

NASC EN74-1 COUPLER ASSESSMENT REPORT

Supplier: _____	Location: _____
Supplier Category: _____	Name: _____
Manufacturer _____	Location _____
Manufacturer _____	Location _____
Manufacturer _____	Location _____
Manufacturer _____	Location _____
Previous Assessment Category: N/A	
Meeting With: _____	
Assessment Date: _____	Response Due By: _____

Assessment Summary

Overall Assessment Score:	0%
Penalty Deductions:	0%
Overall %:	0%
Overall Assessment Category:	D

Individual Category Assessment Scores

	(A) 90%+	(B) 80-89%	(C) 70-79%	(D) 0-69%		
Quality Management Score					>	D
Product & Process Score					>	D
Environmental					>	D
Health & Safety					>	D
Ethical					>	D

Assessment Summary

Assessor: _____ Title: _____

cc: _____ cfi: _____

Supplier Category 1. Single Product & Single Manufacturer
 Supplier Category 2. Single Product & Multiple Manufacturer
 Supplier Category 3. Multiple Product & Multiple Manufacturer

SUPPLIER

DATE:

1. QUALITY ASSURANCE		Yes	No	See Notes
1.01	Is there a Quality Policy developed from Company objectives and is it appropriate to the purpose of the organisation and reviewed on a regular basis by senior management?			
1.02	Is there a UKAS accredited and internationally recognised Quality Management System at all the suppliers UK sites to the requirements of ISO 9001:2015?			
1.03	If the answer to question 1.02 is No, is there an auditable Quality Management System in place designed around the requirements of an internationally recognised System?			
1.04	Is a senior employee responsible for Quality Management and do they have the authority to halt despatch of products?			
1.05	Is there a documented and demonstrable procedure for the control of documentation?			
1.06	Do you hold adequate Product & Public Liability and Employers Liability insurance?			
2. SUPPLIERS & SUB CONTRACTORS		Yes	No	See Notes
2.01	Is there an effective vendor questionnaire available from all Coupler manufacturers?			
3. COMPLAINTS & CUSTOMER FEEDBACK		Yes	No	See Notes
3.01	Is there a documented and demonstrable procedure for dealing with customer complaints and is complaint & feedback information used to improve processes and product quality?			
3.02	Have all outstanding quality issues been fully resolved, with documented confirmation of CAR closure and preventive actions, either implemented or planned, to prevent known or foreseeable problems?			
4. PRODUCT TESTING		Yes	No	See Notes
4.01	Is there independent test data available for all Couplers to the requirements of all applicable Standards?			
5. RAW MATERIAL & COMPONENT CONTROL		Yes	No	See Notes
5.01	Are incoming goods verified as conforming to specification?			
5.02	Are material certificates of conformity available for all Couplers and are they correct to the relevant British and/or European specification?			
5.03	Has a sample right angle & swivel Coupler been identified by the NASC auditor and sent for independent test and analysis and have such tests confirmed compliance with the applicable Standards specification?			
6. PROCESS		Yes	No	See Notes
6.01	Is there a procedure for the identification and control of non-conforming products?			
6.02	Is there effective traceability to the requirements of all applicable Standards?			

6.03	Are procedures in place to ensure that all equipment that is used to make direct measurements is regularly calibrated?			
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SUPPLIER	
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DATE:	
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7. ENVIRONMENTAL	Yes	No	See Notes
7.01 Is there a documented and communicated Environmental Policy and/or guidelines in place that is reviewed as a minimum every two years? In addition has the site been free from environmental prosecution for the last five years?			
7.02 Are documented procedures and controls in place for any breaches of legislation, major accidents, emergencies or spillages?			
7.03 Are any hazardous substances, oils, lubricants and fuels stored safely?			
7.04 Is any waste/scrap segregated and sent for recycling?			
7.05 Is the site generally clean and well maintained?			

