

THE INDIAN SUSTAINABLE TEA PROGRAM

AUDIT PROTOCOL

Revised: November 2020



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Introduction

1. Introduction

trustea, the Indias ustainable teaprogram is an initiative of the Indian tea industry to develop and implement a sustainability code for the Indian domestic market. This initiative to transform the Indian tea industry is based on industry realities and globally accepted core sustainability principles. This meaningful, cost-effective and practical code is rooted in realities of the Indian tea industry as well as its domestic market.

It is envisioned that compliance with trustea Code will not only improve competitiveness for tea farms, but also make it possible for them to comply with national regulations, international sustainability standards. Verification under the code provides consumers with the assurance of responsible production, and provides producers the opportunity to credibly demonstrate this to their customers.

The India-specific truste a Code has been developed from the industry, by the industry and for the industry.

Effective code implementation will provide sustainable tea to a rapidly growing community of discernible Indian tea consumers.

IDH acts as the program coordinator. It aims to convene key stakeholders in the industry in close collaboration with the Tea Board of India to drive behavioral change in the Indian tea industry and institutionalization of sector-wide cooperation.

2. The purpose of the document:

This audit protocol specifies requirements for certification bodies, auditors, internal auditors, internal documentation system (IDS), managers and other interested parties on procedures for trustea audit. Observance of these requirements is intended to ensure that certification bodies operate the management system of trustea verification in a competent, consistent and impartial manner, thereby facilitating the recognition of such bodies and the acceptance of their certificates.

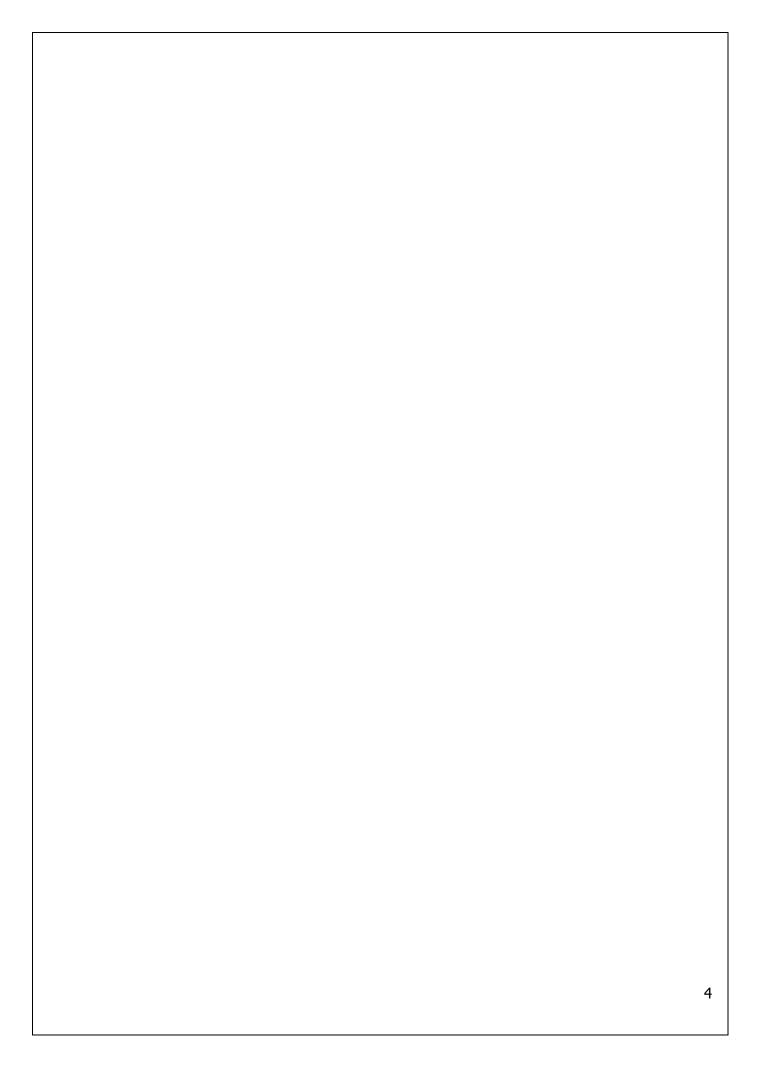
The purposes of the trustea audit protocol are as follows:

- ExplainthestructureandprocessofverificationaccordingtothetrusteaCode
- Provideguidancetotheproducersandfactoriesaswellasteapackersontheproceduresto befollowed.
- Laydowntherules of achieving and maintaining verified status
- Elaborateontheauditprocessanddifferentauditcyclespertainingtotrustea
- Describegeneral rules of farmand group verification procedures
- Laydowntheconditions which necessitate with drawal of verified status
- Laydownproceduresforsegregatingtrustea-verifiedteafromthenon-verifiedtea
- Describe procedures for approving certification bodies (CBs), the required qualifications of their lead auditors, auditors and the reporting obligations for CBs.
- Laydowntheprocess by which a farm or a group could add or remove members within the verified facility

The trustea Secretariat and the trustea Programme Committee (TPC) have the overall authority for issuing and amendment of the content and requirements stated in this document.

