

A photograph of a male worker in a blue long-sleeved uniform and a green cap, looking intently at a piece of machinery in a factory. The machinery is a complex textile machine with various spools and threads. The background shows a large industrial space with overhead lights and structural elements.

Sustainable Apparel Coalition

SAC Higg FEM Verification
Quality Assurance Manual
Version 1.0

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Contents

Introduction	3
1. QA Activities Overview.....	4
2. Quality Assurance (QA) Procedures.....	7
A. Verifier Body and Verifier Selection Process	7
B. Assessing Verifier Bodies' (VB) Internal Management Systems	10
C. Desktop Review (DR)	11
D. Counter Verification (CV)	13
E. Duplicate Verification (DV)	18
F. Shadow Verification (SV)	21
G. Feedback from Facilities	23
H. Disputes	24
I. Verifier Scoring	26
Appendices	27
Appendix I – Extreme Cases (for Invalidating Reports)	27
Appendix II – List of Abbreviations	28

Introduction

Sustainable Apparel Coalition is the apparel, footwear, and textile industry's leading alliance for sustainable production. The Coalition develops the Higg Index, a standardized suite of tools for all industry participants to assess social and environmental value chain performance.

Among the suite of tools, the Higg Facility Environmental Module (Higg FEM) is a holistic self-assessment tool that evaluates the environmental performance of facilities that produce textiles and apparel. Upon completion of the self-assessment, facilities can choose to verify the accuracy of their self-assessed results. The SAC approves Higg FEM Verifier Bodies (VB) and Higg FEM Verifiers based on detailed criteria SAC members have aligned on through the extensive member engagement process. More details about the Higg FEM Verification Program can be found at <https://howtohigg.org/higg-fem-verification-program/>.

This Quality Assurance Manual describes the quality assurance (QA) activities that are applied by the SAC Higg FEM Verification Program Manager (VPM). QA activities are designed to ensure a qualified pool of SAC approved verifiers is available to Higg FEM users, and to ensure quality and integrity during the Higg FEM verification process. It includes a description of the goals and expected outcomes of QA processes and the specific procedures that define how the VPM executes QA.

Higg FEM QA Goals

The purpose of Higg FEM QA is to provide high level oversight of Higg FEM Verification and to evaluate whether the verification process is producing consistent and accurate outcomes as per the related protocols and procedures, instead of focusing on the accuracy of particular assessments (Note that QA is *not* focused on the accuracy of specific verified assessments).

QA Activities

In Q4 2019, the SAC conducted a QA pilot to better understand how each Higg FEM QA activity works and to determine sample size for a 2020 roll out of Higg FEM verification. Based on the learnings of this pilot, these QA activities were chosen for 2020:

- A. Vetting and testing applicant verifiers and verifier bodies (VBs)
- B. Assessing VBs' internal management systems
- C. Desktop Reviews
- D. Counter Verifications
- E. Duplicate Verifications
- F. Shadow Verifications
- G. Feedback from Facilities
- H. Disputes
- I. Verifier Scoring

The SAC determines the coverage (exact number of verifications to conduct) for each QA activity, considering the cost and value of each activity. In determining how many times to conduct activity, the SAC makes sure that QA ensures the quality of the Higg FEM verification process and generating insights for overall system improvements.

For more details on sampling, please contact the SAC team.

Reading guide

In the QA overview (section 1) all QA activities are described, in section 2 the specific procedures are outlined for each activity.

1. QA Activities Overview

QA activity	Why	What
Vetting and testing of Verifiers Verifier Bodies (VBs)	Through vetting and testing applicant Verifier Bodies (VB) and Verifiers, the VPM ensures that requirements are met regarding professional experience, internal quality management systems and auditing skills and knowledge of SAC procedures and protocols	<ul style="list-style-type: none"> Assessing of candidate VBs and Verifiers against SAC criteria (regarding their experience conducting environmental assessments, knowledge of legal requirements and international standards and education) for the countries where they propose to operate Mandatory taking of e-learning training course on Higg FEM verification program and processes Exam to test candidate Verifiers on technical skills, and their knowledge of SAC procedures and protocols
Assessment of VBs management systems	As it is the responsibility of VBs to ensure that Verifiers have the skills and experience required to perform Higg FEM Verifications, these assessments help ensure that VBs have the management system in place to ensure quality and integrity of their verifiers	An assessment of the policies and procedures VBs have in place to ensure their Higg FEM Verifiers' competency and consistency of Verification activities.
Desktop Review	Desktop Reviews are an effective method of ensuring that verifiers are completing verification reports correctly and that data in reports is accurate. They are also used to identify aspects of the SAC system that are not well understood by verifiers.	<p>A Desktop Review is a remote assessment of verified reports. A Desktop Review assesses report content, with a focus on instances where the Verifier has provided a corrected response.</p> <p>A Desktop Review identifies any issues in the report, including:</p> <ul style="list-style-type: none"> Whether approved and qualified verifiers completed the verification Corrected responses that are inaccurate Instances where a facility provides inconsistent information that is not corrected by the verifier Any instances where it appears that the question was misunderstood by the verifier, causing the "corrected response" to be misleading

