SMETA Corrective Action Plan Report (CAPR)

Version 6.1

Audit Content:

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

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

2-Pillar SMETA Audit

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

4-Pillar SMETA

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

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

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

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).

Audit Details			
Sedex Company Reference: *(only available on Sedex System)*	ZC1045432	Sedex Site Reference: *(only available on Sedex System)*	ZS1063520
Business name (Company name):	Hortamar.Soc.Coop.And.		
Site name:	HORTAMAR Roquetas de Mar		
Site address:	Carretera de Alcún, 148 Apdo. Correos 90 Roquetas de Mar 04740 ES	Country:	ES
Site contact and job title:	Francisco Javier Montero / Quality manager		
SMETA Audit Pillars:	☐ Labour Standards ☑ Health and Safety (plus Environment 2-Pillar)	☐ Environment 4-pillar	☐ Business Ethics
Date of Audit:	2022-12-15		

Audit Company Name:
SGS Spain

Audit Conducted By					
Affiliate Audit Company	☑	Purchaser	☐	Retailer	☐
Brand owner	☐	NGO	☐	Trade Union	☐
Multi-stakeholder	☐	Combined Audit (select all that apply)			

Audit Parameters				
Time in and time out	Day 1		Day 2	
	In	09:00	In	09:00
	Out	17:30	Out	14:00
Audit type:	Full initial			
Was the audit announced?	SEMI_ANNOUNCED			
Was the Sedex SAQ available for review?	Yes			
Any conflicting information SAQ/Pre-Audit Info to Audit findings?	No			
Who signed and agreed CAPR	Francisco Javier Montero / Quality manager			
Is further information available	No			

Audit attendance	Management	Worker Representatives	
	Senior management	Worker Committee representatives	Union representatives
A: Present at the opening meeting?	Yes	Yes	Yes
B: Present at the audit?	Yes	Yes	Yes
C: Present at the closing meeting?	Yes	Yes	Yes
Reason for absence at the opening meeting			
Reason for absence during the audit			
Reason for absence at the closing meeting			

Summary of Findings

Issue (please click on the issue title to go direct to the appropriate audit results by clause)	Area of Non–Conformity		Number of issues			Findings
	ETI	Local Law	NC	Obs	GE	
10B2 - Environment 2–pillar	10.B2.1	§1	1	0	0	NC - 38a8d18d-934b-4242-98ba-91050c9ad70f
0A - Universal rights covering UNGP			0	1	0	Obs - c9bbc1dd-7610-4d0d-8ad9-cd45c39369b6
3 - Working conditions are safe and hygienic	3.1 3.1 3.1	§2 §3 §4	3	0	0	NC - ec326df9-e0d3-494e-b632-1b0e592230b2 NC - 864f9ddc-0149-4981-9cb7-08d2a67c2aa4 NC - 769a918f-ab6f-4dce-80a3-08ae0ec27f5f

Local Law Issues

Issue	Description
§1	Royal Decree 553/2020. Art 5: the content of the treatment contract is defined.
§2	R.D 513/2017. Annex I: describes the maintence actions that must be carried out according to the periodicity. /Real Decreto 513/2017.Anexo I: se decriben las acciones de mantenimiento que deben realizarse según la periodicidad.
§3	Royal Decree 286/2006. Art 7: The employer must do everything in his power to ensure that protectors are used hearing aids, encouraging their use when it is not mandatory and ensuring that they are used when it is mandatory in accordance with the provisions of section 1.b) above; likewise, The employer will be responsible for verifying the effectiveness of the measures taken in accordance with this article./Real Decreto 286/2006. Art 7: El empresario deberá hacer cuanto esté en su mano para que se utilicen protectores auditivos, fomentando su uso cuando éste no sea obligatorio y velando por que se utilicen cuando sea obligatorio de conformidad con lo previsto en el apartado 1.b) anterior; asimismo, incumbirá al empresario la responsabilidad de comprobar la eficacia de las medidas adoptadas de conformidad con este artículo.
§4	Royal Decree 552/2019. Instruction IF-14: Level 2 refrigeration facilities will be inspected every ten years. Regardless of the level of the facilities, those that use fluorinated refrigerants will be inspected every year if their refrigerant charge is equal to or greater than 5000 tons of CO2 equivalent, each two years if it is less than 5000 tons of CO2 equivalent but equal to or more than 500 tons of CO2 equivalent, and every five years if it is less than 500 tons of CO2 equivalent but equal to or more than 50 tons of CO2 equivalent./ Real Decreto 552/2019. Instrucción IF-14: Se inspeccionarán cada diez años las instalaciones frigoríficas de nivel 2. Independiente del nivel de las instalaciones, aquellas que empleen refrigerantes fluorados se inspeccionarán cada año si su carga de refrigerante es igual o superior a 5000 toneladas equivalentes de CO2, cada dos años si es inferior a 5000 toneladas equivalentes de CO2 pero igual o superior a 500 toneladas equivalentes de CO2, y cada cinco años si es inferior a 500 toneladas equivalentes de CO2 pero igual o superior a 50 toneladas equivalentes de CO2.