Abbreviations

Full Name	Abbreviati on
Bought Leaf Factory	BLF
Certification Body	СВ
Code Development Committee	CDC
Control Points	СР
Estate Factory	EF
External Verification Audit	EVA
Farm Support Centres	FSC
Internal Audit	IA
Internal Documentation System	IDS
Mandatory Control Points	МСР
Monthly operation Meeting	MoM
Minimum Wage	MW
Other Control Points	ОСР
Pollution Control Board	РСВ
Provident Fund	PF
System Assurance Audit	SAA
Self Help Groups	SHGs
Small Tea Growers	STGs
Trustea Advisory Committee	TAC
trustea Programme Committee	tPC
Verification Certificate	VC
Verified Organisation	vo
Zero tolerance Control Points	ZTCP





Trustea Verification Scheme Version: II January 2015 (Revised 2020)



ENVIRONMENT • SAFETY • LIVELIHOODS

General Regulations - Certification Process

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GENERAL REGULATIONS, PART 1, VERIFICATION PROCESS _____

1 General

1.1 Purpose

To ensure an objective assessment and verification of adherence to trustea requirements at the tea estates, Bought Leaf Factory (BLF) and small tea growers, and to promote uniformity in the operation of the verification scheme and the interaction between the certification bodies (CBs) and the clients (tea producers, tea factories and small tea growers) seeking verification.

1.2 Scope

- Organisations opting for a trustea Verification Certificate can be single estates, multiple
 estates of a single owner, Bought Leaf Factories (BLFs) and their associated producer base,
 multi-site operators with multiple estates, a mix of estates and BLFs, tea processors and their
 associated producer base.
- 2. trustea verification covers all land managed or used by the Verified Organisation in conjunction with tea production, whether owned, rented or leased. This explicitly includes, but is not limited to:
 - a) Teagardens
 - b) Fallow lands within property limits
 - c) Infrastructure within the property limits, including but not limited to housing, roads, offices, warehouses and store rooms
 - d) Owned or leased infrastructure outside the property but closely connected to the activities covered in the scope, e.g. collection centers.
 - e) Processing or packaging plants covered under trustea audits
 - f) All workers working on the farm, regardless of their category (permanent, temporary, as well as the bona fide dependents who live inside the farm.
- 2 Registration and Acceptance of Organisations
- 2.1 Verified organizations must meet the following criteria:
 - 1) They must be a legal entity
 - 2) They must run a single internal documentation system (IDS) for all producers, estates, BLFs (including their associated producer base) that will be included in the scope of the trustea Verification Certificate.

2.2 Registration with the trustea Scheme

Organisations may apply to register with the trustea Secretariat through its website, by sending an email to support@trustea.org The website will have all relevant material for registering with the trustea Secretariat. The applicants will also get a list of Certification Bodies (CBs) empaneled with trustea Secretariat. Applicants need to submit a complete registration form to the trustea Secretariat (via above address or e-mail address), containing all required information. The Registration form can be found online at [http://www.trustea.org]

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Once the trustea Secretariat has reviewed the application form for completeness, it will issue a unique client number, which will be used as an identifier for all verification activities.

Once registered with trustea Secretariat, the Organisation can download the trustea code book, implementation guide and other supporting documents. In case the Organisation needs support, it can contact Implementing Partners-supported trustea Farm Support Centers (FSC) located in Assam (Tinsukia), West Bengal (Siliguri) or Tamil Nadu (Coonoor) for an orientation programme on the use of the Implementation Guides in the process of conducting an internal audit.

Registered Organisations must inform the trustea Secretariat (and if they already hold a Verification Certificate also the CB) about any change in the registration information within six weeks of the change. Special rules apply for change of scope and change of name, location and ownership of the organisation (see section No. 4.7 & 4.8)

Assessment Process

- 3.1 Types of Assessments and Assessment Cycle
 - 1. Types of Assessment: There are three types of Assessments in the trustea scheme:
 - a) External Verification Audits ("External Audits"): The assessments that check an Organisation's compliance with the trustea Code verification requirements in order to get a Verification Certificate, carried out by a Certification Body (CB) everyotheryear(startingfromyear1,thenyear3etc.)
 - b) Internal Audits ("Internal Audits"): The verified organisation's annual formal selfassessment against the trustea Code Verification Requirements during the years not due for external verification audit.
 - c) System assurance audit (SAA): Assessments by trustea Secretariat by engaging external auditors who are not empaneled with Secretariat for carrying out regular verification audit.
 - i) evaluate continued adherence to the trustea code norms by the verified organisations,
 - ii) checking the quality of verification audit done by the concerned CB or
 - iii) checking a specific issue at a verified organisation outside the regular auditschedule, such as suspicion of non-compliances.

System assurance audit will be managed by the truste a secretariat, and a random sample of verified estates or BLFs and their associated supply base shall be selected for the audit.

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- 2. Assessment Cycle: Under the trustea scheme, verified organisations are audited once a year. Audits alternate between external and internal audits: Years 1, 3, 5 etc. are audited externally, years 2, 4, 6 etc. internally. Before the first external verification audit, the organisation is required to conduct gap assessment with the help of FSC. The gap assessment is for diagnostic purposes and does not yet lead to verification.
- 3.2 Scope of Assessments and Verification Requirements

3.2.1. Extent:

All External and Internal Audits will cover the entire operation of the Verified Organisation that will be covered by the Verification Certificate, and are to conform compliance with the entire trustea Code (i.e. all applicable mandatory and other control points). Control audits may be full or partial (see 3.7.1)

- 3.2.2. Assessments shall include visits to all key components of the operation, at a minimum
 - a) Tea growing sites
 - b) Teastorageareas
 - c) Factories (if any)
 - d) Worker housing, sanitation, medical facilities, creches and primary education for children, (if any)
- 3.2.3. Content of the Assessment: All Assessments need to check:
 - a) That the Verified Organisation's registration information, as held by the trustea Secretariat, is complete, current and accurate
 - b) The Verified Organisation's internal documentation system (IDS)
 - c) That the Verified Organisation, and all its sub-entities in case of a group, conform to the trustea code itself and achieve the required level of compliance
 - d) Review of the results of the previous assessment, especially any non-conformities
 - e) Handling and disposal of non-conforming products, if any
 - f) Redressal of complaints, if any.