		<ul style="list-style-type: none"> • Misapplication or misinterpretation of local laws <p>Desktop Reviews check for any issues that could cause the report to be invalidated</p> <p>Desktop reviews assess the verification procedure as follows:</p> <ul style="list-style-type: none"> • The report captures any instances where Verification procedure was not followed including: • Proper completion of the online verified Higg FEM • Number of days spent on site is less than SAC recommendations
Counter Verification	Counter verifications provide insight into whether the Higg FEM verification process is producing accurate and reliable data	<p>Counter Verifications are 1-day visits to facilities that were recently visited for a Higg FEM verification. Counter Verifications assess whether verification procedures were followed, if Verifiers had the skills and knowledge to conduct the verification, and if report content is accurate.</p> <p>Counter Verifications are not a duplication of the initial verification, rather a high-level verification including a sample of all sections of the Higg FEM.</p>
Duplicate Verification	By repeating an entire assessment at a different point in time, Duplicate Verifications assess whether verification procedures were followed, if verifiers had the skills and knowledge to conduct the verification, and if report content is accurate	Duplicate Verifications are a repeat of a Higg FEM verification, performed by a different VB or the VPM after the initial verification. Similar to Counter Verifications, Duplicate Verifications employ the same methods of verifying information used in Verifications (e.g. management interviews, document reviews). Differences are analyzed and a determination of the reasons for discrepancy is made. The determination of why there are discrepancies is essential to determining whether verification procedures were followed, whether verifier conduct was in line with SAC procedures, etc.
Shadow Verification	Shadow Verifications are used to assess verifier quality and identify areas where SAC protocols are not clear or not well understood by verifiers.	During Shadow Verifications the VPM or designated representative observes a verification to ensure that the verifier follows SAC protocols. Through direct observation, the VPM can confirm whether verifiers are following SAC requirements when conducting a verification. During a Shadow Verification, the shadow verifier does not actively participate in the assessment.
Feedback from Facilities	Feedback will be collected from facilities to assess the functioning of verification process in	Feedback is reviewed through feedback forms that are to be filled by a facility after every verification.

	general, as well as verifiers and VBs.	
Disputes	Disputes allow facilities to formally raise concerns over the quality of a verification and for the VPM to determine if this resulted in an impact to the accuracy of the verified assessment report.	On the higg.org platform, a facility raises a dispute if a verifier did not follow Verification Protocol or other SAC requirements were not met. The VPM determines whether the dispute is valid and if the verified assessment report needs to be amended. Disputes are not used to resolve question level issues.
Verifier Scoring	Through verifier scoring, the VPM can identify trends associated with positive verifier performance and determine if there are poor performing verifiers that need to be removed from the system. Verifier scoring can also be used to incentivize timeliness and professionalism.	QA activities result in data regarding Verifier performance. Verifier scoring uses this data to rate Verifiers on all their overall quality. Data from application, testing, Desktop Reviews, on-site QA reviews (Counter Verifications, Duplicate Verifications, Shadow Verifications), and feedback surveys all feed into Verifier scoring.

Quality Assurance Outcomes

The QA activities that the VPM executes are selected to work together systemically to ensure quality, identify issues, and improve the Higg FEM verification process and system as a whole. QA methodologies such as Desktop Reviews, Counter Verifications, Shadow Verifications, and Duplicate Verification are designed to detect issues with the verification process. The VPM uses a dashboard to monitor QA activities, including the specific issues that are identified during each instance of QA. On an ongoing basis, the VPM reviews and analyses these issues. The outcome of this analysis is a determination if the issues detected during QA are systemic problems with the verification process (e.g. Verification Protocol does not address a topic), issues with a particular VB or region (e.g. local laws being interpreted incorrectly), or issues isolated to a particular verifier. In order to address systemic issues, the VPM recommends revisions to the How To Higg Guide, howtohigg.org platform training, Verifier qualifications, etc. Regional issues or VB specific issues may be addressed through technical bulletins to verifiers or direct follow-up with VBs. In this way, QA helps to ensure that problems with the verification process are not only detected but fixed in a systemic way. If a specific QA activity indicates poor performance, or other issues with the verification process it can also trigger additional QA. For example, if a Desktop Review shows that a Verifier has not gathered sufficient evidence, this may trigger additional activities, such as a Shadow Verification, where the verifier is observed on site.

Quality Assurance Communications

In addition to any reporting identified in the specific procedures below, the VPM consolidates the QA outcomes and provides visual summaries via an updated dashboard for review by the SAC. For example, the dashboard may display a chart that shows the overall rating of quality of reports determined by Desktop Reviews by country or VB. The purpose of the dashboard is to provide real-time access to QA outcomes and results so that the SAC can consider potential improvements to the system and plan appropriately.

2. Quality Assurance (QA) Procedures

A. Verifier Body and Verifier Selection Process

The VB/Verifier selection process ensures that VBs/Verifiers have the experience, skills, knowledge, and quality assurance programs required to conduct consistent and reliable Higg FEM verifications. This procedure defines how the VPM selects and approves VBs and Higg FEM Verifiers.

Procedure

1. Verifier Body Application process

- 1.1 All verifiers must be employed by an approved Verifier Body.
- 1.2 Using an online application, VBs provide information regarding their company including auditing/assessment experience, accreditations, management system and quality control procedures.
- 1.3 The full list of requirements for VBs can be found the VPM (Sumerra) website:
<https://www.sumerra.com/programs/sac/sac-fem-verification-program/>

2. VB Selection process

- 2.1 Candidate VBs who meet the criteria are approved as Higg FEM VBs and can then have individual verifiers associated with their organization apply to become Verifiers using the process outlined below (Section 3).
- 2.2 All approved VBs are subject to review to ensure that VBs uphold their commitments to develop policies and procedures on Higg FEM Verifier competence, training and internal quality management

3. Verifier Application process

- 3.1 Using an online application, candidate verifiers provide information regarding their skills, knowledge and experience.
- 3.2 The full list of requirements for candidate verifiers must meet for both General and Chemical Specialist Verifier can be found the VPM (Sumerra) website here:
<https://www.sumerra.com/programs/sac/sac-fem-verification-program/>

4. Selection process

- 4.1 Candidate verifiers who meet the criteria take the required training. Training is delivered online.
- 4.2 Once training is complete, Higg FEM Verifier candidates must take an exam.
- 4.3 Only Verifiers who have completed the training and passed the exam are eligible for Higg FEM Verifier Status.

5. Maintaining Verifier status

- 5.1 Status is maintained by participating in Verifier Status Maintenance (VSM) program. Details on the VSM program can be found on the VPM (Sumerra) website:
<https://www.sumerra.com/sac/verifier-status-maintenance-program/>

6. Verifier Application Audits

6.1 Application Selection and Requesting Information

- 6.1.1 The VPM periodically selects applications for auditing.