8. HEALTH & SAFETY	Yes	No	See Notes
8.01 Is there a documented and communicated Health & Safety Policy and/or guidelines in place that is reviewed as a minimum every two years? In addition has the site been free from prosecution for breaches of H&S legislation for the last five years?			
8.02 Are H&S risk assessments conducted, documented and reviewed on a regular basis?			
8.03 Where appropriate are material safety data sheets available for all required products?			
8.04 Where appropriate are visitors offered personal protection equipment (PPE)?			
8.05 Where required are employees wearing the correct PPE and are site management enforcing its use?			
8.06 Are first aid/medical facilities available on site?			
8.07 Are accidents reported with records kept?			
8.08 Are fire extinguishers readily available showing inspection label and evidence of a periodic check?			
8.09 Are fire drills conducted and recorded?			
8.10 Are all fire exits and equipment clearly marked and unblocked?			

9. ETHICAL	Yes	No	See Notes
9.01 Is there a documented and communicated Modern Slavery Policy and/or guidelines in place?			
9.02 Is there a documented and communicated Social Accountability Policy and/or guidelines in place?			
9.03 Is there a documented and communicated Welfare Policy and/or guidelines in place?			
9.04 Are all employees provided with a written contract of employment?			
9.05 Are there documented and communicated disciplinary and grievance procedures in place?			

SUPPLIER SITE PROFILE

Supplier: _____ Date: _____

Site: _____ Site Contact: _____

Supplier Address: _____

Postal Code: _____ Country: _____

Telephone No: _____ Fax No: _____

E-Mail: _____ Website: _____

Nearest: Airport: _____

Rail Station: _____

QA Contact Name: _____ Position: _____

Mobile No: _____ E-Mail: _____

Size of Site(sq Mtr) (Enclosed/Open): _____ / _____

Business Type: Private Owned Public Ltd State Owned

Year Site Business Commenced: _____ Annual Turnover: £ _____

Current Annual Volume (Units Sold): _____ Number of Days Worked per Week: _____

Number of Shifts Worked: _____ Hours per Shift: _____

Number of Site Employees (Production/Office): _____ / _____

Other Information:

NB. THE INFORMATION PROVIDED AND CONTAINED IN THIS DOCUMENT IS CONFIDENTIAL TO THE NATIONAL ACCESS & SCAFFOLDING CONFEDERATION.

SUPPLIER RESPONSE

RESPONSE DUE BY: **21/01/1900**

Please note that if a satisfactory response is not received by the above date, the site may be downgraded by one category e.g. A to B, B to C, C to D.

SUPPLIER:		ASSESSMENT DATE:
Auditor Comment		
Supplier Response		Action Date
Auditor Comment		
Supplier Response		Action Date
Auditor Comment		
Supplier Response		Action Date
Auditor Comment		
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Auditor Comment		
Supplier Response		Action Date
Auditor Comment		
Supplier Response		Action Date

SUPPLIER ASSESSMENT

SUPPLIER RESPONSE

EN74-1 Coupler Assessment: Photographic Evidence

Assessor Notes & Images
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EN74-1 Coupler Assessment: Photographic Evidence

Assessor Notes & Images
NASC EN74-1 COUPLER ASSESSMENT REPORT

Assessor Notes & Images
Issue 16
02/01/2024

EN74-1 Coupler Assessment - Guidance Notes

1.01 Is there a Quality Policy developed from Company objectives and is it appropriate to the purpose of the organisation and reviewed on a regular basis by senior management?

- A quality policy developed from company objectives to provide the framework & limits for decision making on quality related activities. The policy should reflect preventative activities & management commitment & involvement.
- A documented quality policy that exists to channel actions & decisions along a path that will fulfil the organisations mission & purpose. The quality policy should:
 - Be appropriate to the purpose of the organisation.
 - Include a commitment to comply with requirements & continually improve the effectiveness of the QMS.
 - Provide a framework for establishing & reviewing quality objectives.
 - Be communicated & understood within the organisation.
 - Be formally reviewed on a regular basis for continuing suitability by senior management.
 - Evidence of documented review within the last 2 years.