3.2.4. Minimum length of audit period:

The period of audit (number of days to be devoted for verification audit) shall vary according the size of the organization (area under tea and the number of workers employed). However, the minimum number of days shall not be less than the one indicated in the table below:



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3.2.4.1	SI. No.	No. of Workers (Temporary + Permanent)	Tea garden Area (in Ha)	Audit man days		
	1.	Upto 100	Upto 50	1		
	2.	101 to 500	51 to 250	2		
	3.	501 to 1000	251 to 500	3		
	4.	1001 to 2000	501 to 1000	4		
	5.	Above 2001	Above 1001	4		

3.2.4.2. No. of STGs to be verified and the minimum number of audit days in the case of BLFs or Estate factories sourcing green leaf from small tea growers.

			Audit Man days		
SI. No.	No. of STGs	Sq. root	For Factory	For STGs	Total
1.	Upto 50	7	0.5	1	1.5
2.	51 to 200	14	0.5	2	2.5
3.	201 to 400	20	0.75	2.75	3.5
4.	401 to 1000	31	0.75	4.25	5.0
5.	Above 1001	31	0.75	4.25	5.0

3.2.4.3. Group Verification: While random sampling by square root method for identification of the growers for verification audit the small growers owning less than 10.12 ha are to be separated from the large growers owning more than 10.12 ha as the latter to comply with PLA.

3.2.5. Interviews:

Assessments shall include interviews in order to identify potential issues to be followed up during the course of the audit and triangulate information gathered throughout the Assessment. Interviewees shall, at a minimum, comprise:

- a) Small holder farmers, if any
- b) Both permanent and temporary workers in field and factory, if any
- c) The Verified Organisation's trustea officer
- d) A representative of the senior management
- e) Another two appointed Responsible Persons for two of the following key aspect of the operation: product quality and safety; worker health and safety and labour rights; pest management; environmental protection.
- f) Atrade union representative, if any
- g) the welfare officer, if any
- h) a member of the medical staff, if any



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50% of interviewees shall be women and women should be interviewed by female auditors.

Interviewees should be selected by the auditors only and non-management interviews should take place where the interviewee feels comfortable and not in the presence of management.

Interviewees for b should consist of a variety of roles, such as pluckers, drivers, security guards, sprayers, and maintenance workers from across different sections of the organization. The sample from these groups should also include workers from high risks categories such as younger, older, injured, and pregnant and nursing mothers.

3.2.6. No. of persons to be interviewed:

Depending on the number of workers engaged in the organisation, the minimum number of persons to be interviewed shall not be less than the ones indicated in the table below; Workers should be interviewed both individually and in groups

Audit man day	Number of workers (excl. management)	Individual interviews	Total employees Interviewe d
1	1-100	6	10
2	101-500	6	26
3	501-1000	12	42
4	1001- 2000	20	52
	Above 2000 workers is capped at 4 man days, but can be increased at the discretion of CB		

Interviews should at least last 5 minutes per interviewee. With the exception of senior management staff, it should be made clear to interviewees that their identity will be kept confidential and information they provide will not be attributable to them. The Auditor shall document, for their internal records only, all interview partners with name and position; time, date and duration of the interview; a few notes from the interview; and for c) to e) signature of the interviewee.

3.2.7. Opening and closing meeting:

External Audits shall start with an opening meeting with Senior Management of the VO. In the absence of the Senior Management, it could be with the designated trustea officer of the VO. On completion of the assessment a closing meeting shall be held with senior management and non-conformities identified during the assessment if any should be reviewed. In case of internal Audits itshall be with senior management.



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Notes from the opening and closing meeting shall be included in the Assessment documentation and it shall be signed by a representative of the senior management or the trustea Officer as the case may be.

3.3 Internal Documentation System (IDS)

- 1. Verified Organisations must have an Internal Documentation System (IDS). An IDS is an information management and record keeping system by the verified organization which can demonstrate to auditors that its management controls cover all processes that are subject to trustea rules. If the Verified Organisation comprises a group of entities then it must run the IDS on behalf of all of those individual entities.
- 2. If the Verified Organisation is a group of entities or individual farmers, the IDS shall comprise as a minimum:
 - a) An organogram or explanation of how the group is organised, with roles and responsibilities of key staff and governance structures for the group
 - b) Approval of new members
 - c) Documenting at any point in time (a) which entities or farmers are included in the Verified Organisation and (b) what production areas and processing facilities are included;
 - d) Individual members' deliveries and sales of the Verified Organisation
 - e) Group member record keeping requirements
 - f) Records of Internal Audits; and
 - g) Internal mechanisms for dealing with non-conformities with the trustea Code, sanctions and appeals.
- 3. In the case of groups, farmers and estates of a considerably different production system (in size, nature or geography) can be covered under the same IDS but shall be audited in sub-samples with homogenous attributes.
- 4. During the Assessment the Auditor shall satisfy him or herself that the IDS:
 - a) Exists to the extent of the above minimum requirements
 - b) Is well-managed and up-to-date
 - c) Contains accurate, unequivocal information that is internally consistent and in line with the information that the Auditor observes in the Verified Organisation's operations throughout the audit.

3.4 Compliance with the trustea Code

Checklist:

CBs and verified organisations shall use checklists, based on the full trustea Code, for all their trustea Assessments. The trustea Secretariat may from time to time issue its own checklist, plus rules for the use of such checklists (e.g. whether its use is mandatory or for guidance only).



