The Responsible Jewellery Council

The Responsible Jewellery Council (RJC) is a not-for-profit organisation founded in 2005 with the following mission:

To advance responsible ethical, social and environmental practices, which respect human rights, throughout the diamond and gold jewellery supply chain, from mine to retail.

About this Assessment Manual

The RJC Assessment Manual contains instructions for Members and Auditors on how to complete Self Assessments (Members) and Verification Assessments (Auditors).

This is a ‘living document’ and the RJC reserves the right to revise this Manual based on implementation experience and emerging good practice. The version posted on the RJC website supersedes all other versions. To verify this document is current, please visit: www.responsiblejewellery.com

Disclaimer

No guarantee, warranty or representation is made as to the accuracy or completeness of the Assessment Manual (hereinafter the “Manual”) and other documents or information sources referenced in the Manual. Compliance with the Manual is not intended to, nor does it replace, contravene or otherwise alter the requirements of any applicable national, state or local governmental statutes, laws, regulations, ordinances, or other requirements.

Please note this Manual gives general guidance only and should not be regarded as a complete and authoritative statement on the subject matter contained herein.

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Inquiries or feedback

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Introduction

1.1 Purpose
The Assessment Manual contains information for RJC Members and Auditors on assessing Member business practices under the RJC Certification system. Specifically, this manual:
- Describes the process for achieving RJC Certification;
- Explains how to carry out a Self Assessment and a Verification Assessment;
- Provides guidance on the principles for conducting an effective assessment.

1.2 Scope
The Manual has been prepared for:
- Members applying for Certification under the RJC System;
- Accredited Auditors that conduct the independent Verification of a Member’s business practices.

The following Guides provide additional information to assist with the assessment process:
- RJC Certification Handbook (G001_2009)
  - An overview of the RJC System and the requirements for achieving Certification.
- Standards Guidance (G002_2009)
  - Introduction and guidance on each of the Standards in the Code of Practices.
- Assessment Questions (T002_2009)
  - A series of questions designed to assess a Member’s performance against the Code of Practices and its Provisions to be used by Members and Auditors.
- Self Assessment Workbook (T003_2009)
  - The Assessment Questions laid out in a Self Assessment Workbook format for the use of Members, with additional prompts and guidance on Objective Evidence.

These are publicly available from the RJC website or, on request, the RJC Management Team.

1.3 Co-ordination
It is recommended that Members designate a representative of their organisation’s management as a “coordinator” to oversee the Self Assessment process and liaise with the RJC Management Team, as required.

Please notify the RJC Management Team with the contact details of the coordinator.
The Assessment Process

2.1 Introduction
During 2009-2012, the RJC System will be implemented by Members for the first time. At the core of the implementation is a series of steps that are summarised in the diagram below (Figure 1).

![Figure 1: RJC System 2009 – 2012 Assessment process steps.](image)

This Manual describes the main activities and resources used in each of the five steps. It also provides general guidance on the principles for conducting an effective assessment.

- Common elements applicable to all steps of the process are described in the remainder of this section 2.
- Unique aspects associated with each of the five steps are described in section 3 to section 7 of the Manual.

2.2 Assessment Performance and Objective Evidence

2.2.1 Performance Ratings – Conformance and Non-Conformance
Performance ratings are assigned to represent the level of Conformance of the Member’s practices against the Provisions in the RJC Code of Practices. The Self Assessment and Verification Assessment both use the following performance ratings:
- Conformance
- Minor Non-Conformance
- Major Non-Conformance
- Not Applicable

Definitions for the performance rating terms are provided in Table 1.

Table 1 Performance Rating Definitions

<table>
<thead>
<tr>
<th>Performance Rating</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Conformance</td>
<td>The Member’s business practices, including the policies, systems, procedures and processes, perform in a manner that conforms to the Code of Practices.</td>
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</table>
| Minor Non-Conformance         | The Member’s business practices, including the policies, systems, procedures and processes, perform in a manner that is not wholly conformant with the Code of Practices. Minor Non-Conformances are defined as the occurrence of one or more of the following situations:
  An isolated lapse of either performance, discipline or control of the Member’s business practices, which does not lead to a Major Non-Conformance of the Code of Practices; and/or
  A finding which may not be an actual breach of the Code of Practices at this point in time, but is judged to be a potential inadequacy in the Member’s business practices during the Certification period. |
**Performance Rating** | **Definition**
--- | ---
Major Non-Conformance | The Member’s business *practices*, including the policies, systems, procedures and processes, *perform* in a manner that is *not conformant* with the Code of Practices. Major Non-Conformances are defined as the occurrence of one or more of the following situations:
- The total absence of implementation of a required Provision;
- A Member-wide systemic failure or total lack of controls required to manage business Risks related to the RJC System;
- A situation where the Member’s business practices have not identified relevant legislative or regulatory requirements, or there is a non-compliance of legislative or regulatory requirements and inadequate attempt to rectify the non-complying condition;
- A group of related, repetitive or persistent Minor Non-Conformances indicating inadequate implementation;
- Any finding or observation supported with Objective Evidence to prove a Critical Breach, or which raises serious doubts as to whether the Member has the business practices to avoid any Critical Breach.

Not Applicable | The requirement is not applicable based on the nature, scale and impacts of the Member’s business activities, product and/or services.

Section 2.2.4 details the obligations on Members and Auditors based on the assigned performance rating. Example findings leading to Minor and Major Non-Conformance ratings are provided in Appendix 1.

**2.2.2 Not Applicable**
Circumstances whereby requirements of the Code of practices are deemed by the Member not to apply to a Member’s business must include a suitable explanation from the Member describing the not applicable status.

**2.2.3 Critical Breach**
A Critical Breach is a situation of Major Non-Conformance by a Member in Provisions deemed to be critical to the integrity of the RJC System. The following Provisions have been classified as critical:

<table>
<thead>
<tr>
<th>RJC Code of Practice</th>
<th>Provision Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.3 Kimberley Process</td>
<td>1.3.1, 1.3.2, 1.3.3, 1.3.4</td>
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<tr>
<td>1.5 Product Integrity</td>
<td>1.5.1, 1.5.2, 1.5.3, 1.5.4, 1.5.5, 1.5.6, 1.5.7, 1.5.8</td>
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<tr>
<td>2.2 Child Labour and Young Persons</td>
<td>2.2.1, 2.2.3, 2.2.4</td>
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<td>2.3 Forced Labour</td>
<td>2.3.1</td>
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<tr>
<td>2.6 Health and Safety</td>
<td>2.6.5</td>
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<tr>
<td>2.7 Discipline and Grievance Procedures</td>
<td>2.7.1</td>
</tr>
<tr>
<td>3.2 Hazardous Substances</td>
<td>3.2.1</td>
</tr>
<tr>
<td>3.3 Waste</td>
<td>3.3.1</td>
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</table>

If any of these Critical Provisions are rated as a Major Non-Conformance in the Self Assessment or Verification Assessment, the Member is deemed to be in a situation of Critical Breach under the RJC System. Table 3 outlines the obligations on Members and Auditors where a Critical Breach is identified.

*Provisions classified as critical are uniquely identified in the Self Assessment Workbook using underline italics type face. Should any of these be assessed or verified as a Major Non-Conformance, then this constitutes a Critical Breach against the Code of Practices.*
2.2.4 Findings and Objective Evidence

Rating of performance must be based on the relevant Objective Evidence.

Objective evidence is defined as verifiable information, records, observations and/or statements of fact and can be qualitative or quantitative. It is used by the Assessor or Auditors to demonstrate that the respective Provisions of the Code of Practices have been met through suitable, adequate and effective Member business practices.

Objective evidence is typically based on interviews, examination of documents, observation of activities and conditions, existing results of measurements and tests, or other means within the scope of the assessment and specifically relevant to the requirement.

The process of collecting Objective Evidence involves sampling documentation and records, interviewing a representative selection of personnel, and observing the key functions of the Member’s business practices. When collecting evidence by examination of documentation, it is essential to consider sampling methods and sample sizes. The size of the sample, particularly in relation to the total population, will naturally influence the confidence in the assessment results. Sampling should be carried out to access just enough evidence to verify that systems and process are in place and are effective.

Objective evidence must be all of the following:

- relevant to the time period for the scope of the assessment;
- relevant to what is being assessed or verified;
- traceable;
- clear and unambiguous.

Examples of evidence include, but are not limited to:

- Organisational charts outlining structure, responsibilities and authorities;
- Details describing the Member’s products and processes;
- Legal permits, licences or other authorisations and related documents and correspondence;
- Reviews of previous assessments;
- Audit reports from relevant Certifications under other recognised systems;
- Communication with interested parties including neighbours and other stakeholders;
- Risk assessment registers.

Objective evidence of departure from approved procedures or variations in expected process outcomes are considered as valid justification for a finding of a non-Conformance with the requirement.

Objective Evidence is a matter between Members and the Assessors or Auditors and must not be disclosed to the RJC.

2.3 Preparation of Corrective Action Plans

During the Assessment process, any identified non-Conformance (Provisions rated as either a Minor or Major Non-Conformances) requires the Member to prepare and implement appropriate Corrective Action plans.

A template for Corrective Action Plans is provided in Appendix 2.

Corrective Action Plans should be specific, measurable, achievable, realistic, and demonstrate the means, resources and timeframe for the implementation of each action.

Advice on a suggested management approach for each of the Standards of the RJC System is contained in the Standards Guidance (G002_2009). External assistance to assess potential problems and identify solutions can also be sought at this stage.

The Corrective Action Plan may include both corrective and preventive actions.

- A Corrective Action is defined as an action implemented to eliminate the cause of a non-Conformance or an incident, in order to prevent a recurrence.
- A preventive action is defined as an action implemented to prevent the occurrence of a non-Conformance or an incident.
In all cases, Members must evaluate the effectiveness of the implemented corrective and/or preventive actions to ensure that the actions:

- have not introduced new actual and/or potential Risks, and
- have addressed the root cause to avoid recurrence of the non-Conformance.

The Member should select appropriately qualified and/or experienced personnel to carry out this task commensurate with the nature and severity of the non-Conformance.