- 6.1.2 Applications are selected randomly as well as based on risk (applications that appear to have unusual or inconsistent information).
- 6.1.3 Applications may be audited at any stage of the application and approval process
- 6.1.4 The VPM emails the applicant and request additional information and documentation to support self-reported data in their application.
- 6.1.5 Applicants that are selected for an audit have at least 14 calendar days to provide the requested information.

6.2 Review of Application Criteria

- 6.2.1 The audit focuses on self-reported data. Applicants are not required to provide information that was included in the initial application.
- 6.2.2 Based on the information in the application, the VPM asks for one or more of the following pieces of evidence to support the verifier application:
 - Copies of selected audit reports to support audit log. Brand and other identifying information is redacted as needed to meet confidentiality requirements.
 - Contact information for previous employers so they may be contacted to confirm employment as noted.
 - Contact information for reference(s) that can attest to work experience in environmental sustainability/assessment.
 - Copy of diploma, transcript, or other proof of post-secondary degree.
 - Certificate of completion for all listed trainings.
 - Documentation of receipt of internal training reported (e.g. sign-in sheets, certificate, Learning Management System exports, etc.).
 - English writing and speaking samples.

6.3 Review

- 6.3.1 The VPM completes the audit within 14 days of receiving information from the applicant.
- 6.3.2 Additional information may be sought from the applicant based on their responses.
- 6.3.3 If the applicant provides incorrect data/evidence, they have one additional chance to provide correct data/evidence.
- 6.3.4 After performing the audit, the VPM determines whether the self-reported data provided by the applicant is accurate.

6.4 Audit outcomes

- 6.4.1 If the self-reported data is generally accurate, no further action is needed.
 - 6.4.1.1 Minor issues include honest mistakes in entering numbers/data, i.e. entering incorrect data due to misunderstanding of question
- 6.4.2 If the self-reported data is not accurate, the VPM determines what impact the inaccurate data has on the applicant's application.
 - 6.4.2.1 If the inaccurate data would have resulted in the applicant failing the initial application, the applicant is suspended.
 - 6.4.2.1.1 The auditor may formally appeal the suspension. The appeal will be reviewed by the VPM and the SAC. The appeal decision is final.
 - 6.4.2.1.2 The verifier may appeal to be reinstated after 12 months.

- 6.4.2.1.3 The application must be approved by the VPM as well as the SAC.
- 6.4.2.2 If the inaccurate data would not have affected the initial application, the VB is required to provide an explanation and corrective action plan to demonstrate how it will ensure the accuracy of future applications. Depending on the nature of the inaccurate data, the verifier may be suspended.
- 6.4.3 Applicants are informed of audit outcomes.

Responsibilities

VPM: review applications and apply scoring; determine eligibility based on application score; administer exam.

SAC: approves criteria

B. Assessing Verifier Bodies' (VB) Internal Management Systems

Verifier Body Assessments review the policies and procedures VBs have in place to ensure the quality of Higg FEM Verifications conducted by their verifiers. This procedure defines how the Verification Program Manager (VPM) conducts VB assessments.

Procedure

1. Selecting VBs for assessment

- 1.1. All VBs will be subject to a management assessment. Both 2nd and 3rd-party VBs are included.
- 1.2. Additional assessments may be conducted periodically and/or be based on VB performance

2. Assessing Verifier Bodies

- 2.1. The scope of the assessment is the VB's Higg FEM Verification program.
- 2.2. The VPM assesses:
 - The VB's policies and procedures on Verifier competence
 - The VB's policies and procedures on training for Verifiers
 - The VB's policies and procedures on internal quality, including report review
 - The VB's practices for calibrating Verifiers to ensure consistency, both within the VB and with external requirements
 - The VB's practices for ensuring auditors act ethically
- 2.3. Assessments are conducted remotely. The VPM requests documentation from the VB and may schedule teleconference meetings to review material with VB management. Once the VPM requests documentation, VBs have 14 days to submit the requested documentation to the VPM.

3. Reporting

- 3.1. The outcomes of VB assessments are recorded in a standard report form.
- 3.2. Outcomes of VB assessments are shared with VBs so they can take steps to address gaps in their programs.

4. Corrective Action

- 4.1. If the VPM finds significant gaps in the VB's program, the VB will be required to take corrective action to address those gaps.
- 4.2. VBs that do not take corrective action may be subject to disqualification of their VB status and the status of all associated verifiers.

Responsibilities

VPM: Select VBs for assessment in coordination with the SAC; ensure this procedure is consistently followed; qualify staff as VB assessors.

VPM VB Assessor: Conduct VB assessment in line with this procedure and generate report.

SAC: Select VB's for assessment in coordination with VPM.

VBs: Provide information and documentation, as requested by the VPM

C. Desktop Review (DR)

Desktop Reviews are remote assessments of verified reports. This procedure defines how Desktop Reviews are conducted to ensure that they are the result of a high quality, reliable, and consistent verification process.

Procedure

1. Report Selection

- 1.1. Reports are selected based on risk, through stratified random sampling and simple random sampling. Approximately one-third of Desktop Reviews will be selected using stratified random sampling, one-third selected based on risk and one-third using simple random sampling. The strata for stratified sampling will include: country and VB. Note that these ratios may be adjusted.
- 1.2. Desktop Review identifies any issues in the report, including
 - Facility responses that were not verified
 - Corrected responses that are inaccurate
 - Instances where a facility provides inconsistent information that is not corrected by the verifier
 - Any instances where it appears that the question was misunderstood by the verifier, causing the “corrected response” to be misleading
 - Misapplication or misinterpretation of local laws
- 1.3. The risk factors for selecting reports for review may include specific quality assurance flags identified by the SAC and VPM, VB/Verifier performance and facility feedback surveys.
- 1.4. Depending on how many reports are flagged based on risk, not every flagged report may be reviewed.