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2. Types of Control Points:

The trustea Code has three types of Control Points (CPs) highlighted in different colours within the code as under:

- 1. Zero tolerance (ZTCP) highlighted in red colour
- 2. Mandatory(MCP)-highlightedinambercolour
- 3. Other CPs (OCP) highlighted in green colour

Compliance levels are based on progressive improvement over three years in

eachsectionasfollows: Year 1:100% ZTCP + MCP & 50% of OCP

Year 2:100% ZTCP + MCP & 65% of OCP Year 1:100% ZTCP+MCP & 80% of OCP

Sections:

For assessing compliance, the chapters of the trustea Code are grouped into

four sections as follows:

SectionsI: Chapters 1 and 2 Section II: Chapters 3 to 6 Section III: Chapters 7 to 9

Section IV: Chapters 10 and 11

The minimum compliance levels for the Other CPs of 50%, 65% and 80%, respectively, need to be met per section. An organization that fails to meet the minimum compliance level in one section cannot be verified. The total compliance percentage points (Mandatory and Other Criteria) in year 1 must not be less than 82%, in year 2:88% and in year 3:93%. Further, there will be 0.5 marks for minor non compliances if the auditors can assure that the unit is progressing towards full compliance. An organisation that fails to comply with the ZTCP shall not be eligible for VC for one year from the date of verification audit scored.

4. The trustea Scoring Policy:

On the Checklist, (see sub section 1 of section 3.4) compliance with each CP is marked as follows

- a) Mandatory CPs are either 'pass', scored with 1; or 'fail', scored with 0. There is no partial fulfilment of mandatory CPs, i.e. 0.5 marks cannot be. Anything but full compliance is scored as 'failed' in case of a mandatory CP (see the table below for reference).
- b) Other CPs can be 'fully met', scored with 1; 'partially met' (in case of a minor non-conformity, see 4.4.1), pro rata as per the applicable sub-criteria points; or 'failed' (in case of a major non-conformity), scored with 0 (see table below for reference).
- c) Not Applicable: If a CP, mandatory or other, is not applicable for the Verified Organisation's operation, then this is indicated in the comments column (see the code booklet), along with the reasons or evidence for non-applicability.



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d) Non-applicable CPs are excluded from the calculation of compliance levels.

Audit finding	Score (Mandatory CPs)	Score (Other CPs)	
Compliance	1	1	
Minor non-conformity	0	02 or 0.25 or 0.33 for each of the applicable sub-criteria point	
Major non-conformity	0	0	
Not applicable	Taken out of overall numbers with explanation	Taken out of overall numbers with explanation	

5. Total score:

Scores for all mandatory CPs and all other CPs will be added up separately. Dividing this sum between the numbers of applicable CPs of the trustea code will be used to arrive at percentage compliances for mandatory and other CPs. The auditors will check on the applicability of all control points.

6. Evidence and comments shall be provided for each CP and must be suitable to enable the audit trail to be reviewed after the event, and will include details of references taken during the audit. During all assessments, auditors must make records of the evidence seen for all applicable CPs

3.5 External Verification Audit

1. The Organisation's chosen Certification Body (CB) will conduct the External Audit.

In case of group verification, the CB audits a sample of group members, as described in Clause 11.2 of Part 2 of the General Regulations.

The first External Verification Audit shall take place only after all necessary corrective actions from the Gap assessment have been closed out and the VO has been issued with gap closure certificate. The CB shall share with trustea secretariat the audit plan at least two weeks prior to the proposed date of audit and obtain confirmation that the entity is holding the gap closure certificate.

3.6 Internal Audit

1. General: An Internal Audit must be carried out at least four weeks before the expiry of twelve months from the date of issue of the verification certificate. It will be carried out as a self-assessment under the responsibility of the verified organisation.

The self-assessment shall be against the complete checklist

In case of group verification a minimum of one inspection must be carried out every year against the full checklist for each member of the group.



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2. Informing the Certification Body and the trustea Secretariat:

The organisation shall notify the CB, copying the trustea secretariat, of the planned internal audit date and audit plan at least one week before the starting the audit. Once completed, the completed checklists must be submitted to the organisation's CB, copying the trustea secretariat, within two months.

- 2a. The concerned CB on receiving the internal audit report shall review the same and inform the organisation as to the acceptance or otherwise of the report and the Secretariat shall be kept informed to that effect. In the event of internal audit report was found to be not acceptable, (not reaching the minimum score required for the given year) the CB shall advise the organization to carry out the required corrective actions and submit the report within the specified time period.
- 2b. Failure to carry out internal audit within due time and forward the internal audit report to the CB within two months or if the internal audit is delayed more than three months from the due date, the verification certificate shall be withdrawn by the CB.
- 3. Internal Auditors:
 - Internal Audits are self-assessment which must be carried out by qualified internal auditors.
 - Internal auditors shall have at least the following qualifications:
 - 1. Three years of experience in the tea industry or qualified auditor of any ISO management system.
 - 2. Having qualified trustea audit or internal auditors' trainings.

(Formal internal auditors training by IP or TS will be) as mandatory criteria In absence or non-availability of an internal auditor, the verified unit may subcontract their internal audit to an external trustea approved certification body, different from the CB responsible for the external verification audits. The cost would be borne by the verified unit. **

4. First Internal Audit / GAP Audit:

The first Internal Audit / GAP Audit shall be conducted within one month after registration with trustea (i.e. one month after receiving the unique trustea number). No External Audit may be conducted before all corrective actions from the first Internal Audit are closed out.

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3.7 System Assurance Audits (SAA)

 The trustea Secretariat may at any time carry out System Assurance Audits, and on annual basis the trustea Secretariat will select a random sample of verified organisations in which to conduct System Assurance Audits. System Assurance Audits may also result from complaints to the trustea Secretariat or CB about the certificate holder by relevant stake holders.