### 2.4 Responsibilities & Obligations of Members and Auditors

#### 2.4.1 General Responsibilities

The following general responsibilities describe the roles that Members and Auditors have during the Verification Assessment process.

#### 2.4.1.1 Lead Auditor

The lead Auditor is responsible for ensuring the efficient and effective conduct and completion of the Verification Assessment within the scope and plan approved by the Member.

In addition, lead Auditor responsibilities and activities should cover:

- Consulting with the Member when determining the scope and plan of the Verification Assessment;
- Obtaining relevant background information necessary to meet the objectives of the Assessment;
- Forming the audit team and directing its activities;
- Preparing the audit plan and communicating it to the Member and audit team members;
- Coordinating the preparation of working documents;
- Resolving any problems that arise during the Verification Assessment;
- Recognising when audit objectives are unattainable and reporting the reasons to the Member and the RJC Management Team;
- Representing the assessment team in all discussions;
- Notifying Verification Assessment findings to the Member;
- Making Suggested Business Improvements to the Member if requested;
- Approving Corrective Action Plans for Major Non-Conformances identified in the Verification Assessment;
- Reporting the Verification results to the Member and the RJC, including a recommendation on Certification.

#### 2.4.1.2 Auditor

Auditor responsibilities and activities should cover:

- Following the directions of and supporting the lead Auditor;
- Planning and carrying out the assigned tasks objectively, effectively and efficiently;
- Collecting and analysing Objective Evidence;
- Preparing working documents under the direction of the lead Auditor;
- Documenting individual Verification Assessment findings;
- Assisting in writing the Verification Reports.

#### 2.4.1.3 Members

The responsibilities and activities of the Members being assessed or verified should cover:

- Informing personnel about the objectives and scope of the Verification Assessment as necessary;
- Providing resources needed for the audit team;
- Nominating competent Member staff to accompany Members of the audit team;
- Ensuring Auditors are aware of any Risks such as occupational Health, Safety and other requirements;
- Providing access to Facilities, personnel and relevant information and records;
- Responding to the findings of the Member Verification Report;
- Developing and implementing necessary Corrective Action plans.
2.4.2 Follow-up Obligations from Non-Conformances

The following table describes the obligations that Members and Auditors have in relation to follow-up action required for non-Conformances identified during a Self Assessment or a Verification Assessment.

Table 3: Obligations of Members and Auditors Based on the Findings of the Assessment Process

<table>
<thead>
<tr>
<th>Performance Rating</th>
<th>Self Assessment</th>
<th>Verification Assessment</th>
</tr>
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<tbody>
<tr>
<td>Critical Breach</td>
<td>Members have an obligation to immediately report Critical Breaches to the RJC Management Team. Members must cease and/or immediately reassess the activity until the Critical Breach is rectified. The RJC can direct the Member to resources that may assist with Corrective Action. The Council needs to be kept abreast of progress and will only initiate disciplinary action if the Member does not implement the changes necessary to rectify the Critical Breach.</td>
<td>The Auditor shall immediately communicate all Critical Breaches to the RJC Management Team. Disciplinary proceedings against the Member will be triggered which may result in temporary or permanent loss of membership of the RJC.</td>
</tr>
<tr>
<td>Major Non-Conformances</td>
<td>Members should prepare adequate corrective and/or preventive actions and document these in a Corrective Action Plan. Members must implement these actions in a timely manner and evaluate their effectiveness prior to a Verification Assessment. Evidence of action to address Major Non-Conformances should be available for review by the Auditor during a Verification Assessment.</td>
<td>Members must prepare adequate corrective and/or preventive actions and document these in a Corrective Action Plan. The Member should then forward this Corrective Action Plan to the Lead Auditor within 1 month of the Verification Assessment, or as otherwise agreed. A follow-up visit should occur within 6 months of the Verification Assessment to confirm that the Member has either addressed the areas of Major Non-Conformance, or that progress towards the implementation of these actions is well underway. Where appropriate, the Auditor may agree that the Member can dispatch the necessary evidence to the Auditor by other means such as electronically or via remote conference. The effectiveness of implemented actions must be evaluated by the Member. The Auditor cannot recommend the Member for Certification until all Major Non-Conformances have been adequately addressed or captured in a Corrective Action Plan approved by a Lead Auditor. Certification, if granted with Major Non-Conformance/s, is valid for 1 year from the date of the Verification Assessment.</td>
</tr>
<tr>
<td>Performance Rating</td>
<td>Self Assessment</td>
<td>Verification Assessment</td>
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<td></td>
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<td>Prior to the expiry of the 1 year certification, a follow-up assessment should occur to confirm that the Member has either addressed the areas of Major Non-Conformance, or that progress towards the implementation of these actions is well underway. Where appropriate, the Auditor may agree that the Member can dispatch the necessary evidence to the Auditor by other means such as electronically or via remote conference. The effectiveness of implemented actions must be evaluated by the Member.</td>
</tr>
</tbody>
</table>

| Minor Non-Conformance | Members should prepare adequate corrective and/or preventive actions and document these in a Corrective Action Plan. Minor Non-Conformances do not need to be completely resolved before a Verification Assessment, but evidence should be available of the Corrective Action being undertaken. The effectiveness of implemented actions must be evaluated by Members. | Members **must** prepare adequate corrective and/or preventive actions and document these in a Corrective Action Plan. Corrective and preventive actions addressing Minor Non-Conformances must be completed within the 3 year Certification period. Action plans may be reviewed by the Auditor during subsequent Certification Assessments and/or visits. **Certification, if granted with Minor Non-Conformances, is valid for 3 years from the date of the assessment.** |
Step 1: Self Assessment by Members

3.1 Objective of the Self Assessment
In the first step, Members carry out a Self Assessment of their organisation and its facilities. There are three purposes to the Self Assessment:

- For Members to define the Certification Scope, by identifying those parts of their business which actively contribute to the Diamond and/or Gold Jewellery supply chain.
- For Members to review their business practices against the requirements of the RJC System. This provides the opportunity to identify any areas of non-Conformance and address them in advance of auditing.
- For Members to assemble the relevant information to enable the Auditor(s) to work efficiently and effectively.

3.2 Self Assessment Frequency
A Self Assessment is required before a Member can proceed with an independent Verification Assessment. However, Members may choose to use the Self Assessment toolkits to conduct more frequent reviews prior to and following a Verification Assessment.

3.3 Certification Scope
A Self Assessment must cover all of the Member’s business activities falling within the Certification Scope.

In commencing a Self Assessment, Members must determine the Certification Scope for their business. The Certification Scope covers those parts of the Member’s business with activities and facilities that actively contribute to the Diamond and/or Gold Jewellery supply chain. Facilities that must be included within the Certification Scope are premises that are:

- owned by or under the Control of a Member; and
- actively contribute to the Diamonds and/or Gold Jewellery supply chain.

For the RJC’s definition of “Control”, refer to the Glossary.

The RJC System has been designed to accommodate the various sizes and types of organisational structures which make up the RJC membership. Organisational structures may be flat or multi layered, with a range of sizes, complexity and nature of the business.

Figure 3, Figure 5 and Figure 7 are example schematics of organisational structures. These illustrate how the Certification Scope is determined in organisations with some or all of the following layers:

- Head office/corporate
- Regional division or business units
- Site/Facility

The Certification Scope will not change unless there is a change to the Member’s business, such as:

- Organisational restructure
- Divestments and acquisitions or change to the equity share of businesses related to the Diamond and Gold Jewellery supply chain
- Changes to activities, products and processes
- Changes to the locations and distribution of the Member’s facilities
- External influences such as changes in the statutory environment, regulations and/or other stakeholder expectations and commitments that affect the organisation.

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1 Note that Auditors will be instructed to review records and evidence from the previous 12 months for the first verification assessment. At re-certification, Auditors will review records and evidence for the previous 3 years.

2 Records relating to provisions in the Code of practices should be kept for a minimum of 3 years (the certification validity) or longer as required by Applicable Law.
Changes to the Certification Scope must be captured and re-assessed prior to a follow-up Verification Assessment. The RJC must be notified of any changes to the Certification Scope.

The Certification Scope, therefore, must be clearly defined by the Member to ensure the Self Assessment is appropriately completed. Equally important, the Certification Scope is used by Auditors to plan the Verification Assessment (see section 4).

Figure 2: A three-layered organisational structure typical of a large organisation, with the Certification Scope determined as a subset of the Member’s business.

Figure 3: A two-layered organisational structure typical of a medium sized organisation, with the Certification Scope determined as most of its business.

Figure 4: A flat organisational structure typical of a small organisation, with the Certification Scope determined as the entire business. This model is common for Members with one site/Facility.
Note that these are not a comprehensive range of the types of organisations and that Members may be a combination or variation of these examples.

In each case, the Certification Scope must include all parts of the Member’s business that actively contribute to the Diamond and/or Gold Jewellery supply chain.

Members with Mining Facilities should note the following:

- Facilities in the exploration to pre-commissioned stages of the mine lifecycle are not visited as part of the Verification Assessment. Business practices in these stages of the mine lifecycle can be evidenced, where necessary and appropriate, by desktop review of policies, systems, procedures and processes.
- A Mining Facility is excluded from RJC Certification if riverine tailings disposal is used at that Facility. However, all other COP provisions apply at that Facility and it can be included in the Verification Scope.
- A Mining Facility is not included in the Certification Scope if there is no saleable Diamonds or Gold, for example where Gold is a trace element in mineral concentrate, process by-products, or wastes.
- A Mining Facility producing multiple commodities or products, including Diamonds and/or Gold, can be excluded from the Certification Scope if there is a parallel certification system applicable to other commodities produced by the Mining Facility that is evaluated by the RJC to be technically equivalent to the RJC system.
- Provisions 2.11.2 and 2.11.3 do not apply retrospectively beyond the previous 12 month period of initial certification.
- Provisions 3.5.1 and 3.5.2 do not apply retrospectively to Mining Facilities in operation before World Heritage or protected area status is designated.
- Provision 4.4 does not apply retrospectively to impact assessments for existing Facilities formally commenced prior to 2010.

