plan. Climate management - **OCP**

Documents to be Prepared

- Water **management/conservation plan**
- Records of **irrigation system audits** or energy-water use efficiency evaluations
- **Maintenance logs** of irrigation or water recycling systems
- Evidence of **community engagement or awareness drives (if applicable)**
- Training materials or attendance registers for **water conservation training**
- Water usage records (meter readings, borewell logbooks, etc.)

Processes to be Maintained

- Adoption of **efficient irrigation** (e.g., drip/sprinkler, optimized scheduling)
- Implementation of **rainwater harvesting, recycling or reuse systems**
- Engagement with workers and/or **local community on water saving measures**
- Field visits to assess leakage control, bunding, or contouring
- Factory-level water use monitoring or reduction initiatives



Sample Policy attached as annexure
- tSTF WMP01_Sample
Water Management Plan

E 2.2 The verified facility shall comply with national and local legal obligations with respect to withdrawing water from natural sources and have necessary permits. - **MCP**

Processes to be Maintained

- Valid **permits or licenses** for:
 - Groundwater extraction (e.g., borewells)
 - Surface water withdrawal (e.g., rivers, ponds)
- **Approval/consent letters** from Water Resource Department or Pollution Control Board
- **Renewal status** and expiry dates of permits
- Maps or documentation showing **source and volume of water** usage
- If the NOC is exempted, then availability of the supporting documents (like MSME certificate or any state specific rule related to the business type, or exemption letter or something similar, that can prove the exemption.

As per the latest guidelines issued by CGWA, it's mandatory to get NOC if you're drawing more than 10 cubic meters of groundwater for industrial usages.



Important Links: <https://cgwa-noc.gov.in/LandingPage/index.htm>
<https://cgwa-noc.gov.in/Sub/ApplicantRegi/ApplicantRegistration.aspx>
[Application for Issue of NOC to Abstract Ground Water \(NOCAP\)](#)
<https://www.thesustainabilitycloud.com/cgwa-noc>
[\(How to get NOC from CGWA?\)](#)



NOCAP documents & Steps for filling Application form for NOC in CGWA are available as reference to this guide as annexure.

In case the water usage NOC is issued by the State Authority, kindly visit the relevant website for State Govt. guidelines

E 2.3 - The entity shall optimize, track and measure water usage in the various operational areas. Plan and results on optimization of water usage shall be documented. Climate management - MCP

Documents to be Prepared

- Water management/conservation plan
- Records of **irrigation system audits** or energy-water use efficiency evaluations
- **Maintenance logs** of irrigation or water recycling systems
- Evidence of **community engagement or awareness drives (if applicable)**
- Training materials or attendance registers for **water conservation training**
- Water usage records (meter readings, borewell logbooks, etc.)

Processes to be Maintained

- Review of flow meters installed in different operational areas (irrigation, processing, domestic)
- Cross-check records with actual readings (spot checks)
- Discussions with responsible personnel on how **optimization actions were selected and implemented**
- Physical check of **drip/sprinkler systems or low-flow fixtures**
- Verify if water reuse/recycling (e.g., condensate reuse) is practiced

E 2.4 - Entity shall make efforts to conserve and reduce the wastage of water used for domestic areas by carrying out training and awareness programs for the residents of the tea estate. The water distribution system should also be monitored for leakages and wastage - OCP

Documents to be Prepared

- Records of **training/awareness sessions** conducted for estate residents
- Posters, pamphlets, or IEC materials related to water conservation
- Domestic water **usage logs** (if tracked separately)
- **Inspection/maintenance logs** of the domestic water supply system

Processes to be Maintained

- Interview with **estate residents** to verify awareness and participation in programs
- Physical inspection of **domestic water pipelines**, taps, tanks for signs of leakage
- Check for presence of **display materials** (posters or signs) promoting water conservation



E2.5 - The verified facility shall evaluate and adopt an efficient water irrigation delivery system in order to minimize wastage – **Climate Management - MCP**

Documents to be Prepared

- Documentation of current irrigation practices (e.g., sprinkler, drip, etc.)
- Maintenance logs for irrigation equipment
- Internal water use efficiency benchmarks or targets

Processes to be Maintained

- Interview with field/agronomic staff about:
 - ☞ Evaluations conducted and selection criteria used
 - ☞ Rationale for the current irrigation system in use
- Site visit to observe irrigation infrastructure (pipes, sprinklers, drip lines, valves, etc.)
- Check if the system includes timers, flow regulators, moisture sensors, or other efficiency tools
- Review of irrigation scheduling practices – is it based on weather/moisture data or fixed cycles?



Sprinkler and Drip Irrigation

E 2.6 - In case underground water is in use as a water source, the entity shall track the water level of the source before and after the rainy season every year. In case there is a trend of reduction of the level of the underground water source, the adoption of replenishment techniques like rainwater harvesting and appropriate planting of shade trees are to be implemented - Climate Management - **OCP**

Documents to be Prepared

- Annual water table monitoring records (pre- and post-monsoon)
- Groundwater extraction logs or meter readings
- Reports indicating changes/trends in underground water levels
- **Records or plans for:**
 - ☘ Rainwater harvesting systems (rooftop, recharge pits, bunds)
 - ☘ Shade tree plantation initiatives

How to measure the underground water level before or after rainy season?

To check underground water levels, you can measure the depth of water in a well using a steel tape, use a plunger that makes a "plop" sound when it hits water, or employ geophysical methods like ground-penetrating radar (GPR). A submersible pressure transmitter can also be used, especially for wells or boreholes

Here's a more detailed look at each method:

1. Steel Tape Method:

- Lower a steel tape coated with chalk into the well until it reaches the water level.
- The chalk will wet where the water is, indicating the depth.

2. Plunger Method:

- A hollow tube (plunger) is suspended on a tape measure.
- When the plunger hits water, it makes a "plop" sound, and the tape measure indicates the depth.

3. Geophysical Methods:

- Ground-Penetrating Radar (GPR): This technique uses radar waves to map subsurface structures and detect water-bearing formations.
- Electromagnetic, Electrical, and Seismic Techniques: These methods can be used to identify water-bearing strata.
- Remote Sensing: Using sensors to acquire geospatial data without direct contact can also help.

4. Submersible Pressure Transmitter:

- These small, cylindrical transmitters are lowered into the well, borehole, or monitoring well.
- They measure water pressure, which can be converted to depth.

5. Other Methods:

- Test Drilling: Drilling observation wells provides detailed subsurface data.
- Dowsing: Using divining tools like forked sticks to locate underground water sources.
- Local Wells: Measuring water levels in existing wells can also provide insights.

6. Groundwater Monitoring Tools:

- The [India Observatory](#) has developed a Groundwater Monitoring Tool (GWMT) that enables collection and collation of water level data.
- The [Central Ground Water Board \(CGWB\)](#) monitors water levels using a network of monitoring stations.

Choosing the right method:

- The simplest and most cost-effective method for measuring water levels in an existing well is often using a steel tape or plunger.
- For more complex investigations or situations where wells are unavailable, geophysical methods like GPR or remote sensing may be necessary.

E 3 – Agrochemical

E 3.1 - The verified facility shall implement an integrated pest management (IPM) plan to reduce dependence on synthetic agrochemicals and fertilizers and increase the application of organic inputs. The plan should focus on the adoption of alternate control measures like biological controls and/or practices based on indigenous technical knowledge (ITK) and/or oil spray and/or any other standard recommended application in use. The entity must plan and implement documented actions on this.

Climate management - MCP

Documents to be Prepared

- IPM Plan (detailing biological, cultural, and mechanical control methods)
- Records of:
 - ☞ Pesticide and fertilizer purchase and usage
 - ☞ Organic input application
 - ☞ Biological control agents (e.g., predators, parasitoids)
- SOPs or training materials on ITK-based practices
- Monitoring logs showing pest/disease incidence and response actions
- Action plans or logs of IPM implementation

Processes to be Verified

- Field-level observation of:
 - ☞ IPM techniques (e.g., trap cropping, neem-based solutions, pheromone traps)
 - ☞ Use of organic fertilizers or composting units
 - ☞ Reduced usage of synthetic chemicals
- Interview workers or estate management on:
 - ☞ Knowledge and application of IPM strategies
 - ☞ Integration of ITK practices in pest management
- Evidence of capacity-building/training on IPM and ITK

Focus on Sustainable Pest Management Plan & Mapping of indigenous technical knowledge (ITK)



IMPACT

To reduce dependence on synthetic agrochemicals and gradually cut back and reduce the chemical pesticide usage.

Focus on Sustainable Pest Management Plan



Always refer the latest guidelines of PPC and FSSAI requirements for IPM.

Important Links as of Jun 2025

<https://www.teaboard.gov.in/TEABOARDPAGE/ODY=>

https://www.fssai.gov.in/upload/uploadfiles/files/Compendium_Contaminants_Regulations_20_08_2020.pdf

https://www.fssai.gov.in/upload/advisories/2023/04/644b6627e7923Direction_Fixation%20of%20MRL%20of%20Pesticides%20in%20Tea.pdf

<https://fssai.gov.in/upload/advisories/2024/04/6616351c775b5Order%20MRL%20Spices%20and%20culinary%20herbs.pdf>

Red spider mite (*Oligonychus coffeae*)

Materials: Water- 100L, Pothoruabihlongoni (*Polygonum hydropiper*) - 30kg and Cow urine- 50 L.

Pothoruabihlongoni is crushed and soaked in water and cow urine for 10 days and after filtration sprayed in the field at 15L in 100L of water at an interval of 20 days.

Tea mosquito bug (*Helopeltis theivora*)

Materials: Amla (*Phyllanthus emblica*)- 2kg, Neem (*Azadirachta indica*)- 10kg, Cowdung- 10kg and Water- 50L.

Amla and neem are crushed and mixed with cowdung and water and kept it for 10 days and then sprayed in the infested bushes at 10L in 100L of water. The solution is applied at an interval of 20 days.

E 3.2 The verified facility shall use PPFs approved by the appropriate regulatory and government authority - **ZTCP**

Documents to be Prepared and recorded

- List of PPFs used (with brand names, active ingredients)
- Purchase invoices of pesticides/PPFs
- Material Safety Data Sheets (MSDS)
- State/Central government-approved list of pesticides
- Stock and usage registers
- Pesticide application records (date, location, dosage, applicator name)
- Training to the STGs of approved chemical usage

Processes to be Verified

- Cross-verification of PPFs used with the official approved list
- Check labels on pesticide containers for proper registration numbers
- Observe storage facility for compliance with legal and safety norms
- Interview applicators and management for awareness of :
 - ☞ Approved vs. banned/restricted substances
 - ☞ Correct usage and disposal practices
- In case of STGs – Training records on chemical awareness



Always check the latest version of PPC and FSSAI guidelines on Approved Chemical usage

E 3.3 - The verified facility should regularly maintain and calibrate agrochemical application equipment and keep records of such equipment maintenance and calibration. - **MCP**

Documents to be Prepared and recorded

- Equipment maintenance logs
- Calibration records (with date, person responsible, method used)
- SOPs for calibration and maintenance (if available)
- Equipment usage records

Processes to be Maintained

- Physical inspection of sprayers or other agrochemical application tools
- Check for visible signs of wear, leakage, or damage
- Interview with staff/operators on:
 - ☞ Calibration frequency
 - ☞ Understanding of correct dosages and spray patterns
- Review records for periodicity and consistency
- Demonstration of calibration process (if feasible)

E 3.4 - Storage(with access control), mixing and handling of agrochemicals shall be done in a designated area with adequate protection for people and the environment. Safety and emergency information is to be displayed prominently in a way that is easily understood by the visitor and operating personnel. (Storage includes PPE and related equipment)-MCP

Documents to be Prepared

- Chemical storage inventory
- Safety Data Sheets (SDS) for agrochemicals used
- Emergency response plans
- Visual instructions/signage layout (photos or plan)
- PPE issuance and usage logs (if maintained)

Processes to be Verified

- **Physical inspection of storage and mixing area:**
- Clear signage (hazards, emergency procedures, do's and don'ts)
- Availability and proper condition of PPE (gloves, goggles, masks, aprons), First-aid kit, Spill kits / sand or sawdust for spills
- Interview staff
- Check if PPE and equipment are stored appropriately and accessible



Chemical mixing area inside Garden



Map with designated area for mixing.



Cautionary sign during chemical application



Chemical Storage Area

E 4 – Biodiversity

E 4.1 - A biodiversity action plan (Not applicable for stand-alone BLF) for natural ecosystem conservation shall be available with the verified unit outlining procedures for responsible management of the impact of tea farming and processing. Natural vegetation, water bodies and natural habitats of animals, birds, and beneficial insects within the periphery of the verified entity are to be identified and nurtured to enhance biodiversity. Measures like afforestation and plantation of shrubs and other woody vegetation including natural vegetative barriers with native species are to be part of the plan and actions. - Climate management- **MCP**

Documents to be Prepared

- Biodiversity Action Plan (BAP)
- Maps or diagrams showing natural ecosystem areas
- Plantation records (native species, vegetative barriers)
- Records of afforestation or habitat restoration
- Photographs of implemented activities
- Monitoring reports on flora/fauna or biodiversity health (if available)

Processes to be Verified

- Visual inspection of, Natural vegetation zones Water bodies (ponds, streams), Habitat areas for birds, animals, beneficial insects, any fenced/marked biodiversity conservation zones
- Check evidence of Afforestation/plantation with native species Maintenance of vegetative buffers/barriers
- Interview of the Staff responsible for implementation of the BAP, Awareness of biodiversity areas and importance
- Assess effectiveness of implemented measures: Presence of wildlife, insect activity, plant diversity, Protection from encroachment, pollution, or misuse

Key Elements of a biodiversity action plan

Tea estates are often located in ecologically sensitive zones where responsible biodiversity management is crucial for maintaining soil health, climate resilience, and ecosystem services. As a mandatory requirement in trustea, a well-structured Biodiversity Action Plan (BAP) must ensure that tea cultivation harmonizes with nature conservation. Here are the key elements that should form the core of a BAP for tea estates

1. Baseline Assessment

- **Survey and Documentation:** Conduct an ecological survey to record existing flora, fauna, water bodies, and habitat types.
- **Identification of High Conservation Value (HCV) Areas:** Map ecologically sensitive zones, riparian buffers, sacred groves, and habitats of rare/endangered species.
- **Assessment of Threats:** Analyze pressures like habitat loss, invasive species, pollution, and pesticide use.

2. Goal Setting

- **Biodiversity Conservation Goals:** Define clear, measurable, and achievable conservation goals (e.g., restoring native vegetation, protecting endangered species, maintaining water quality).
- **Alignment with Global and National Priorities:** Ensure goals align with frameworks like the Convention on Biological Diversity (CBD) and India's National Biodiversity Action Plan.