System Assurance Audits can be:

- Full (against the entire trustea code and covering the entire verified organisation) or partial (against parts of the trustea code of limited to certain parts or aspects of the Verified organisation's operation); and
- ii. Announced or unannounced.

System Assurance Audits can take two forms:

- Non-Programmed Audits: independent re-audits carried out by the trustea
 Secretariat or its appointed auditors
- ii. Shadow Audits: a regular external or internal audit that is accompanied by a trustea officer or appointed agent.
- 2. System Assurance Audits can also result from complaints about the certificate holder by other parties to the CB, e.g. the government or NGOs.
- 3. The timing for System Assurance Audits must keep in view the Production season to coincide the visit with plucking time as far as possible.
- 4. Any non-conformities will be treated like non-conformities found in regular audits and the same processes, time lines and consequences apply as for non-conformities found in regular audit.
- 5. Cost for the System Assurance Audit (SAA) will be built into the fees payable to the regular audits for CBs
- 6. For the audits done by trustea Secretariat there won't be any fees chargeable to the entity.
- 7. Mandatory for all verified entities to comply with the SAA notice as this is an integral part of the whole trustea process.
- 8. Non-adherence to the same may be considered as an indication of ongoing noncompliance to the code requirements which may lead to the suspension of the trustea Certificate for that entity.

* Subject to force major

3.8 Audit Timing and Team Composition

1. Audit timing:

The timing for all Assessments (Internal, External and Control) should take place during active production and when both permanent and temporary staff are available for interviews



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Timings and date of External Audits shall be fixed with the consent of the applicant organisation ensuring that normal operations will be open for witnessing during the planned Audits.

Alternative timing options may be followed where audit during production time is not possible, however this should be avoided and appropriate justification should be documented and maintained by the CB. Where audits take place outside of production, this should be noted in the audit report along with a summary of the impact on the audit. Practically, audit of records and visual evidence requires that the audit must take place as close to harvest as possible, for the evaluators to verify as many control points as possible. If an External Audit takes place outside of production time, the next External Audit must take place during production and assess any CPs that could not be evaluated in the previous External Audit.

2. Audit team composition:

The Certification Body shall communicate the composition of the team of auditors and duration of Audit to the trustea Secretariat and the applicant at least three weeks before the planned audit date. Where the audit man days are two and more, the audit team shall consist not less than two auditors CBs shall endeavour to include female auditors so that woman workers are interviewed only by the female auditors.

3. Appeals against audit timing and team composition

Until two weeks before the planned audit date, the applicant may raise any concerns about timing or the assigned auditors (e.g. suspected conflict of interest) in writing to both the trustea Secretariat and the CB explaining in detail the nature of their concern, along with any evidence. The normal appeals procedure applies (see Section 4.6). An appeal does not change the set audit date or team composition until it is either revoked by the CB or the matter is escalated to the trustea Secretariat by either party. Organisation and CBs are encouraged to find solutions bilaterally.

3.9 Checking of Audit Results by the trustea Secretariat

1. Random inspections:

Every year the trustea Secretariat will randomly inspect a number of internal and external Audits. The purpose is to ensure consistency in the quality of auditing across the trustea programme. In cases where the inspections uncover non-confirmities, or insufficient implementation of previously closed out corrective actions, the trustea Secretariat may ask the CB to re-audit or put the verified organisation's status to 'verification pending'.

2. The trustea Secretariat will also use the random inspections to feed back to the CBs on the quality of the audit reporting, inform training needs and identify areas for improvement in the audit approach. In cases where audit reports are not of a sufficient standard, the trustea Secretariat will contact the CB.



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The number of audits the Secretariat will check is determined by the trustea programme committee (tPC), or a committee entrusted with such reviews by the trustea programme committee (tPC).

4. Verification Process

4.1 General

1. Contracting:

A written contract is established between the applicant organisation and the CB depicting the fees, timeframe, dates and the scope of the audits. The applicant Organisation as well as the CB inform the trustea Secretariat and shares a copy of the contract.

2. Application for verification:

- a) Organizations shall apply to the CB in the application format prescribed by the CB, and provide, as a minimum, information on its name, unique reference number and contact details.
- d) The CB shall respond to all enquiries received from organisations regarding their application within seven days of receipt of the query.

3. Granting of verification against the trustea code:

- a) The applications found to be complete and supported with all documents shall be accepted and registered in order of receipt with the CB's own unique identification number, acknowledged and records maintained.
- b) The CB shall grant verification certificate after ensuring complete compliance with the verification requirements and satisfactory close out of any corrective actions. Thereshall be no conditional grant of verification.
- c) Verification certificate is granted only against the latest versions of the trustea Code, verification requirements and scheme rules. The CB shall review all applications for the above to ensure that applicants are prepared for an audit against the latest requirements.
- d) The Verification Certificate shall be issued within 30 days of completion of the audit, unless corrective actions are noted, in which case the verification certificate shall be issued within 30 days of satisfactorily closing out the corrective Actions (see 4.4.3.1).

4. Rejection of applications:

- a) CBs shall reject and close all applications for verification under the following conditions:
 - 1. Lack of competent personnel in the Organisation for handling trustea audit
 - 2. Organization shows no progress towards completion of corrective actions within three months of first audit

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- 5. Voluntary withdrawal of application.
 - a) Organizations that have earlier either violated the trustea Terms & Conditions or misused the Verification Mark or their affiliation with trustea, shall be banned from re-applying for one year from cancellation of the certificate by any CB.

