Assessment Report

trustea Sustainable Tea Foundation

Assessment dates: 29/04/2022 to 29/04/2022 (Please refer to Appendix for details)
Assessment Location(s): Kolkata (001)
Report Author: Shubhanjan Banerjee
Assessment Standard(s): ISO 9001:2015
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Executive Summary

The established QMS of tRUSTEA has demonstrated that it is designed to support the strategic direction and deliver the intended results through the recognition and management of stakeholder’s expectations, strong relationship with customer, enhancement of brand. Effectiveness of QMS could be evidenced vide (a) Increase in entity base (b) Increase in Customer Satisfaction etc.

BSI did business with 80,000 clients in the last 12 months across 172 countries and with over 200,000 clients in the last 6 years – all of the learnings from those client interactions were incorporated into the Excellence Framework. The improvement continuum graph is the status of your organization viz a viz where you want to be.

BSI Excellence Improvement Continuum -

![BSI Improvement Continuum](chart.png)
Changes in the organization since last assessment

There is no significant change of the organization structure and key personnel involved in the audited management system.

No change in relation to the audited organization’s activities, products or services covered by the scope of certification was identified.

The reference or normative documents applicable to the scope of certification were revised as follows:
Organizational structure, key personnel, products or activities are remain same.
Only changes in office address is done.
Previously it was DBS House, Suit no 201 & 202, 10/2 Hungerford street, Kolkata - 700017, West Bengal.
New address is 5th Floor, 6 Dr. Meghnad Saha Sarani, Kolkata - 700026, West Bengal.

Trade License proof for the mentioned new address was verified.
NCR summary graphs

There have been no NCRs raised.
Your next steps

**NCR close out process**

There were no outstanding nonconformities to review from previous assessments. No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.
Assessment objective, scope and criteria

The objective of the onsite assessment was to conduct a certification (extension to scope) and CAV assessment to evaluate the level of conformity with the Standard(s) requirements, effectiveness of the management system(s) in continually meeting objectives, and the ability of the management system to ensure the organization meets applicable statutory, regulatory, and contractual requirements and as applicable, to identify areas for potential improvement of the management system(s).

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015
trustea Sustainable Tea Foundation management system documentation

Statutory and regulatory requirements

Organization is complying with all applicable statutory & regulatory requirements, however there is no service specific statutory & regulatory requirements applicable.
Trade License no - 006664008470
## Assessment Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Opening Meeting</th>
<th>Closing Meeting</th>
<th>Interviewed (processes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Rajesh Bhuyan</td>
<td>Director</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Mr. Debasish Dutta</td>
<td>IT Manager</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Ms. Suman Sharma Jain</td>
<td>Operations</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Ms. Anandita Ray Mukherjee</td>
<td>Code Management</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Ms. Anika Kumari</td>
<td>Communication Manager</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</tbody>
</table>
Assessment conclusion

BSI assessment team

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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</thead>
<tbody>
<tr>
<td>Anup Dutta</td>
<td>Team Member</td>
</tr>
<tr>
<td>Shubhanjan Banerjee</td>
<td>Team Leader</td>
</tr>
</tbody>
</table>

Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. The audit team concludes based on the results of this audit that the organization does fulfil the standards and audit criteria identified within the audit report and it is deemed that the management system continues to achieve its intended outcomes.

**RECOMMENDED** - The audited organization can be **Recommended for continued certification with new address** to the above listed standards, and has been found in general compliance with the audit criteria as stated in the above-mentioned audit plan.

Use of certification documents, mark / logo or report

The use of the BSI certification documents and mark / logo is effectively controlled.
Findings from this assessment

Top Management and Context of the Organization:
Top management is committed to improve the effectiveness of the management systems and has provided resources for effective implementation. Internal issues such as Service Provision Capabilities, Competent Manpower, Knowledge of Sustainability etc. and external issues such as Competition, Economic Condition of Market etc. were verified to have been determined. Interested parties are mainly Entity, Certification Body, Commercial Partner, Implementing Partner, Employees etc. and their needs and expectations such as Overall improvement of Tea Industry on Sustainability Front, Professional Development etc. have been determined. These were deemed to be relevant and appropriate. Risks identified are mainly related to Non-Adherence of Sustainability Code, over dependency over critical employees etc. and appropriate controls have been established against the identified risk. As per organization procedure Risk Assessment is reviewed on six monthly basis keeping in view process non-conformities, system non-conformities, internal audit findings etc. Implementing Partner Quality Improvement etc. have been identified as main opportunity area.