2. Report Review

- 2.1. Each facility response, verification selection (accurate, inaccurate, no response), corrected response and verification comments, supporting documents are reviewed.
- 2.2. The report review identifies any instances where the report is incomplete or where verified data is not supported with evidence including:
 - Unclear language: English answer is interpretable in multiple ways, short answers that do not do justice to the question.
 - Facility responses that were not verified (No “Verification Response” selected).
 - Corrected responses that are inaccurate (“Verification Comment” in the tool does not support “corrected response”).
 - Instances where facility provides inconsistent information that is not identified by the verifier.
 - Instances where it appears that the question was misinterpreted by the verifier, causing “false positive” response.
 - Misapplication or misinterpretation of local statutory requirements.
 - Misapplication or misinterpretation of Higg FEM questions.
 - Verification data supporting a corrected response is outside the scope of the verification (prior year).

- 2.3.** The report review also identifies any areas where the report was not completed correctly and/or where the Verification protocol was not applied correctly, including:
- Corrected responses that do not include Verification comments with necessary details.
 - Report comments use auditing terminology (e.g. “auditor”, “auditee”, “non-conformant”).
- 2.4.** The VPM may contact the verifier for clarifying flagged issues.

3. Analyzing Inaccuracies and errors

- 3.1.** Any inaccuracies and errors (as defined above) are analyzed as part of the Desktop Review.
- 3.2.** Inaccuracies and errors are categorized in order to summarize and report on the types of inaccuracies and errors that are most common and most critical.

4. Reporting

- 4.1.** Desktop Review outcomes are recorded in a standard report format.
- 4.2.** Desktop Review reports are completed within 10 working days of selection of the report review.
- 4.3.** Information regarding Verifier performance is captured in the Verifier scorecard.
- 4.4.** The VPM provides the SAC with a summary of issues identified through Desktop Reviews.
- 4.5.** Individual Desktop Review reports are not provided to VBs. The VPM aggregates information on common mistakes and misunderstanding and may issue technical bulletins to all VBs, so they are informed of common mistakes and critical issues. The VPM may follow up directly with individual VBs if Desktop Review shows their verifiers do not understand SAC protocols and the VB needs to take specific action to improve their reports.

5. Invalidating Reports

- 5.1.** If the Desktop review finds any of the issues listed in Appendix I, Extreme Cases, the VPM may invalidate the Verification report.
- 5.2.** If VPM determines a report must be invalidated, the VPM informs VBs and the facility
- 5.2.1. The VPM emails the facility and the VB informs that the report will be invalidated. A short explanation of why the report is being invalidated is provided.
- 5.2.2. Four calendar days after the facility and VB are informed, the VPM sets the report status to Verification Invalidated (VRI) on the Higg.org
- 5.3.** Instances where reports are invalidated due to errors or oversights by the verifier will be captured in the Verifier scorecard. If a verification is invalidated due to significant issues with verifier performance, the VPM may suspend the Verifier from conducting additional verifications. Decisions to suspend Verifiers will be made jointly by the VPM and the SAC.

Responsibilities

VPM: ensure this procedure is consistently followed; select reports for review; qualify staff as report reviewers.

D. Counter Verification (CV)

Counter Verifications are high level one-day visits to a recently verified facility. They are used to assess whether Higg FEM Verification procedures are being followed, whether verifiers have the skills and knowledge to conduct verifications, and whether verification report content is generally accurate. Counter Verifications can also identify risk and identify ways to improve the overall usability of the Higg.org system.

When inconsistencies in data are found a Counter Verification investigates further to assess whether it is a competency issue (e.g. individual verifier's knowledge and skills, training program), a procedural issue (e.g. Verification Protocol quality, VB management procedures), or an ethical issue (e.g. bribery, corruption).

This procedure defines how the VPM conducts Counter Verifications so that they produce consistent and reliable feedback on the verification process.

Procedure

1. Counter Verification Selection

- 1.1. Counter Verifications are performed by qualified Counter Verifiers.
- 1.2. Counter Verifiers may work for either the VPM or a VB.
- 1.3. The VPM selects the Counter Verifier for each Counter Verification based on factors including availability, experience and cost.
- 1.4. To be considered qualified a Counter Verifier must
 - Meet the requirements for being a Verifier
 - Have a minimum of 5 years' experience conducting environmental assessments and/or consulting work that covers all aspects included in the Higg FEM
 - Have a minimum of 2 years' experience conducting quality assurance such as report reviews or internal audits
 - Additional qualifications and experiences may be considered as equivalents for the criteria listed above
- 1.5. A Counter Verifier cannot work for the VB that conducted the initial verification.

2. Counter Verification Facility Selection

- 2.1. All verified facilities are subject to Counter Verification.
- 2.2. Selection of facilities for Counter Verification is done jointly by the VPM and the SAC.
- 2.3. Facilities will be chosen based on several criteria including risk factors, size, facility type, and geographic location.
- 2.4. The VPM contacts facilities to inform them of the Counter Verification.
- 2.5. Counter Verifications are announced. The VPM works with the facility and Counter Verifier to find a suitable date for the Counter Verification.
- 2.6. There are no costs to facilities for Counter Verifications.

3. Counter Verification Preparation

- 3.1. Prior to the Counter Verification, the Counter Verifier reviews the verified report. This allows the Counter Verifier to review any inconsistencies and determine which questions to sample while on site. If the Counter Verification is conducted by a VB, the VPM makes

this information available to the VB/Counter Verifier at least two weeks prior to the Counter Verification.