3.4 Self Assessment Workbook
A Self Assessment Workbook (T003_2009) has been developed by the RJC for use by Members. It is organised into the following sections:

- Section 1 – Member Information and Scope of Certification
- Section 2 – Assessment Questions
- Section 3 – General Findings and Opportunities for Improvement
- Section 4 – Request for Verification Assessment.

3.5 Section 1 – Member Information and Scope of Certification
In this section, the Member must provide background information about its business details, organisational structure, and description of activities, and also list each Facility that falls under the Certification Scope.

Information required includes:
1. Member business name, type (i.e. Mine, Retail, etc) and address details.
2. Contact details for key Member personnel, including the names of the coordinator and any others completing parts of the Self Assessment, and the designated contact for correspondence with the Auditor.
3. Key details about each Facility within the Certification Scope, such as:
   a. Name
   b. Location
   c. Number of Employees and Contractors
   d. A brief written explanation of the nature of the business.

Note: For those Members with a number of similar facilities (e.g. large retailers with a large number of stores) the description of the facilities may be described as being essentially the same and a separate document listing each Facility (or grouped similar facilities) may be attached to the Workbook.

In summary, the information provided in this section provides details on the Certification Scope, as described in section 3.3 of this Manual.
3.6 Section 2 – Self Assessment Questions

3.6.1 Overview
The Member completes the Assessment Questions in the Self Assessment Workbook and provides responses, evidence and findings that demonstrate how the business performs against the Provisions in the Code of Practices. The Self Assessment should gather sufficient evidence and encompass enough of the business practices to represent its performance relating to responsible ethical, social and environmental practices in the Gold and Diamond Jewellery supply chain. For instance, the Self Assessment may adopt the following process:

1. A review at a head office or at a central location of the Member’s common and company wide systems and procedures.

2. A review of divisional or Facility specific systems and procedures.

3. Assessment of the implementation of those specific systems and procedures.

The Assessment Questions ask Members to:
• Address each of the directives listed in the column with the heading “Self Assessment Requirement”.
• List the evidence and include any applicable references in the column with the heading “Objective Evidence in Support of Findings”. This includes ticking one or more of the boxes to indicate the type of evidence (Documentation, Observation and/or Testimonial).
• Document any findings, apparent non-Conformances, adverse conditions, observations and/or noteworthy achievements relating to the degree of Conformance with the Requirement. This is documented in the column with the heading “Observations and Findings”.
• Identify the role or functional area within the Member’s organisation with responsibility to manage the respective Requirement. This is documented in the column with the heading “Responsibility”. This involves tick one or more boxes to indicate where responsibility lies (Head office, Business/Divisional, Facility/Site and/or None).
• Assign the “Performance Rating” in the final column of the table (Compliance, Minor Non-Conformance, Major Non-Conformance, or Not Applicable).

3.6.2 Completing one or more Self Assessment Workbooks
Members can decide how many separate Self Assessment Workbooks, or similar, to complete as part of the overall Member self Assessment. This decision may be made on the basis of:
• The organisational structure
• Design and implementation of the operating Management Systems
• Regulatory framework and jurisdiction
• Size and nature
• Process activities, complexity and technology
• Product range
• Geography and location.

In essence, Members should complete the minimum number of Self Assessment Workbooks that allows a representative assessment of the Member’s Facilities so that performance ratings to be suitably allocated against each of the requirements in the Workbook.

For example, a Member may elect to complete:
• One Self Assessment Workbook to cover the whole of its business; or
• One Self Assessment Workbook to cover its manufacturing Facilities, and another Workbook to cover its retail business; or
• A Self Assessment Workbook to cover each of its major retail brands.

Together, the Self Assessment Workbook/s must cover all of the Member’s business activities and practices relevant to the Diamond and Gold Jewellery supply chain – the Certification Scope.
3.6.3 Using an alternative format

Members may wish to respond to the Assessment Questions using an alternative format to the Self Assessment Workbook provided by the RJC. One or more documents can be assembled, which must contain the information that is required in the Self Assessment Workbook. The Member’s document/s must clearly reference the Provision being assessed and include the following:

- Member Name
- Date
- Name of person completing the Assessment
- Site/Facility Reference
- Standard Provision Reference
- Performance Requirement Reference
- Objective Evidence (including type: Documentation, Observation and/or Testimonial)
- Observations and Findings
- Responsibility (i.e. Head office, divisional and or Facility)
- Performance Assessment.

An alternative response template to the Self Assessment Workbook, that can be further adapted by Members or Auditors, is provided in Appendix 3. Members may also develop their own format, but it must include the above required information to enable Auditors to carry out a Verification Assessment.

3.6.4 Objective Evidence

- The Self Assessment Workbook provides an opportunity to identify and record Objective Evidence to support the degree of Conformance with the respective requirement. This includes tick boxes to record the source of the evidence as:
  - D which denotes Documents
  - O which denotes Observations
  - T which denotes Testimonial

Note that combinations of Objective Evidence can be ticked.

3.6.5 Observations and Findings

All findings and non-Conformances must be recorded on the Self Assessment Workbook. Findings must be clear, unambiguous and be supported by Objective Evidence.

Where Non-Conformances are identified, these should be addressed or made the focus of a Corrective Action Plan (as detailed in Table 2, section 2.4 of this Manual).

3.6.6 Responsibility

It is important that the Member indicates which role and/or function within the Member’s organisation is responsible for implementing the specific requirement. This information will be used by the Auditor to assist with the preparation, planning and conduct of the Verification Assessment.

Tick boxes are available to denote responsibility at:

- Head Office
- Business/Divisional
- Facility/Site
- None

Note that combinations of responsibility roles or functions can be ticked.
3.6.7 Performance Rating
The Self Assessment Workbook requires Assessors to tick the most appropriate performance rating of the Member’s business and/or Facilities being assessed for the respective requirement as follows:

- Conformance
- Minor Non-Conformance
- Major Non-Conformance
- Not Applicable

A definition for each performance rating is provided in section 2.2.2 of this Manual.

Note that valid reasons must be included for all requirements ticked as being ‘Not Applicable’. Reasons shall be validated by the Verification Assessment Auditors.

3.7 Section 3 – General Findings and Suggested Business Improvements
This section of the Self Assessment can be used to record additional information that may assist the Auditor for the Verification Assessment. It may also assist the Member for future Self Assessments. This section can include:

- General findings (related to but not a direct requirement of the Code of Practices and its Provisions)
- Details of planned changes to the Member’s business and practices such as expansions, acquisitions, divestments, etc, that may affect future Certification Scope.
- Details of identified Suggested Business Improvements.

A Suggested Business Improvement is:

A situation where the systems, procedures and activities are in Conformance with the relevant Provisions of the Code of Practices, but where an Assessor or Auditor determines that there is scope to improve these current processes. A Suggested Business Improvement is offered without prejudice, and its implementation is not mandatory. Subsequent Assessments shall not judge performance based on the implementation of a Suggested Business Improvement.

Suggested Business Improvements are purely for informative purposes only and may include simplification, removal of redundancy and duplication, streamlining and/or other enhancements that could result in a Continual Improvement of the Member’s operating performance.

3.8 Section 4 – Request for a Verification Assessment
When the Member is ready to begin a Verification Assessment, Section 4 of the Self Assessment is completed.

The Member’s RJC Co-ordinator will compile the Member’s Self Assessment with any accompanying documentation and send this information and request to an Auditor or auditing organisation that has been accredited by the RJC.

Members should only apply for a Verification Assessment if all of the following criteria are met:

- The information provided is true and accurate to the best knowledge of the Member preparing the Self Assessment.
- If identified, all Critical Breaches have been brought to the attention of the RJC Management Team and have been rectified.
- If identified, all Major Non-Conformances have been corrected or are subject to a Corrective Action plan. The Corrective Action Plan details the Corrective and Preventive Actions, and the means, resources and timeframe for their implementation.
- The information in the Self Assessment, Corrective Action Plan(s) (if applicable) and accompanying documentation is authorised for use by the Auditor to establish a program for the visit.

The Self Assessment Workbook/s shall be reviewed and endorsed by the Member’s senior management.

Self Assessments should NOT be submitted to the RJC Management Team. Members should submit their Self Assessment to their chosen Auditor(s).

Note that the cost of the Verification Assessment is borne by the Member.
3.9 Information for Members and Employees Preparing for the Assessment

The Verification Assessment will be conducted by professional Auditors accustomed to interviewing Employees from all levels of the Members business. To assist Employees and Contractors prepare for questions from Auditors, the following information is provided:

- Individual and group interviews can be conducted as per the audit plan
- Translators and support personnel can be present during the interviews.
- Quiet meeting rooms should be made available for interviews, however some interviews may be conducted in an open place.
- If requested by the interviewee and/or the Auditor, interviews can be conducted in a confidential manner without the presence of the management.
- Interviewees will be selected by the Auditor. Some will be identified on the Verification Plan (described in section 4.2.6) and others may be interviewed informally during the Auditor’s site inspection. In all cases, Auditors can only request an individual to participate in an interview, however a manager cannot prevent a willing interviewee from participating in the audit.
- Employees and Contractors must answer truthfully and accurately, including the situation where the interviewee is unsure of the response.
- Interviewees need to be aware that Auditors will record notes from the discussion. If the interview is to be recorded on audio or video media, then the interviewee must be informed and agree to this type of recording.
- Interviewees may be asked to describe and/or demonstrate how they carry out their day to day duties to enable the Auditor to observe practices. This is a normal method used by Auditors to verify testimonial or documented statements.
- No Employee or Contractor shall be reprimanded for their responses. If a response is factually incorrect, management shall communicate to all concerned (Employees, Contractors and Auditors) of this mistake, state the correct answer and provide evidence to verify the correct information.
- Although interviews are important, and participation should be encouraged, they are not compulsory. However, Auditors may note a situation where an Employee has refused to be interviewed.
- Report findings linked to Employee interviews remain anonymous.
- In certain locations, it may be a legal requirement that Employees be informed of this process in advance. Where it is not a legal requirement, it is nevertheless recommend that Employees be informed about the audit and the possibility of their being interviewed.