1.02 Is there a UKAS accredited and internationally recognised Quality Management System at all the suppliers UK sites to the requirements of ISO 9001:2015?

- A UKAS accredited and internationally recognised QMS which provides a details as a minimum of:-
 - The scope of the Quality Management System.
 - Documented procedures to the requirements of ISO 9001:2015.
 - Reference to all other QMS documents i.e. work instruction / visual aids / forms etc.
 - Evidence of documented review within the last 2 years.
- Copy of certification to be retained for NASC records.

1.03 If the answer to question 1.02 is No, is there an auditable Quality Management System in place designed around the requirements of an internationally recognised System?

- An auditable QMS which is designed to the requirements of an internationally recognised System. The QMS must have: -
 - Documented procedures. (product based procedures only required).
 - Reference to all other QMS documents i.e. work instruction / visual aids / forms etc.
 - Evidence of documented review within the last 2 years.

1.04 Is a senior employee responsible for quality management and do they have the authority to halt despatch of products?

- That a member of management has been appointed who has the responsibility & authority that includes: -
 - All processes needed for the quality management system are established implemented & maintained.
 - Reports directly to top management on the performance of the QMS & any need for improvement.
 - Ensures the promotion & awareness of customer requirements throughout the organisation.
 - Has the authority to halt production or dispatch of products.

1.05 Is there a demonstrable procedure for the control of documentation?

- Any document that is used or generated by the process is controlled. There should be a documented procedure in place defining the controls needed to control documents that include: -
 - How documents are approved prior to use.
 - Document review & update as necessary.
 - Ensuring changes & revision levels of documents are identified.
 - Ensuring relevant versions of applicable documents are available at the point of use.
 - Evidence that documents are legible & readily identifiable.
 - Prevention & unintended use of obsolete documents, applying suitable identification to them if they are retained for any purpose.

1.06 Do you have adequate product & public liability and employers liability insurance?

- Does the Company have adequate product & public liability and employers liability insurance?
- Minimum insurance values of £5m & £10m respectively with evidence required of values currently in place.
- Copy of certificate to be retained for NASC records.

2.01 Is there an effective vendor questionnaire available from all Coupler manufacturers?

- Documented procedures for planning & implementing the assessment of suppliers.
- Records of supplier assessment & list of approved suppliers.
- Methods to score or grade supplier assessment results in order to provide a basis for supplier improvement.
- Basis for supplier selection and deselection.
- Records of timely corrective actions resulting from deficiencies identified during the assessment of suppliers.
- Processes to evaluate & select suppliers on the basis of their ability to meet sub-contract requirements. e.g. Vendor Questionnaire / Rating etc., independent product certification. ISO Registration etc., with evidence of documented review within the last 2 years.
- Evidence that any alternative supplier proposed is accredited.

3.01 Is there a documented and demonstrable procedure for dealing with customer complaints and is complaint & feedback information used to improve processes and product quality?

- A process for the registering complaints in order to account for them & monitor progress.
- The process for investigating the nature & cause of complaints & taking appropriate action to resolve the complaint & trigger improvements that will prevent re-occurrence of the complaint.
- Included in the above a documented procedure for the recall of products in the event of a major issue.
- This procedure shall detail that measures are in place to manage and control the process e.g. advertising templates, dedicated telephone lines, method of product collection etc.

3.02 Have any outstanding quality issues been fully resolved, with documented confirmation of CAR closure and preventive actions, either implemented or planned, to prevent known or foreseeable problems?

- A documented procedure for reviewing non-conformities (including product customer complaints), determining the causes of non-conformities & evaluating the need to ensure non-conformities do not re occur.
- Processes that monitor customer complaint trends, overall number of complaints & the distribution of complaints by type, customer, location & nature of complaint.
- Records to show that customer complaint information has been used effectively to improve product & processes.