- 3.2. A Counter Verification agenda is sent to the facility at least one week prior to the Counter Verification

4. Counter Verification Methodology

- 4.1. Counter Verifications take one working day.
- 4.2. Counter Verifications consist of three main activities:
 - 1) Management interviews to assess verifier conduct and verification procedure during the initial verification.
 - 2) Review of assessment questions and verified responses. This activity will include management/worker interviews, facility walk through, document review and other activities that are part of a standard SAC verification.
 - 3) Analyzing differences in verified assessment results and Counter Verification results.
- 4.3. These activities are conducted to assess the SAC verification process and determine whether verification protocols are followed; whether verifiers have appropriate skills and knowledge and if assessment reports are accurate and reliable. These activities are not used to correct or adjust the outcomes of the initial Verification.

5. Counter Verification Process

- 5.1. Management interviews
 - 5.1.1. There are two types of management interviews conducted during Counter Verifications, each serving a different purpose. The first type of management interview is to assess verifier conduct and Verification procedure during the initial verification. This is an activity that is unique to Counter Verifications and the purpose of this activity is to get input from facility management on the SAC process. The second type of management interview is to assess report content. This activity is similar to management interviews that take place during regular verification and the purpose of this activity is to assess if the facility has accurately answered questions.
 - 5.1.2. To assess verifier conduct and verification procedure, a pre-defined set of questions is used as a guide to interview management. Questions are formulated to cross-check information from other QA activities and to gather additional information.
 - 5.1.3. Counter Verifiers should spend no more than one hour conducting management interviews to assess verifier conduct and verification procedures.
 - 5.1.4. Management interviews to assess the facility responses and corrected responses to questions in the SAC tool follow the same procedure as during the initial verification.
- 5.2. Reviewing assessment questions and verified responses
 - 5.2.1. The purpose of assessing facility responses and corrected responses is to evaluate if the verifier(s) marked questions correctly during the initial assessment. If this is not the case an investigation starts into verifier quality and conduct (including an investigation into bribery).

- 5.2.2. Report content is assessed by reviewing of a sample of facility responses and corrected responses. The sample assesses questions from each Higg FEM section.
 - 5.2.3. Prior to the Counter Verification, the counter verifier selects the questions that will be sampled. Depending on actual conditions on site, the questions assessed may be changed during the Counter Verification. The sample should include both questions where the response was corrected and questions where the responses were not corrected.
 - 5.2.4. Counter Verifiers use the same Verification methodologies used during the initial Verification and follow the SAC protocols for conducting verifications. Document reviews, factory walk through, worker interviews, and management interviews are all used to assess if information contained in the verified report is accurate. Counter Verifiers follow the same practices that Verifiers do, including ensuring the confidentiality of worker interviews.
 - 5.2.5. Counter Verifications note and analyze any differences between facility responses, corrected responses and what is observed on site during the Counter Verification.
 - 5.2.6. For the purposes of Counter Verifications, “observed on site” means any information obtained during a Counter Verification. This is not limited to visual observations but can include information obtained through worker or management interviews, document reviews, etc.
- 5.3. Differences between initial Verification results and Counter Verification results
- 5.3.1. Differences between facility responses and what is observed on site and differences between corrected responses and what is observed on site will be captured by Counter Verifiers.
 - 5.3.2. Counter Verifiers will spend a portion of the Counter Verification determining the underlying reasons for the differences between what is contained in the verified report and what is observed on site. To do this analysis, Counter Verifiers may conduct additional document review, worker interviews and/or management interviews.
 - 5.3.3. If a Counter Verifier observes any differences between what was reported during the initial verification and the Counter Verification, they investigate fully to determine whether the discrepancy is due to corruption or falsification of records.
 - 5.3.4. Counter Verifiers will capture as much information as possible on the underlying reasons for the discrepancies in the Counter Verification report.
- 5.4. Submission of Counter Verification Data to the VPM
- 5.4.1. If a Counter Verification is performed by a VB, the Counter Verifier submits an initial Counter Verification Report to the VPM, using a standard report template provided by the VPM.
 - 5.4.2. The initial Counter Verification report includes data on what the Counter Verifier assessed on-site, highlighting any differences between the initial verification and the Counter Verification.
 - 5.4.3. Initial Counter Verification reports are due to the VPM within 5 business days of the Counter Verification.

6. VPM Analysis of differences between initial Verification and Counter Verification

- 6.1. The VPM analyzes any differences between the initial Verification and the Counter Verification. This assessment forms the basis for the VPM's determination of whether SAC processes were followed and if the verifier had the required skills and knowledge to conduct the initial verification.
- 6.2. Based on information provided by the Counter Verifier, the VPM categorizes any differences/discrepancies raised during the Counter Verification. The VPM assesses whether the discrepancies were due to understandable point in time differences or due to systemic oversight or other issues with the initial Verification.
- 6.3. The VPM may follow up with VB Counter Verifiers if additional clarifications are necessary.

7. Final Counter Verification Report

- 7.1. Counter Verifications reports are completed using a standard report template.
- 7.2. Reports are completed within 15 business days of the Counter Verification.
- 7.3. Facilities receive a summary of the Counter Verification report that includes:
 - 7.3.1. Details on the Counter Verification (when it took place, the party that conducted it, etc.)
 - 7.3.2. If there were no significant issues, confirmation that the Counter Verification did not show any significant issues
 - 7.3.3. If there were significant issues found during the Counter Verification that would result in invalidation of the verification, a notification that the initial Verification is invalidated
- 7.4. Verifier Bodies receive a summary of the Counter Verification Report that includes:
 - 7.4.1. Details on the Counter Verification (when it took place, the party that conducted it, etc.)
 - 7.4.2. Summary of any issues identified during the Counter Verification that were missed by the verifier (i.e. issues that were clearly present during the initial Verification and not captured in the report)

8. Invalidating Reports

- 8.1. If the Counter Verification finds any of the issues listed in Appendix I, Extreme Cases, the VPM may invalidate the report.
 - 8.1.1. The VPM emails the facility and the VB informs that the report will be invalidated. A short explanation of why the report is being invalidated is provided.
 - 8.1.2. Four calendar days after the facility and VB are informed, the VPM sets the report status to VRI on Higg.org
- 8.2. Instances where reports are invalidated due to errors or oversights by the verifier will be reflected in the verifier scorecard. If a Verification is invalidated due to bribery or to significant issues with verifier performance, the VPM may suspend the verifier from conducting additional verifications. Decisions to suspend verifiers will be made jointly by the VPM and SAC.