3. Planning and Management Actions

- **Habitat Protection:** Conserve natural forests, wetlands, and grasslands within or adjacent to the tea estate.
- **Native Species Plantation:** Prioritize indigenous tree, shrub, and ground cover species for afforestation, shade management, and buffer zones.
- **Pollinator Conservation:** Maintain hedgerows and flowering plants to support bee and butterfly populations.
- **Agroforestry and Mixed Cropping:** Introduce biodiversity-friendly agricultural practices.
- **Invasive Species Control:** Monitor and manage invasive alien species that threaten native biodiversity.

4. Sustainable Agrochemical Management

- **Integrated Pest Management (IPM):** Reduce reliance on chemical pesticides and fertilizers; promote biological controls and organic practices.
- **Buffer Zones for Chemical Use:** Establish no-spray zones around water bodies and sensitive habitats.

5. Stakeholder Engagement

- **Community Participation:** Involve workers, local communities, and neighboring farmers in conservation initiatives.
- **Training and Awareness:** Conduct biodiversity education programs for estate staff, workers, and surrounding communities.
- **Partnerships:** Collaborate with NGOs, academic institutions, and government bodies for technical support and capacity building.

6. Monitoring and Evaluation

- **Biodiversity Monitoring Protocols:** Regularly monitor indicator species, habitat health, and ecological changes.
- **Use of Technology:** Incorporate GIS mapping, camera traps, and citizen science approaches where the public participates voluntarily in the scientific process to address real-world problems.
- **Review and Adaptive Management:** Update the BAP periodically based on monitoring results and changing environmental conditions.

7. Reporting and Transparency

- **Documentation:** Maintain records of conservation actions, monitoring data, and outcomes.
- **Public Disclosure:** Share achievements and challenges through sustainability reports or certification audits.

8. Integration with Estate Operations

- **Mainstreaming Biodiversity:** Integrate biodiversity considerations into estate management plans, procurement practices, and worker welfare policies.
- **Eco-restoration of Degraded Areas:** Rehabilitate abandoned sections or degraded land patches with native vegetation.



CONCLUSION

A Biodiversity Action Plan is not just an ecological commitment but also a business strategy for tea estates to ensure soil stability, climate resilience, and market credibility through certifications and eco-labelling. Protecting biodiversity today ensures the long-term sustainability of tea cultivation and the well-being



Sample BAP attached as annexure







E 4.2 – There shall be no degradation of the natural ecosystem and deforestation of forest land or any other form of encroachment in the forest land as per relevant legal requirements. At a minimum, the entity should be able to demonstrate compliance with non-deforestation from 2014 onwards.

Climate management - ZTCP

Documents to be Prepared and recorded

- Historical land use records (maps, satellite imagery if available)
- Land ownership and lease documents
- Forest clearance records (if applicable)
- Legal compliance records (e.g., NOC from Forest Department)
- Records showing land under tea cultivation prior to 2014
- Affidavit/declaration of no encroachment or deforestation
- Environmental Impact Assessment (if applicable)

Processes to be maintained

- Visual inspection of :
 -  Tea cultivation boundaries
 -  Nearby forest land (to check for recent clearance or encroachment)
- Compare current land use with older records (e.g., Google Earth imagery)
- Check for:
 -  Tree cutting, soil degradation, or changes in ecosystem health
 -  Community complaints or forest official notices (if any)
- Interview:
 -  Estate management regarding land expansion history
 -  Nearby community members or field workers on any recent land clearing

E 4.3 Identification and management of existing natural and native ecosystems in and around the tea garden and ensuring that they are left in their existing natural form. No conversion of an existing natural ecosystem in any form or use should be carried out. - **MCP**

Documents to be Prepared

- Map showing natural/native ecosystems in and around the tea garden
- Biodiversity registers or list of flora, fauna, and habitats
- SOP or plan for protection and management of these ecosystems
- Declaration of no conversion of natural ecosystems
- Monitoring records or photographic evidence
- Staff training records on ecosystem conservation

E 4.4 The verified facility should maintain shade trees of the native variety and shall have a plan for afforestation within and around tea plantations without interrupting the existing natural ecosystem - **OCP**

Documents to be Prepared

- Shade tree management/plantation plan with native species
- Map or layout showing afforestation zones
- Evidence of planting (photos, records)
- SOP ensuring no harm to existing natural ecosystems
- Monitoring or maintenance log



Afforestation Calculation:

What is a Tree ?

- ☞ A tree is a woody plant that has branches supported by a trunk or a body of at least 10 cm diameter at breast height i.e. at least 4.5 ft. high from the ground.

What is Riparian Vegetation?

- ☞ It is an area adjacent to a stream, lake, or wetland comprising a combination of trees, shrubs, and/or other perennial plants, that provides conservation benefits. It should not be considered as afforestation.

What is meant by the term Afforestation ?

- ☞ The International Panel on Climate Change (IPCC) Guidelines define afforestation as the "planting of new forests on lands which, historically or till the present times, have not contained forests."

How to calculate Afforestation area ?

- ☞ The area can be calculated as per the following equation:

$$\text{Area (in Ha)} = \frac{\text{Total no. of trees planted}}{107}$$

(consider only the trees aged 5 years or more)

Ref. The equation is based on the canopy diameter assumption for medium semi mature trees.

E 4.5 Wildlife within and around the facility shall be documented and analyzed in case any prominent change occurs. These species shall be protected and measures shall be taken to see that there is no confinement, hunting, trafficking or commercial collection. All relevant laws for wildlife protection are to be complied with. - **MCP**

Documents to be Prepared

- Wildlife inventory with date-wise records
- Wildlife monitoring or change analysis reports
- SOP or guidelines on protection measures
- Records of awareness/training for staff
- Compliance checklist with wildlife protection laws
- Incident log (if any) on wildlife harm/prevention

E 4.6 Verified units shall promote native vegetative barriers between crop production and human activity (such as schools, worker housing and public roads), and natural ecosystems to reduce the possibility of any cross-contamination of fertilizer or PPFs into those areas - **OCP**

Documents to be Prepared

- Site map showing native vegetative buffer zones
- Records of native species planted or maintained as barriers
- SOP on buffer maintenance and contamination prevention
- Inspection or monitoring records for buffer effectiveness
- Photos or geo-tagged evidence of vegetative barriers
- Training records on buffer zone importance for workers

E 4.7 The plant protection formulations and chemical fertilizers preparation, mixing, usage and application shall not be carried out within the buffer zone of 5 meters distance from water bodies, wildlife habitats, areas having human habitation and movement and areas used for other agriculture activities. If there are no options for maintaining such distance due to a unique topography, the producer shall use a suitable organic formulation to ensure that there is no chance of contamination beyond the application area. - **MCP**

Implementation Requirements

Buffer Zone Maintenance

Mandatory 5 meters buffer must be maintained between:

- Water bodies (ponds, rivers, streams)
- Wildlife habitats (natural forests, sanctuaries, biodiversity areas)
- Human habitations and movement zones (villages, paths, estate quarters)
- Areas under other agricultural activities (other crop fields).

Preparation and Application Restrictions

- Mixing, preparing, and applying plant protection chemicals and fertilizers must be conducted outside the 5-meter buffer zone.
- No chemical handling activities should occur inside the buffer zone to prevent contamination.

Alternative Action in Special Cases

If maintaining a 5-meter distance is **not possible** due to:

- **Unique topography** (steep slopes, confined spaces, narrow land strips, etc.)
- The producer **must use a suitable organic formulation** (such as certified biopesticides, biofertilizers).
- Organic options should ensure **zero risk of contamination** beyond the intended application area.

Documentation and Proof

1. Maintain **field maps** showing marked buffer zones.
2. SOPs for preparation, mixing, and application of PPFs and fertilizers
3. Records/logs of application dates, areas, and formulations used
4. Evidence of alternative organic formulations used (if buffer not maintained)
5. Monitoring records of contamination checks
6. Training records on safe application near sensitive zones



E 5 – Waste Management

E5.1 – Sustainable management of waste which minimizes impact on the environment and community is to be integrated into the operations. The waste management plan shall include identification, opportunities for prevention, categorization, segregation, reduction, recycling and environment-friendly disposal by ensuring waste hand over to government authorized waste management operators based on the type of wastes handling approval. Practices like the reuse of non-hazardous waste, vermicomposting and biochar application are to be implemented based on feasibility. The process to sensitize all the relevant stakeholders is to be an integral part of the plan. – **Climate management – MCP**

Documents to be Prepared

- Waste Management Plan including:
 - Waste identification and categorization
 - Strategies for prevention, segregation, reduction, and recycling
 - Feasibility assessment for reuse (e.g., vermicomposting, biochar)
- Records of waste generation and disposal
- SOPs for environmentally friendly disposal methods
- Evidence of reuse and recycling initiatives
- Stakeholder training/sensitization records and awareness materials
- Monitoring reports on waste handling practices and impact assessments

Largely found wastes in Tea gardens and factories

HAZARDOUS WASTE	NON HAZARDOUS WASTE	BIO MEDICAL WASTES	NON BIO-MEDICAL WASTE
Broken glass bulbs, tube lights	Residue of Vegetables	Anatomical Waste	Used Gloves
Empty Chemical Containers	Paper Wastes	Expired Medicines	Used Masks
Residue of burnt oil	Organic Wastes	Cotton Swabs	Needles, blades
Oil soaked dresses, gloves or similar			
Toxic Items			

Refer Hazardous-waste-management
-rules-2016

Refer Bio-Medical Waste
(Management and Handling)
Rules, 1998, amendment 2016

Sample Waste Types and Management Strategies

WASTE TYPE	SOURCE	MANAGEMENT ACTION	FINAL DISPOSAL/USE
Organic waste (leaf litter, pruning residues)	Field operations	Composting at designated compost pits	Use as organic manure in fields
Empty pesticide/fertilizer containers	Field store, application areas	Triple rinsing, puncturing; store in labeled hazardous waste room	Hand over to authorized hazardous waste recyclers
Domestic waste (food waste, kitchen scraps)	Worker housing, canteen	Segregation at source; compost organic waste	Compost or use in biogas units
Non-recyclable plastics (packaging waste)	Factory packing area, office	Segregation; minimize use by switching to eco-friendly alternatives	Hand over to municipal/non-hazardous waste handler
Recyclable materials (cardboard, paper, plastic bottles)	Factory office, colony, warehouse	Collect separately; store in dry condition	Sell to licensed recyclers
E-waste (computers, electrical equipment)	Office, factory	Storage in e-waste room	Dispose through authorized e-waste recyclers
Factory sludge (if applicable)	Factory wastewater treatment plant (if any)	Dry and test for contamination	Use as compost if safe or hand over to waste handler
Used oil and lubricants	Machinery maintenance (factory)	Collected in leak-proof drums	Hand over to authorized hazardous waste recycler

Key Processes to be maintained

- **Segregation at Source:** Color-coded bins for organic, recyclable, non-recyclable, and hazardous wastes at all generation points.
- **Storage:**
 - ☛ Designated temporary waste storage areas away from water bodies and habitation.
 - ☛ Signage for hazardous waste storage areas.
- **Collection and Transportation:** Scheduled daily collection of waste to central storage points.
- **Recycling and Disposal:** Only licensed vendors to be used for recycling/disposal.
- **Record Keeping:** Maintain logs for waste generation, disposal receipts, and vendor authorizations.

Awareness and Training

- Conduct regular training for field workers, factory staff, and colony residents on waste segregation, handling, and reporting.
- Display posters and instructions at strategic locations (canteens, colonies, factories).



Monitoring and Review

- Monthly internal audits to assess:
 - ☛ Waste segregation effectiveness
 - ☛ Cleanliness of storage areas
 - ☛ Disposal record maintenance
- Annual review of the Waste Management Plan for necessary updates

Emergency Handling Plan

- In case of accidental hazardous material spillage:
 - ☛ Immediate containment (sand/absorbent material)
 - ☛ Reporting to Environmental Manager
 - ☛ Proper clean-up and documentation

Wastewater Treatment Process Flow Diagram

This diagram outlines the typical stages of industrial wastewater treatment from a factory outlet to discharge, incorporating crucial control points for regulatory compliance and operational efficiency.

1. Factory Outlet

Raw industrial wastewater exits the production facility.

CRITICAL: Dedicated Wastewater Piping

CRITICAL: Rainwater Line **MUST** be Separate

2. Wastewater Collection Sump / Equalization Tank

Wastewater is collected here to homogenize flow and pollutant concentration, preparing it for subsequent treatment stages.

Overflow Prevention (Sensors & Alarms)

Adequate Capacity Management

3. Primary Treatment

Removal of large solids, suspended particles, and some organic matter through physical processes like screening, grit removal, and sedimentation.

Regular Maintenance (Screens, Grit Chambers)

Efficient Sludge Management & Disposal

4. Secondary Treatment

Biological processes (e.g., activated sludge, aeration) are used to remove dissolved and colloidal organic matter.

Process Monitoring (DO, pH, Nutrients)

Controlled Recirculation (if needed)

5. Tertiary Treatment (Filtration & Polishing)

Advanced treatment steps to remove remaining suspended solids, pathogens, specific pollutants, and nutrients. This often includes filtration (e.g., sand filters, membrane filtration) and disinfection.

Filter Backwash & Cleaning

Accurate Disinfection Dosing

6. Treated Effluent Holding Tank / Pit

A temporary storage point for treated wastewater before final discharge.

CRITICAL: NEVER Go Out Without Treatment (No Bypass)

7. Monitoring and Testing Point (Pre-Discharge)

The final stage where the treated effluent is rigorously tested to ensure it meets all regulatory standards before release.

Comprehensive Testing (PCE Parameters)

Output **NEEDS** to be Tested (Filtration Confirmation)

Is Effluent Meeting PCE Guidelines?

YES (Proceed to Discharge)

NO (Divert for Re-treatment)

8. Discharge Point (Outside Factory Boundary)

Compliant treated wastewater is safely discharged to the environment (e.g., river, public sewer, irrigation).

Maintain Detailed Records for Audit

E 5.2 No burning shall be practiced as a method of waste disposal. A policy shall be in place for the management of plastic production or purchase, use, and end-of-life treatment that is updated periodically. Plastic items, PVC and other non-biodegradable and toxic wastes shall never be burnt and shall be disposed of as per government regulations - **MCP**

Documents to be Prepared

- Written commitment/policy explicitly prohibiting open burning of waste
- SOPs on safe disposal of plastic, PVC, toxic and non-biodegradable wastes
- Waste segregation records showing proper classification of waste types
- Records of authorized disposal (e.g., receipts from licensed waste handlers)
- Evidence of compliance with local/state government waste disposal regulations
- Internal monitoring reports on waste disposal practices
- Awareness/training records for workers on prohibited waste disposal methods

E 5.3 All hazardous wastes shall be stored in a secured and weatherproof store ensuring access control for unauthorized personnel and external negative impact on the environment. - **MCP**

Documents to be Prepared

- Hazardous Waste Inventory and Classification
- SOPs for hazardous waste handling, labelling, and storage
- Storage area layout/plan with security and weatherproofing features
- Access control logs or evidence of restricted access (e.g., lock systems, signage)
- Incident logs related to hazardous waste (spills, leaks, unauthorized access)
- Environmental risk assessments for storage sites
- Training records for personnel handling hazardous waste
- Compliance records with local/state hazardous waste management regulations



- Statutory approvals
- Landfill design documents/layouts
- Environmental risk assessment
- Monitoring records (leachate, odour, etc.)