4.01 Is there independent test data available for all Couplers to the requirements of all applicable Standards?

- Testing should be undertaken a minimum of every 12 months and be confined to swivel Couplers & right angle Couplers for all suppliers (manufacturers).
- Couplers to requirements of EN 74-1:2022 for slipping force test and failure force (maximum load) test only.
- All annual testing must be by a UKAS accredited external test facility, TUV or SGS with satisfactory results achieved and documented.
- Full test data to EN 74-1 by a UKAS registered external body must also be available for all existing Couplers.
- If a new component supplier is utilised then a NASC audit will also be carried out within 6 months of any such change. In addition, appropriate testing & analysis to applicable Standards will also be required which will be verified at the next scheduled NASC audit, which for Couplers must include full testing to the requirements of EN 74-1 by a recognised UKAS registered external body.
- All testing must be by each NASC member Company unless the supplier/manufacturer is an NASC member in their own right.
- Failure to comply with the above will result in a penalty deduction of 31% giving an overall audit rating of "D".

5.01 Are incoming goods verified as conforming to specification?

- Documented procedures for receiving inspection & testing activities in order to verify that specified requirements are met. Procedures should include methods for refusing a shipment & identification & segregation of non-conforming product.
- Documents defining which products require receiving inspection or testing, methods to be used, including jigs where appropriate.
- Records that provide evidence that the product has been inspected. These records must show if the product has passed or failed inspection according to defined inspection criteria.
- Evidence that goods receiving inspection results are reported to purchasing, & results are used to monitor & improve sub contractor performance.
- Appropriate inspection facilities & equipment to conduct goods inwards inspections, including provision of training for all personnel performing activities affecting quality.
- Any Sampling plans & Switching procedures should be based on the requirements of the recognised sampling plans e.g. BS 6001, ISO 2859.

- As a minimum, Couplers should be checked for fit & function and torque overtightening with records of these activities available.
- Failure to comply with the above will result in a penalty deduction of 11%, downgrading the overall score by one category.

5.02 Are material certificates of conformity available for all Couplers and are they correct to the relevant British and/or European specification?

- Confirm availability of certificates of conformity for all Couplers to the requirements of EN 74-1
- Confirm compliance to the relevant British and/or European material specification. The appropriate British and/or European Standard and material specification must also be clearly identified on the material & component certification.
- Failure to comply with the above will result in a penalty deduction of 11%, downgrading the overall score by one category.

5.03 Has a sample right angle & swivel Coupler been identified by the NASC auditor and sent for independent test and analysis and have such tests confirmed compliance with the applicable Standards specification?

Samples of right angle & swivel Couplers (forged and/or pressed steel) will be selected from one supplier (manufacturer) by the NASC auditor and sent for independent test & analysis to confirm compliance with the applicable Standards. ISO Standards utilised will be EN 74-1:2022 with clauses tested against at the discretion of the Testing Authority in conjunction with the NASC but as a minimum for slipping force test, failure force (maximum load) test and cruciform bending stiffness test.

- Samples will be taken at random, (quantity at auditors discretion) at a location of the auditors choice and will be identified with details of the supplier, product, date & auditors signature. Photographic evidence will also be attached to the audit report.
- Sample selection and independent testing will be for each individual NASC member Company. Failure of independent test will result in a penalty deduction of 31%, giving an audit rating of “D”. A further two samples will immediately be selected by the NASC auditor for independent re-test on the original failure mode only and if these pass test a positive score will be given and the audit result / grade amended accordingly. If either of the two further samples selected fail independent re-test, then upon receipt of written notification of test failure, the NASC member Company must provide a proposed written corrective action plan within 14 working days and a completed written corrective action plan within 28 days. This should include supporting test data.
- At this point, when new stock is available that has been subject to the corrective action taken, a further three samples will be selected by the NASC auditor. Then, and only if satisfactory independent test results are achieved, will a positive score be given and the audit result / grade be amended. If any of these further three samples fails re-test then a revised corrective action plan must be submitted, including supporting test data as above, with further independent testing then carried out. This process may be continued until a satisfactory conclusion is recorded.