Responsibilities

Counter Verifiers: conduct Counter Verifications in line with this procedure and completing Counter Verification reports.

VPM:

- Recruit and qualify Counter Verifiers to conduct Counter Verifications;
- Ensure that this procedure is followed consistently;
- Conduct QA reviews of Counter Verification reports;
- Determine Counter Verification facilities, in cooperation with SAC.

SAC: Approve updates and amendments to this procedure and determine Counter Verification facilities, in cooperation with the VPM.

Brands and Facilities: Support and facilitate scheduling of Counter Verifications

E. Duplicate Verification (DV)

Duplicate Verifications are a repeat of a verification, done at a different point in time by a different VB or the VPM. They are used to assess if Higg FEM Verification procedures are being followed, whether verifiers have the skills and knowledge to conduct verifications, and whether verification report content is generally accurate.

When inconsistencies in data are found between the original and duplicate verifications, the VPM investigates further to assess whether it is a competency issue (e.g. individual verifier's knowledge and skills, training program), or a procedural issue (e.g. Verification Protocol quality, VB management procedures), or an ethical issue (e.g. bribery, corruption)

Procedure

1. Duplicate Verifier Selection

- 1.1. Duplicate Verifications are performed by qualified Verifiers or the VPM.
- 1.2. VPM staff that perform the Duplicate Verifications meet the requirements for being a qualified verifier.
- 1.3. VBs shall not perform Duplicate Verifications if they performed the initial Verification.
- 1.4. Duplicate Verifier shall not review the existing Higg vFEM, however, they will be permitted to view the Higg FEM as they would a typical verification.
- 1.5. The VPM selects the VB based on factors including availability, experience and cost.
- 1.6. The VB selects the Duplicate Verifier from any approved Verifier available and provides information on Verifier to the VPM for scheduling.

2. Duplicate Verification Facility Selection

- 2.1. All verified facilities are subject to Duplicate Verification.
- 2.2. Selection of facilities for Duplicate Verification is done jointly by the VPM and SAC.
- 2.3. Facilities will be chosen based on several criteria including risk factors, size, facility type and geographic location.
- 2.4. The VPM contacts facilities to inform them of the Duplicate Verification.
- 2.5. Duplicate Verifications are announced. The VPM works with the facility and Duplicate Verifier to find a suitable date for the Duplicate Verification.
- 2.6. There are no costs to facilities for Duplicate Verifications.

3. Duplicate Verification Preparation

- 3.1. Preparation is the same as for a standard verification.

4. Duplicate Verification Methodology

- 4.1. Duplicate Verifications consist of the same activities as a standard verification.

5. Submission of Duplicate Verification Data to the VPM

- 5.1. If a Duplicate Verification is performed by a VB, the Duplicate Verifier submits an initial Duplicate Verification Report to the VPM, using a standard verification tool provided by the VPM.
- 5.2. Initial Duplicate Verification reports are due to the VPM within 5 business days of the Duplicate Verification

6. VPM Analysis of differences between initial Verification and Duplicate Verification

- 6.1. The VPM analyzes any differences between the initial Verification and the Duplicate Verification. This assessment forms the basis for the VPM's determination of whether SAC processes were followed and if the Verifier had the required skills and knowledge to conduct the initial verification.
- 6.2. Based on information provided by the Duplicate Verifier, the VPM categories any differences/discrepancies raised during the Duplicate Verification. The VPM assess if the discrepancies were due to understandable point in time differences or due to systemic oversight or other issues with the initial Verification.
- 6.3. The VPM may follow up with VB Duplicate Verifiers if additional clarifications are necessary.

7. Final Duplicate Verification Report

- 7.1. Duplicate Verifications reports are completed using a standard report template.
- 7.2. Reports are completed within 15 business days of the Duplicate Verification.
- 7.3. Facilities receive a summary of the Duplicate Verification report that includes:
 - 7.3.1. Details on the Duplicate Verification (when it took place, the party that conducted it, etc.).
 - 7.3.2. If there were no significant issues, confirmation that the Duplicate Verification did not show any significant issues.
 - 7.3.3. If there were significant issues found during the Duplicate Verification that would result in invalidation of the verification, a notification that the initial Verification is invalidated.
- 7.4. Verifier Bodies receive a summary of the Duplicate Verification Report that includes:
 - 7.4.1. Details on the Duplicate Verification (when it took place, the party that conducted it, etc.).
 - 7.4.2. Summary of any issues identified during the Duplicate Verification that were missed by the Verifier (i.e. issues that were clearly present during the initial Verification and not captured in the report).

8. Invalidating Reports

- 8.1. If the Duplicate Verification finds any of the issues listed in Appendix I, Extreme Cases, the VPM may invalidate the report.
 - 8.1.1. The VPM emails the facility and the VB informs that the report will be invalidated. A short explanation of why the Verification is being invalidated is provided.
 - 8.1.2. Four calendar days after the facility and VB are informed, the VPM sets the report status to VRI on the Higg.org.
- 8.2. Instances where reports are invalidated due to errors or oversights by the verifier will be reflected in the verifier scorecard. If a Verification is invalidated due to bribery or to significant issues with Verifier performance, the VPM may suspend the Verifier from conducting additional Verifications. Decisions to suspend Verifiers will be made jointly by the VPM and SAC.

Responsibilities

Duplicate Verifiers: Conduct Duplicate Verifications in line with this procedure and completing Duplicate Verification reports.

VPM:

- ensure that this procedure is followed consistently;
- conduct QA reviews of Duplicate Verification reports;
- determine Duplicate Verification facilities, in cooperation with SAC.