E 5.4 The landfills and dumps within the verified facility shall be as per the approval of the applicable statutory authority and have a design that minimizes risks of environmental contamination and damage to human health. – **OCP**

Documents to be Prepared

- Copy of valid **consent/approval** for wastewater discharge from the relevant regulatory authority (e.g., Pollution Control Board)
- **Wastewater management plan** outlining treatment, discharge points, and compliance measures
- **Test reports** of wastewater quality (minimum once a year or as per authority's recommendation)
- **Monitoring logs** showing dates, parameters tested, and results
- **SOPs** for operation and maintenance of wastewater treatment systems (if applicable)
- Records of **communication or correspondence** with regulatory authorities
- Documentation of **corrective actions** taken in case of non-compliance or test failures
- Training/awareness material for relevant staff on wastewater discharge protocols

E 5.5 Appropriate regulatory and government authority requirements shall be followed for the discharge of any wastewater from the tea factory and tea gardens. The testing frequency shall be a minimum of once a year or less, if recommended by the approving authority - **MCP**

E 5.6 Human sewage-contaminated water (water from sewers and water that may be contaminated with run-off from sewage treatment facilities) shall not be applied in the tea plantations.- **MCP**



Documents to be Prepared

- Sewage Contamination Risk Assessment
- Training Records
- Water Application Records
- Corrective Action and Non-Conformance Reports

E 5.7 The garden or factory should not deposit into the natural water bodies, surface soil, or pit any form of organic or inorganic solids, such as domestic or industrial waste, rejected products, construction debris or rubble, soil, and stones from excavations, rubbish from cleaning land or other materials - **MCP**

Human Sewage Water contamination to the Garden

Documents to be Prepared

- Solid Waste Management Policy/Protocol
- Waste Inventory Log/Register
- Waste Disposal Records with Vendor Details
- List of Approved Waste Disposal Vendors
- Site Inspection and Monitoring Reports
- Photographic Evidence of Disposal Practices
- Training Records on Waste Management
- Map Showing Waste Collection and Disposal Points

E 5.8 - Incineration of any type of waste can only be done if the entity has a legally approved permit or license that specifically mentions this activity. In such a case all the requirements must follow the methods approved by the statutory authority. In all other cases, burning/ incineration is completely prohibited. - **MCP**



Example of Medical Waste Incinerator

Documents to be Prepared

- Incineration Permit or License (if applicable)
- Waste Incineration Approval Documentation
- Compliance with Statutory Authority Guidelines
- Incineration Records
- Waste Management Policy and Procedures
- Environmental Impact Assessment (if applicable)
- Audit or Inspection Reports
- Corrective Action and Non-Conformance Reports
- Employee Training Records on Waste Management
- Incident Logs (if applicable)

E 6 – Energy Management

E 6.1 – The verified facility shall make continuous efforts to optimize the usage of energy in its operations through a documented energy management plan including monitoring of the effectiveness. - Climate management - **MCP**

E 6.2 – The facility must carry out an energy audit of all processing areas in the garden and factory by a competent agency or individual in a minimum frequency of three years. In-process transportation and storage areas within the facility should be included in the scope of the audit. Documented plans to be prepared to address the actions arising out of the energy audit carried out in the facility - Climate management - **MCP**

E 6.3 – The verified facility shall be aware of and demonstrate compliance with national legal obligations with respect to energy use, energy use-related emissions, fuel use, electrical power, and fuel-burning installations. - **MCP**

Documents to be Prepared

- Energy Management Plan
- Energy Audit Reports
- Energy Audit Documentation (Competent Agency or Individual as per trustee qualification criteria available in trustee website)
- Energy Audit Action Plans
- Climate Management Strategy
- Energy Usage and Emissions Monitoring Records
- Compliance Documentation with National Energy Legislation
- Fuel Use and Energy Use-Related Emissions Records
- Records of Energy Use-Related Installations (e.g., Fuel-Burning Installations)
- Training Records on Energy Management and Legal Compliance



Sample Energy Audit checklist attached –
Annexure - tSTF EAC 01 _ Sample Energy Audit Check List

Sample Plan for Energy Conservation

SECTION	OBSERVATIONS	REMEDIAL MEASURES
1. Factory Lighting	At present factory's lighting load is 30 Amps which consists of CFL and tube lights. Although reflectors are fitted, there is scope to bring down the load to 20 Amps at least by going for LED type bulb.	1. Conversion to LED. 2. Rechecking/replacing old wires, where there is leakages etc. 3. Proposal will be forwarded for capex sanction.
2. Water Pump	At present factory's lighting load is 30 Amps which consists of CFL and tube lights. Although reflectors are fitted, there is scope to bring down the load to 20 Amps at least by going for LED type bulb.	1. Proposal will be sent for capex sanction.
3. Trough Fans	At present 12 nos trough fans are fitted with 5 HP motor, which can be brought down to 3 HP with energy efficient light weight fan.	1. Already 1 nos. New trough has been fitted with 2HP energy efficient fan and other 5HP can be stepped down in phase manner only.
4. Trough Conveyer	The present leaf carrying conveyer has 2 nos. 2HP × 1HP motors which can be down-sized to 1 nos. 2HP motor by installing monorail.	1. Already proposed in the capital programme.
5. All electrical motors above 15HP and above fitted to Rolling table Rotorvane CTC machine & Drier Hot air fan	There is a total 315 HP (233 KWH) of such motors on an above 15 HP.	1. With the installation of variable frequency drive all such higher HP motor can be downsized.
6. Panel Board	The existing panel board is 37 years old and most of the switch gear & cables, joints develops leakages.	1. By upgrading the existing panel boards the leakages can be prevented, thereby save in electricity. Proposal sent to H.O.

Sample Plan for Energy Conservation

SECTION	OBSERVATIONS	REMEDIAL MEASURES
7. Gas Burners	The conventional direct fired gas burner consumes higher gas than the energy efficient burners.	1. Proposal sent for replacement of conventional burners to energy efficient burner, which can save 10%-15% of gas consumption.
8. Installation of: a. Feed controller for Rotorvane	With uniform feeding desired output can be achieved, which in turn save energy.	Proposal will be sent for capex sanction.
b. Installation of Boiler	Boiler can be put to use in lieu of direct fire heater and although the initial installation cost is high,	Proposal will be sent
9. Supervision at each and every level	Continuous supervision, awareness among the masses and immediate tapping of the leakages can save minimum 5% of the energy loss in any organisation.	1. Periodic checking are done. 2. Awareness meeting are conducted from time to time.
10. All energy consuming devices	Devices are on power mode even if no one is using - like fans, lights, computers	3. Training / Awareness to all staffs & workers on energy conservation awareness & thereby to switch off fans, computers etc when not in use.

E 6.4 - Any long-term negative trend observed in usage efficiency over a seasonal cycle of production should be analyzed and documented actions are taken to improve the same. - Climate management - **OCP**

E 6.5 - The facility should study the feasibility of purchasing or captive renewable energy as a part of the energy management plan. - Climate management. Climate management - **OCP**

Documents to be Prepared

- Energy Usage Efficiency Trend Analysis
- Corrective Action Plans for Energy Efficiency Improvement
- Seasonal Energy Usage Reports
- Feasibility Study on Renewable Energy Purchase or Captive Use
- Renewable Energy Integration Plan
- Energy Management Plan Updates
- Documentation of Actions Taken for Efficiency Improvement
- Renewable Energy Cost-Benefit Analysis
- Employee Training on Energy Efficiency and Renewable Energy
- Climate Management Documentation (related to energy use)



What is Risk?

Risk is the possibility of harm or adverse outcomes resulting from exposure to a hazard. In the context of workplace safety under the *trustea* Code, risk refers to the chance that a hazard—such as unsafe equipment, poor ergonomics, or exposure to chemicals—could cause injury or illness to workers. It is typically evaluated by considering two key factors: the likelihood of the hazard occurring and the severity of its potential impact. Understanding and assessing risk is essential for taking timely and appropriate preventive actions to protect worker health and safety.

Risk Calculation Using Probability and Severity in the *trustea* Safety Segment

In the context of the *trustea* Sustainable Tea Code, ensuring workplace safety is a critical component of responsible management. To proactively manage risks and prevent accidents, it is essential to adopt a structured approach to risk assessment. One of the most effective methods is to evaluate risks based on two core dimensions: probability (likelihood) of an incident occurring and the severity (impact) of its consequences.

This approach enables producers, factory managers, and supervisors to prioritize safety interventions by identifying which hazards pose the greatest threat to workers' health and safety. The process involves:

1. **Identifying hazards** in the work environment—ranging from machinery and chemical use to ergonomics and fire risks.
2. **Assessing the probability** of each hazard materializing, using a scale (e.g., Rare, Unlikely, Possible, Likely, Very Likely).
3. **Determining the severity** of the consequences if the hazard were to occur (e.g., Minor Injury, Major Injury, Fatality).
4. **Calculating the risk level** by multiplying the scores assigned to probability and severity, thereby generating a risk score.
5. **Categorizing the risk** (e.g., Low, Medium, High, Critical) to guide the urgency and type of control measures required.

By integrating this risk matrix approach into day-to-day operations, tea estates and factories can create a safer working environment, ensure compliance with *trustea* requirements, and foster a culture of continuous improvement in occupational health and safety.

Here are a few **simple and relatable examples of risk assessment using the "Possibility × Severity" method**, ideal for safety training across industries like agriculture, manufacturing, and daily workplace activities.

1. Handling Chemical Fertilizer Without Gloves

- **Scenario:** A field worker mixes fertilizer barehanded.
- **Possibility:** 5 (Very likely – happens regularly)
- **Severity:** 4 (Skin burns, rashes, chemical absorption)
- **Risk Score:** $5 \times 4 = 20$
- **Risk Level:** **High Risk**
- **Control Action:** Use gloves, apron, and proper training.

2. Climbing a Ladder Without a Spotter or Helmet

- **Scenario:** Maintenance staff climbs high storage rack without PPE.
- **Possibility:** 4 (Likely to happen due to urgency)
- **Severity:** (Could lead to serious injury or death)
- **Risk Score:** $4 \times 5 = 20$
- **Risk Level:** **High Risk**
- **Control Action:** Mandatory helmet use, ladder spotter, fall arrest system.

3. Storing Heavy Materials Above Head Height

- **Scenario:** Warehouse worker stores 25 kg bags on a high shelf.
- **Possibility:** 3 (Occasional error)
- **Severity:** 4 (Head injury if falls)
- **Risk Score:** $3 \times 4 = 12$
- **Risk Level:** **Moderate Risk**
- **Control Action:** Use lower shelves, signage, stacking guidelines.

4. Using Electric Kettle Near Water Source Without Grounding

- **Scenario:** Staff uses kettle near washbasin with poor wiring.
- **Possibility:** 3
- **Severity:** 5 (Risk of electric shock)
- **Risk Score:** $3 \times 5 = 15$
- **Risk Level:** **Tolerable Risk**
- **Control Action:** Electrical inspection, safe placement, proper grounding.

5. Digital Monitoring of Tea Drying Temperature

- **Scenario:** Operator checks dryer temperature from a digital control panel.
- **Possibility:** 1 (Rarely fails)
- **Severity:** 4 (Could lead to batch loss if fails)
- **Risk Score:** $1 \times 4 = 4$
- **Risk Level:** **Minimum Risk**
- **Control Action:** Maintain equipment; alert system in case of malfunction.

S 1 – Traceability

What is Traceability?

- Traceability refers to the ability to track the movement of a product—from its origin to the final point of sale—through all stages of production, processing, and distribution.
- In the tea supply chain, traceability means being able to identify:
 - Where the tea leaves were grown (estate, smallholder farm)
 - Where they were harvested, handled, and processed
 - Which factory processed them
 - Where and how they were stored, transported, and supplied
- This involves maintaining accurate records at each step and ensuring that every batch of tea can be

How It Works (Simplified)

- Grower/Leaf Source Registration
 - ☞ Each farmer is uniquely identified
- Procurement Log
 - ☞ Factory records how much leaf is collected from whom (daily and grower-wise)
- Batch Processing Records
 - ☞ Tracking tea lots from intake to packaging
- Traceability System
 - ☞ Paper trail or App based (e.g., Tracetea)

trustea traceability system requirements

Traceability is a mandatory zero tolerance criteria of the trustea program. The actual practices and record keeping should be such that at all times the manufacturing unit is able to demonstrate the following:

- ✓ The procurement of green leaves for production is only from the list of trustea verified STGs as per the verification certificate
- ✓ The quantity of green leaf procured from the STGs does not exceed the quantity as per the verification certificate
- ✓ The daily quantity of green leaf from each individual STG is available in the factory on a day-to-day basis.
- ✓ The persons who receive leaf at the factory gate should be fully aware of the above requirements and be able to demonstrate that he is following the same.
- ✓ Updated daily list of invoices of trustea verified tea raised

Apart from the above it is the responsibility of the manufacturing unit that the Farm Diary of the affiliated STGs are updated, particularly with the pesticide application details without fail.

Derived traceability trail from system requirement documents

The documents as mentioned in the system requirements should be such that the following should be available at any time for traceability of any invoice as may be required:

- ✓ List of each individual STG who supplied to the unit on the day and at least three days prior to the invoice date.
- ✓ Chemicals applied by the STGs concerned, one month prior to the date of supply along with the plucking date.

S 1.1 - Records of the volume of verified and non-verified green tea leaf harvests are made available and regularly maintained.-**OCP**

S 1.2 - Records of the volume of verified and non-verified green leaves sold/bought are available and regularly maintained. (The daily record has to be maintained for each individual STG in case of both fully verified or partially verified leaf supplied to the factory)- **MCP**

Documents to be prepared for paper-trail traceability:

Sale/Purchase record of leaves with proper quantification of verified and non-verified tea leaves.

