




SMETA Corrective Action Plan Report (CAPR)

Version 6.0



Audit Details			
Sedex Company Reference: <i>(only available on Sedex System)</i>	ZC: 403556537	Sedex Site Reference: <i>(only available on Sedex System)</i>	ZS: 403563811
Business name (Company name):	VIETAI GARMENT ACCESSORIES COMPANY LIMITED		
Site name:	VIETAI GARMENT ACCESSORIES COMPANY LIMITED		
Site address: <i>(Please include full address)</i>	Lot M7-M9-M11, Street A, Cat Lai Industrial Park, Thanh My Loi ward, Dist.2, Ho Chi Minh City	Country:	Vietnam
Site contact and job title:	Mr. Johnny Chan – Operating Director		
Site phone:	+84 28 37420058	Site e-mail:	johnny@vietaico.com
SMETA Audit Type Pillars:	<input checked="" type="checkbox"/> Labour Standards	<input checked="" type="checkbox"/> Health & Safety	<input checked="" type="checkbox"/> Environment <input checked="" type="checkbox"/> Business Ethics
Date of Audit:	09 April 2019		

Audit Company Name & Logo:  Total Quality. Assured.	Report Owner (payee): <i>(If paid for by the customer of the site please remove for Sedex upload)</i> Nexgen Packaging, LLC
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Audit Conducted By					
Commercial	<input checked="" type="checkbox"/>	Purchaser	<input type="checkbox"/>	Retailer	<input type="checkbox"/>
Brand owner	<input type="checkbox"/>	NGO	<input type="checkbox"/>	Trade Union	<input type="checkbox"/>
Multi-stakeholder	<input type="checkbox"/>	Combined Audit (select all that apply)			

Audit Content:

(1) A SMETA audit was conducted which included some or all of Labour Standards, Health & Safety, Environment and Business Ethics. The SMETA Best Practice Version 6.0 April 2017 was applied. The scope of workers included all types at the site e.g. direct employees, agency workers, workers employed by service providers and workers provided by other contractors. Any deviations from the SMETA Methodology are stated (with reasons for deviation) in the SMETA Declaration.

(2) The audit scope was against the following reference documents

2-Pillar SMETA Audit

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

4-Pillar SMETA

- 2-Pillar requirements plus
- Additional Pillar assessment of Environment
- Additional Pillar assessment of Business Ethics
- The Customer's Supplier Code (Appendix 1)

(3) Where appropriate non-compliances were raised against the ETI code / SMETA Additions & local law and recorded as non compliances on both the audit report, CAPR and on Sedex.

(4) Any Non-Compliance against customer code shall not be uploaded to Sedex. However, in the CAPR these 'Variances in compliance between ETI code / SMETA Additions/ local law and customer code' shall be noted in the observations section of the CAPR.

SMETA Declaration

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

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

Any exceptions to this must be recorded here

(e.g. different sample size): None

Auditor Team (s) (please list all including all interviewers): Anh Tran and Hien Vu

Lead auditor: Anh Tran - 21703020

Team auditor: Hien Vu - 21700497

Interviewers: Anh Tran, Hien Vu

Report writer: Anh Tran

Report reviewer: Gangadharaiah.MK

Audit Company Report Reference: Vie 9405-02

Date of declaration: 09 April 2019

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

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

Audit Parameters

Audit Parameters			
A: Time in and time out	Day 1 Time in: 08:30 Day 1 Time out: 17:25	Day 2 Time in: N/A Day 2 Time out: N/A	Day 3 Time in: N/A Day 3 Time out: N/A
B: Number of Auditor Days Used:	2 auditors in 09 April 2019 (1.5 manday)		
C: Audit type:	<input type="checkbox"/> Full Initial <input checked="" type="checkbox"/> Periodic <input type="checkbox"/> Full Follow-up <input type="checkbox"/> Partial Follow-Up <input type="checkbox"/> Partial Other – Define		
D: Was the audit announced?	<input checked="" type="checkbox"/> Announced <input type="checkbox"/> Semi – announced: Window detail: NA <input type="checkbox"/> Unannounced		
E: Was the Sedex SAQ available for review?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, why not		
F: Any conflicting information SAQ/Pre-Audit Info to Audit findings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes , please capture detail in appropriate audit by clause		
G: Who signed and agreed CAPR (Name and job title)	Mr. Johnny Chan – Operating Director		
H: Is further information available (if Y please contact audit company for details)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
I: Previous audit date:	12 April 2018		
J: Previous audit type:	Initial		
K: Was any previous audit reviewed during this audit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		

Audit attendance	Management		Worker Representatives	
	Senior management		Worker Committee representatives	Union representatives
A: Present at the opening meeting?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

B: Present at the audit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
C: Present at the closing meeting?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
D: If Worker Representatives were not present please explain reasons why <i>(only complete if no worker reps present)</i>	N/A. There is no worker representative in the facility.		
E: If Union Representatives were not present please explain reasons why: <i>(only complete if no union reps present)</i>	N/A		