Members should also ensure that Employees and Contractors are familiar with the documentation and records likely to be used during the audit process. Documents may include the Member’s policies and procedures, and the records generated from the implementation of these procedures. Examples of documents and records are included in the evidence column of the Self Assessment Workbook (T003_2009). Additional examples are provided in Appendix 7.

Note that no copies of these documents and records can be taken by the Auditor unless they seek written permission from the Member. They will however, be reviewed by the Auditor whilst on site in order to assess Conformance with the Code of Practices.

Appendix 8 contains guidelines on how to conduct effective audits. Members and their Employees may find reading this information helpful to further understand the audit process.

3.10 Co-ordinating the scheduling of auditing

Where similar standards are to be audited at a Member and/or Facility, organising RJC System Verification to occur concurrently may reduce duplication and costs.

If feasible to do so, Members may choose to coordinate the Verification Assessment to coincide with the Verification for other Members that are located in close proximity, thereby providing the potential to equitably share the Auditors travel costs and expenses. Any such arrangement requires formal agreement between all respective Members and the Verification Auditors.
Further, Members and Audits may agree to concomitantly conduct the Verification Assessment with audits against other standards to which the Member subscribes (for example ISO14001 and/or OHSAS18001). Any arrangements shall be agreed directly between the Member and the Auditor and not involve the RJC. However, the integrity of the RJC Verification Assessment shall not be compromised and the Verification Assessment objectives must be met. In addition, Auditors must be suitably qualified and accredited to conduct these combined audits (i.e. carry Accreditation to assess Conformance to the RJC Code of Practice, and any other external standards).

3.11 Seeking assistance with the Self Assessment
Members who lack the capacity, resources or confidence to complete their Self Assessment can consider seeking the assistance of a competent consultant or advisor.

Note that any person involved in the Self Assessment cannot play a role in the Verification Assessment, as this represents a conflict of interest.

3.12 Feedback to the RJC Management Team
The RJC Management Team welcomes feedback on the Self Assessment process and resources. Input will be used to improve the RJC System.

Note: the RJC Management Team does not receive a copy of the Member’s Self Assessment.

The Self Assessment is sent directly to the appointed Auditor/s.
Step 2: Verification Assessment by Auditors

4.1 Introduction
In the second step towards Certification, an independent third-party Auditor accredited by the RJC conducts a Verification Assessment. The objective of the Verification Assessment is to verify or ‘check’ a Member’s own assessment of performance.

Verification Assessments are carried out when a Member initially seeks Certification of their practices, and then at the end of each respective Certification period in order to renew and maintain the Certification status.

To gather sufficient evidence for Verification, Auditors carry out on-site reviews of the Self Assessment at a representative selection of the Member’s facilities chosen by the Auditors. Auditors can potentially choose any Facility as part of the Verification Assessment. In addition, Auditors may select all or a sub-set of the relevant RJC Code of Practices and its Provisions to assess during the Verification visit.

Factors affecting the required time (and hence the cost) of a Verification Assessment is described in section 4.2.3.2.

The Verification Assessment uses the same set of questions and performance ratings as the Self Assessment Workbook. All Verification Assessments comprise the following:

- A preliminary desktop review of the Member’s Self Assessment and other related information;
- Definition of the Verification Scope – a set of the Member’s Facilities and Provisions to visit and assess respectively, that is representative of the nature, scale and impact of the Member’s business;
- Verification of the Member’s Self Assessment through on-site review of the selected practices and facilities within the Verification Scope.

There are three main stages for a Verification Assessment:

- Pre-Assessment Planning
- Assessment Conduct
- Post-Assessment Follow-up and Reporting

Further details regarding each of these stages are provided below.

4.2 Pre-Assessment Planning
Verification Assessments require clear direction and focus which means that planning is vital to ensure the success of the process. Planning and pre-assessment activities include the following steps:

1. Initial Communication with the Member
2. Gather and Review Information
3. Define the Scope and Timing of the Audit
4. Identify the Audit Team
5. Document the Audit Plan
6. Finalise Details with the Member

4.2.1 Initial Communication with the Member
Prior to the Assessment a range of details need to be discussed and confirmed with the Member. This includes availability of documentation, pre-assessment visits (if possible and agreed) and on-site timetable (itinerary) information. A considered approach must be taken, as Members not accustomed to formal assessments may well be apprehensive. The formality of such communication varies dependent upon the nature and objectives of the Assessment, local and cultural customs, and familiarity of the Auditors with the Member’s business.

To establish positive working relationships, phone conversations and e-mails can be utilised to establish initial agreements with the Member’s concerning the Verification Scope and timing. Formal notification confirming the actual arrangements made are discussed in pre-assessment planning step 6 (section 4.2.7).

Factors to consider in initial contacts by the Auditors with the Member include:

- Logistics involved
- Date and timing of Assessment
- Agreement on Verification Scope and objectives
4.2.2 Gather and Review Information

4.2.2.1 Documentation

For an effective Verification Assessment, the Lead Auditor should endeavour to gain as much understanding of the Member’s business as possible by obtaining access to and reviewing relevant documentation. As a minimum, the documentation must include the completed Member Self Assessment. Other useful documentation includes, but is not limited to:

- Organisational charts outlining structure, responsibilities and authorities
- Description of the products and processes including:
  - Infrastructure, facilities and equipment
  - Work hours and shifts
- Descriptions of the applicable legislation
- Reviews of previous assessments
- List of current issues including:
  - Interested parties including neighbours and other stakeholders
  - Risk profile of the Member including environmental and workplace Health and Safety issues

The Lead Auditor should be aware of both the intent and practical application of relevant criteria documents including relevant regulations, standards, policies, contracts, procedures, specifications and guidelines.

General information relating to the activities or functions to be audited should also be obtained and reviewed prior to the Assessment. While it is ideal to review such Member documentation prior to the Assessment, it is not uncommon that Auditors need to exercise flexibility and adapt to situations where some documentation is not available until on site.

While much of this documentation may not always be available prior to the Assessment, the Member should be aware that access to such documentation will be an essential part of the onsite Verification Assessment activities.

4.2.2.2 Pre-Assessment Visits

Some Members may request and benefit from a pre-assessment visit to some or all of the Member facilities. The purpose of such a visit is to obtain sufficient information on the Member business including its size, complexity and scope (geographical, workforce and process range) to allow the Verification Assessment to be planned as effectively as possible. However, this is not mandatory and should only take place if agreed to by the Member organisation.

4.2.3 Define the Verification Scope and Time Requirements

4.2.3.1 Verification Scope

The Verification Scope defines the extent and boundaries of the Verification Assessment and is determined by the Auditors. The Verification Scope includes the selection of Facilities and Provisions in the Code of Practices to be reviewed during the Verification Assessment.

Guidance is provided on the time (in Assessment person-days) that should be required to achieve this, according to the size, complexity and location of the Member’s business (see Table 4 and Figure 5).

To define the Verification Scope, the Lead Auditor will select Provisions from the Code of Practices to assess that s/he considers to be the most relevant, taking into consideration the nature, scale and impact of the business.

Thus the Verification Scope should be determined so as to:

- Take account of Risk and relevance using available information e.g. the Member’s Self Assessment, public reports, legislative frameworks, the results of previous assessments, and any existing Certifications.
- Fit within the recommended time limits, or as otherwise negotiated (see section 4.2.3.2).
- Obtain the necessary Objective Evidence to make a recommendation on Certification to the RJC Management Team.
For the first Verification Assessment, Auditors shall review records and evidence from the previous 12 months. (Records and evidence older than 12 months may be provided at the discretion of the Member).

At re-Certification, Auditors can review records and evidence for the previous 1 or 3 years, depending on the Certification validity.

- Be documented in a Verification Plan (audit plan) detailing which Provisions are to be assessed at which Facilities (see section 4.2.6).

The scope of the Verification Assessment for Members with Mining Facilities must consider the following:
- Facilities in the exploration to pre-commissioned stages of the mine lifecycle are not visited as part of the Verification Assessment. Business practices in these stages of the mine lifecycle can be evidenced, where necessary and appropriate, by desktop review of policies, systems, procedures and processes.
- A Mining Facility is excluded from RJC Certification if riverine tailings disposal is used at that Facility. However all other COP provisions apply at that Facility and it can be included in the Verification Scope.
- A Mining Facility is not included in the Certification Scope if there is no saleable Diamonds or Gold, for example where Gold is a trace element in mineral concentrate, process by-products, or wastes.
- A Mining Facility producing multiple commodities or products, including Diamonds and/or Gold, can be excluded from the Certification Scope if there is a parallel certification system applicable to other commodities produced by the Mining Facility that is evaluated by the RJC to be technically equivalent to the RJC system.
- Provisions 2.11.2 and 2.11.3 do not apply retrospectively beyond the previous 12 month period of initial certification.
- Provisions 3.5.1 and 3.5.2 do not apply retrospectively to Mining Facilities in operation before World Heritage or protected area status is designated.
- Provision 4.4 does not apply retrospectively to impact assessments for existing Facilities formally commenced prior to 2010.

Auditors should place a high value on existing Certifications under systems which have equivalent requirements to Provisions of the Code of Practices. The RJC will provide further guidance on equivalence between the Code of Practices and recognised Certification systems, where applicable.

The Verification Scope should encompass some or all of the following activities, for some or all of the Code of Practices:
1. A review at a head office or at a central location of the Member’s common and company wide systems and procedures.
2. A review of divisional or Facility specific systems and procedures.
3. Verification of the implementation of those specific systems and procedures at a selected set of target locations, based on the nature, scale and impacts of the Member’s business practices.

The Verification Scope must be sufficient for the Auditor to establish confidence that the Member can be recommended for Certification to the RJC Management Team.

4.2.3.2 Time and Cost Requirement
A critical consideration in determining the Verification Scope is an estimate of the time and cost required to conduct an effective Verification Assessment.