Mandatory records -

Verified green leaf supplier (STG) list

Traceability report - Invoice list

Traceability report - STG-wise daily green leaf supply

Traceability report - STG-wise monthly green leaf supply

Traceability report - Application of pesticide

S1.3 - A clear process of physical segregation of all non-verified tea from Verified tea during manufacturing and storage and invoicing shall be implemented. For any unit that is fully verified, daily leaf supply records of individual farmers shall be maintained to substantiate that all the supplies are from verified growers. The maximum quantity of leaf supplied in a year shall be within the approved quantity in the certificate. (+10% tolerance may be applied to account for seasonal and weather effects) - **ZTCP**

Documents & processes to be followed

- Physical Segregation Process
- Invoicing records showing traceability
- Batch-wise production logs
- Storage area maps or markings
- Daily Green Leaf Supply Register
- Training records to confirm all growers and agents are trained on trustea standard latest version for traceability.



Sample paper-trail traceability document is attached as annexure

Clear process of physical segregation of all non-verified tea from verified tea during manufacturing and storing must be maintained. - example



Trough Area Segregation



Sorting Segregation



Packing & Invoicing Segregation



Storing Segregation

S1.4 There shall be at least one person available at the verified facility who shall be made responsible for traceability and will provide a list of verified tea packed and sold by the facility. The organization shall be responsible for traceability and the manufacturing unit should be able to demonstrate the traceability of the green leaf source for the verified tea manufactured by the facility through its actual practices and record keeping. - MCP



*Note – Compliance on trustea mark and logo must be in line with the Claims Management Policy documents available on trustea website

Documentation

- Qualification, experience and training of the traceability officer
- Invoice to confirm the sale of verified tea
- Use of **trustea** logo as per the guideline

S 2 – Food Safety

S 2.1 – The entity must adhere to a Standard Operating Procedure (SOP) for maintaining food safety including sanitary and hygiene and legal requirements including legal requirements to be followed by all personnel, machinery and processes each stage of manufacturing, storage area, external premises in the manufacturing process from raw material input up to packaged finished product. This should include all necessary guidance for visitors. The SOP should be linked to a food safety risk assessment.– **MCP**

Documentation:

- Standard Operating Procedure (SOP) for Food Safety, Sanitation, and Hygiene
- Legal Compliance Register for Food Safety and Hygiene
- Cleaning and Sanitation Schedule (Daily/Weekly/Monthly)
- Personal Hygiene Guidelines for Workers
- Visitor Hygiene Protocol and Guidance Document
- Training Records on Food Safety and Hygiene Practices
- Food Safety Risk Assessment Report
- Pest Control Records
- Inspection Checklist for Manufacturing, Storage, and External Areas
- Corrective and Preventive Action (CAPA) Records related to hygiene non-conformities

S 2.2 – Compliance with the SOP is to be ensured by adequate effective training and shop floor practices for each area and record keeping to demonstrate the same – **MCP**

S 2.3 - Health and hygiene requirements including adequate dress and footwear are to be ensured for all individuals who enter the food processing area including all employees and visitors.– **MCP**

Documentation:

- | | |
|---|--|
| <ul style="list-style-type: none"> • Training Calendar and Training Module on SOPs • Attendance Sheets / Participant Lists • Training Evaluation / Feedback Forms • Photographic Evidence of Training (if available) • Shop Floor Inspection Records / Checklists • Internal Audit Reports on SOP Compliance • Corrective Action Reports related to non-compliance • Records of Periodic Refresher Training | <ul style="list-style-type: none"> • Personal Hygiene SOP / Policy • Visitor Entry Protocols / Guidelines • Employee and Visitor Declaration Forms (Health and Hygiene) • Issue Register of Protective Gear (e.g., hairnets, gloves, boots) • Health Check-up Records of Workers • Signage / Visual Guidance for Hygiene Practices • Incident Logs for Non-Compliance |
|---|--|

S 2.4 No individual with an infection should be allowed to enter the processing facilities. An adequate and verifiable screening mechanism should be available at the entry point of the unit. –MCP

S 2.5 Visual display mentioning do's and don'ts shall be put up at a prominent location at the entry and in the processing areas in a language/languages understood by all personnel including visitors. –MCP

S 2.6 There must be a facility for proper washing of hands and feet at the entry.–MCP

S 2.7 Segregated changing facilities for males and females shall be provided at the entry the processing unit. –MCP

Key Documents to Prepare:

1. **Entry Hygiene and Safety SOP** – A comprehensive standard operating procedure detailing:
 - ☞ Health screening protocols for infections (S2.4),
 - ☞ Visual communication of hygiene dos and don'ts (S2.5),
 - ☞ Use and maintenance of hand and foot washing stations (S2.6), and
 - ☞ Gender-segregated changing room procedures (S2.7).
2. **Screening and Entry Logbook** – To record daily health checks of all personnel and visitors entering the premises, including screening results and any instances of denied entry.
3. **Visual Display Plan** – A documented list of hygiene instructions in relevant local languages, validated for comprehension by staff and visitors.
4. **Facility Maintenance Checklist** – A daily log capturing:
 - ☞ Functionality and cleanliness of hand and foot washing stations,
 - ☞ Availability of soap, sanitizers, and water,
 - ☞ Cleanliness and usability of segregated changing rooms.
5. **Training & Communication Record** – Documentation of training sessions for entry gate staff, housekeeping, and floor supervisors on the importance and implementation of entry hygiene protocols.

Processes to Implement and Monitor:

- **At the Entry Point:**
 - ☞ Ensure presence of a **trained gatekeeper** to screen all entrants for visible infections and take temperature readings.
 - ☞ Place visual **displays of dos and don'ts** prominently at entry and in processing areas, using languages understood by all.
 - ☞ Install and maintain **hand and foot washing facilities** with clear usage instructions and ensure availability of water, soap, and disinfectants at all times.
 - ☞ Provide and label **segregated changing** facilities for males and females near the entry area with adequate privacy, cleanliness, and ventilation.

- **Ongoing Monitoring and Compliance:**

- Conduct **daily checks** using the facility maintenance checklist and health screening log.
- Regularly **update visual displays** and replace damaged or faded signage.
- Conduct **monthly audits** to review documentation and physical conditions of the entry hygiene system.

- **Corrective Actions:**

- Any failure in screening, hygiene infrastructure, or segregation protocol should be recorded, investigated, and addressed with corrective and preventive actions (CAPA), documented in the facility's health and safety records.



S 2.8 An adequate number of toilets of appropriate hygienic design with separate enclosures for males and females and a modesty partition for the female toilet facilities, shall be provided. The facility should not open directly into food processing, handling or storage area. **-MCP**

S 2.9 The entity shall provide continuous supply of water for the lavatories / urinals including wash basins with soap/ liquid handwash and a foot wash hygiene station with availability of adequate facility for hand drying near the exit area of the lavatory/ urinals. **-MCP**

S 2.10 Sufficient lighting and access pathway are to be provided so that the lavatories / toilets are accessible during all working hours in all weather conditions. **-MCP**





S 2.11 Designated cleaning personnel shall be deployed to maintain all the facilities including toilets. **-MCP**

Procedure and Documentation for Sanitation, Water Supply & Facility Hygiene (S2.8 – S2.11)


To ensure compliance with trustea Code requirements for workplace sanitation, the unit must maintain safe, accessible, and hygienic facilities with proper infrastructure and management systems. The following documents and practices must be established:

Key Documents to Prepare:





1. Sanitation and Facility Hygiene SOP

-  Covers the design, use, and cleaning of toilet and washroom facilities, including gender segregation and modesty requirements (S2.8),
-  Continuous water supply and soap/handwash station maintenance (S2.9),
-  Lighting and access provisions (S2.10), and
-  Deployment and responsibilities of cleaning personnel (S2.11).

2. Facility Design Blueprint or Layout Plan

-  Illustrates toilet block placement, ensuring they do not open directly into food processing, storage, or handling areas.


3. Toilet and Washroom Maintenance Log

-  Daily checklist recording:
 -  Cleanliness status,
 -  Availability of soap, water, and hand-drying materials,
 -  Functionality of foot wash and drainage systems.


4. Water Supply Monitoring Record

-  Documentation of inspections ensuring **uninterrupted water supply** to all sanitation points.

5. Lighting and Accessibility Inspection Report

-  Periodic review report to confirm functional lighting and access to sanitation facilities during all shifts and in varied weather conditions.

6. Cleaning Staff Roster and Training Register

-  List of **assigned sanitation personnel** with documented training on hygiene protocols and facility management.

Processes to Implement and Monitor:

- **Infrastructure Readiness:**
 - ☛ Provide **adequate number of toilets** for the workforce with separate enclosures for male and female users, including modesty partitions for female toilets.
 - ☛ Ensure toilets are located away from food handling or processing zones, with no direct access routes into sensitive areas.
- **Hygiene Facilities:**
 - ☛ Maintain **continuous water supply** to all lavatories and urinals, with functioning wash basins, soap/liquid handwash, and foot wash hygiene stations.
 - ☛ Install **hand-drying stations** (paper towels or dryers) near the exits of all washroom areas.
- **Lighting and Access:**
 - ☛ Equip toilets with **sufficient lighting** and construct durable, all-weather pathways to ensure accessibility throughout the day.
- **Cleaning and Maintenance:**
 - ☛ Appoint **dedicated cleaning personnel** for all sanitation blocks with clear duty schedules and supervisory oversight.
 - ☛ Display cleaning schedules in public view and conduct **spot checks** during operations.



S 2.12 The factory shall keep processing and storage facilities (walls, floor, windows, etc.) clean, well-maintained, and waste-free to avoid contamination. The facility should have good air circulation with extraction fans in dust-prone areas and sufficient light in sorting areas. – **MCP**

S 2.13 A risk management plan shall be developed and deployed for the identification and prevention of contamination of the food in the manufacturing process from input to final output. – **OCP**

S 2.14 Cleaning, sanitation and maintenance are to be followed to ensure the food processing equipment, factory areas, and outlying area including the shopfloor drainage system are maintained in clean and hygienic condition. A plan to carry out adequate microbial tests of the equipment and surfaces to establish the efficacy of the cleaning and sanitation process is to be implemented. – **MCP**

Procedure and Documentation for Hygiene, Contamination Risk Control & Sanitation Effectiveness (S2.12 – S2.14)

To ensure food safety and worker health, the factory must maintain a high standard of cleanliness across all processing and storage areas, supported by documented sanitation practices and risk-based contamination control mechanisms.

Key Documents to Prepare:

1. Hygiene and Infrastructure Maintenance SOP

- ☛ Defines cleaning frequency and responsibilities for all **walls, floors, windows, air vents, and sorting areas**, ensuring they remain clean, dry, and free from waste or obstructions (S2.12).

2. Risk Management Plan for Contamination Control

- ☛ Details **hazard identification**, control measures, and responsibilities across the food production chain—from raw material input to final output—to **prevent food contamination** (S2.13).
- ☛ Incorporates CCPs (Critical Control Points), allergen control, and storage segregation protocols.

3. Cleaning and Sanitation Plan

- ☛ Step-by-step cleaning schedule and procedures for **machinery, shop floor, drainage, and other outlying factory areas**, aligned with Good Manufacturing Practices (S2.14).
- ☛ Includes record-keeping formats for daily, weekly, and monthly cleaning activities.

4. Microbial Testing and Efficacy Evaluation Protocol

- ☛ A documented plan for **regular swab and microbial testing** of equipment, surfaces, and air to validate the effectiveness of sanitation measures.
- ☛ Includes lab testing frequency, sampling areas, and corrective actions.

5. Facility Layout with Airflow and Lighting Plan

- ☛ Blueprint showing **air circulation units, exhaust fans** in dust-prone areas, and **lighting intensity** in sorting zones to prevent cross-contamination and promote visual hygiene checks.

Processes to Implement and Monitor:

• Facility Hygiene Maintenance:

- ☛ Ensure all physical infrastructure—including walls, floors, ceilings, and ventilation units—are cleaned regularly and maintained to avoid buildup of dust or debris.
- ☛ Install air circulation systems with extraction fans in dusty areas and maintain adequate lighting in sorting/inspection zones.

- **Contamination Risk Mitigation :**

- Establish a **risk management** team to regularly review raw material sourcing, process flow, packaging, and dispatch to detect and prevent any point of contamination.
- Apply **preventive controls** such as zoning (wet/dry), physical barriers, cleaning between shifts, and separation of allergens and chemicals.

- **Sanitation Protocol and Verification :**

- Assign dedicated sanitation teams for daily cleaning of processing equipment, drainage systems, and peripheral areas.
- Conduct weekly inspections and swab tests to evaluate hygiene effectiveness and address non-compliances immediately.
- Document and track microbial load trends to improve sanitation strategies over time.



Safe Storage of tea bags



Covered conveyor for hygienic transfer

S 2.15 Any lubricant or cleaning material that is applied on equipment and surfaces in direct contact with the material under process must be food grade as certified by the manufacturer. If water is used for cleaning, periodic tests must be carried out to ensure the water used for cleaning is free from microbial contamination.- **MCP**

S 2.16 A designated place must be available to keep disinfectant and other cleaning materials, separated from the processing area to prevent contamination.- **MCP**

S 2.17 The factory has to take adequate and verifiable measures to ensure there is no entry and infestation of rodents, pests and insects in all processing and storage areas.- **MCP**

Procedure and Documentation for Safe Chemical Use, Cleaning Material Storage & Pest Control (S2.15 – S2.17)

To maintain hygienic production environments and avoid cross-contamination, the entity must implement strict controls on the use of cleaning agents, ensure safe storage of chemicals, and take proactive pest management measures across processing and storage zones.

Key Documents to Prepare:

1. List of Approved Food-Grade Cleaning Materials and Lubricants

- ☞ Maintain a documented list of all **lubricants, greases, and cleaning agents** used on surfaces or equipment that come in direct contact with tea or related materials, along with **manufacturer's food-grade certifications** (S2.15).

2. Water Quality Monitoring Plan for Cleaning Water

- ☞ Include **periodic microbial testing protocols** (e.g., for E. coli, coliforms) of water based on IS10500 standard used for cleaning equipment and surfaces. Maintain lab reports and logs of **corrective actions** in case of non-conformities (S2.15).

3. Cleaning Agent and Disinfectant Storage SOP

- ☞ Define designated, locked storage areas for all disinfectants and chemicals, clearly segregated from processing zones with proper labelling, MSDS (Material Safety Data Sheets), and handling instructions (S2.16).

4. Integrated Pest Management (IPM) Plan

- ☞ A written strategy detailing pest **monitoring, control, and prevention methods** such as sealing entry points, using traps, regular inspections, and pest-proofing of doors/windows.
- ☞ Include vendor contracts (if outsourced), pesticide usage logs (if applicable), and evidence of **verifiable actions** to prevent rodent and insect infestation (S2.17).

Processes to Implement and Monitor:

- **Safe Use of Chemicals:**

- ☞ Ensure **only food-grade lubricants and cleaning agents** are used on direct-contact surfaces; verify with **supplier certifications** during procurement.
- ☞ Conduct **training for sanitation staff** to understand which materials are safe for food-contact equipment and how to handle them.