Corrective Action Plan - Non Compliances

Non-Compliance	Evidence
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Non-Compliance	
Reference	38a8d18d-934b-4242-98ba-91050c9ad70f
Clause	10B2 - Environment 2–pillar
Issue Title	606 - Environmental certifications or environmental management systems documentation were not available to review
Subcategory	General Environmental Permits, & Management systems
New or carried over?	☑ New ☐ Carried Over
Root cause	☐ Training ☑ System ☐ Costs ☐ Lack of workers ☐ Other
Root cause - Other	
ETI code or local law issue	Royal Decree 553/2020. Art 5: the content of the treatment contract is defined.
Explanation to the non compliance	There is no treatment contract for all waste managers (Non-hazardous waste). No se dispone del contrato de tratamiento de todos los gestores de residuos (Residuos no peligrosos)
Follow up method	☐ Follow up audit ☑ Desktop audit
Timescale	☐ Immediate ☐ 30 days ☐ 60 days ☑ 90 days ☐ 120 days ☐ 180 days ☐ 365 days ☐ Other
Actions	Request treatment contracts from waste managers. Solicitar a los gestores de residuos los contratos de tratamiento

Non-Compliance	Evidence
[Back to findings summary]	

Non-Compliance	
Reference	ec326df9-e0d3-494e-b632-1b0e592230b2
Clause	3 - Working conditions are safe and hygienic
Issue Title	187 - Fire extinguishers not inspected / checked regularly / out of date
Subcategory	Fire Safety - Fire Fighting Equipment
New or carried over?	☑ New ☐ Carried Over
Root cause	☐ Training ☑ System ☐ Costs ☐ Lack of workers ☐ Other
Root cause - Other	
ETI code or local law issue	R.D 513/2017. Annex I: describes the maintence actions that must be carried out according to the periodicity. /Real Decreto 513/2017.Anexo I: se decriben las acciones de mantenimiento que deben realizarse según la periodicidad.
Explanation to the non compliance	The quarterly reviews of the fire extinguishers are not being carried out./ No se están realizando las revisiones trimestrales de los extintores.
Follow up method	☐ Follow up audit ☑ Desktop audit
Timescale	☐ Immediate ☐ 30 days ☑ 60 days ☐ 90 days ☐ 120 days ☐ 180 days ☐ 365 days ☐ Other
Actions	Carry out quarterly reviews in accordance with the regulations/ Realizar las revisiones trimestrales conforme marca la normativa

Non-Compliance	Evidence

[Back to findings summary]

Non-Compliance	
Reference	864f9ddc-0149-4981-9cb7-08d2a67c2aa4
Clause	3 - Working conditions are safe and hygienic
Issue Title	272 - Lack of appropriate equipment / machinery - creating a moderate risk to workers
Subcategory	Machinery
New or carried over?	☑ New ☐ Carried Over
Root cause	☐ Training ☑ System ☐ Costs ☐ Lack of workers ☐ Other
Root cause - Other	
ETI code or local law issue	Royal Decree 286/2006. Art 7: The employer must do everything in his power to ensure that protectors are used hearing aids, encouraging their use when it is not mandatory and ensuring that they are used when it is mandatory in accordance with the provisions of section 1.b) above; likewise, The employer will be responsible for verifying the effectiveness of the measures taken in accordance with this article./Real Decreto 286/2006. Art 7: El empresario deberá hacer cuanto esté en su mano para que se utilicen protectores auditivos, fomentando su uso cuando éste no sea obligatorio y velando por que se utilicen cuando sea obligatorio de conformidad con lo previsto en el apartado 1.b) anterior; asimismo, incumbirá al empresario la responsabilidad de comprobar la eficacia de las medidas adoptadas de conformidad con este artículo.
Explanation to the non compliance	It is observed during the visit to the facilities, workers in the cardboard area without hearing protectors when it is mandatory due to the noise level./ Se observa durante la visita a las instalaciones, trabajadores en la zona de cartón sin los protectores auditivos cuando es mandatorio por el nivel de ruido.
Follow up method	☐ Follow up audit ☑ Desktop audit
Timescale	☐ Immediate ☐ 30 days ☑ 60 days ☐ 90 days ☐ 120 days ☐ 180 days ☐ 365 days ☐ Other
Actions	Check that employees subject to the mandatory use of hearing protectors use them./ Revisar que los empleados sujetos a la obligatoriedad de uso de protectores auditivos los utilizan.