Sample Documented Information Verified: SWOT Analysis, Internal and External Issues, Risk Assessment and Opportunities Register etc.

Management System Functions and Customer Process:
Documented Information was verified vide Doc.No. TSTF AM 01, Issue 03, Rev.No:02. The only change was made that is in Address and mentioned in Quality Manual. New address is 5th floor, 6 Dr. Meghnad Saha Sarani, Kolkata - Quality Policy is documented, found in line with the requirement of standard and approved by Director, intent in communication of policy is observed. Objective has been taken on Review and Revision of Code, Process Compliance Adherence etc. and available as documented information vide Annual Operating Plan and Performance Development Plan. Internal audit process warrants audit every twelve months. The last internal audit conducted on 03/02/2022 by competent auditor was verified. Only 1 number of non-conformance was raised and duly closed.
Documented information verified such as Internal Audit Plan, Internal Audit cum Non-Conformity Report etc.
Management Review is carried out at twelve monthly frequency with the latest having been conducted on 09/02/2022. The minutes of the meeting was verified to have covered all agenda points.
Customer complaint handling procedure is in place by taking due Correction, Root Cause and Corrective Actions and details recorded in Service Non-Conformity Analysis Form. Customer feedbacks are collected vide Customer Perception Survey Form. Feedbacks received are analyzed to find area of improvement and action plan prepared. Feedback from TUV Nord on training was verified.

Communication:
Communication mainly involves in providing communication guideline for implementing partner, query redressal, sending communication collateral and news letter, updation of website etc. Process of communication with stake holders was verified vide an evidence of web training done on 20th April, 2022 on female workers safety in work place. Communication plan linked to seal on pack - deliverables...
are prefixed and approved by council. Quarterly publications of News letter and yearly conducting of 2 webnair are set as objectives and found achieved for the fy 2021-2022. Verified latest communication guideline provided to implementing partner. Overall process found satisfactory.

**Purchase:**
Purchase procedure is available and mainly limited to purchase of laptop etc. Selection process of service providers verified. For the procurement of software an EOI (Express of Interest) raised 20th may, 2019. Selection method, scope of work, functional requirement, instruction to supplier, techno commercial documentation, evaluation process, potential cause of rejection, pre-qualification criteria etc is defined in EOI. M/s. Optimize It systems Pvt Ltd, software provider for traceability system. Performance evaluation done on each order through quality, delivery, pricing, details verified for Contract number IDH/Trustea/19-20/0005, valid till August 2022. Performance evaluation of external provider, Certification Body was verified for TUV Nord for the year 2021 and found satisfactory and as per the requirement of CB evaluation criteria. of Overall process found satisfactory.

**Competence, Awareness, Training & Knowledge:**
TSTF Training Need Identification. Competency & Training need identification of all staff carried out through periodical review in respect to their Qualifications, Experiences, Skill and professional qualification. Based on competency analysis Training needs effectively identified and Annual Training calendar prepared. Training are imparted as per plan and found satisfactory. Training effectiveness evaluated by the faculty and on-line exam and issue of certificate, process found satisfactory. Training on Trustea code training for developing new auditors and Implementing partners, dated 17th - 18th June 2021. Evaluation was verified. Trainees score cards was verified vide Scoreboard June 2021.In addition to all this organization has some mandatory training which are conducted as per plan in online portal. TCMS (trustea code management system) dated 02/02/2022. Process verified for training on Code Management. Organizational knowledge determined and maintained by the organization by Knowledge transfer in group for development & deployment is carried out through meeting, interactive session. Sample documented information verified: Mandatory Training Portal, Training Record etc.