- **Water Safety for Cleaning:**

- ☞ Perform **quarterly microbial analysis** of cleaning water and maintain records.
- ☞ Use filtration or UV systems where needed and stop usage immediately upon detection of contamination, followed by corrective measures.

Processes to Implement and Monitor:

- **Storage of Cleaning Materials:**
 - 🌿 Construct and maintain a **separate, labelled chemical storage area**—away from tea handling or storage zones—to hold disinfectants and other sanitation materials.
 - 🌿 Implement **inventory tracking** and regular checks to prevent accidental misuse or spillover.
- **Pest Control and Infestation Prevention:**
 - 🌿 Perform routine pest inspections (minimum monthly) and document evidence of bait/trap stations, pest-proofing, and corrective measures.
 - 🌿 Keep entry points closed or sealed, especially near raw material storage or packaging zones.
 - 🌿 Monitor for signs of infestation and record action plans and outcomes.

S 2.18 The factory is able to provide evidence of residue testing done twice a year in compliance with requirements stipulated by the Plant Protection Code (PPC) and FSSAI for Tea. Residue testing is to be done twice in a year with a gap of 6 months (+/- one month) during the production period. (In case of a break-in in the production process the test needs to be conducted within 2 months from the date of commencement). The verified facility will promptly notify the buyers if the sold tea appears to reach/exceed the maximum residue limits.- **MCP**

Pesticide Residue Testing and Buyer Notification (S 2.18)

To ensure food safety and compliance with national standards, the factory must conduct regular residue testing and take corrective actions when required, maintaining transparency with buyers.

Key Documents to Prepare:

1. Residue Testing Plan

- 🌿 A documented plan outlining the schedule for **biannual residue testing** in compliance with the **Plant Protection Code (PPC) and FSSAI** standards.
- 🌿 The plan should specify:
 - ✓ Tests to be conducted **twice a year** during the production period.
 - ✓ A **minimum gap of 6 months (+/- 1 month)** between tests.
 - ✓ Residue test for non-approved or banned chemicals for tea as per latest FSSAI guideline

Key Documents to Prepare:

2. Residue Testing Report

- ☞ Maintain **NABL-certified laboratory reports** for each test.
- ☞ Report must have all of the Legally approved chemical test results and additional non-approved chemical tests also for MRL as per latest PPC or FSSAI testing guidelines
- ☞ Keep records of **corrective actions taken** in case of exceedance.

3. stakeholders and Buyer Notification Protocol

- ☞ A procedure for prompt notification to buyers if a test reveals that the sold tea reaches or exceeds the maximum permissible residue limits of approved chemicals or presence of banned chemicals
- ☞ Record of communication (e.g., emails or letters) to be retained for audit and traceability.

Processes to Implement and Monitor:

- **Testing and Lab Engagement:**

- ☞ Engage with **NABL-accredited or FSSAI-approved** labs for conducting the tests.
- ☞ Schedule sampling and testing as per the production calendar and **retain evidence of sample collection dates.**

- **Record-Keeping and Audit Readiness:**

- ☞ Create a **Residue Test Register** with date of sampling, lab report number, test results, corrective actions (if any), and buyer notification (if needed).

- **Buyer Communication:**

- ☞ In case of MRL exceedance, initiate immediate written communication to buyers and **pause dispatch** until the issue is addressed.

- **Internal Review and Risk Mitigation:**

- ☞ Use test data to **review pesticide use practices**, work with suppliers to ensure PP C compliance, and educate workers and supervisors.



Sample Food Contamination Risk Assessment Policy _Annexure
- tSTFFCRA01, Sample tea Food Safety SOP - tSTF
FSMSOP 01 and Sample Food Safety Risk Assessment
_ Annexure _ tSTFFSRA01

S3 - Occupational Health And Safety

S 3.1 - A policy statement of the organisation must be in place on the occupational health and safety of the workers that include the legal requirements.- **MCP**

S 3.2 - There shall be documented risk assessment and verifiable action plans, covering all potential occupational health or safety risks of the workforce. - **MCP**

S 3.3 - There shall be documented training in place for all workers engaged in various jobs as appropriate to the task and as per the risk assessment. - **MCP**

S 3.4 - The verified facility shall provide a safe working environment with respect to building safety, machinery safety, fire safety, electrical safety, air quality, noise, and lighting levels which shall all be within safe parameters as per legal requirements.- **MCP**

Documentation and Process Framework for S3.1-S3.4 Compliance

1. Occupational Health and Safety (OHS) Policy

- **Document:** OHS Policy Statement
 - ☞ Signed by top management.
 - ☞ Aligned with national legal requirements (e.g., Factories Act, Building & Other Construction Workers Act).
 - ☞ Clearly communicates commitment to health, safety, and continuous improvement.
- **Process:**
 - ☞ Annual review and approval by management.
 - ☞ Display in local language(s) or the language that workers understand at the workplace.
 - ☞ Dissemination during induction and periodic staff meetings.

2. Risk Assessment and Action Plan

- **Document:** Occupational Health & Safety Risk Assessment Report
 - ☞ Identification of hazards across tasks, departments, and equipment.
 - ☞ Assessment based on probability and severity (e.g., Risk Matrix).
 - ☞ Includes chemical, physical, mechanical, fire, electrical, ergonomic, and psychosocial risks.
- **Document:** OHS Action Plan
 - ☞ Specific corrective and preventive measures with responsible persons and deadlines.
 - ☞ Status tracking of actions (open/closed/pending).
- **Process:**
 - ☞ Review and update risk assessments annually or upon any major process or layout change.
 - ☞ Joint participation by workers and safety officers in risk identification.
 - ☞ Monthly review of open actions in OHS committee meetings.

3. Training and Awareness

- **Document:** OHS Training Matrix
 - ☛ Role-wise training needs (e.g., fire safety for security staff, PPE use for shopfloor workers).
- **Document:** Training Calendar and Attendance Records
 - ☛ Records of induction training, job-specific training, fire drills, and refresher sessions.
- **Process:**
 - ☛ Induction for all new employees.
 - ☛ Annual refresher training based on risk exposure.
 - ☛ Evaluation of training effectiveness (pre-post quiz or observation).

4. Safe Work Environment Assurance

- **Document:** Workplace Safety Audit Checklist
 - ☛ Covers building safety, emergency exits, ventilation, lighting, noise, electrical systems, etc.
- **Document:** Preventive Maintenance and Safety Inspection Records
 - ☛ Includes machinery safety checks, fire extinguisher inspections, and electrical panel audits.
- **Process:**
 - ☛ Monthly internal safety audits and workplace inspections.
 - ☛ Immediate corrective action tracking via CAPA logs.
 - ☛ Calibration and maintenance schedule adherence.

5. Occupational Health Monitoring

- **Document:** Health Check-up Records
 - ☛ Annual medical reports for employees, especially for high-risk roles (as per legal requirements).
- **Process:**
 - ☛ Partner with certified medical providers.
 - ☛ Track health trends and correlate with working conditions.

6. Emergency Preparedness and Incident Reporting

- | | |
|--|--|
| <ul style="list-style-type: none">• Document: Emergency Response Plan<ul style="list-style-type: none">☛ Fire, chemical spill, electric shock, structural failure, etc.• Document: Accident/Incident Register<ul style="list-style-type: none">☛ Root cause analysis reports.☛ Near-miss logbooks. | <ul style="list-style-type: none">• Process:<ul style="list-style-type: none">☛ Conduct fire and evacuation drills every 6 months.☛ Immediate incident investigation with documented CAPA. |
|--|--|

7. Worker Participation and Legal Compliance

- **Document:** OHS Committee Meeting Minutes
 - Includes worker representatives, management, and safety officer.
- **Document:** Legal Register for Health & Safety
 - Updated list of applicable laws, inspection reports, and compliance status.
- **Process:**
 - Bi-monthly OHS committee meetings.
 - External audits or inspections followed by CAPA implementation.

Monitoring and Continuous Improvement

- Periodic **Internal Audits** to verify documentation and implementation.
- Use of **Key Performance Indicators (KPIs)** such as number of incidents, training hours per worker, etc.
- Annual **Management Review** of OHS performance.



Sample risk assessment for factory and garden (SOP) is available as an annexure
Sample OHS Policy is available as an annexure



S 3.5 Fuel (petrol/diesel/gas/kerosene coal/firewood shall be stored in such a way that there are no risks from fire and flood or contamination of the area. The fire safety provisions shall be undertaken and documented in accordance with the relevant legal requirement and applicable license based on the type and quantity of fuel being stored.- **MCP**

S 3.6 The verified facility shall have at least one First Aid trained person available in every shift at the operational areas.- **MCP**

S3.7 - In case of any government-mandated health emergency, all applicable protocols must be followed by the entity and adequate records to be maintained to demonstrate compliance. - **MCP**

S 3.8 A register shall be maintained documenting all the occupational health and safety incidents and accidents in the garden and/or factory. A corrective action plan shall be implemented to prevent such occurrences. - **MCP**

Documentation and Process Framework for S3.5-S3.8 Compliance

1. Fuel Storage and Fire Safety Management (S3.5)

- **Document:** : Fuel Storage SOP & Safety Protocol
 - ☞ Covers types of fuels stored (e.g., diesel, LPG, kerosene, firewood), location, containment, and segregation. Explosive License and/ Legal applicable licenses.
 - ☞ Specifies precautions against fire, flood, and environmental contamination.
- **Document:** Fire Safety Compliance Register
 - ☞ Includes fire NOC/licenses from competent authorities based on storage volume.
 - ☞ Records of inspections, extinguisher refills, hydrant checks, and fire drills.
- **Process:**
 - ☞ Weekly visual inspection of fuel storage and fire-fighting systems.
 - ☞ Annual review of legal permits and compliance updates.
 - ☞ All staff near storage trained in fire response and spill containment.

2. First Aid Readiness (S3.6)

- | | |
|--|---|
| <ul style="list-style-type: none"> • Document: First Aid Personnel Roster by Shift <ul style="list-style-type: none"> ☞ Updated list of certified First Aiders in each operational shift. • Document: First Aid Training Certificates and Attendance <ul style="list-style-type: none"> ☞ Records of certification from recognised bodies (e.g., Red Cross, St. John Ambulance). | <ul style="list-style-type: none"> • Document: First Aid Kit Inventory Log <ul style="list-style-type: none"> ☞ Location-wise log for refills, expiry checks, and access control. • Process: <ul style="list-style-type: none"> ☞ Monthly audit of kit supplies and location signages. ☞ Annual certification or refresher training for nominated staff. ☞ Drills and simulations integrated with emergency preparedness. |
|--|---|

3. Health Emergency Compliance (S3.7)

- **Document:** Government Health Emergency Protocol Compliance Log
 - ☛ Includes COVID-19 or similar emergency guidelines issued by MoHFW, Labour Ministry, etc.
 - ☛ Record of SOPs implemented (e.g., sanitisation, distancing, symptom screening).
- **Process:**
 - ☛ Compliance implementation during health emergencies (e.g., pandemic, vector-borne outbreaks).
 - ☛ Maintain documented evidence: circulars, training sessions, procurement logs (masks, sanitisers).
 - ☛ Appoint Emergency Coordinator to track and implement directives.

4. Incident and Accident Documentation (S3.8)

- **Document:** Health & Safety Incident Register
 - ☛ Log of all accidents, injuries, near-misses, illnesses in factory/garden.
 - ☛ Includes type, cause, date, location, person involved.
- **Document:** Root Cause Analysis (RCA) & Corrective Action Plan (CAPA) Log
 - ☛ Includes investigation report, action owner, target date, and status.
- **Process:**
 - ☛ Immediate recording and reporting of all incidents.
 - ☛ Incident review during monthly safety meetings.
 - ☛ Preventive measures integrated into future risk assessments and training content.

Cross-cutting Monitoring Mechanisms

- **OHS Committee Review** to oversee fuel storage, emergency preparedness, and incident reporting.
- **Monthly Compliance Checklist** to track legal adherence, licensing, and documentation updates.
- **Internal Audit and Management Review** to evaluate system performance and make improvements.

S3.9 - All legal compliances related to workforce accidents including statutory reporting, corrective action, and legally mandated actions must be complied with. The entity shall maintain reports on actions taken by the management and compensation given as per law. **ZTCP**

Documentation

1. **Accident Reporting & Investigation Policy** – Outlines roles and steps for legal compliance following workforce accidents.
2. **Incident Register**– Records all accidents with date, nature, location, affected person, and immediate actions.
3. **Statutory Reporting Log**– Tracks notifications to authorities as per legal requirements (e.g., ESI, Factory Inspector).
4. **Corrective Action Register**– Details investigations, root cause, and corrective/preventive measures.
5. **Compensation Records**– Documents compensation paid and acknowledgements as per law.
6. **Training Records**– Evidence of periodic staff training on accident reporting and legal compliance.
7. **Legal Correspondence**– Availability of the record of Legal Correspondence related to accidents as applicable.

Process Steps

1. **Report & Respond** – Immediate reporting of incidents; first aid provided; area secured.
2. **Investigate** – Internal investigation within 24–48 hours; root cause identified and documented.
3. **Notify Authorities** – Report to relevant government body using prescribed legal formats.
4. **Disburse Compensation** – Compensation assessed and paid as per applicable laws; documented.
5. **Implement Corrective Action** – CAPA executed; improvements tracked for effectiveness.
6. **Review & Communicate** – Management reviews reports periodically; learning shared with staff.
7. **Maintain Records** – All documentation filed for audit readiness and legal retention periods.

S 3.10 - Personal protective equipment (PPEs) Including govt. mandated PPEs in public health emergencies with reference tea-specific requirements if any) and clothing shall be provided free of cost to all workers on hazardous jobs, must be suited to the type of work, product (as per the MSDS) or machinery (as per the instruction manual) handled and the PPE should be used properly by the workers. The usage of PPEs must have a clear link with the risk management plan related to workplace health and safety. – **MCP**

Key Documents

1. **PPE Policy & SOP** – Defines procedures for PPE provision, maintenance, and mandatory use.
2. **Risk Assessment & PPE Mapping** – Links job roles and hazards to required PPE based on MSDS/instruction manuals.
3. **PPE Distribution Register** – Record of issued PPEs (including public health-specific PPEs), with worker acknowledgment.
4. **Training Records** – Proof of worker training on PPE use, care, and replacement protocols.
5. **PPE Inspection & Maintenance Logs** – Routine checks for condition, replacement schedules.

Process Steps

1. **Identify Hazards & PPE Needs** – Conduct job hazard analysis and determine PPE based on task, material (MSDS), or machinery.
2. **Procure & Distribute PPE** – Provide appropriate PPE free of cost, including during public health emergencies.
3. **Train Workers** – On correct usage, maintenance, and replacement of PPEs.
4. **Monitor Usage** – Supervisors ensure compliance and correct usage on-site.
5. **Maintain & Replace** – Regularly inspect and replace PPEs as per wear-and-tear or expiry.
6. **Review & Update** – Periodically review PPE effectiveness in line with the risk management plan.