SAC: Approve updates and amendments to this procedure and determine Duplicate Verification facilities, in cooperation with the VPM.

Brands and Facilities: Support and facilitate scheduling of Duplicate Verifications

F. Shadow Verification (SV)

Shadow Verifications are an observation of a Verification to assess verifier performance. This may be done by the VPM or self-nominated Brand or Manufacturer representatives (2nd parties). During a Shadow Audit, the Shadow Verifier observes the verifier to confirm that SAC protocols are followed and that the verification is conducted in line with SAC expectations.

Procedure

1. Shadow Verification Selection

- 1.1. Verifications are selected for shadowing by the VPM or brand/manufacturer representatives.
- 1.2. Verifications are selected by the VPM randomly as well as based on risk.
- 1.3. Brand/Manufacturer shadows may be selected by the brand or manufacturer in coordination with the VPM.
- 1.4. Shadow Verifications are announced to both the VB and the facility.
- 1.5. To facilitate Shadow Verifications, VBs must provide the VPM with information on scheduling of Verifications when requested.

2. Shadow Verification Process

- 2.1. During the opening meeting the Shadow Verifier is introduced, and the purpose of the Shadow Verification explained.
- 2.2. The Shadow Verifier observes the Verification process and notes instances where Verification Protocols are not followed or where other SAC requirements are not met by the verifier. The Shadow Verifier also notes any best practices.
- 2.3. Verifiers are assessed on how well they follow SAC protocols; their understanding of the SAC system; professionalism; audit preparation; time management; reporting; knowledge of local laws and regulations; knowledge of labor and human rights issues.
- 2.4. During the on-site verification, the Shadow Verifier does not actively participate in the Verification. The Shadow Verifier does not gather information or provide guidance to the Verifier. The Shadow Verifier may periodically ask the verifier questions for clarification, but this should not interfere with the verification process.
- 2.5. The Shadow Verification includes a review of the finalized verification report to assess how accurately the report reflects the on-site verification.
- 2.6. All observations are captured in the Shadow Verification report.

3. Shadow Verification Reporting

- 3.1. Shadow Verification outcomes are recorded using a standard report format.
- 3.2. Shadow Verification reports are completed within 15 business days of the verification report being finalized.
- 3.3. VBs are provided with the Shadow Verification report.
- 3.4. Shadow Assessment outcomes are reflected in the verifier scorecard.

4. Invalidating Reports

- 4.1. If during the Shadow Verification, the VPM finds any of the issues listed in Appendix II, Extreme Cases, the VPM may invalidate the report.
- 4.2. The VPM emails the facility and the VB informs that the report will be invalidated. A short explanation of why the Verification is being invalidated is provided.

- 4.3. Four calendar days after the facility and VB are informed, the VPM sets the report status to VRI on Higg.org

Responsibilities

Shadow Verifiers: Conduct Shadow Verifications in line with this procedure

VPM:

- Ensure that this procedure is followed consistently;
- Conduct QA reviews of Shadow Verification reports;
- Determine Shadow Verification facilities, in cooperation with SAC.

SAC: Approve updates and amendments to this procedure and determine Shadow Verification facilities, in cooperation with the VPM.

Brands and Facilities: Support and facilitate scheduling of Shadow Verifications

G. Feedback from Facilities

Feedback from SAC system users gives valuable information on the workings of SAC Verification and the quality of verification actors, e.g. the VB and the Verifier. The VPM uses collected feedback to populate verifier scorecards. Gathered information will contribute to ensuring quality of Verification.

1. Feedback forms

- 1.1 A feedback form is sent to all facilities after they complete a verification. Facilities are asked to provide comments on the verification process and verifier conduct. Completing the form is optional.

2. Feedback outcomes

- 1.2.1 All feedback is captured and analyzed by the VPM. The VPM provides SAC with reporting on feedback.
- 1.2.2 Feedback is used to determine if any SAC system users need additional training, guidance or support.

3. SAC system users' questions

- 2.1 Through howtohigg.org/request SAC system users can submit requests. Requests related to Verification are automatically forwarded to the VPM.
- 2.2 Solved information requests are captured by the VPM for evaluation of the Verification process.

Responsibilities

VPM: Collect feedback data into database; analyze feedback data;

H. Disputes

A dispute is an issue related to verifier conduct or the verifier not following the verification protocol. The dispute process is not used to resolve issues or disagreements over verification outcomes of specific questions. If the facility has concerns about specific verification answers and outcomes of the verification, the Verifier should be made aware of those concerns at the closing meeting, so they can be swiftly resolved within two days of the close of the on-site verification. The facility may also use the period before the verification is finalized to resolve any question level issues directly with the Verification Body (VB). This process does not require Verification Program Manager (VPM) involvement and would not be considered as part of the dispute process.

1. Raising Disputes

- 1.1. Disputes are instances where a facility has an issue with their verified assessment. The VPM receives such disputes.
- 1.2. Only facilities may raise disputes.
- 1.3. Disputes are raised on the Higg.org platform. When initiating a dispute, facilities are required to provide information on the reason for the dispute. This information should be provided in the Dispute survey which appears when the facility clicks “Dispute Verification” on the left pane titled “Available Actions” in the module Overview section.
- 1.4. A facility has one opportunity per verification to raise a dispute. Multiple issues may be included within a single dispute. For example, if the dispute is raised because the Verifier did not spend enough time on site and because the Verifier did not speak the language of management at the Facility, these issues are raised together in one dispute.
- 1.5. A facility should raise a dispute within 5 days of a verified module with the status being set to VRC by Verifier

2. Substantiating Disputes

- 2.1. Within 5 working days, the VPM evaluates the dispute to determine if it is valid.
- 2.2. To be valid, a dispute must relate to Verifier conduct or the Verification Protocol and must relate to a specific verification. Question level issues are not considered valid disputes.
- 2.3. If a dispute is not substantiated, the VPM sets the status of the verified module to VRF on Higg.org.
 - 2.3.1. The VPM notifies the Facility that the dispute is not substantiated.
 - 2.3.2. Within 5 working days after the notification, the VPM sets the status to VRF.
- 2.4. Disputes that are not substantiated may be treated as complaints. This does not impact the status of the verified assessment.