Applications from Organizations found to be misusing the Verification Mark or their affiliation with trustea while their application is being processed, shall not be processed any further, and rejected after a due notice of 15 days.

- b) The trustea Secretariat reserves the right to reject or put on hold applications if it believes that the application may put the reputation of the trustea scheme at risk. The applicant can appeal against such a decision with the trustea Board.
- c) Antecedents of applicant Organisations shall be checked. If punished under the law, or the earlier product verification had been cancelled, the application from the same Organization will not be entertained.
- d) Applications from eligible Organisations whose previous applications have been withdrawn, stopped or rejected, shall be processed as fresh applications.
- 6. Notification to the Organization and issue of verification certificate: On granting verification the certification body shall inform the organization and issue a verification certificate, uniquely identified, indicating the names of the product verified, the verification requirements against which the verification has been awarded, effective date, expiry date, and the name and address of the organization as a minimum.
- 7. Notification to the trustea Secretariat and records. The CB must fill in the audit report using the trustea software and upload it to the trustea portal within 15 days after the audit. The CB must give the results of the audit, and a summary report to the organization and trustea Secretariat within 30 working days after completing the audit. Based on audit outcome the CB will then issue a VC to the organisation in the format prescribed by trustea. The validity of the VC shall be two years from the date of issue of VC.

The CB shall maintain records of all verification activities: application registration, documents provided by applicant, and on site audit reports for a period of five years after the audit.

4.2 Renewal of Verification

- 1. The CB shall send a renewal notice to the verified organisation at least four months prior to certificate expiration.
- 2. The Verified Organization should apply for renewal of verification at least three months before expiry of the verification.
- 3. The CB then carries out a full External Verification Audit, ideally at least four weeks before expiry of the old verification certificate.
- 4. When the performance of the verified organisation does not meet the verification



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 $requirements, the \,CB \,shall \,\,not \,issue \,a \,new \,verification \,certificate \,to \,the \,Organization.$

5. The new verification certificate shall be effective from the date of the expiry of the old certificate provided the verification audit has taken place four weeks prior to expiry of the old VC.

In the event of audit takes place less than the prescribed period of 4 weeks prior to expiry of old VC, the intervening period gap between the expiry date of the old certificate and the start date of the new one, shall be treated as period of non-verification. During this period, the verified unit shall not claim verification or use the trustea logo, trademark, verification certificate, or any other type of document that has any relation to trustea verification or make any explicit or implicit reference that suggest it is trustea verified.

4.3 Verification status

Organisations will be classified as one of the following

- Verified
- 2. Verification pending
- 3. Not verified.

Only verified organisations may use the trustea word mark and logo, in line with trustea rules. Organisations with a pending verification may not use the trustea word mark logo but may refer to their trustea status as "trustea verification pending" in written communication with their business partners.

4.4 Non-Conformance

4.4.1 Types of non-conformities

- 1. Non-compliance with a requirement under the code will be termed as non-conformity.
- 2. Any non-conformity against a mandatory control point leads to a 'fail' of that CP and thereby failing to meet the verification requirements.
- 3. Non-conformities against other CPs are classified into major and minor non-conformities. An organisation conforms with other CPs if its requirements are (a) implemented to the full extent; and (b) across the entire organisation (in case of group verification across all members of the group).

In the case of other CPs, a non-conformity is

3.1. Minor, if the Code requirement is either not implemented to the full extent; or not implemented across the entire organisation (in case of group verification across all members of the group). In addition, there must not be any evidence that points towards failing management or control systems as the underlying root cause of the non-compliance.



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3.2. Major, if the Code requirement is absent; or evidence points towards failing management or control systems as the underlying root cause of the non-compliance.

4.4.2 Improvement Plans

1. In years 1 and 2 of the trustea verification the CB and organisation jointly draw up an improvement plan that details how the organisation will move from its current compliance level to the compliance level required for the following year (e.g. moving from 50% compliance with all other CPs in year 1 to 65% in year 2).

Verified organisations are to continue having an annual improvement plan beyond year 2, as part of good management practice and their ongoing efforts to improve sustainability.

2. The Improvement plan shall be specific, measurable, actionable and time-bound:

Specific: Listing specific actions to improve compliance with specific CPs in the trustea Code

Measurable: Leading to improvements that will increase the compliance level to the one required in the following year (or beyond)

Actionable: Concrete, as well as realistic in terms of time, competency and resources available to the verified organisation

Time-bound: Specific by when an improvement will be achieved, and where appropriate defining interim milestones

3. The CB checks that the organisation has achieved the improvements laid out in the improvement plan as part of the audit (in year 3) or when reviewing the internal audit report (in year 2)

4.4.3 Corrective Action

- 1. Instead of failing the audit, the CB can demand corrective action from the organisation before issuing the verification certificate in cases where minor non-conformities (see Section 4.4.1) prevent the organisation from meeting the required compliance level for a particular year. Corrective actions may also be mandated after the CB checks the results of the Internal Audit and after SAA and special investigations, whether initiated by the CB or the trustee Secretariat.
- 2. The CB registers the minor non-conformity and should review corrective actions proposed by the entity being audited, and if necessary indicate why they may be inadequate to allow closing of a non-conformity.
- 3. If the same non-confirmity is found more than once in a three year period, a warning will be issued. (see 4.5.1). Corrective action can only be used once on the same Control Point in 3 consecutive years.



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- 4. Corrective Actions comprise the following steps:
 - (i) investigation of cause (root cause analysis),
 - (ii) finding possible solutions,
 - (iii) monitoring of effectiveness.
- 5. Corrective Actions can only be closed out as completed if:
 - (a) the CB accepts the evidence presented by the organisation for following the three steps described in the previous paragraph; and
 - (b) the CB verifies implementation of the solution.