**Operation:**
Operation and Governance mainly include empanelment and performance monitoring of external CBs, Training of CBs auditor, Review of Report submitted by CBs, Implementing Partner Management, Management of Trustea Database etc. Process carried out as per established norms of delivery. Following verified to ensure compliance of the process. Process performance verified as per below sample: Entity : M/s Goodrick group Limited of Sankos tea garden, Implementing partner: M/s Tea research association, GAP audit conducted from 23/08/2021 to 24/08/2021 by tea research association. NOC was released on 10/09/2021. Then Certification body(M/s DNV) sent the audit plan to M/s Trust tea for review and approval on 30/09/2021, audit plan approved on 01/10/2021. Audit was conducted from 04/10/2021 to 05/10/2021. Training of certification body auditors record verified as training dt: 22/02/2022 to 23/02/2022. Total person present were 16person. Attendance and training record verified for Ms. Indu Yadav from M/s Cotecna. Assessment and re assessment record verified. Audit report of audit conducted by Certification body submitted the report on 06/11/2021. On 15/11/2022 report is
received, no comments found raised. Then draft was generated on 16/11/2021. Trust tea approval of V.C generated on 18/11/2021, finally entity approval on 26/11/2021 and final V.C generated on 24/01/2022. Objectives verified.

**Design and Development of code:**

Next visit objectives, scope and criteria

The objective of the assessment is to ascertain the integrity of the organisation’s management system over the current assessment cycle to enable re-certification and confirm the forward strategic assessment plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015
tuesta Sustainable Tea Foundation management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date.
## Next Visit Plan

<table>
<thead>
<tr>
<th>Date</th>
<th>Auditor</th>
<th>Time</th>
<th>Area/Process</th>
<th>Clause</th>
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<tbody>
<tr>
<td></td>
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<td>Leadership - Top Management including Organization Context</td>
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<td></td>
<td>Management System Functions, Risk &amp; Opportunities Assessment and Management</td>
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<td>Customer Process</td>
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<td>Competence, Awareness, Training &amp; Knowledge</td>
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<td>Purchase</td>
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<td>Communication Department</td>
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<td>Development - Code</td>
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<td>Operation and Governance - Code Management</td>
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<td>Re-Certification</td>
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Appendix: Your certification structure & ongoing assessment programme

**Scope of Certification**

**FM 723039 (ISO 9001:2015)**

The Development & Governance of the voluntary trustea sustainability code of conduct for the Indian tea industry, comprising of large & small tea growers, bought leaf factories and tea estates.

**Assessed location(s)**

The audit has been performed at Permanent Locations.

<table>
<thead>
<tr>
<th>Kolkata / FM 723039 (ISO 9001:2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location reference</td>
</tr>
</tbody>
</table>
| **Address**             | trustea Sustainable Tea Foundation  
|                        | 5th Floor  
|                        | 6, Dr. Meghnad Saha Sarani  
|                        | Kolkata  
|                        | Kolkata  
|                        | West Bengal  
|                        | 7000026  
|                        | India  |
| **Visit type**          | Continuing assessment (surveillance) |
| **Assessment number**  | 3364089 |
| **Assessment dates**    | 29/04/2022 |
| **Deviation from Audit Plan** | No |
| **Total number of Employees** | 5 |
| **Effective number of Employees** | 5 |
| **Scope of activities at the site** | Main Certificate Scope applies. |
| **Assessment duration** | 1 day(s) |