Non-Compliance	Evidence
[Back to findings summary]	

[Back to findings summary]

Non-Compliance	
Reference	769a918f-ab6f-4dce-80a3-08ae0ec27f5f
Clause	3 - Working conditions are safe and hygienic
Issue Title	268 - Lapses in inspections / maintenance of machinery (used in production or otherwise, e.g. boilers)
Subcategory	Machinery
New or carried over?	☑ New ☐ Carried Over
Root cause	☐ Training ☑ System ☐ Costs ☐ Lack of workers ☐ Other
Root cause - Other	
ETI code or local law issue	Royal Decree 552/2019. Instruction IF-14: Level 2 refrigeration facilities will be inspected every ten years. Regardless of the level of the facilities, those that use fluorinated refrigerants will be inspected every year if their refrigerant charge is equal to or greater than 5000 tons of CO2 equivalent, each two years if it is less than 5000 tons of CO2 equivalent but equal to or more than 500 tons of CO2 equivalent, and every five years if it is less than 500 tons of CO2 equivalent but equal to or more than 50 tons of CO2 equivalent./ Real Decreto 552/2019. Instrucción IF-14: Se inspeccionarán cada diez años las instalaciones frigoríficas de nivel 2. Independiente del nivel de las instalaciones, aquellas que empleen refrigerantes fluorados se inspeccionarán cada año si su carga de refrigerante es igual o superior a 5000 toneladas equivalentes de CO2, cada dos años si es inferior a 5000 toneladas equivalentes de CO2 pero igual o superior a 500 toneladas equivalentes de CO2, y cada cinco años si es inferior a 500 toneladas equivalentes de CO2 pero igual o superior a 50 toneladas equivalentes de CO2.
Explanation to the non compliance	Periodic inspections are not being carried out every 5 years of the refrigeration facilities/ No se están realizando las inspecciones periódicas cada 5 año de las instalaciones frigoríficas
Follow up method	☐ Follow up audit ☑ Desktop audit
Timescale	☐ Immediate ☐ 30 days ☐ 60 days ☐ 90 days ☑ 120 days ☐ 180 days ☐ 365 days ☐ Other
Actions	Carry out inspections according to regulations/ Realizar las inspecciones conforme normativa

Corrective Action Plan - Observations

Observation	Evidence
[Back to findings summary]	

Observation	
Reference	c9bbc1dd-7610-4d0d-8ad9-cd45c39369b6
Clause	0A - Universal rights covering UNGP
Issue Title	9 - The site has not appointed a competent, senior member of management responsible for compliance with the audit Code requirements
Subcategory	Site's Management systems & Monitoring
New or carried over?	☑ New ☐ Carried Over
Root cause	☐ Training ☑ System ☐ Costs ☐ Lack of workers ☐ Other
Root cause - Other	
Explanation to the observation	
Actions	The company has not designated a responsible for implementing standards concerning Human Rights / La empresa no ha designado a un responsable para implementar el estándar de derechos humanos.

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.

Auditor Team			
Lead Auditor:	Elena Robles	APSCA Number:	21705037
Additional Auditors:			
Date of declaration:	2022-12-15		

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.

Site Representation	
Full Name:	Francisco Javier Montero
Title:	Quality manager
Date of declaration:	2022-12-15
Comments:	

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.

For more information visit: Sedexglobal.com

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

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

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

http://www.surveymonkey.com/s.aspx?sm=riPsbE0PQ52ehCo3lnq5Iw_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