The cost is a direct function of the time required and the rates charged by the Auditor. As the rates vary based on the market and are subject to commercial arrangements between the Member and the Auditor, this section focuses on guidance to estimating the time required to conduct a Verification Assessment.

As a rule of thumb, the time allocated for each stage of the Verification Assessment should be:
• 30% of time devoted to planning and preparation;
• 50% to the on-site component of the Assessment; and
• 20% for post assessment follow-up and reporting.

By this rule of thumb, the total time required by the Auditor for the whole Verification Assessment is likely to be double that spent on-site at the Member’s premises.
These proportions may vary based on the nature and complexity of the Verification Assessment.

The following table provides guidance on the number of on-site Assessment (person) days that should be expected, based on the number of Employees and permanent Contractors working for the Member business.

The guidance in this section should not be taken as a formula and does not stipulate minimum and maximum times. It is intended to provide a framework to be used to determine the time required for the on-site component of the Assessment, taking into account the specific nature of the Member business to be assessed.

Table 4: Guidance Regarding Required Time On Site during the Verification Assessment.

<table>
<thead>
<tr>
<th>Number of Personnel working in Facilities included in the Certification Scope</th>
<th>Base Time (Assessment person Days)</th>
<th>Additive Factors (Business Complexity &amp; Location)</th>
<th>Additive Factors</th>
<th>Additive Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Local Operation and Simple Processes</td>
<td>Local Presence and Complex Processes</td>
<td>Regional/Global Operation and Simple Processes</td>
</tr>
<tr>
<td>1 – 25</td>
<td>2</td>
<td>-1</td>
<td>+1</td>
<td>+2</td>
</tr>
<tr>
<td>25 – 100</td>
<td>3</td>
<td>-1</td>
<td>+1</td>
<td>+2</td>
</tr>
<tr>
<td>100 – 500</td>
<td>5</td>
<td>-1</td>
<td>+2</td>
<td>+3</td>
</tr>
<tr>
<td>500 – 1000</td>
<td>6</td>
<td>-2</td>
<td>+3</td>
<td>+4</td>
</tr>
<tr>
<td>1000 – 5000</td>
<td>8</td>
<td>-2</td>
<td>+4</td>
<td>+6</td>
</tr>
<tr>
<td>5000 – 10,000</td>
<td>10</td>
<td>-3</td>
<td>+5</td>
<td>+7</td>
</tr>
<tr>
<td>10,000 – 15,000</td>
<td>12</td>
<td>-4</td>
<td>+6</td>
<td>+8</td>
</tr>
<tr>
<td>15,000 – 20,000</td>
<td>14</td>
<td>-5</td>
<td>+7</td>
<td>+9</td>
</tr>
<tr>
<td>&gt;20,000</td>
<td>&gt;14</td>
<td>&gt;5</td>
<td>&gt;7</td>
<td>&gt;9</td>
</tr>
</tbody>
</table>

Table 4: Illustrates the potential additive factors on Auditor time based on the nature, scale and impacts of the Member’s business practices.

* The number of part time employees should be treated as fulltime equivalents based on the number of hours worked as compared with full time employees.

* Additive factors calculated proportionally.

Figure 5: Business organisation types and process complexity factors which affect the Verification Assessment times.
The horizontal and vertical axes in Figure 5 (Process/System Complexity and Organisational Structure & Location, respectively) illustrate a continuum spread rather than discrete distinction between business types. For instance, the Process/System Complexity continuum can include Members with:
- Limited product line and/or simple process (e.g. retail)
- Multiple products and varied process operations (e.g. Diamond trading or Jewellery manufacturing)
- Complex, unique and or significant operations (e.g. Mining, manufacturing, etc)

Similarly, the Organisational Structure & Location continuum can include Members with:
- Local presence (usually within a city or locality)
- Regional presence (typically within a country or several countries)
- Global (typically multinational presence)

Additional factors to be considered when estimating the time (and cost) requirements include:
- Travel time
- Onsite inductions
- Regular meetings with the Members and other Auditors.

4.2.4 Select the Verification Assessment Team

If a Verification Assessment is to be undertaken by a team of two or more people, the Lead Auditor must appoint appropriate personnel to the Verification Assessment team.

The size and composition of the Verification Assessment team will be influenced by a number of factors including:
- Verification Scope
- Availability of qualified Auditors
- Geographic location of the Member
- Requirement for specialist knowledge
- Language considerations
- Cultural considerations (e.g. language, country or regional social familiarity, religion, gender, etc).

All Auditors must:
- Be independent
- Be Accredited as trained and appropriately qualified
- Have knowledge of practices, processes and equipment typical of the Member’s business.

Note that any person (including personnel, external consultants or advisers) involved in the Self Assessment cannot be an Auditor in the Verification Assessment, as this represents a conflict of interest.

The conduct of effective audits requires effective Auditors. Whilst the style of auditing may differ from one Auditor to another, there are common elements of competency that all Auditors should possess. These can be categorised as knowledge and skills gained through education, training and experience and personal attributes which are exercised through exposure to a range of circumstances.

4.2.5 Principles of Verification

For Verification Assessments to be effective, Auditors must adopt the following five principles as identified by ISO 19011:2002.

1. Ethical Conduct: the foundation of professionalism.
   Trust, integrity, confidentiality and discretion are essential to assessments and audits.

2. Fair presentation: the obligation to report truthfully and accurately.
   Assessment findings, conclusions and reports reflect truthfully and accurately the Member’s practices. Significant obstacles encountered during the Assessment and unresolved diverging opinions between the Auditors and the Members are reported.

3. Due professional care: the application of diligence and judgement in assessments.
   Auditors exercise competence and care in accordance with the importance of the task they perform and the confidence placed in them by the Member and the RJC.

4. Independence: the basis for the impartiality of the Assessment and objectivity of the Assessment conclusions.
Auditors are independent of the activity being assessed and are free from bias and conflict of interest.

5. Evidence based approach – the rational method for reaching reliable and reproducible conclusion in a systemic Assessment process.

Auditors maintain an objective state of mind throughout the Assessment process to ensure that the findings and conclusions will be based only on the Objective Evidence. Objective Evidence is verifiable. It is based on samples of the information available, since an Assessment is conducted during a finite period of time and with finite resources. The appropriate use of sampling is closely related to the confidence that can be placed in the conclusions.

The fundamental objective of these principles being applied is that different Auditors working independently from one another should be able to reach similar conclusions in similar circumstances.

4.2.6 Develop the Verification Plan

Once the Lead Auditor has established the Verification Scope, time requirements and has selected the Verification Assessment team, the assessment activities need to be carefully documented and agreed with the Member.

A Verification Plan, also at times referred to as an “audit program” or “audit plan”, is used to outline what activities will be reviewed, by whom and when, in which organisational areas and involving which personnel. Typically the layout of such timetables is in a table format with the expected times for activities being scheduled.

The Verification Plan should include the following information:

- Assessment objectives and scope
- Dates, places and times of Assessment
- Name(s) of Auditor(s)
- Identification of the Member’s business practices and the facilities to be assessed.
- Expected time and duration for each major activity.
- Personnel (or functional roles) to be interviewed. The number individuals required for interviewing will vary based on total number of Employees, Risks and nature and scale of activities.
- Meetings scheduled to be held with Member business management, other Employees and/or Contractors and nominated RJC coordinator.
- Time to revisit and review information.
- Times for miscellaneous activities such as inductions and breaks.
- Likely documentation to be reviewed,

The Verification Plan should be designed to be flexible enough to both permit changes in emphasis based on information gathered during the Assessment and to effectively utilise available (Member’s and Auditor’s) resources.

The Verification Plan should be planned logically, to create minimum disruption to the normal business processes and yet build a sequence of Objective Evidence necessary to verify the degree of Conformance with the RJC Code of Practices.

Appendix 4 contains a template Verification Plan.

4.2.7 Finalise Details with the Member

Once the plan is complete, the Lead Auditor shall contact the Member’s RJC Coordinator and confirm arrangements and details for the Verification Assessment. These details include:

- Assessment objectives and scope
- Date and time of Assessment
- Name(s) and qualifications of Auditor(s)
- Verification Plan
- Availability of interviewees
- Availability of Objective Evidence
- Invitation to senior management to attend both entry and exit meetings
- Request for guides to be available to accompany the Auditor(s)
- Request for office facilities including space and meeting rooms to be made available to conduct interviews and
for the Auditors to review information

- Request to advise all staff of Assessment arrangements
- Requirements for any special personal protective equipment for the Auditors visiting facilities
- Time requirements for inductions and introductions.

The Verification Plan must be presented to the Member at least two weeks prior to the commencement date of the Verification Assessment. This will provide the Member with an opportunity to prepare for the assessment, and suggest an alternative timing or order of proceedings such that it minimises disruption to the Member’s business. However, the Verification Scope and objectives set by the Auditor cannot be changed.

Note that a Member may request the Auditor(s) to assess facilities beyond those selected by the Auditor and/or request that all sections of the Code of Practices are included in the Verification Scope. This request is supported by the RJC but it is not a requirement for Certification and shall be conducted at the Member’s discretion.

4.3 Conducting the Verification Assessment

4.3.1 Overview

The on-site activities during the Verification Assessment may involve all or some of the following stages:

- Opening meeting
- Assessment which involves:
  - Obtaining Objective Evidence
  - Interviewing (listening, questioning, observing)
  - Notes & record taking
- Evaluation of the results
- Closing or Exit Meeting

4.3.2 Opening Meeting

Upon arrival, the first activity is an opening meeting. The purpose of an opening meeting is to:

- Introduce the Verification Assessment team to the representatives of the Member business;
- Confirm briefly the purpose and scope of the Assessment;
- Review the timetable and agenda;
- Provide a short summary of the methods and procedures to be used to conduct the Assessment;
- Arrange for guides to accompany the audit team, as required;
- Explain the confidential nature of the Verification Assessment process;
- Answer questions from the Member’s personnel present at the meeting.

The names of those present should be recorded.

4.3.3 The Verification Assessment Process

The Auditor(s) commence(s) the process of obtaining and evaluating Objective Evidence, which will involve inspections, Verifications, or a review of activities, to determine whether the Member business practices comply with the requirements of the relevant Provisions of the Code of Practices.