<table>
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|                        | Kolkata  
|                        | Kolkata  
<p>|                        | West Bengal  |</p>
<table>
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<tr>
<th><strong>Visit type</strong></th>
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<tr>
<td><strong>Assessment number</strong></td>
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<tr>
<td><strong>Assessment dates</strong></td>
<td>29/04/2022</td>
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<tr>
<td><strong>Deviation from Audit Plan</strong></td>
<td>No</td>
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<tr>
<td><strong>Total number of Employees</strong></td>
<td>5</td>
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<tr>
<td><strong>Effective number of Employees</strong></td>
<td>5</td>
</tr>
<tr>
<td><strong>Scope of activities at the site</strong></td>
<td>Main Certificate Scope applies.</td>
</tr>
<tr>
<td><strong>Assessment duration</strong></td>
<td>0.5 day(s)</td>
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</table>
The text contains a certification assessment program for a program with a certificate number and location reference. It includes tables showing business area/locations, dates, and duration. The justification exclusions/ non-applicable clauses section discusses what accredited management system certification means and what is expected for the organization.
customer and applicable statutory/regulatory requirements;
• has determined and is managing the processes needed to achieve the Expected Outcomes intended by the management system standard;
• has ensured the availability of resources necessary to support the operation and monitoring of these products, processes and services;
• monitors and controls the defined product process and service characteristics;
• aims to prevent nonconformities, and has systematic improvement processes in place including the addressing of complaints from interested parties;
• has implemented an effective internal audit and management review process;
• is monitoring, measuring, analysing, evaluating and improving the effectiveness of its management system and has implemented processes for communicating internally, as well as responding to and communicating with interested external parties.

What accredited management systems certification does not mean?
It is important to recognize that management system standards define requirements for an organization’s management system, and not the specific performance criteria that are to be achieved (such as product or service standards, environmental performance criteria etc).

Accredited management systems certification should provide confidence in the organization’s ability to meet its objectives related to the intent of the management system standard. A management systems audit is not a full legal compliance audit, and does not necessarily ensure ethical behaviour or that the organization will always achieve 100% conformity and legal compliance, though this should of course be a permanent goal.

Within its scope of certification, accredited management systems certification does not imply or ensure, for example:
• that the organization is providing a superior product and service, or
• that the organization’s product and service itself is certified as meeting the requirements of an ISO (or any other) standard or specification.

Definitions of findings:
Non-conformity:
Non-fulfilment of a requirement.

Major nonconformity:
Nonconformity that affects the capability of the management system to achieve the intended results. Nonconformities could be classified as major in the following circumstances:
• If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;
• A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Minor nonconformity:
Nonconformity that does not affect the capability of the management system to achieve the intended results.
Opportunity for improvement:
It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved may lead to nonconformity in the future. We may provide generic information about industrial best practices but no specific solution shall be provided as a part of an opportunity for improvement.

Observation:
It is ONLY applicable for those schemes which prohibit the certification body to issue an opportunity for improvement.
It is a statement of fact made by the assessor referring to a weakness or potential deficiency in a management system which, if not improved, may lead to a nonconformity in the future.

How to contact BSI

Visit the BSI Connect Portal, our web-based self-service tool to access all your BSI assessment and testing data at a time that’s convenient to you. View future audit schedules, submit your corrective action plans and download your reports and Mark of Trust logos to promote your achievement. Plus, you can benchmark your performance using our dashboards to help with your continual improvement journey.

Should you wish to speak with BSI in relation to your certification, please contact your local BSI office – contact details available from the BSI website:
https://www.bsigroup.com/en-IN/Contact-us/

Notes

This report and related documents are prepared for and only for BSI’s client and for no other purpose. As such, BSI does not accept or assume any responsibility (legal or otherwise) or accept any liability for or in connection with any other purpose for which the Report may be used, or to any other person to whom the Report is shown or in to whose hands it may come, and no other persons shall be entitled to rely on the Report. If you wish to distribute copies of this report external to your organisation, then all pages must be included.

BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a ‘need to know’ basis.

This audit was conducted through document reviews, interviews and observation of activities. The audit method used was based on sampling the organization’s activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.

As this audit was based on a sample of the organization’s activities, the findings reported do not imply to include all issues within the system.
Regulatory compliance

BSI requires to be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to BSI as soon as practical after the event.

"We at BSI have formulated a methodology to assess your organization based on certain set of guidelines which gives an impression on the maturity level of the Quality Management System on a continuous basis. This methodology could help you improving the processes and would add value proposition through assessment. This approach has no bearing whatsoever on the decision making process of your certification however it will aid you to focus on the right process which may be improved further on depending on your needs and requirements."