Personal Protective Equipment



Safety guards in all machineries and moving parts

1. Conduct full Risk assessment- Identify hazards, understand risk and train workers.
2. Safeguards – Guards are first line of defense against injuries caused by machine operation. Guards are physical barriers that enclose dangerous machine parts and protect workers against contact with hazardous moving parts.
3. Workplace dress code – Never allow dangling chains, loose clothing, rings or have loose, long hair that could get caught up in moving parts.
4. Training – Regular training of workers is the most important component of preventing accidents and injuries in workplace.

S3.11 - Adolescent workers (who have completed their fourteenth year but have not completed his/her eighteenth year) and women, shall not be involved in handling and spraying agrochemicals and any hazardous processes like handling storage and disposal of hazardous containers, and PPEs. Compliance with the Child Labour Prohibition Act is mandated and the child and young labour policy shall cover Remediation measures in case of violation. **ZTCP**

Documentation

1. **Child and Young Labour Policy** – Outlines prohibition of child labour and restrictions on adolescent-workers and women in hazardous tasks as per legal requirements.
2. **Age Verification Records** – Copies of government-issued IDs or birth certificates for all workers.
3. **Work Allocation Register** – Evidence that adolescents and women are not assigned to hazardous processes.
4. **Hazardous Work Definition List** – Internal list aligned with legal provisions identifying hazardous jobs (e.g., spraying, agrochemical handling).
5. **Remediation Plan** – Procedure for immediate corrective action in case of violation (reassignment, education linkage, etc.).
6. **Compliance Checklist for CLPRA (Child Labour Prohibition and Regulation Act)** – Maintains audit readiness.

Process Steps

1. **Verify Age During Hiring** – Collect and document proof of age for every worker.
2. **Restrict Hazardous Work** – Ensure adolescents and women are not engaged in handling agrochemicals, hazardous waste, or PPEs.
3. **Maintain Work Records** – Track daily assignments to ensure alignment with legal and policy restrictions.
4. **Train Supervisors** – On legal requirements and how to monitor task assignments in the field.
5. **Monitor & Audit** – Conduct periodic internal checks to detect violations.
6. **Apply Remediation** – If violations occur, implement documented corrective actions and update records.

S 3.12 - The verified facility should provide free access to clean and safe (potable as per national or local legislation, whichever is higher) drinking water for all workers (potable as per national or local legislation, whichever is stricter). – **MCP**

S 3.13 - Medical facilities including first aid boxes for workers and their families (as prescribed by the local law) should be provided at work facilities. – **MCP**

S3.14 - The entity shall endeavor to provide toilet facilities / Latrine accommodation in the cultivation area as per relevant regulatory provisions (Plantation Labour Act and State Rules). – **MCP**

DOCUMENTATION

1. Infrastructure Compliance Register

- Records all existing facilities: drinking water stations, toilets, and medical aid points.
- Includes GPS coordinates or mapped location, installation date, and current functional status.

2. Water Quality Test Reports

- Conducted at least twice a year by government-approved or NABL-accredited labs.
- Test parameters: physical (turbidity, color), chemical (nitrate, fluoride, arsenic), biological (E. coli, coliform).
- Reports must meet national/local potable water standards (whichever is stricter). Water test report should follow IS 10500 standard

3. Facility Maintenance Log

- Maintains cleaning schedules and maintenance of:
 - ☞ Drinking water dispensers/filters
 - ☞ Toilets/latrines (including waste disposal methods)
 - ☞ First aid boxes and medical rooms
- Should include inspection date, responsible staff, issues found, and actions taken.

4. Medical Facilities Register

- Inventory of medical facilities at the workplace (nurse presence, dispensary, ambulance access, etc.).
- Record of issued first aid kits, stock replenishment frequency, and emergency contact numbers.

5. Toilet Facility Map

- Visual layout or schematic showing all toilets and latrine points across the facility, especially near work areas in the field.
- Annotated with distance from field clusters to ensure accessibility.

6. Legal Compliance Checklist

- Based on relevant Acts:
 - ☞ **Plantation Labour Act**, local municipal/state health norms, and other labour welfare regulations.
- Confirms legal conformity of number, type, and maintenance of water, sanitation, and medical facilities.



Latrine accommodation in the cultivation area

PROCEDURES

Step 1: Facility Gap Assessment

- Conduct a facility gap analysis at least annually.
- Identify:
 - ☞ Distance to water points and toilets from worker locations
 - ☞ Whether medical/first-aid stations meet minimum staffing and supply norms

Step 2: Installation and Upgrades

- Install new facilities where gaps are found.
- Upgrade old or non-compliant facilities (e.g., replace broken handpumps, add latrine seats).

Step 3: Periodic Testing and Monitoring

- **Water testing:** Preferably twice yearly minimum (pre-monsoon and post-monsoon).
- **Toilet hygiene audits:** Monthly.
- **Medical aid inspections:** Weekly first-aid box check and monthly restocking.

Step 4: Worker Orientation and Signage

- Conduct training for workers on:
 - ☞ Importance of potable water, hygiene, and using toilets
 - ☞ Locations and usage of medical and first aid facilities
- Display visual signage (in local language) near facility points.

Step 5: Internal Audit and Compliance Review

- Annual/ Biannual internal audits to verify
 - ☞ Functional status of facilities
 - ☞ Documentation completeness
 - ☞ Legal compliance status
- Share findings with senior management and include in MRM (Management Review Meetings).

Step 6: Corrective Action and Prevention (CAP)

- When gaps are identified, log in CAP register.
- Assign responsibility, timeline, and verify closure in subsequent audits.

Sample Aspect-Impact Summary Table
(Environment-Focused Refer ISO 14001 for further information)

Aspect	Impact	Severity	Control Action
Use of fossil fuel for boiler	Air pollution, GHG emissions	High	Explore biomass or energy-efficient options
Tea leaf waste (organic)	Odor, uncontrolled decomposition	Moderate	Composting or sell to local farms
Plastic packaging waste	Non-biodegradable waste	Moderate	Reduce, re-use, recycle; engage recyclers
Wastewater from cleaning	Groundwater/soil contamination	High	Use ETP or charcoal-gravel filtration system
Pesticide drum disposal	Soil/water pollution	High	Triple rinse, return to supplier, store safely

Sample Risk Register

Activity/ Area	Hazard/ Aspect	Type	Poss.	Sev.	Risk	Risk Level	Potential Impact	Control Measures
CTC Machine Operation	Hand injury due to moving parts	OHS	4	5	20	High	Amputation, downtime	Guarding, E-stop switch- es, PPE, traing
Tea Handling (Drying)	Contamination from dirty trays	Food Safety	3	4	12	Moderate	Product rejection, health risk	Tray hygiene, cleaning SOP, training
Boiler Operation	Steam burns, explosion risk	OHS	2	5	10	Low	Worker injury, plant damage	Pressure gauge checks, PPE, regular servic- ing
Packing & Storage	Pests in packaging area	Food Safety	3	4	12	Moderate	Product contamination, brand risk	Pest control, sealed storage
Cleaning with Chemicals	Chemical exposure to workers	OHS	3	3	9	Low	Skin/eye irrita- tion, chemical inhalation	PPE, MSDS, controlled usage
Waste water Discharge	Effluent enter- ing nearby soil/water	Environment	2	4	8	Low	Soil/water pollution	ETP setup, filtration unit, regular testing
Power Backup Use	Air/noise pollution from diesel genset	Environment	3	3	9	Low	Air quality degradation, complaints	Low-sulfur fuel, mainte- nance, acous- tic housing
Water Storage & Use	Standing water leading to mosquito risk	OHS	2	3	6	Low	Vector-borne illness	Drainage plan, periodic clean- ing
Tea Tasting Room	Improper hygiene in sample handling	Food Safety	2	4	8	Low	Unsafe samples, consumer risk	Handwashing SOP, clean utensils, gloves
Diesel Storage	Spillage during transfer	Environment	2	4	8	Low	Soil contami- nation, fire risk	Secondary containment, trained handlers



L 1 – Fair Wages and Decent Work

L 1.1 The verified facility shall maintain documents to show the records of all workers employed, including temporary and casual workers, each year in the factory and on-field. The documentation shall include names, the average monthly payment (including cash in-kind), age and gender. Ensure an established process for workers to be provided with information relating to any decision that changes or affects their terms of employment. - **MCP**

Documents to Maintain

1. **Worker Master Register** – Including name, age, gender, employment type (permanent/temporary/casual), joining date.
2. **Wage Register** – Monthly records of payments (cash and in-kind) with proof of acceptance.
3. **Attendance & Work Allocation Records** – To validate employment and workdays.
4. **Employment Terms Register/Letters** – Signed contracts or communication on employment terms.
5. **Change Notification Log** – Record of information shared with workers on any changes in employment terms.

Process to Follow

1. **Worker Data Collection** at induction and updated annually.
2. **Monthly Wage Documentation** with cash and in-kind components recorded and acknowledged.
3. **Maintain Individual Employment Files** with employment terms and any revisions.
4. **Communication Protocol:**
 -  Inform workers of any change in employment conditions (e.g. via notice board, group meetings, or written communication).
 -  Record date and mode of communication for accountability.
5. **Internal Review** of documentation quarterly to ensure completeness and accuracy.

L 1.2 - Equal work shall be remunerated with equal pay.- **ZTCP**

L1.3 - All workers (permanent, temporary, contractual and migrant) shall be paid the same gross wages that comply with national legislation or collective bargaining agreements whichever is higher. If workers are paid per unit weight of harvested tea, on a normal working day they shall be allowed to earn at least the national or sector-established minimum wage. Deductions from wages for any reason shall not be made beyond the provisions of the law and without the consent of the employee. Company policy on wages and the appointment letter shall state that the compensation and remuneration will be made based on applicable CBA or Govt. notified wages. - **ZTCP**

Documents to Maintain

1. **Wage Policy Document** – Outlines commitment to equal pay for equal work, wage rates, and reference to national law or applicable CBA.
2. **Appointment Letters/Contracts** – Include terms of compensation, wage structure, mode of payment, and CBA/Govt. wage references.
3. **Wage Register** – Monthly record of gross wages paid to all workers, categorized by employment type and gender.
4. **Attendance and Output Records** – Track working days, hours, and output (e.g., quantity of tea harvested) to ensure fair compensation per unit and minimum wage compliance.
5. **Payroll Deduction Log** – Maintain justification, legal reference, and consent documentation for any deductions made.
6. **Grievance Register** – Record any complaints raised regarding wage discrimination or unfair deductions and their resolution (Refer grievance management register under general management clause number G1.14)
7. **CBA Copies and Govt. Wage Notifications** – Reference material to validate wage benchmarking.

Process to Follow

1. **Wage Benchmarking & Review** – HR/admin reviews national wage laws and CBAs annually or when updated to revise wage structures accordingly.
2. **Standardized Payroll Processing** – Ensure uniform wage calculation for same roles, regardless of employment category (permanent, contractual, migrant, etc.).
3. **Output Monitoring (if paid per unit weight)** – Track individual output; ensure minimum wage is met even on low-output days.
4. **Pre-approved Deduction Process** – Ensure all deductions are legally permitted and documented with signed consent.
5. **Worker Communication** – Explain wage structure, rights, and deductions at induction and during periodic refreshers. Provide wage slips monthly with clear breakdowns.
6. **Internal Audit & Reporting** – Conduct quarterly audits to verify wage parity, compliance with legal minimums, and deduction practices.
7. **Redress Mechanism** – Provide confidential channels for workers to report wage-related issues. Maintain documentation of follow-up actions.

L 1.4 All workers (permanent, temporary, contractual and migrant) shall be paid the same gross wages that comply with national legislation or collective bargaining agreements whichever is higher. If workers are paid per unit weight of harvested tea, on a normal working day they shall be allowed to earn at least the national or sector-established minimum wage. Deductions from wages for any reason shall not be made beyond the provisions of the law and without the consent of the employee. Company policy on wages and the appointment letter shall state that the compensation and remuneration will be made based on applicable CBA or Govt. notified wages.- **ZTCP**

L 1.5 - For any work done on a closed holiday in the plantation or on any other day of rest, a worker shall be entitled to the legally applicable rates of ordinary wages as in the case of overtime work.- **ZTCP**

L 1.6 If an estate employs adolescent workers, then no adolescent worker shall be given work for more than twenty-seven hours a week and follow all other requirements as maintained in the PLA, 1951- **ZTCP**






L 1.7 - The verified unit (where applicable) shall provide Provident Fund (PF) for all its employees (permanent and temporary) & Gratuity and Pension schemes for all its permanent employees conforming to national norms. PF benefit to be extended to the tea gardens/factories workers from the date of joining. - **ZTCP**

Documentation and Process for Compliance with Clauses L 1.4 – L 1.7




(Wages, Working Hours, Overtime, and Social Security)

Documents to Maintain

1. Wage & Payroll Records

-  Wage Register (with breakdown by worker category: permanent, temporary, migrant, contractual)
-  Overtime Register and Holiday Work Record
-  Payslips with gross wages, deductions, PF contributions
-  Government Wage Notifications / Collective Bargaining Agreements
-  Appointment letters reflecting applicable wage terms

2. Consent & Policy Documentation

-  Wage Deduction Consent Forms
-  Company Wage Policy (stating compliance with Govt/CBA rates)
-  Display of wage entitlements and legal deductions at the workplace

3. Workforce Registers

- ☞ Worker Register with Name, Gender, Age, Category, Date of Joining
- ☞ Attendance and Work Allocation Records (including holiday/overtime work)
- ☞ Adolescent Worker Register with verified age proofs

4. Social Security Records

- ☞ PF Enrollment Documents with UAN details
- ☞ Monthly PF Contribution Receipts
- ☞ Gratuity and Pension Records (as per eligibility)

Process to Follow

1. Wages & Equal Pay (L 1.4)

- ☞ Pay all workers gross wages as per latest Government notifications or CBA, whichever is higher.
- ☞ Ensure piece-rate workers can earn at least the sector minimum wage on normal days.
- ☞ Obtain prior written consent for legal wage deductions.
- ☞ Include wage structure and conditions in appointment letters.
- ☞ Conduct regular wage audits and worker feedback sessions.

2. Holiday and Overtime Pay (L 1.5)

- ☞ Maintain a holiday calendar and track any work assigned on closed holidays or rest days.
- ☞ Pay legal overtime rates for such work (typically double wages).
- ☞ Reflect holiday work payment clearly in payroll.

3. Adolescent Workers' Protection (L 1.6)

- ☞ Verify age through official documents during recruitment.
- ☞ Do not engage adolescents in hazardous tasks.
- ☞ Limit working hours to a maximum of 27 per week for adolescent workers.
- ☞ Follow Plantation Labour Act, 1951 provisions strictly.