Guidance:

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

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

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

Root cause (see column 4)

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

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

Next Steps:

1. The site shall request, via Sedex, that the audit body upload the audit report, non-compliances, observations and good examples. If you have not already received instructions on how to do this then please visit the web site www.sedexglobal.com.
2. Sites shall action its non-compliances and document its progress via Sedex.
3. Once the site has effectively progressed through its actions then it shall request via Sedex that the audit body verify its actions. Please visit www.sedexglobal.com web site for information on how to do this.
4. The audit body shall verify corrective actions taken by the site by either a "Desk-Top" review process via Sedex or by Follow-up Audit (see point 5).
5. Some non-compliances that cannot be closed off by "Desk-Top" review may need to be closed off via a "1 Day Follow Up Audit" charged at normal fee rates. If this is the case then the site will be notified after its submission of documentary evidence relating to that non-compliance. Any follow-up audit must take place within twelve months of the initial audit and the information from the initial audit must be available for sign off of corrective action.

6. For changes to wages and hours to be correctly verified it will normally require a follow up site visit. Auditors will generally require to see a minimum of two months wages and hours records, showing new rates in order to confirm changes (note some clients may ask for a longer period, if in doubt please check with the client).

Corrective Action Plan

Corrective Action Plan – non-compliances									
Non-Compliance Number <i>The reference number of the non-compliance from the Audit Report, for example, Discrimination No.7</i>	New or Carried Over <i>Is this a new non-compliance identified at the follow-up or one carried over (C) that is still outstanding</i>	Details of Non-Compliance <i>Details of Non-Compliance</i>	Root cause <i>(completed by the site)</i>	Preventative and Corrective Actions <i>Details of actions to be taken to clear non-compliance, and the system change to prevent re-occurrence (agreed between site and auditor)</i>	Timescale <i>(Immediate, 30, 60, 90, 180, 365)</i>	Verification Method <i>Desktop / Follow-Up [D/F]</i>	Agreed by Management and Name of Responsible Person: <i>Note if management agree to the non-compliance, and document name of responsible person</i>	Verification Evidence and Comments <i>Details on corrective action evidence</i>	Status <i>Open/Closed or comment</i>
Health & safety No. 3	N	3.1 Based on the facility tour and confirmation of facility management, it was noted that there were no MSDS and secondary containment provided for 01 observed chemical cans (Mobil grease) at Weaving room.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	It is recommended that the facility shall ensure to provide MSDS and secondary containment for all chemical in the facility	30 days	Desktop	Mr. Johnny Chan – Operating Director		
Health & safety No. 3	N	3.2 Based on the facility tour and confirmation of facility management, it was noted that 03 observed exit signs at Material warehouse, Weaving room and production area did not have local language included	<input checked="" type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input type="checkbox"/> Other – please give details:	It is recommended that the facility shall ensure to provide exit signs with local language included	30 days	Desktop	Mr. Johnny Chan – Operating Director		

Health & safety No. 3	N	3.3 Based on the facility tour and confirmation of facility management, it was noted that 1 out of 1 electrical wire of fan in the Material warehouse was in un-safe condition since it was temporarily repaired by tape instead of being replaced by a new one or being put into a safety cover.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	It is recommended that the electrical wires are in good condition & well maintained.	30 days	Desktop	Mr. Johnny Chan – Operating Director		
Health & safety No. 3	N	3.4 Based on document review and confirmation of facility management, it was noted that there were insufficient team members in the firefighting team. There were 94 people working in the facility; However, there were only 10 members in the firefighting team instead of at least 15 members of the internal firefighting team.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	It is recommended that the facility shall ensure that the firefighting team to have sufficient members as legal requirement	30 days	Desktop	Mr. Johnny Chan – Operating Director		
Health & safety No. 3	N	3.5 Based on document review and confirmation of facility management, it was that employees who worked in hazardous and heavy condition (printing, guillotine, weaving) were provided health check one time per year instead of every 6 months. Two latest health checks were conducted on 12 April 2018 and on 28 March 2019.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	It is recommended that the facility shall ensure to provide sufficient health check for their employees	30 days	Desktop	Mr. Johnny Chan – Operating Director		
Living Wages and	N	5.1 Based on document review, employee interview and confirmation of facility management, it was noted	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs	It is recommended that the facility shall ensure that the	60 days	Follow-up	Mr. Johnny Chan –		