6.01 Is there a procedure for the identification & control of non-conforming products?

- Documented procedures to ensure that product which does not conform to specified requirements is prevented from unintended use or delivery.
- Procedures for identification, documentation, evaluation, segregation & disposal of non-conforming product & for notification to the functions concerned.
- Recording of non-conformities & any actions taken including concessions & identifying opportunities for prevention of further non-conformities.
- Evidence that non-conforming material is conspicuously identified & positively controlled.
- Must include a section on the procedure or process to recall any non-conforming product if not already detailed in the complaints procedure.

6.02 Is there effective traceability to the requirements of all applicable Standards?

- Assurance that all Couplers supplied will be marked in accordance with the requirements of EN 74-1:2005.
- Failure to comply with the above will result in a penalty deduction of 31% giving an overall audit rating of “D”.

6.03 Are procedures in place to ensure that all equipment that is used to make direct measurements is regularly calibrated?

- Documented procedures to control, calibrate & maintain inspection, measuring & test equipment.
- An established calibration system for inspection, measuring & test equipment.
- Evidence that all equipment used to make direct measurements are part of a calibration system & are identified as in calibration via a suitable label or unique number that is traceable to the calibration record.
- Calibration recall systems that identify when measuring equipment requires re-calibration.
- Evidence that inspection, measuring & test equipment, including jigs, is calibrated against certified equipment, which is traceable to national standards.
- Where an alternative process is in place for control of direct measurement, this will only be acceptable if the process has been approved by an internationally recognised & accredited body.

7.01 Is there a documented and communicated Environmental Policy and/or guidelines in place that is reviewed as a minimum every two years? In addition has the site been free from environmental prosecution for the last five years?

A policy or guidelines defining the organisations commitment to the protection of the environment. The policy should define

- top management commitment & involvement & reflect preventative activities & a commitment to assess & improve environmental performance & impacts.
- The environmental policy should: -
 - Be appropriate to the nature, scale & environmental impacts of the organisation's activities, products & services.
 - Include a commitment to continual improvement & prevention of pollution.
 - Provide a framework for setting & reviewing environmental objectives & targets.
 - Be formally reviewed on an annual basis for continuing suitability.
 - Be communicated & understood within the organisation.
 - Be made available to the public.
 - Include a commitment contained within the environmental policy to follow the country legal requirements.
 - Comply with expectations in respect of the environment.
 - A register detailing environmental legislation, which affects the organisation.
 - Evidence such as records that a concerted effort has been made to demonstrate active management & improvement of environmental issues, rather than doing the minimum possible to avoid prosecution.
 - Evidence that the site has been free from environmental prosecution for the last 5 years.

7.02 Are documented procedures and controls in place for any breaches of legislation, major accidents, emergencies or spillages?

- Procedures to identify & prevent potential emergency situations & potential accidents that can have an impact on the environment & how to respond to actual emergencies & accidents.
- Evidence of periodic testing of emergency response procedures.
- Evidence that spill kits & other applicable accident containment controls are available in key areas, & key employees have been trained in dealing with spillage's, accidents & emergencies.
- Evidence that the location & types of drains are known & identified on the ground.
- Evidence that any spilled waste is segregated & consigned to legal sites using licensed agencies.

7.03 Are any hazardous substances, oils, lubricants and fuels stored safely?

Evidence that all hazardous substances including oils, lubricants and fuels are stored in such a way so as to prevent accidents &

- avoid leakage in case of accident with Flt's or other mobile plant. e.g. secure storage areas, bunds, locked cages, safe storage of IBC's.
- Evidence that oil, lubricants and fuels stored in quantities over 100 litres is on a drip tray or in a bund, which is in good condition.
- Evidence that bulk stored liquids are stored within well maintained bunds that would prevent spillage into water courses.

7.04 Is any waste/scrap segregated and sent for recycling?

- That key waste is segregated and sent for recycling.
- That there is an active and measurable waste recycling programme in place.