The Auditor(s) will use the Verification Plan to guide the assessment process. The experienced Auditor may not necessarily follow a step-by-step approach but will have the ability to look at all of these aspects of the system at once.

The Verification Assessment addresses the same set of requirements and performance ratings as the Self Assessment. The Auditor(s) must record specific details of all Objective Evidence collected. Information obtained can include hard or softcopy documentation, forms, records, verified statements of fact or observations relevant to the Assessment.

It is important to understand the actual process of gathering Objective Evidence involves interaction with people as well as technical skill. Strong communication, questioning, listening and observation skills become ineffectual if the wrong information is gathered, and poor checklist utilisation means inadequate records for evaluation, conclusion and report writing.
The Auditor must ensure that all observations and information pertinent to the Assessment is clearly and unambiguously recorded. This evidence shall be used to evaluate the performance of the Member business.

Although Auditors that conduct Verification Assessments shall be suitably competent and qualified, Appendix 8 contains general guidelines for conducting effective audits.

4.3.4 Evaluation of the Results
Upon completion of the Verification Assessment, records, verified statements of fact and other information relevant to the Assessment are evaluated. The results of the evaluation of such evidence against criteria are reported as the Verification Assessment findings.

The Auditor(s) analyse any apparent non-Conformances or adverse conditions to ensure they are valid findings. Against each Provision identified under the Verification Plan, the Auditor(s) must determine if the level of performance is acceptable. Objective evidence of departure from the Member’s approved procedures or variations in expected process outcomes are considered as valid justification for a finding of nonconformity. Such evidence needs to be recorded and brought to the attention of the Member.

The evaluation uses the same performance rating as that used in the Self Assessment as defined in section 2.2 of this Manual. The three possible performance ratings for each question are:

- Conformance
- Minor Non-Conformance
- Major Non-Conformance

Based on their experience, Auditor(s) may also offer the Member recommendations and identify Suggested Business Improvements (see definition in the Glossary).

Suggested Business Improvements are purely for informative purposes only, their implementation is not mandatory, are offered without prejudice, and may be at the request of the Member. Auditors offer such improvement opportunities freely and openly, however the Member is under no obligation to accept and/or implement them. Subsequent Verification Assessments shall not judge performance based on the implementation of these Suggested Business Improvements.

4.3.5 Closing or Exit Meeting
A closing or exit meeting to verbally present preliminary findings and recommendations to the Member shall be conducted before the Auditors depart.

The meeting should be used as a final opportunity to:
- Seek acknowledgement and understanding from the Member regarding the findings
- Answer any questions
- Discuss misunderstandings and/or clarify points of difference
- Provide an overview of the follow-up steps
- Communicate that the Auditor shall issue a report at a later date which documents the overall findings and recommendations
- Explain that the Auditors provide a Certification Recommendation to the RJC concerning Membership status; and Members or Auditors should not pre-empt the RJC decision.

The names of those present should be recorded.

4.4 Post-Assessment Follow-up and Reporting
4.4.1 Corrective Actions for Assessment Findings
4.4.1.1 General Requirements
The Member is responsible for determining and initiating corrective and preventive actions needed to rectify any non-Conformances and to prevent those non-Conformances from recurring.
The nature of the Corrective Actions, including milestones, may be negotiated and agreed between the Lead Auditor and the Member. The RJC Management Team may enter into discussions about the nature and timing of Corrective Action, if Members and Auditors cannot agree.

**4.4.1.2 Corrective Action Plan for Major Non-Conformances**

Members must develop appropriate Corrective Actions for all Major Non-Conformances identified during the Verification Assessment. These must be documented in a Corrective Action Plan and submitted to the Lead Auditor within 1 month of the Verification Assessment. The Corrective Actions must address the root cause of the non-Conformance to prevent a recurrence of the finding. Actions must be realistic, ‘fit for purpose’ and wherever possible, completed within the 1 year Certification period. In situations where actions required to treat the underlying cause of the Major Non-Conformance require more than one year, interim short term Corrective Actions must be established. These must mitigate the effects of the events which lead to the non-conforming finding, until the long term and more permanent solution can be implemented.

A suggested template for a Corrective Action Plan is provided in Appendix 2.

When approving the Corrective Action Plan/s, the Lead Auditor must take into account and verify the following factors:

1. **Specific**: Is the Corrective Action clear and unambiguous?
   Does it address the underlying cause of the Major Non-Conformance?

2. **Measurable**: Can the implementation of the action be monitored and measured?

3. **Achievable**: Does the action have clearly assigned responsibilities and the means for implementing the action?

4. **Realistic**: Is the Corrective Action realistic and fit for purpose, given the nature of the non-Conformance?
   Does the Member have the capacity (resources, allocated funding, etc) to implement the Corrective Action?

5. **Timely**: Is the time frame for completing the Corrective Action within the Certification period?
   Preference should be given to ensuring all Corrective Actions are completed within the 1 year Certification period. However, the Lead Auditor may approve Corrective Actions that require up to 3 years where the action involves capital works requiring long term external approvals. As noted above, in situations where Corrective Actions require more than 1 year to implement, the Lead Auditor must ensure that there are interim short term corrective measures established to mitigate the effects of the events which lead to the Major Non-Conformance.

6. **Effective**: Based on the known operating environment, will the action be effective in addressing the Major-Non-Conformance, and prevent its recurrence?

Where a conflict or dispute arises regarding the approval of a Corrective Action Plan, the RJC Management Team may enter into discussions about the nature and timing of Corrective Action.

**4.4.2 Reporting**

Lead Auditors coordinate the collation of all findings and information, and then prepare two reports for the Member and the RJC Management Team, respectively as follows:

- **Member Verification Report**
- **Certification Recommendation**

**4.4.2.1 Member Verification Report**

Auditors shall prepare a comprehensive report, including the scope, coverage, and overall assessment of the Members Conformance with the relevant Provisions in the RJC Code of Practices, the effectiveness of the Member’s practices, and offer conclusions and recommendations.
Member Verification Reports may include any general observations that the Auditor(s) considers to be constructive, or opportunities to improve the Members business systems and practices.

Reports are structured to provide a summary overview followed by the detail of the findings. The report should contain the following information, as applicable:

- Executive summary
- Background and purpose
- Assessment team qualifications and auditing responsibilities
- Certification Scope as defined by Member
- Verification Scope including the Code of Practices\textsuperscript{3} assessed and Facilities visited
- Personnel interviewed and documents reviewed
- Details of levels of cooperation including any conflicts, disputes and disagreements
- Summary of the Verification Assessment method and any limitations
- Detailed log of all non-Conformances
- List of Suggested Business Improvement opportunities if requested by the Member
- Detailed log of any Corrective Action Plans (if any) that have been agreed between the relevant Auditors and Member to address non-Conformances
- Noteworthy achievements and positive initiatives
- Certification recommendation
- Concluding statement
- Appendices & supporting documentation.

A suggested table of contents for the Member Verification Report is available in Appendix 5.

If requested by a Member, the Auditors may prepare and issue a brief and concise Facility Assessment Report to some or all facilities visited.

The Lead Auditor is responsible for ensuring the Report is accurate and that it is completed within a suggested 2 – 3 week timeframe (or within a period as agreed with the Member) from the final date of the Verification Assessment. The Report (and supporting documentation) shall be issued to the nominated Member representative in a language and format that is understood by the Member’s representatives and management.

This detailed report must not be submitted to the RJC Management Team.

It is recommended that a draft copy of the report be initially forwarded to the Member for their agreement/ comment. Unresolved matters and conflicts can be referred to the RJC Management Team for independent resolution. Once the factual content is agreed, the report can be issued as a final version.

At this point, the Lead Auditor reports to the RJC on their recommendation regarding Certification of the Member.

4.4.2.2 Certification Recommendation & Summary Report

The Lead Auditor shall prepare a summary report to the RJC summarising the results of the Assessment:

- Certification Recommendation Statement
- Assessment team qualifications and auditing responsibilities
- Certification Scope as defined by Member
- Verification Scope including the Code of Practices’ assessed and Facilities visited
- Summary of the Verification Assessment method and any limitations
- Summary of findings
- Noteworthy achievements and positive initiatives
- General comments and feedback to RJC
- Details of levels of cooperation including any conflicts, disputes and disagreements

\textsuperscript{3} The Verification Scope needs to state the version of the Code of Practices used in the assessment criteria.
The information included in the report should be sufficient:

- To support the Lead Auditor’s Certification Recommendation
- For the RJC Management Team to take an informed decision on endorsing the Certification recommendation
- For traceability to be available in the event, for example, of a dispute, peer review or for planning for the next assessment.

A suggested table of contents for the Certification Recommendation and Summary Report is available in Appendix 6.

The Certification Recommendation and Summary Report to the RJC Management Team must be in the English language.

In deciding on the Certification Recommendation, the Lead Auditor shall consider:

- The effectiveness of the Member business Management Systems and procedures in meeting the requirements of the RJC Code of Practices;
- The performance of the Member business operation and activities in relation to the principles and values of the RJC Code of Practices;
- The number and seriousness of the individual non-Conformances found during the Verification Assessment;
- Positive improvements in performance, and major achievements and milestones that relate to a specific RJC Code of Practices Provision;
- The capacity to clearly demonstrate commitment to Continual Improvement.

The following figure illustrates the decision process for Certification based on the outcomes of the Verification Assessment:

![Verification Assessment Outcomes]

**Figure 6: Verification Assessment Outcomes.**

The Lead Auditor can only recommend that Certification be granted to a Member if:

- adequate performance is established; and
- no non-Conformances are found or where there are non-Conformances, these are rated as Minor; and
- All Major Non-Conformances have been addressed by an approved Corrective Action Plan with actions implemented or underway; and
- There are no Critical Breaches.

The Certification Recommendation and Summary Report shall include the following Statement:

---

4 See section 4.4.1.2 for guidance on approving Corrective Action Plans to address Major Non-Conformances.
Based on the scope and findings of the Verification Assessment, the sites visited and the available information provided by the Member:

☐ The Auditors recommend that the RJC Management Team grant RJC Certification to the Member valid for 3 years.