4. Social Security Benefits (L 1.7)

- ☞ Register all eligible workers (including temporary) for Provident Fund from the date of joining.
- ☞ Ensure permanent employees are covered under Gratuity and Pension schemes as per law.
- ☞ Display PF details in payslips and provide enrolment assistance.

L 2 – Workers' Rights

L 2.1 The verified facility shall respect the right of all workers to establish and/or join a worker organization of their choice. The facility shall not in any way block the effective functioning of such organisations. A clear process of including inputs received from workers representative shall be considered during the policy making. – **MCP**

L 2.2 The verified facility shall respect the rights of workers to engage in collective bargaining and demonstrate proactive engagement with workers' organisations. – **MCP**

Documents to Maintain





1. **Freedom of Association and Collective Bargaining Policy**
 - ☞ Policy affirming the right of workers to join unions or worker organizations of their choice
 - ☞ Statement prohibiting discrimination or retaliation against worker representatives
2. **Worker Organization Records**
 - ☞ Register of recognized unions or informal worker groups operating within the facility
 - ☞ Records of meetings with worker representatives (minutes, agendas, attendance)
 - ☞ Written feedback received from worker representatives on workplace issues or policies
3. **Communication and Decision-Making Records**
 - ☞ Evidence of worker inputs integrated into policies (e.g. grievance handling, workplace safety, wages)
 - ☞ Circulars or notices showing communication of rights and processes to workers
4. **Collective Bargaining Agreements (where applicable)**
 - ☞ Signed CBAs with timelines, terms, and wage agreements
 - ☞ Records of negotiations or consultations held with worker organizations

Process to Follow

1. **Ensuring Freedom of Association (L 2.1)**
 - ☞ Communicate to all workers their right to freely join or form worker organizations
 - ☞ Do not interfere in the formation, leadership, or activities of any worker group
 - ☞ Establish an open-door policy for representatives to raise concerns without fear
 - ☞ Include a step in policy development to formally seek feedback from recognized worker groups and document how inputs were addressed

Process to Follow

2. Enabling Collective Bargaining (L 2.2)

-  Actively engage in good faith with registered unions or worker organizations on employment terms and working conditions
-  Ensure management representatives participate in scheduled consultations or negotiations
-  Maintain a process for reviewing and implementing the outcomes of collective bargaining agreements
-  Document all agreements and monitor implementation with joint review mechanisms

L 2.3 - The verified facility shall not permit the use of forced or bonded labour (As per ILO definition of slave labour) under any circumstances, including workers sourced through third-party contractors. Training on employment must include all workers (including new joiners) ensure pertaining necessary information about the termination, retirement and disciplinary action. Documented HR procedure for transparent recruitment and training procedure for migrant workers with clear, complete information about their working terms and conditions as well as their rights, pre-departure and post-arrival, in a language that they understand. Separate policy for migrant labour must include the necessary information on freedom of movement, terms of joining and leaving the organization etc. Process of Management Monitoring must be ensured at all levels. - **ZTCP**



L 2.4 - No labour shall be employed below the age of 14 years. - **ZTCP**

Documentation and Process for Compliance with Clauses L 2.3 - L 2.4



(Prohibition of Forced and Child Labour; Protections for Migrant Workers)

Documents to Maintain

1. Forced and Bonded Labour Prohibition Policy

-  Statement in line with ILO definitions clearly prohibiting all forms of forced, bonded, and slave labour
-  Specific clauses extending to third-party contractors and subcontractors

2. Migrant Worker Policy

-  Includes terms of freedom of movement, voluntary employment, joining and leaving conditions, and prohibition of retention of identity documents
-  Clearly outlines rights, working conditions, and termination processes in local language(s)

3. Recruitment and Onboarding Documents

- 🌿 Documented HR recruitment procedure including:
 - ✓ Transparent hiring practices for direct and third-party recruited workers
 - ✓ Pre-departure and post-arrival orientation/training materials in understandable language
 - ✓ Signed contracts with clear employment terms
 - ✓ Disciplinary and grievance procedures

4. Worker Registers and Employment Records

- 🌿 Master list of all workers (including contract/migrant) with verified age documentation (e.g., birth certificate, Aadhaar, school records)
- 🌿 Proof of identity and consent-based recruitment documentation
- 🌿 Records of disciplinary actions, terminations, and retirements

5. Training Records

- 🌿 Records of induction training for all new joiners covering:
 - ✓ Rights at work
 - ✓ Procedures on termination, disciplinary actions, retirement
 - ✓ Anti-forced labour and migrant worker rights
- 🌿 Annual refresher training log for all worker categories

6. Monitoring and Grievance Reports





- 🌿 Internal audit reports and periodic reviews conducted by management on recruitment practices
- 🌿 Grievance Redressal Register specifically recording and resolving concerns related to forced/migrant labour

Process to Follow

1. Prohibiting Forced Labour and Ensuring Ethical Recruitment (L 2.3)

- 🌿 Establish zero-tolerance policy against forced, bonded, or slave labour
- 🌿 Screen all contractors for compliance; include contractual clauses mandating compliance with the policy
- 🌿 Conduct orientation for all workers (including migrant workers) during hiring, ensuring they understand:
 - ✓ Their rights
 - ✓ Working conditions
 - ✓ Rules for termination, retirement, and disciplinary action
- 🌿 Provide information pre-departure and post-arrival (in local/migrant languages)
- 🌿 Monitor contractors and management units regularly through compliance checks and worker interviews



2. Preventing Child Labour (L 2.4)

-  Implement a strict age verification process during recruitment
-  Maintain documented proof of age for every employee
-  Conduct periodic internal reviews to verify no child labour is employed, including through contractors
-  Include child labour prohibition in contracts with suppliers, labour contractors, and vendors



L 2.5 Equality of treatment: Workers shall have access to jobs, training, and promotion on equal terms, irrespective of gender, age, ethnic origin, colour, marital status, sexual orientation, political opinion, religion or social origin. . Availability of Documented procedure shall ensure transparency in recruitment, complete information sharing to all worker about their working terms and conditions as well as their rights, pre-departure and post-arrival, in a language that they understand. – **MCP**

Documents to Maintain



1. Equal Opportunity and Non-Discrimination Policy

-  Clearly states that all employment decisions (recruitment, training, promotion, etc.) will be made irrespective of gender, age, ethnic origin, colour, marital status, sexual orientation, political opinion, religion, or social origin
-  Must be signed by management and communicated to all levels of staff






2. Documented Recruitment Procedure

-  Outlines the transparent selection process
-  Ensures that job descriptions, eligibility criteria, and evaluation methods are free from bias and applied uniformly



3. Training and Promotion Records

-  Registers showing equal access to internal and external training programs
-  List of promotions with supporting evaluation criteria showing fairness and merit-based decisions

4. Induction and Information Sharing Records




-  Pre-departure and post-arrival orientation materials covering:
 -  Their rights
 -  Working conditions
 -  Rules for termination, retirement, and disciplinary action
-  Proof of communication in a language understood by workers

5. Grievance and Complaint Logs



-  Records of complaints related to discrimination or unequal treatment
-  Actions taken and resolution timelines documented

Process to Follow



1. Transparent and Fair Recruitment

-  Implement unbiased hiring based on job-related criteria
-  Ensure interview panels are diverse (where feasible) and follow structured evaluation formats
-  Share complete terms of employment (job role, wages, hours, benefits, rights) during recruitment, in understandable local/migrant language



2. Equal Access to Opportunities

-  Promote inclusivity in training nominations and advancement opportunities
-  Conduct periodic reviews of training and promotion data to identify and correct imbalances

3. Worker Orientation and Awareness

-  Include a dedicated session on workplace equality and rights in induction training
-  Reiterate zero tolerance for discrimination during annual refresher training

4. Monitoring and Grievance Mechanism

-  Establish anonymous reporting channels for discrimination concerns
-  Conduct management-level monitoring of adherence to equal opportunity policies

L2.6 - All permanent and temporary workers shall receive all maternity entitlements and protection in line with national law and practice. Maternity leave shall not result in any discrimination, loss of seniority or deduction of wages. - **ZTCP**

L2.7 - No pregnant female employees should be dismissed from their employment just prior to the legal period of service for qualifying for maternity. - **MCP**

Documentation:

1. Maternity Benefit Policy Document:

A formal written policy aligned with national maternity laws detailing entitlements, leave duration, wage protection, anti-discrimination measures, and protection against dismissal.

2. Employee Records:

Maintain updated personnel files including maternity leave applications, approvals, wage records during leave, and return-to-work confirmations for all female employees.

3. **Communication Records:**

Evidence of communication and training sessions provided to workers on maternity rights and procedures (e.g., attendance sheets, training materials).

4. **Grievance Register:**

Document complaints or issues related to maternity entitlements, including investigation outcomes and resolutions.

5. **HR Audit Reports:**

Records from periodic internal audits verifying compliance with maternity benefit policies and legal requirements.

6. **Medical Checkups:**

Records to confirm no periodic health check-up or no general health checkup shall be performed during employment or pre-employment that confirm the involvement of maternity confirmation or related test.

7. **Training Record:**

Training records to be maintained to confirm awareness on the related clause to the permanent, temporary, contractual or migrant workers especially female workers.

Processes:

1. **Policy Implementation:**

Communicate the maternity benefit policy to all employees at induction and through regular refresher sessions in appropriate languages.

2. **Leave Application and Approval:**

Establish a clear, confidential process for female workers to apply for maternity leave, ensuring timely approval without any wage deduction or loss of seniority.

3. **Non-Discrimination Assurance:**

Train managers and supervisors to prevent discrimination or dismissal of pregnant workers prior to maternity leave qualification period.

4. **Record Keeping:**

Maintain accurate and confidential records of maternity leave and related entitlements for audit and legal compliance purposes.

5. **Monitoring and Auditing:**

Conduct regular internal reviews and audits of HR files and payroll to verify adherence to maternity benefits and protection policies.

6. **Grievance Handling:**

Provide a confidential mechanism for workers to report violations or concerns related to maternity benefits, ensuring prompt investigation and corrective action.

L 2.8 - The verified facility and its staff shall not engage in the use of corporal punishment, mental, physical or sexual harassment, or any kind of intimidation at the workplace. - **ZTCP**




L 2.9 - An entity must have a policy in place to prevent and address sexual harassment and other forms of violence against women and girls. Ensure effective implementation of the policies in creating a safe and empowering workplace as per the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 and relevant revisions. The process to refer survivors of violence to essential community services such as healthcare, psychological support, legal aid, etc. should be a part of the policy. Awareness programmes shall be in place to increase safety for women and reduce gender-based violence both for workers and women in the community.- **ZTCP**

L2.10 - All tea estates and bought leaf factories must set up an Internal Committee (IC) with suitable representation must be set up and employees should be trained on how to lodge complaints. All employees, managers and supervisors must be trained on sexual harassment and rights for grievance redressal through grievance mechanisms to report cases of sexual harassment or other forms of violence. This mechanism must be designed in a simplified way so that it is easily accessible to the relevant stakeholders with different modes of communication, including oral communication. However, the final complaint shall be in writing, and in case complain cannot be made in writing, the Presiding Officer or any member from IC, or LC shall render all reasonable assistance to the woman for making the complaint in writing. The mechanism must ensure that the confidentiality and safety of the aggrieved woman or the reporter is protected. - **ZTCP**







Documents and Processes to Confirm Adherence to L 2.8, L 2.9, and L 2.10

I. Required Documents

1. Anti-Harassment & Non-Violence Workplace Policy

-  Clearly states zero tolerance toward corporal punishment, mental, physical, or sexual harassment, and intimidation in any form.
-  Applicable to all permanent, temporary, contractual, and third-party workers and management staff.
-  Defines unacceptable behaviors and corresponding disciplinary actions.

2. Sexual Harassment Prevention and Redressal Policy

-  Aligned with the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013.
-  Includes procedures to report, investigate, and resolve cases.
-  Contains survivor support measures including referral to:
 -  Healthcare services
 -  Mental health counselling
 -  Legal aid and protection services

3. Internal Committee (IC) Constitution Record

- ☛ Details of members appointed (Presiding Officer, NGO/External member, employees).
- ☛ Tenure, gender ratio, roles and responsibilities.
- ☛ Meeting minutes, decisions, and redressal records (with confidentiality).

4. Complaint and Grievance Registers (Confidential)

- ☛ Secure records of all complaints lodged, resolved, pending.
- ☛ Maintained with restricted access, ensuring anonymity.

5. Training Records and Materials

- ☛ Records of all sessions conducted on harassment prevention and grievance redressal.
- ☛ Training manuals, signed attendance sheets, feedback forms.
- ☛ Proof of communication in local languages or oral/visual mediums if required.

6. Awareness Campaign Materials

- ☛ Posters, pamphlets, orientation kits on gender-based violence and reporting mechanisms.
- ☛ Visuals displayed in prominent and safe locations (e.g., rest areas, health units).

II. Required Processes

1. Policy Communication and Awareness

- ☛ During induction and periodic refresher training, all workers (including management) must be sensitized about the Anti-Harassment and Sexual Harassment Policies.
- ☛ Ensure the policies are available in regional/local languages and via verbal explanation for low-literacy workers.

2. Internal Committee Formation and Capacity Building

- ☛ Form an IC at each estate/factory with gender-sensitive and legally compliant representation.
- ☛ Provide IC members specialized training on legal procedures, trauma-informed responses, and maintaining confidentiality.
- ☛ Display IC member names and contact information in workplaces discreetly.

3. Accessible Complaint Mechanism

- ☛ Provide multiple reporting channels: oral, written, anonymous drop box, digital helpline, etc.
- ☛ Simplify complaint forms and procedures—allow complaints in any format (written/oral); provide help in writing if needed.
- ☛ Guarantee that the complainant is never victimized, dismissed, or penalized.

4. Grievance Handling and Redressal

- ☛ The IC must acknowledge complaints promptly, investigate within the defined timeline, and submit a recommendation to the employer.
- ☛ Follow legal process and protect both confidentiality and rights of the accused and the complainant.
- ☛ Keep proper documentation of the case and the resolution outcome.

5. Survivor Support & External Referrals

- ☛ Create a referral process within the policy to connect survivors with:
 - ✓ Local primary health centres/hospitals
 - ✓ NGO partners or helplines for counselling
 - ✓ Legal services or police when necessary
- ☛ Assign a nodal person or HR officer to guide and accompany survivors through the process, if requested.

6. Monitoring and Review

- ☛ Periodic review of complaints, training effectiveness, and IC performance by senior management.
- ☛ Track and analyze trends, if any, to improve awareness and prevention measures.