7.05 Is the site generally clean and well maintained?

- A clean & hygienic place of work consistent with industry standards.
- Walkways that are free of obstacles.
- Working areas that are tidy organised & free from clutter.
- Evidence that (where applicable) cleaning schedules are in place.
- Evidence that buildings, plant & equipment are in a good state of repair & are regularly maintained.

8.01 Is there a documented and communicated Health & Safety Policy and/or guidelines in place that is reviewed as a minimum every two years? In addition has the site been free from prosecution for breaches of H&S legislation for the last five years?

- A Health & Safety Policy or guidelines authorised by top management that clearly states overall H&S objectives & a commitment to improving H&S performance & providing a safe working environment.
- The H&S policy should: -

- Be appropriate to the nature & scale of the organisations H&S risks.
- Include a commitment to continual improvement.

- Include a commitment to at least comply with current applicable H&S legislation.
- Be documented implemented & maintained.
- Be communicated to all employees with the intent that all employees are made aware of their individual H&S obligations.
- Be reviewed on an annual basis to ensure that it remains relevant & appropriate to the organisation.
- Evidence that the site has been free from environmental prosecution for the last 5 years.
- Additionally the auditor will be looking for evidence that a member of management been appointed who has the responsibility & authority that includes: -
 - Reporting directly to top management on the performance of H&S & any need for improvement.
 - Ensures the promotion & awareness of H&S throughout the organisation.
 - Confirm the Company has been free prosecution for breaches of H&S legislation for the last 5 years.

8.02 Are H&S risk assessments conducted, documented and reviewed on a regular basis?

- Documented procedures for planning & implementing risk assessments every 2 years as a minimum requirement.
- Schedule of periodic risk assessments and evidence of regular review and communication.
- Appropriate training & qualification of risk assessors.
- Records of risk assessments and evidence of communication to those who may be affected by the hazard.
- Records of timely corrective actions resulting from risks identified during risk assessments.

8.03 Where appropriate are material safety data sheets available for all required products?

- COSHH sheets (or equivalent for non-European Community countries) for any product identified under CHIP 3 categorisation.
- That COSHH sheets or equivalent are available at the point of use.
- Evidence that COSHH data is current & is regularly reviewed.

8.04 Where appropriate are visitors offered personal protection equipment (PPE)?

- H&S rules & risks explained to visitors & is appropriate PPE offered to visitors & enforced during the visit.
- Appropriate procedures for contractors working on site, including work permits, explanation of rules & regulations & enforcement of PPE while on site.

8.05 Where required are employees wearing the correct PPE and are site management enforcing its use?

- Appropriate signage instructing the wearing of PPE in applicable areas on the site.
- Rules with regard to the wearing of appropriate PPE including foot-ware, clothing, jewellery & the tying back or covering of hair.
- All site management to wear appropriate PPE when visiting areas where it's use is required.
- Is the appropriate PPE worn in relevant areas, & does site management enforce the wearing of PPE.

8.06 Are first aid/medical facilities available on site?

- Appropriately equipped first aid boxes located at key points throughout the workplace.
- Signage indicating who are the first aiders & where the first aid boxes are located.
- Appropriate records to show that first aiders have received adequate training, and that training is in date.
- Evidence that workplace accidents & "near misses" are recorded & reviewed to prevent re-occurrence.

8.07 Are accidents reported with records kept?

- Evidence that accidents and near misses are recorded.
- Records to show that accident and near miss information is used to improve H&S performance.
- Accident and near miss information is communicated to the work force.
- Even if no accidents have occurred to date, a recording method is still required.
- Evidence of major reportable accidents as required by national or local legislation

8.08 Are fire extinguishers readily available showing inspection label and evidence of a periodic check?

- Appropriate fire extinguishers are available at key points throughout the workplace, & are of the appropriate type of extinguisher.
- Extinguisher original inspection label and evidence of an annual recorded check by external personnel.
- Records of employee fire extinguisher use training and fire marshal training.