The Corrective actions shall be verified on site unless the CB can verify the same off-site

- 6. The CB sends a notice to the organisation and the trustea Secretariat whether it accepts the evidence or not within 7 days of receipt of the evidence.
- 7. The period for completing Corrective Actions is set by the CB and must not exceed three months or the expiry date of the current VC, whichever of the two is shorter.
- 8. In case the organisation does not complete satisfactorily all corrective actions within their allotted periods, the verification shall stand cancelled from the end of the first deadline for a corrective action.

4.5 Sanctions

4.5.1 Warning

- 1. Both the CB and the trustea Secretariat can issue warnings. A warning is issued when a verified organisation
 - a) Does not conform with the same verification requirement on two consecutive external audits (External Verification Audits or Control Audits)
 - b) Is seen to misuse its affiliation with trustea, the trustea mark or logo, or behave in other ways that threaten the reputation of trustea or its other members.
- A warning is delivered to the verified organization by the trustea Secretariat in writing detailing the reason for the warning. If the warning is initiated by the CB, the CB will notify the trustea Secretariat of their view that a warning should be issued and provide all necessary information related to the warning. If the warning is initiated by the trustea Secretariat, a copy shall be sent to the CB that issued the current verification certificate.
- 3. Once placed under warning, an organisation's verification certificate can be cancelled without prior notice (see Section 4.5.2). While under warning the organization is still considered verified.
- 4. Warnings will be formally lifted in writing by the trustea Secretariator the CB.
- 5. Organisations can appeal against being placed under warning with the trustea Board within three months after the warning has been issued. The trustea Board will respond to appeals within two weeks.



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4.5.2 Cancellation of verification

- 1. The VC shall be cancelled if the verified organization fails the ZTCP. Such VOs shall apply for VC only after 12 months from the date of cancellation of the VC.
- 2. The Verification Certificate shall be cancelled when corrective actions are not closed out as completed after the allotted time (see Sections 4.4.3)
- 3. The Verification Certificate may be cancelled when
 - A non-conformity leads to serious doubt about the integrity of the product, particularly food safety
 - b) An organisation severely or purposefully violates the trustea terms and conditions or misuse its affiliation with trustea, the trustea mark or logo, or behave in other ways that threaten the reputation of trustea or its other members.
- 4. Certification Body shall also cancel the verification at the request of the verified organisation, if the operation(s) in the organisation's premises can no longer be carried out due to reasons of natural calamities such as flood, fire, earthquake etc., lockout declared bythemanagement, or closure of business operations etc.
- 5. A formal notice of cancellation is delivered to the verified organisation by the CB that has issued the VC. The notice shall detail the reasons and the date from which the VC will be invalid.
- 6. VC's can only be cancelled by the CB that has issued them. The trustea Secretariat can however put an organisation's status on 'Not Verified' and instruct the concerned CB to cancel a VC if maintaining verification for an organisation poses a risk to the reputation of the trustea scheme or is deemed to pose a risk to the reputation of other verified organisations. The CB shall issue a notice period of at least two weeks to the verified organisation before cancelling the VC. However, if the verified organisation is under warning no notice period is required
- 7. An Organisation that has had a cancellation applied may not re-submit for verification until twelve months after the date of cancellation.
- 8. A cancellation of the verification certificate will result in the total prohibition of using the trustea logo, trademark, VC, or any other type of document that has any relation to trustea verification, or make any explicit or implicit reference that suggest it is trustea verified.

Organisations can appeal against a cancellation with the trustea Board within three months after it has been issued. The trustea Board will respond to appeals within two weeks.



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- 4.6 Appeals against Certification Body decisions
 - 1. An Organisation can appeal against decisions of a CB within 15 days of receipt of formal notice of the decision. The appeal shall state which decision is contested, detailed reasons why the organisation objects and what it thinks should be the correct decision.
 - 2. The CB shall respond within 7 days of receipt of the appeal, replying in detail to the concerns of the organisation and either confirm or revoke the contested decision.
 - 3. If the organisation is not satisfied it should engage in further rounds of trying to resolve the issue directly with the CB.
 - 4. Any appeals will be logged with the trustea secretariat. Both the appealing organisation and the CB have a duty to inform the secretariat, which issues a case number and will log all related correspondence. All correspondence in the matter from both the appealing organisation and the CB shall be in writing (or confirmed in writing if verbal) and copied to the trustea Secretariat by post or e-mail to
 - 5. If either party feels that the issue cannot be resolved bilaterally, or cannot be resolved within an acceptable time, the party may escalate the matter to the trustea Secretariat. The trustea Secretariat will review the case, hearing both sides, and make a final and binding decision within one month. The Secretariat reserves the right to pass on the cost of such a review by the trustea Secretariat (time, travel to the field and other expenses) to one or both of the parties, at a level and split at its discretion.
 - 6. An appeals procedure is a mandatory component of the contract between organisations and CBs. The appeals procedure must be in line with the above generic framework.
- 4.7 Extension of Scope under an Existing Verification Certificate
 - 1. A verified organization may increase the number of STGs which is not there in the approved annexure (provided with the VC by the CB), but the verified organization must report any proposed increase of STGs to the trustea Secretariat. Post that, with concurrence of Secretariat, external audit is to be carried out by CB and upon approval by CB, the list may be modified. A verified entity may increase upto 10% in volume per STG which can be approved without the need of conducting a new External Verification Audit before the next scheduled external audit. However, the verified organization must report any change in production area or of the approved STG to the trustea Secretariat and proceed only upon confirmation by secretariat. Until the process as outlined above is followed, no new STG may be added to original list of approved STGs
 - 2. The trustea Secretariat may commission the CB to quality check the documentation wherever necessary, at the cost of the verified organisation. Further, new areas or new members of a group may only be included in the scope of the VC if the CB is provided with documentation demonstrating that those farms were subject to an Internal Audit and complied with all of the trustea Code requirements. The results of the internal audit must be submitted to the trustea Secretariat as part of the supporting documents.