3. Investigating Disputes

- 3.1. If a dispute is substantiated, the VPM investigates.
- 3.2. The Facility, Verifier and/or VB may be contacted to provide additional information.
- 3.3. The VPM may consult with SAC regarding the dispute.
- 3.4. The VPM shall resolve all disputes within 10 working days, unless there is coordination issue with the related parties.

4. Outcomes of Disputes

- 4.1. There are three potential outcomes of a dispute: 1) the VPM determines a change is needed to the report, 2) the VPM determines the report is invalidated or 3) the VPM determines no change is required and the report is finalized with no edits.
 - 4.1.1. If the VPM determines that a change is needed to the report:
 - 4.1.1.1. The VPM informs the Verifier and Facility of the change required.
 - 4.1.1.2. The VPM sets the status of the verified module to VRC.
 - 4.1.1.3. The Verifier and the Facility have 7 days to make and review the change.

- 4.1.1.4. On the 8th day, the status of the verified module automatically changes to VRF unless the facility selected the VRF prior to day 7.
- 4.1.2. If the VPM determines there were significant issues and the verification meets the criteria for invalidation (see Appendix II in the QA Manual for criteria for invalidating a verification):
 - 4.1.2.1. The VPM informs the verifier and the facility that the verification will be invalidated.
 - 4.1.2.2. Within 5 days after the VPM informs the verifier and the facility, the VPM sets the status to VRI.
- 4.1.3. If the VPM determines that there are no changes needed to the report:
 - 4.1.3.1. The VPM informs the verifier and the facility that the verification report will not be changed.
 - 4.1.3.2. Within 5 days after the VPM informs the verifier and the facility, the VPM sets the status to VRF.

5. Tracking and Reporting on Disputes

- 5.1. All disputes received by the VPM are tracked.
- 5.2. Outcomes of the dispute are reflected in the verification report in one of the following ways:
 - Dispute not substantiated: status set by VPM to VRF
 - Dispute substantiated: status set by VPM to VRC
 - Dispute substantiated: status set by VPM to VRI

Responsibilities

VPM: Collect, review and investigate disputes.

Examples of incidents which can be substantiated as Dispute

- Verifier failed to spend the appropriate amount of time to properly assess the accuracy of the facilities self-assessment data. E.g. Although it was recommended that the Verifier spend two days as per person-day guidance, the verifier only spent one day and also failed to review all of the energy use documentation provided by the facility. This lack of review of documentation resulted in the Verifier wrongly noting the self-assessment question as ‘inaccurate.’ ***This would be a failure to follow the established protocols and would be considered unprofessional behavior.***

Examples of incidents which can NOT be substantiated as Dispute

The facility provided an environmental strategy document to the verifier. Upon review the Verifier determined in their judgement the document did not meet the minimum requirement for a “Yes” and marked the facilities answer of “Yes” as ‘inaccurate’ and corrected the response to “No.” The facility disagrees with this assessment. ***This would be question level disagreement on the verifier’s judgement. These should be addressed directly with the verifier and Verifier Body on a collaborative way during the VRC status.***

I. Verifier Scoring

Verifier Scoring takes data from the QA process and uses it to rate verifier performance.

Procedure

1. Scoring Inputs

1.1. The following sources of data on Verifier performance are used to calculate the verifier Score:

- Verifier exam scores
- Desktop Review outcomes
- Counter Verification outcomes
- Duplicate Verification outcomes
- Shadow Verification outcomes
- Facility feedback

2. Scoring Criteria

- 2.1. Verifier performance is rated by the VPM according to set criteria.
- 2.2. A score is provided for each verification for which data is available.
- 2.3. The scoring inputs described in 1.1 are aggregated into a single numeric verifier score.
- 2.4. The verifier score is an average score from all verifications for which scores exist.
- 2.5. Inputs are weighted based on importance (QA items are considered more important than feedback).
- 2.6. Data on scores is stored in VPM database and attached to each verification.

Responsibilities

VPM: Collect scoring data and calculate verifier scores

Appendices

Appendix I – Extreme Cases (for Invalidating Reports)

When a verified assessment report is considered invalid, the status “invalidated” is attributed in the Higg.org and all stakeholders are notified (facility, verifier, end user).

Verified assessment report is considered invalid when:

1. Basic quality standards are not met:

- a. Tool not completed (over 5 percent of the questions left blank)
- b. Tool not completed in English
- c. Significant number of findings not supported with evidence
- d. Significant number of findings not clearly communicated (findings are not written clearly; findings can be interpreted in more than one way; questions not correctly answered)

2. Verifier requirements are not met:

- a. Verifier not approved by VPM
- b. Verifier visiting facility for second time in a row without registering this in the Repeat Verification Registry
<https://www.sumerra.com/programs/sac/sac-fem-verification-program/fem-repeat-request/>
- c. Verifier provided facility with consulting services within 12 months of verification
- d. Verifier did not spend sufficient man-days on site

3. Significant issues with the Verification process are found:

- a. Evidence of bribery (solicited or accepted by verifier)
- b. Evidence of prohibited ‘selling’ of products or services in violation of the terms
- c. Verifier was denied access to facility grounds (entirely or in part)
- d. Verifier was denied access to workers (interviews)
- e. Verifier was denied access to information (documents)
- f. Findings at the verified site were not captured in the report

Appendix II – List of Abbreviations

FEM	Higg Facilities Environmental Module
QA	Quality Assurance
SAC	Sustainable Apparel Coalition
VB	Verifier Bodies
VPM	Verification Program Manager
VRI	Verification Invalidated