8.09 Are fire drills conducted and recorded?

- Records to show when the last two fire evacuation drills took place & results obtained from the last fire drill which as a minimum should be carried out every 12 months.
- Designated fire assembly points & evidence that employees are aware of their assembly point.

- Records of regular fire alarm tests which as a minimum should be carried out on a monthly basis.

8.10 Are all fire exits and equipment clearly marked and unblocked?

- Clear unobstructed fire exit signage in corridors, on walls, over doors & overhead where applicable with emergency lighting where applicable.
- Clear unobstructed access to fire fighting equipment, fire alarms & fire exits.
- Fire exits must be outward opening, clear both inside & outside & allow easy access. Doors must not be locked in any way, and the outside area should be marked "Fire Exit - Keep Clear".
- Evidence that highly combustible material & liquids are stored away from stairwells & fire escapes.

9.01 Is there a documented and communicated Modern Slavery Policy and/or guidelines in place?

- Evidence of a documented Modern Slavery Policy in place reviewed a minimum of every 2 years.
- Evidence that relevant personnel understand and comply with the Policy and have regular training on it.
- Evidence that the Policy is communicated to all suppliers.
- Evidence that any employee or supplier will face action if the Policy is breached.

9.02 Is there a documented and communicated Social Accountability Policy and/or guidelines in place?

- Evidence of a documented Social Accountability Policy in place reviewed a minimum of every 2 years.
- Evidence that relevant personnel understand and comply with the Policy and have regular training on it.
- Statement relating to charitable/community work.
- Statement relating to social accountability issues.
- Statement relating to ethical trading issues.

9.03 Is there a documented and communicated Welfare Policy and/or guidelines in place?

- Evidence of a documented Welfare Policy in place reviewed a minimum of every 2 years.
- Contracts of employment stating specific conditions of employment including rates of remuneration, type of work performed, employment rights etc.
- Policies promoting equality of treatment between manual workers & other employees & compliance with national laws.
- Procedures for the management & assessment of workers.
- Records of employee assessments consistent with national law to ensure compliance with laws & regulations.

9.04 Are all employees provided with a written contract of employment?

- Evidence that full terms of employment are clearly communicated in a language understood by the employee.

9.05 Are there documented and communicated disciplinary and grievance procedures in place?

- Documented disciplinary & grievance procedures that have been communicated to all employees & clearly identify a formal process.
- Records of all disciplinary actions taken by the organisation.
- Evidence (where applicable) that the organisation has taken all appropriate measures to ensure their suppliers have disciplinary & grievance procedures & do not subject their employees to any form of physical, mental or verbal abuse.

Audit Notes:-

Note 1:- All member Company's Couplers are to be included as part of the audit process.

Note 2:- If an internationally recognised and externally accredited Quality Management System is in place, but product is received direct to satellite sites from the supplier/manufacturer, then records must fully satisfy the auditor that all activities that take place at all of these satellite locations are fully verifiable, through an independent authority, for all relevant audit questions. If not, additional sites will be visited, location at the auditors discretion, at the frequency detailed below.

Note 3:- If an internationally recognised and externally accredited Quality Management System **is not** in place, but product is received direct to satellite sites from the supplier/manufacturer, then additional sites will be visited, location at the auditors discretion. Frequency will be 2 sites as a minimum and up to a maximum of 10% of all relevant total Company sites.

Note 4:- At the auditor's discretion a positive mark may be given, potentially overriding the specific content of the guidance notes, if it is deemed that the information provided satisfies the headline question adequately. This must be detailed in the audit report assessor notes.

Note 5:- Audit frequencies are as follows:-

- Grade A - Every 2 years (Compliant with NASC Code of Practice audit)
- Grade B - Annually (Compliant with NASC Code of Practice audit)
- Grade C - Annually (Compliant with NASC Code of Practice audit)
- Grade D - Every 6 months (Non Compliant with NASC Code of Practice audit)