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4.8 Change of Location, Ownership or Name

1. Change of location: The verified organisation shall inform the CB and trustea Secretariat of any change in the location of its operations within four weeks.

The verified Organisation shall conduct an Internal Pre-Assessment and be subject to an External Audit at the new site like an organisation that applies for the first time.

If the External Audit is satisfactory, the CB shall transfer the Certificate to the new location and the verified organisation be permitted to operate verification from the new site.

The CB shall endorse the change of premises on the Certificate.

2. Change of ownership:

Status	Action by new owner	Status of certificate <120 days of expiry	Status of certificate >120 days of expiry	Audit requirement
Certificate within valid date	Commitment to continue with certification	valid	Valid	EA before due date as required
Recertification audit date crossed	Commitment to continue with certification	valid	Certification invalid.	Fresh certification with Gap Audit
Internal audit due	Commitment to continue with certification	valid	Valid	IA to be done*
Status	Commitment to continue with certification	valid	Certificate Invalid	Immediate EA

^{*} Below requirement to be fulfilled (any one)

A. Internal Auditor is not changed then no need to go for an IA/EA

B. If Internal Auditor is changed then the entity needs to submit the relevant document for the new Internal Auditor complying with the trustea requirement to satisfy the criteria.

C. If the entity is not complying the above requirement then they have to go for an External Audit or internal Audit by the External body (CB/tS)



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3. Change of name: In case of change of name, the verified unit shall inform the CB and trustea Secretariat, supported with documentary evidence, and if satisfied the CB shall endorsethecertificate in the new name.

4.9 Verification Certificate

1. The Certification Body shall provide a formal hard copy of the VC to the Verified organisation. The VC shall be in the standard template issued by the Secretariat, (see Annex 1)

Name of marks shall be mentioned on the VC or any other document intimating grant of verification.

2. A copy of the VC shall be sent to the trustea Secretariat which may, within six weeks of issue, contest the verification in case of suspected errors or irregularities.

The VC remains valid if contested by the trustea Secretariat, until a formal cancellation is issued.

- 3. The CB will maintain a copy of the VC as a record for five years.
- 4. The validity of the VC will be two years, subject to any suspensions, cancellation or extensions in accordance.
- 5. Once the verification certificate is issued the product produced up to 3 months prior to that day is to be considered as verified.
- 6. If the verified organisation provides copies of the verification certificate to others, the certificate shall be reproduced in its entirety.

5 Use of the trustea word mark and logo

- 1. The policy for using the word mark and logo of trustea on-pack and off-pack is being developed and will be binding. For the present the following general rules apply:
 - a) The trustea logo and accreditation marks are the sole property of the trustea Secretariat. Any incorrect or inappropriate use of the same may lead to legal and punitive actions
 - b) The CB shall immediately notify the trustea Secretariat of any suspected or observed incorrect references to trustea verification status or misleading use of VCdocuments, marks or audit reports
 - c) Verified Organizations will only make reference to their verification status in communication media such as the internet, brochures or advertising, or other documents if they comply fully with the trustear equirements
 - d) Verified Organizations do not make, or permit others to make on their behalf, any misleading statements regarding their trustea verified status.
- 2. Any users of the trustea word mark and logo must ensure that they are not used in such a manner that would bring the CB or the trustea code to lose public trust and reputation.



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ANNEXURE I



Seal of the

issuing body

trustea

Accreditation No:

Total No. of verified STGs:

VERIFICATION CERTIFICATE

trustea Code for Sustainable Tea in India
Verification Certificate no: TS-VC / CB / certificate number / year

Ver	ification Cert	tificate no: TS-VC / CB / certificate number / year				
This verification certification	This verification certificate is issued based on the audit conducted in accordance with the trustea Code Version 2.0					
the trustea code which c		with certifies that the entity mentioned below is found in compliance with agronomic, food safety, occupational health & safety and environmental				
Name of the VC	: ,					
holding entity	:					
Name of the site /	:	Production Area of estates : Own Leaf Area :				
sites verified		Bought Leaf Area :				

Total Own Grant Area (Ha)

Address

Source of Green Leaf	Name of Products	Mark	Estimated Production (Kg)
	CTC TEA		
Own Leaf	ORTHODOX		
	GREEN TEA		
Total			
	CTC TEA		
Bought Leaf	ORTHODOX		
	GREEN TEA		
Total			
Grand Total (Own Leaf + Bought Leaf)			

	*		1	
Date of Audit	:			
Date of Issue of VC	:			
/Cvalid up to	:			
Date of First is sue of VC	:			
Date of Revision	:			
Place	:			
		_		_
			Seal and Signature	



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is accredited by trustea. This VC remains the property ofand can be withdrawn in case of terminations as mentioned in the contract or in case of changes or deviations of the above-mentioned data. The licensee is obliged to inform AB's Name immediately of any changes in the above-mentioned data. Only an original and signed certificate is valid.
Address:



ANNEXURE II



Verification Certificate no: TS-VC / CB / certificate number / year

SI. No.	Code	Name	Production Area (Ha)	Estimated Production of Green Leaves (Kg)
		8		
		10 8/		
ESTII	MATED PRO			
ESTII	MATED PRO			

Seal of the issuing body