Benefits No. 5		that the facility settled the reimbursement cost for sick leaves and maternity leaves on 8th of the following month instead of within 3 days after receiving the Approved list of entitled employees for sick leave and maternity leave benefits from the Insurance Funds.	<input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	reimbursement cost for sick leaves and maternity leaves to be paid as legal requirement			Operating Director		
Living Wages and Benefits No. 5	N	5.2 Based on document review and confirmation of facility management, it was noted that there were 10 workers being trained on firefighting skills on 21 and 22 April 2018, however, they were provided insufficient legally required allowance of 0.5 daily salary for each training day. They were provided with VND 88,636 for 2 training days / each person instead of about VND 153,076 for 2 training days / each person.	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details: Inadequate control	It is recommended that the facility should provide sufficient legal required allowance for workers who attend the firefighting training	60 days	Follow-up	Mr. Johnny Chan – Operating Director		
Living Wages and Benefits No. 5	N	5.3 Based on document review and confirmation of facility management, it was noted that the overtime wage of 02 out of 10 sampled employees in production section in March 2019 was paid insufficiently. In detail: There were 03 working shifts in facility regulation: Shift 1: from 09:00 to 17:30, Shift 2: from 07:00 to 15:30, Shift 3: from 13:30 to 21:30. On the attendance records of March 2019, two cases worked from 07:01 to 16:00 and 07:08 to 16:00; However, the overtime wage for the 0.5 overtime hour from 15:30 to 16:00 was not being	<input type="checkbox"/> Training <input type="checkbox"/> Systems <input type="checkbox"/> Costs <input type="checkbox"/> lack of workers <input checked="" type="checkbox"/> Other – please give details:	It is recommended that the facility should provide sufficient overtime wage for employee	60 days	Follow-up	Mr. Johnny Chan – Operating Director		

		<p>paid. One case worked from 07:35 to 17:25; However, the facility only paid overtime wage for 1 overtime hour instead of overtime hours In additional, on the attendance records of March 2019, 2 samples worked overtime 30 and 21.5 overtime hours; however the facility only paid for 27 and 18 overtime hours respectively.</p>							
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Corrective Action Plan – Observations

Observation Number <i>The reference number of the observation from the Audit Report, for example, Discrimination No.7</i>	New or Carried Over <i>Is this a new observation identified at the follow-up or one carried over (C) that is still outstanding</i>	Details of Observation <i>Details of Observation</i>	Root cause <i>(completed by the site)</i>	Any improvement actions discussed <i>(Not uploaded on to SEDEX)</i>
NA	NA	None observed	NA	NA

Good examples

Good example Number <i>The reference number of the non-compliance from the Audit Report, for example, Discrimination No.7</i>	Details of good example noted	Any relevant Evidence and Comments
	None observed	

Confirmation

<p>Please sign this document confirming that the above findings have been discussed with and understood by you: (site management) <i>If actual signatures are not possible in electronic versions, please state the name of the signatory in applicable boxes, as indicating the signature.</i></p>		
<p>A: Site Representative Signature:</p>	<p>Mr. Johnny Chan</p>	<p>Title: Operating Director</p> <p>Date: 09 April 2019</p>
<p>B: Auditor Signature:</p>	<p>Anh Tran, Hien Vu</p>	<p>Title: Auditors</p> <p>Date: 09 April 2019</p>
<p>C: Please indicate below if you, the site management, dispute any of the findings. No need to complete D-E, if no disputes.</p>		
<p>D: I dispute the following numbered non-compliances:</p>		
<p>E: Signed: <i>(If <u>any</u> entry in box D, please complete a signature on this line)</i></p>	<p>Mr. Johnny Chan</p>	<p>Title: Operating Director</p> <p>Date: 09 April 2019</p>
<p>F: Any other site Comments:</p>		

Guidance on Root Cause

Explanation of the Root Cause Column

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

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

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

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

Some examples of finding a "root cause"

Example 1

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

Example 2

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

Example 3

A site uses fines to control unacceptable behaviour of workers.

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

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

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

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

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

Disclaimer

Any proposed Corrective Action Plan (CAP) closed utilizing a Desktop Review is limited by the evidential documentation provided by the facility in order to correct the non-compliance. The intent of this service is to provide assurance that the facility is on the correct path with its proposed or completed corrective actions. Intertek cannot be held responsible for the falsification of evidence or the effective implementation of the proposed corrective actions, which in many instances may only be truly validated by an onsite Audit visit owing to the limitations of the desktop review process. The facilities shall be wholly responsible for the correct and effective implementation of their proposed CAP.

Intertek nor any of its affiliates shall be held liable for any direct, indirect, threatened, consequential, special, exemplary or other damages that may result including but not limited to economic loss, injury, illness, or death arising from the inability of a facility to implement its CAP.



For more information visit: Sedexglobal.com

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

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

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http://www.surveymonkey.com/s.aspx?sm=riPsbE0PQ52ehCo3lnq5lw_3d_3d

[Click here for Supplier \(B\) members:](#)

http://www.surveymonkey.com/s.aspx?sm=d3vYsCe48fre69DRgIY_2brg_3d_3d

[Click here for Auditors:](#)

<https://www.surveymonkey.co.uk/r/BRTVCKP>