7. Community & Worker Engagement

- ☛ Conduct gender sensitization and violence prevention sessions not only for workers but also for community members (where applicable).
- ☛ Involve local NGOs or women's rights groups for conducting campaigns and providing support.



Article No.	Requirement
Rule 4 (1)	Every employer of a workplace shall, by an order in writing, constitute a Committee to be known as the " Internal Committee" (IC), formerly known as " Internal Complaints Committee" (ICC)
Rule 4 (2)	The IC (Internal Committee) shall have the following members; Presiding Officer - shall be woman employed at a senior level, not less than 2 members from amongst employees who have experience in social work or have legal knowledge, 01 member from an NGO
Rule 4 (2) (c)	Atleast half of the total members shall be women
Rule 4 (3)	The Presiding officer and the members shall hold office not exceeding 3
Rule 10	The IC, may before initiating an enquiry and at the request of the aggrieved woman take steps to settle the matter between her and the respondent through conciliation. No monetary settlement shall be made as a basis of conciliation
Rule 11 (1)	The ICC shall make the enquiry and forward the complaint to the police within 7 days, for registering the case.
Rule 12 (1)	During pendency of enquiry, the employer may transfer the aggrieved woman to any other workplace, upon a written request made by the aggrieved woman.
Rule 12 (2)	The leave granted to an aggrieved woman shall be in addition to the leave she would be otherwise entitled.
Rule 13 (1)	On completion of inquiry by the IC, shall provide a report of its findings to the employer or District Officer, within a period of 10 days.
Rule 14	Punishment for false or malicious complaints or false evidence - The employer may take actions in accordance with the service rules
Rule 16	Prohibition of publication or making known the contents of complaint and enquiry proceedings
Rule 19 (b)	Every employer shall display at any conspicuous place in the workplace, the penal consequences of sexual harassment and the IC.

Article No.	Requirement
Rule 19 (c)	Employer to organize workshops and awareness programs at regular intervals for sensitizing the employees with the provisions of the Act.
Rule 19 (e)	Assist in securing the attendance of the respondent and witnesses before the IC
Rule 19 (i)	Treat sexual harassment as a misconduct under the survive rules and initiate action for such misconduct.
Rule 19 (j)	Monitor the timely submission of reports by IC
Rule 21 (1)	The IC shall make an annual report each calendar year and submit the same to the employer and the District Officer



Always refer the present applicable act, rule and the latest amendments
Sample Annual Report format is attached as annexure

L2.11 - The entity must ensure that any complaints of sexual harassment or violence are given due consideration as per the established mechanism. There should be no instance of negligence, denial of the right to lodge the grievance, or any effort to suppress the incident which denies the right of the complainant or justice. – **ZTCP**

L2.12 - Top management is accountable for periodic reviews to verify that the effective grievance mechanism is in place and confirm employees' rights are protected. Corrective and punitive actions must be taken in case of any adverse findings. – **MCP**

Documents to be Maintained:

1. **Grievance Redressal Policy / Anti-Sexual Harassment Policy** - Clearly defines zero-tolerance stance, reporting channels, investigation procedure, and disciplinary action.
2. **Internal Committee (IC) Constitution Order** - Document outlining IC formation, member names, tenure, and qualifications in line with legal requirements.
3. **Complaint Register / Grievance Logbook** - Chronological record of all complaints received (including anonymous), with case ID, date, nature of grievance, and resolution status.
4. **Case Files / Investigation Reports** - Detailed documentation for each case including statements, evidence, investigation findings, and final decision.
5. **Acknowledgement Receipts and Communication Logs** - Records of complaint acknowledgments, communication with complainants, and notifications of outcomes.
6. **Corrective and Disciplinary Action Records** - Documentation of actions taken based on investigation outcomes, with dates and approvals.
7. **Quarterly/Periodic Review Meeting Minutes** - Top management review records reflecting oversight of the grievance mechanism, with decisions and follow-up actions.
8. **Awareness & Training Records** - Agendas, materials, attendance sheets, and feedback from staff trainings on grievance redressal and prevention of sexual harassment.
9. **Anonymous Feedback or Suggestion Box Logs** - If available, periodic record of suggestions/complaints received through such channels and corresponding responses.
10. **Audit Trail of Grievance Management System (if digital)** - Access logs, response times, and closure records from digital grievance handling platforms.

Processes to be Implemented:

1. **Grievance Lodging Process** - Multi-channel system (verbal, written, box, digital) to accept complaints ensuring confidentiality and non-retaliation.
2. **Case Handling Protocol** - Defined steps from complaint receipt, acknowledgement, investigation, IC hearing, to final resolution.
3. **Timeline Monitoring Mechanism** - Internal tracking system to ensure all complaints are addressed within a specified time frame (e.g., 15–30 days).
4. **Confidentiality and Data Protection Process** - Secure storage and restricted access to grievance-related records (physical or digital).
5. **Corrective and Disciplinary Action Workflow** - SOP to enforce proportionate actions, with checks to prevent recurrence.
6. **Top Management Review Process** - Scheduled reviews to assess grievance trends, evaluate effectiveness, and ensure zero suppression or negligence.
7. **Employee Awareness and Sensitization Plan** - Regular training sessions, posters, and orientation for all staff, especially vulnerable groups (e.g., female workers, youth).
8. **Escalation Protocol** - Clear pathway for unresolved or mishandled complaints to be escalated to senior leadership or external authorities.

L 2.13 - In every plantation wherein fifty or more women workers (including permanent, temporary workers employed directly or through any contractor) are employed or were employed on any day of the preceding twelve months, or where the number of children of women workers (including women workers employed by any contractor) is twenty or more, the employer shall provide and maintain suitable rooms (Creche) with adequate sanitation, drinking water, food prescribed and sleeping areas for the use of children of such women workers. All provisions should adhere to the relevant requirement of clause number 12 in the relevant state rule of the plantation labour act 1951 - **MCP**

Documents to be Maintained:

Crèche Facility Requirements:

1. **Crèche Facility Compliance Register** - Record indicating number of eligible women workers and children; justification for crèche setup or exemption (if applicable).
2. **Crèche Attendance Register** - Daily attendance of children availing the crèche services, signed by caregiver and supervisor.
3. **Staff Appointment & Training Records** - Documentation of appointed caregiver(s) with qualifications and training records in early childhood care.
4. **Facility Maintenance Records** - Log of sanitation, drinking water supply, food provision, and hygiene inspections at the crèche.
5. **Infrastructure and Utility Compliance Reports** - Certification or documentation confirming availability of sleeping area, toilet facility, potable water, and nutritious food at the crèche.
6. **Medical Check-Up Reports** - Periodic health check-up reports for children availing the crèche services.
7. **Visual Documentation (if permissible)** - Photos or layout plans showing the setup and facilities of the crèche area.
8. **Reference to State Rule Clause 12 (PLA Rules)** - Document mapping state-specific PLA Rule 12 requirements with actual facilities provided.

Processes to be Implemented:

1. **Eligibility Assessment Process** - Monthly review of total women workers and their children to determine need for crèche setup.
2. **Crèche Operations SOP** - Daily routine, caregiver duties, safety procedures, feeding schedules, hygiene maintenance, and parent access protocol.
3. **Child Safety and Health Procedure** - First-aid readiness, emergency contact procedure, illness isolation steps, and immunization follow-up.
4. **Awareness and Enrollment Process** - Periodic awareness sessions with women workers to encourage utilization of the crèche facility.
5. **Maintenance and Monitoring Mechanism** - Regular inspections, checklist-based supervision, and corrective action tracking for crèche upkeep.

Good and Bad examples of Creche



Creche with the above conditions
are not acceptable



Creche with **acceptable conditions**

L 2.14 The plantation should provide (permanent) workers (including their families) housing accommodation as per PLA 1951. The equivalent alternate facility as per government-sponsored schemes can also be provided for housing and toilet facilities. In case the facility cannot provide accommodation to workers then house rent can be paid as per the relevant state notification. - **MCP**

Documents to be Maintained:

1. **Worker Housing Allotment Register** - List of permanent workers and their families with housing allotment details, occupancy date, and facility ID.
2. **Structural Safety and Sanitation Certificates** - Periodic inspection records of housing units verifying ventilation, lighting, cleanliness, and hygiene.
3. **Toilet and Water Facility Maintenance Records** - Documentation of toilet-to-household ratio, water availability logs, and cleaning schedules.
4. **Housing Infrastructure Compliance Reports** - Assessment against PLA 1951 housing standards or alternate government housing schemes.
5. **House Rent Payment Records (if applicable)** - Worker-wise payment logs, state rent calculation references, and bank/payment transfer evidence.
6. **Records of Government-Sponsored Housing Scheme Implementation** - Documentation of registration, implementation timeline, and beneficiary workers.
7. **Worker Grievance or Feedback Logs on Housing Conditions** - Feedback register or complaint log related to housing, followed by actions taken.
8. **Periodic Management Review Notes on Housing Facility** - Internal review records by management to ensure continuous improvement and policy alignment.

Processes to be Implemented:

1. **Housing Allotment and Verification Procedure** - Transparent and documented process to allocate housing based on eligibility and availability.
2. **House Rent Disbursement Procedure (if no housing provided)** - Clear mechanism to calculate and disburse rent as per state rule, with grievance redressal option.
3. **Infrastructure Maintenance & Safety Protocol** - Schedule for plumbing, waste management, pest control, and general upkeep of houses and sanitation blocks.
4. **Worker Consultation and Feedback Mechanism** - Periodic meetings with residents to assess satisfaction, address concerns, and plan upgrades.
5. **Annual Management Review and Reporting Process** - Review of housing adequacy, occupancy status, and compliance gaps with action plans.

Toilet Conditions:



NOT ACCEPTABLE

Toilet discharges waste directly into open pit, open drain, nallahs, pond or river

Toilet is connected to a closed drain which empties into open area, pond, nallahs, river etc. without treatment

Toilet is connected to septic tanks and the overflow pipe of septic tank empties directly into drain, pond, nallahs or river



ACCEPTABLE

Toilet is connected to an enclosed twin pit

Toilet is connected to a closed drain which empties into open area, pond, nallahs, river etc. after treatment

Toilet is connected to septic tanks and have overflow pipes that empty into separate soak pits

Note to the Entity:

- Entity must ensure safe confinement and disposal of feces
- Entity must make defunct toilets functional
- Workers must have access to toilet and should not be practicing open defecation
- Necessary hygiene training should be given



Non availability of septic tank in labour line



Govt. planned Septic tank in labour line

L 2.15 - The plantation should make provision for adequate potable water daily per head of the resident population. The number of water points provided per household and the distance of the water points should be adequate and as per legal provisions. If the supply is from a ring well or a tank (which should be only in exceptional circumstances where supply is not possible from taps or tube wells). All potable water shall confirm to the requirements as per the IS10500 – **MCP**

Documentation:

1. **Water Source Register** – Details of all water sources and areas served.
2. **Water Quality Test Reports** – Periodic lab reports showing compliance with IS10500.
3. **Water Point Layout & Household Coverage** – Map showing water point distribution and distance from households.
4. **Daily Supply Log** – Records of quantity supplied per person per day.
5. **Maintenance Log** – Schedule and records of water system cleaning and repairs.
6. **Complaint Register** – Documentation of water-related issues and resolution.
7. **Alternate Source Justification (if applicable)** – Written justification for use of ring well or tank.
8. **Authority Clearance (if available)** – Local authority or health department clearance.

Supporting Processes:

1. **Water Allocation Monitoring** – Ensure adequate daily supply as per legal norms.
2. **Regular Water Testing** – Monthly/quarterly tests and immediate action on non-compliance.
3. **System Maintenance** – Routine inspection and upkeep of water infrastructure.
4. **Grievance Redressal** – Defined mechanism for lodging and resolving complaints.
5. **Awareness Sessions** – Education on safe water use and hygiene.
6. **Management Review** – Periodic review of water provision adequacy and compliance.

L 2.16 - If there are more than twenty-five children (aged between six and twelve) of permanent workers, primary education shall be made available to them under PLA 1951. – **MCP**

Documentation:

1. **List of Eligible Children**– Names and ages (6-12) of permanent workers' children residing in the estate.
2. **Enrollment Register**– Record of school enrollment or attendance for each eligible child.
3. **Education Facility Details**
 - Copy of registration or affiliation of the school (if estate-run).
 - MoU or partnership documentation (if service provided through third party/government school).
4. **Teacher Qualification Records**– Certificates or credentials of teachers employed by the facility.
5. **Class Schedule & Curriculum**– Weekly time table, subjects taught, and learning materials used.
6. **Inspection/Monitoring Reports**– Government or internal audit records verifying schooling standards.
7. **Parent Communication Records**– Evidence of communication with workers' families regarding school access.

Supporting Processes:

1. **Eligibility Verification**– Annual census of children aged 6-12 linked to permanent workers.
2. **Schooling Arrangement**– Ensure operation of primary school if more than 25 eligible children are identified.
3. **Attendance Tracking**– Daily monitoring of student presence and learning continuity.
4. **Grievance & Feedback Mechanism**– Collect and address concerns regarding school quality or access.
5. **Periodic Review by Management**– Top management review of education provision under PLA compliance.



In-proper roof condition



Toilet outlet pipe of the school is in a broken condition resulting feces contamination on ground

L 2.17 The verified facility shall set up a grievance reporting system that protects the identity and rights of the worker and reports on the action taken for the same shall be available. – **MCP**

Documentation:

1. **Grievance Reporting Policy**– Formal document outlining the procedure for lodging grievances confidentially.
2. **Grievance Register**– Record of complaints received, including dates, nature of grievance, action taken, and closure status.
3. **Anonymous Reporting Tools**– Copies or evidence of anonymous drop-box forms, helpline posters, or digital grievance tools.
4. **Worker Awareness Records**– Training logs or attendance sheets showing workers were oriented on how to raise grievances.
5. **Action Taken Reports**– Documents showing timely and fair resolution of grievances (redacted to protect identities).
6. **Internal Audit/Review Reports**– Periodic review of grievance handling effectiveness by management or compliance teams.
7. **Confidentiality Undertaking**– Signed declaration by grievance committee members to maintain confidentiality and non-retaliation.

Supporting Processes:

1. **System Setup & Access Points**– Establish easily accessible and safe mechanisms (physical or digital) for workers to report grievances.
2. **Confidential Intake Process**– Grievance intake handled by trained personnel who ensure non-disclosure of identity.
3. **Grievance Committee Functioning**– Regular meetings to review and resolve complaints with documented minutes.
4. **Timely Resolution Protocol**– Defined timelines for acknowledgment, investigation, resolution, and closure.
5. **Retaliation Prevention Mechanism**– Immediate intervention protocol if retaliation is suspected or reported.
6. **Reporting and Review**– Monthly or quarterly reporting to management with trend analysis and corrective action plans.

REVIEW RESULT :

REVIEWED by [Anandita Ray Mukherjee](#)

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