☐ The Auditors recommend that the RJC Management Team grant RJC Certification to the Member valid for 1 year.

☐ The Member is not ready for RJC Certification due to the identification of Major Non-Conformance(s) which are being addressed by the Member.

☐ Critical breaches have been identified and the RJC Management Team should initiate disciplinary procedures.

The Auditors confirm that:

✔ The information provided by the Member is true and accurate to the best knowledge of the Auditor(s) preparing this report.

✔ The findings are based on verified Objective Evidence relevant to the time period for the assessment, traceable and unambiguous.

✔ The scope of the assessment and the method used are sufficient to establish confidence that the findings are indicative of the performance of the Member’s defined Certification Scope.

✔ The Auditor(s) have acted in a manner deemed ethical, truthful, accurate professional, independent and objective.

The Summary Report must log which Provisions relate to the Major Non-Conformances. If the agreed timelines are not met by a Member, the RJC may commence disciplinary proceedings.

The Lead Auditor shall recommend that Membership be the subject of disciplinary proceedings if a Critical Breach is identified. The Summary Report or interim communication must identify the nature of the Critical Breach and provide Objective Evidence.
Step 3: RJC Certification

On receipt of the Certification Recommendation and Summary Report, the RJC will initiate the Member Certification process. Steps included in the process include:

- Confirm the competence of the Auditor(s) against the accredited Auditor register.
- Confirm that the Member’s membership of the RJC is in good standing in all respects;
- Review the summary report and confirm that the findings are consistent with the instructions to Auditors in the Assessment Manual.
- Set the terms of the Certification validity, including the Certification Scope and the date Certification becomes effective and when it expires (i.e. the date for re-assessment).
- Issue formal documentation and information to the Member, including a unique Certification identification number unambiguously identifying the Certification status, and the licence conditions for use of the RJC logo.

Certified Members will be listed as such on the RJC website. They will be entitled to use the RJC Certification logo under licence from the RJC.
Step 4: Periodic Performance Evaluation

6.1 Member Periodic Performance Evaluation
The Member is encouraged to maintain a systematic approach and periodically evaluate its performance in relation to the RJC Code of Practices. This can be achieved by:

- Using selected sections of the Assessment Questions to conduct internal audits;
- Using the RJC Codes and the Self Assessment to review the effect that any changes to the Member’s practices and/or systems may have on the degree of Conformance with the RJC principles and values;
- Ensuring that Corrective Actions are implemented in a timely manner and as stated in the related Corrective Action Plan(s);
- Checking the effectiveness of the Corrective Actions after the completion of the actions.

The Member will have access to guidance, tools and information developed by the RJC which can help the Member evaluate its performance.

6.2 Follow-up Focus Visits
Following the initial Verification Assessment, a follow-up visit may be carried out over the 3 year Certification Period (this will not occur within the 2009-2012 initial implementation period). Such a visit may be scheduled to review progress against Corrective Action plans or as part of a coordinated set of focus visits to assist Members continually improve performance in a particular area.

Depending on the nature of the non-Conformances identified during the initial Verification Assessment, follow-up reviews of progress against milestones may need to be carried out by the accredited Auditors.

Follow-up visits ensure that the Member maintains and operates its systems and procedures in accordance with the RJC Code of Practices.

Any non-Conformances identified during these follow-up visits shall be reported as per the reporting processes followed during the Verification Assessment.

Importantly, performance improvements and noteworthy achievements can be reported to enable the broader RJC Membership to benefit from any learning.
Step 5: Re-Assessment and Continual Improvement

The Certification is valid for a 3 year period (or one year for those Members with Major Non-Conformances). At the end of this period, Members are required to initiate a Certification Re-Assessment process. This process essentially repeats Steps 1-4 and incorporates Continual Improvement processes, as illustrated in the figure below:

![Diagram](image.png)

This ongoing re-assessment process demonstrates to stakeholders and Jewellery consumers that the industry is committed to promoting responsible ethical, social and environmental practices throughout the Jewellery supply chain. A commitment to Continual Improvement will help to enhance consumer confidence.

By working responsibly, improving performance and establishing sustainable business practices, the industry, its Members, stakeholders and the greater community will benefit economically, environmentally and socially.
References


ISO/IEC 17011. General requirements for Accreditation bodies accrediting conformity assessment bodies.


ISO 19011. Guidelines for quality and/or environmental Management Systems auditing.

SA 8000 Social Accountability Standard.
## Appendix 1: Examples of Conformances and Non-Conformances

<table>
<thead>
<tr>
<th>Performance Rating</th>
<th>Sample Code of Practices Provision</th>
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</thead>
<tbody>
<tr>
<td><strong>Business Ethics</strong></td>
<td><strong>Human Rights and Social Performance</strong></td>
</tr>
<tr>
<td>1.1.1 Members will prohibit Bribery in all business practices and transactions that are carried out by them, or on their behalf by Business Partners. They will not offer, accept or countenance any payments, gifts in kind, hospitality, expenses or promises as such that may compromise the principles of fair competition or constitute an attempt to obtain or retain business for or with, or direct business to, any person; to influence the course of the business or governmental decision-making process.</td>
<td>2.1.1 Members shall at all times respect the fundamental human rights and the dignity of the individual, according to the United Nations Universal Declaration of Human Rights.</td>
</tr>
</tbody>
</table>
| **Conformance** | • No evidence of bribery based on review of documentation, observations and interviews with Employees and Business Partners. | • No evidence of breach with human rights including:  
  – Child labour  
  – Forced labour  
  – Discrimination  
  – Excessive working hours  
  – Mis-treatment and/or abuse. | • Environmental Risks associated with the Members activities, products and services are identified, managed and minimised through well understood and practised systems and controls. | • Risk assessments conducted on activities, products and services related to significant Business Partners. Significance is explicitly defined by the Member and includes those Contractors, customers, Suppliers and Partners that have the potential to compromise the Members reputation and capacity to comply with the Code of Practices. |
| | • Members have Risk assessed transactions with potential for bribery. | • Members have reviewed the UN Universal Declaration of Human Rights as it applies to their business and communicated the relevant principles to all Employees and relevant Contractors. | • Compliance with environmental applicable law. | • Members have established management controls based on the outcomes of the Risk assessment. |
| | • Have implemented controls including procedures and checks. | • No evidence of detrimental and uncontrolled environmental impacts. | • Controls are understood by relevant Employees and significant Business Partners. | |
| | • Controls are regularly communicated to all Employees, relevant Contractors and agents acting on behalf of the Member. | | |
| | • Independent Verification to ensure procedures are properly implemented. | | |
| | • All areas of potential conflicts of interest are disclosed and openly managed. | | |

*Continued next page*
## Appendix 1: Examples of Conformances and Non-Conformances

<table>
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<tr>
<th>Performance Rating</th>
<th>Sample Code of Practices Provision</th>
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<tbody>
<tr>
<td></td>
<td><strong>Business Ethics</strong></td>
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</table>
| Conformance              | Members use their best endeavours (i.e. act honestly, reasonably and make a positive effort), commensurate with their ability to influence, (based on the nature of the relationship) to promote responsible Jewellery practices among their business partners. This may include:  
  - Providing Business Partners information about the RJC and the Code of Practices  
  - Sharing of information relating to ethical, human rights, social and environmental performance.  
  - Working with the business partner to improve performance of both the Members’ and business partners’ practices. |                                                                                                      |
| Minor Non-Conformance    | No evidence of bribery, however:  
  - However, Risk assessment and controls do not capture all transactions especially for locations where bribery is known to exist.  
  - Areas of potential conflicts of interest. | No evidence of a breach against the UN Universal Declaration of Human Rights, however:  
  - UN Declaration on Human Rights (UND HR) has not been assessed for applicability and relevance especially in locations known for HR issues; or  
  - Minor concerns raised internally regarding HR issues that have not been addressed.  
  - System regarding HR have been developed but not implemented (i.e. those affected by the systems have no awareness of the systems) | Risk assessments, management and operating systems do not capture full scope of Members business (that relates to the Diamond and Gold Jewellery supply chain). For instance:  
  - Some Facilities not captured by these systems  
  - Not all detrimental impacts have been identified or managed. | Risk assessments do not apply to all significant Business Partners (as defined by the Member).  
  - The Member has developed systems about how to apply best endeavours and influence its identified significant Business Partners, but these systems are not fully implemented. For instance, not all of its identified significant Business Partners have received information regarding responsible ethical, human rights, social and environmental practices. |

*Continued from previous page*
## Appendix 1: Examples of Conformances and Non-Conformances

<table>
<thead>
<tr>
<th>Performance Rating</th>
<th>Sample Code of Practices Provision</th>
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<tbody>
<tr>
<td>Business Ethics</td>
<td>Human Rights and Social Performance</td>
</tr>
<tr>
<td>Major Non-Conformance</td>
<td>• Evidence of bribery and corruption</td>
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<td>• Clear situations of conflict of interest such as a Member of senior management having financial interests in a Contractor actively engaged to provide goods and/or services to the Member.</td>
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<td>• Evidence of human rights violations obtained by:</td>
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<td>– interviews with Employees and relevant Contractors.</td>
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<td>– Observations of working conditions, etc</td>
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<td>– Enforcement or non-compliance actions issued by regulators.</td>
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<td>• Management has ignored the UNUDHR, and/or not developed systems especially where Risks regarding HR are known.</td>
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<tr>
<td>Environmental Performance</td>
<td>• There are no or ineffective systems to manage detrimental environmental impacts.</td>
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<td>• Non-compliance actions issued by regulators and no plans to rectify the non-compliance.</td>
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<td>• Uncontrolled sources of off-site contamination resulting in significant impacts to ecosystems, uncontrolled impacts to rare/priority flora &amp; fauna, and/or widespread contamination of air, land and waterways.</td>
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<tr>
<td>Management Practices</td>
<td>• The Member has not identified its significant Business Partners, nor conducted a Risk assessment of the relationship with these Business Partners.</td>
</tr>
<tr>
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<td>• The Member has made no attempt to communicate or promote responsible Jewellery practices.</td>
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</table>
Appendix 2: Sample Corrective Action Plan Template

<table>
<thead>
<tr>
<th>Reference</th>
<th>Finding and recommendation</th>
<th>Priority (High/Medium/Low)</th>
<th>Corrective and/or Preventive Action</th>
<th>Due Date</th>
<th>Responsibility</th>
<th>Status (Open/Closed)</th>
<th>Effectiveness Verification/Sign Off</th>
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# Appendix 3: Alternative Self Assessment template

This is an alternative template to the Self Assessment Workbook that can be further adapted by a Member or an Auditor. Members may also develop their own format, but it must include the required information to enable Auditors to carry out a Verification Assessment.

<table>
<thead>
<tr>
<th>Member:</th>
<th>Facility:</th>
<th>Assessors Name:</th>
<th>Date:</th>
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<table>
<thead>
<tr>
<th>Code of Practice (Rev No:___):</th>
<th>Provision Ref:</th>
<th>Requirement No:</th>
<th>Responsibility for:</th>
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<thead>
<tr>
<th>Objective Evidence:</th>
<th>□ Documentation</th>
<th>□ Observation</th>
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<tbody>
<tr>
<td>Testimonial</td>
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<tr>
<th>Observations and Findings:</th>
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<table>
<thead>
<tr>
<th>Performance Rating:</th>
<th>□ Conformance</th>
<th>□ Minor Non-Conformance</th>
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<tbody>
<tr>
<td></td>
<td>□ Major Non-Conformance</td>
<td>□ Not Applicable</td>
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<th>Reason:</th>
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Page ___ of ___
Appendix 4: Verification Plan Template

This template can be adapted as required.

<table>
<thead>
<tr>
<th>Member:</th>
<th>Dates:</th>
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<tbody>
<tr>
<td>Provision</td>
<td>Auditor 1</td>
</tr>
<tr>
<td></td>
<td>Member Location</td>
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</tbody>
</table>

**Business Ethics**

1.1 Bribery and Facilitation Payments
1.2 Money Laundering and Finance of Terrorism
1.3 Kimberley Process
1.4 Product and Material Security
1.5 Product Integrity

**Human Rights and Social Performance**

2.1 Human Rights
2.2 Child Labour and Young Persons
2.3 Forced Labour
2.4 Freedom of Association and Collective Bargaining
2.5 Discrimination
2.6 Health and Safety
2.7 Discipline and Grievance Procedures
2.8 Working Hours
2.9 Remuneration
2.10 General Employment Terms
2.11 Community Impact
2.12 Use of Security Personnel

**Environmental Performance**

3.1 Environmental Protection
3.2 Hazardous Substances
3.3 Waste and Emissions
3.4 Use of Energy and Natural Resources

**Management Practices**

4.1 Legal Compliance
4.2 Policy
4.3 Business Partners – Contractors, Customers, Suppliers and Joint Venture Partners.
## Appendix 5: Member Verification Report Template

### VERIFICATION ASSESSMENT REPORT

(Member/Facility)  
(Assessment Dates)  
(Document number)

Report Date: ________________  
Revision: ________________

Lead Auditor: ________________  
Signature: ________________

**Report Distribution (DO NOT INCLUDE THE RJC MANAGEMENT TEAM)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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Appendix 5: Member Verification Report Template

Table of Contents

Executive Summary
1. INTRODUCTION
   a. Background
   b. Purpose
   c. Certification Scope as defined by Member
   d. Verification Scope
      i. Code of Practices Assessed
      ii. Facilities Visited
      iii. Personnel Interviewed
      iv. Documents Reviewed
      v. Limitations
   e. Assessment Team
   f. Verification Assessment Process
      i. Audit Plan
      ii. Audit methodology (Objective Evidence and Conformance Verification)
      iii. Opening and Closing Meeting Attendance
      iv. Reports and Recommendations
2. ABBREVIATIONS AND ACRONYMS
3. AUDIT FINDINGS & SUGGESTED RECOMMENDATIONS
   a. Noteworthy Achievements
   b. Critical Breaches
   c. Major Non-Conformances
   d. Minor Non-Conformances
   e. Observations
   f. Suggested Business Improvements (optional)
4. CERTIFICATION RECOMMENDATION
5. CONCLUDING STATEMENT

APPENDICES & SUPPORTING DOCUMENTATION
Appendix 6: Certification Recommendation and Summary Report Template

CERTIFICATION RECOMMENDATION
AND SUMMARY REPORT

to the RJC Management Team

{Member/Facility}
(Assessment Dates)
(Document number)

Report Date: ____________________________
Revision: ____________________________

Lead Auditor: ____________________________
Signature: ____________________________

Report Distribution

<table>
<thead>
<tr>
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</table>
Appendix 6: Certification Recommendation and Summary Report Template

Table of Contents

Certification Recommendation Statement
1. SUMMARY OF FINDINGS
   a. Noteworthy Achievements for Communication to All Members
   b. Code of Practices with Critical Breaches
   c. Code of Practices with Major Non-Conformances
   d. Code of Practices with Minor Non-Conformances

2. VERIFICATION ASSESSMENT PROCESS
   a. Background
   b. Purpose
   c. Certification Scope as defined by Member
   d. Verification Scope
      i. Code of Practices Assessed
      ii. Facilities Visited
      iii. Limitations
   e. Assessment Team
   f. Audit Plan
   g. Audit Methodology
   h. Abbreviations And Acronyms

3. GENERAL COMMENTS AND FEEDBACK
   a. Conflict Matters
   b. General Feedback to RJC
Certification Recommendation Statement

Based on the scope and findings of the Verification Assessment, the sites visited and the available information provided by the Member:

- The Auditors recommend that the RJC Management Team grant RJC Certification to the Member valid for 3 years.
- The Auditors recommend that the RJC Management Team grant RJC Certification to the Member valid for 1 year.
- The Member is not ready for RJC Certification due to the identification of Major Non-Conformance(s) which are being addressed by the Member.
- Critical breaches have been identified and the RJC Management Team should initiate disciplinary procedures.

The Auditors confirm that:

- The information provided by the Member is true and accurate to the best knowledge of the Auditor(s) preparing this report.
- The findings are based on verified Objective Evidence relevant to the time period for the assessment, traceable and unambiguous.
- The scope of the assessment and the method used are sufficient to establish confidence that the findings are indicative of the performance of the Member’s defined Certification Scope.
- The Auditor(s) have acted in a manner deemed ethical, truthful, accurate professional, independent and objective.

Lead Auditor: __________________________

Signature: ____________________________

Date: ________________________________
Appendix 7: Examples of Documents and Records Reviewed During the Verification Assessment

There are numerous sources of information available to the Auditor that can assist with the task of verifying Conformance with the Code of Practices. Note that not all policies and procedures need to be documented. Documentation may only be required where its absence would lead to a deviation from the business’ intent. Documentation where it exists that can be reviewed includes, but is not limited to, the following:

- **General documentation**
  - Site plans and map of surrounding area;
  - Plant layout and description of operations;
  - Stormwater and sewer plans;
  - Underground tanks and piping plans and records;
  - Waste disposal sites (current and disused);
  - Site contamination study reports;
  - Site history documentation
  - Leases and titles;
  - Material Safety Data Sheets;
  - Operating licences and permits;
  - Prosecutions and penalties;
  - Aerial photographs.

- **Product and process information**
  - Process Description;
  - Process Flow Diagrams (PFDs);
  - Equipment Lists;
  - Piping and Instrumentations Diagrams (P&IDs);
  - Operating procedures;
  - Raw material, product and packaging lists;
  - Intermediates produced production routines;
  - Production records;
  - Energy types used;
  - Inventory records and stock checks;
  - Monitoring records.

- **Management information**
  - Policies and procedures;
  - Organisation charts and job descriptions;
  - Management improvement plans;
  - Complaints and incidents;
  - Abatement notices;
  - Accidents, spills and emergencies;
  - Insurance and waste disposal costs.

- **Employee Documentation**
  - Employment contracts/terms & conditions of employment
  - Employee files (including employment application, discipline letters, etc)
  - Employee handbooks
  - Proof of age documentation (copies of identification cards, birth certificates, medical clearance, etc.)
  - Employee benefits.

- **Facility Policies and Procedures**
  - Internal operating policies and procedures
  - Business licenses
  - Maintenance and Health license
  - Wage and hour policies
  - Employment at-will policy
  - Anti-discrimination policy
  - Employee/Management grievance policy
  - Freedom of association policy
  - Any other government license, certificates of operation, etc.

- **Payroll Documents**
  - Payroll records for peak and non-peak seasons for the current last 12 months
  - Time records or other work hour support
  - Piece rate records
  - Payroll registers
  - Payroll stubs
  - Support for overtime calculations
  - Special labour waivers such as the overtime extension waiver.

- **General Safety, Health and Environment**
  - Plant layout or Facility plot plan
  - Notices from regulatory agency inspections
  - Correspondence with regulatory agencies
  - Training records (sign-in sheets, agendas, training materials)
  - Manual and/or written programs
  - Committee records (agendas, meeting minutes, activity logs)
  - Inspection records (fire extinguisher, eyewash/shower, etc.).
• **Environmental**
  - Air emission permits
  - Air emission monitoring records
  - Reports of analysis of drinking water
  - Piping diagrams/as-built diagrams for wastewater and air emissions
  - Wastewater discharge monitoring reports
  - Wastewater discharge permits
  - Inventory of PCB-containing equipment
  - Registration or permits for PCB-containing equipment
  - Asbestos survey/inventory and sampling results
  - Asbestos operations and maintenance plan
  - Hazardous waste manifests or shipping papers
  - Waste profiles/test results/waste analyses
  - Waste information
    - Types and sources;
    - Composition;
    - Quantities;
    - Transfer of wastes;
    - Storage;
    - Treatment methods;
    - Destination/disposal;
    - Waste reduction and recycling programs.

• **Health & Safety**
  - Accident investigation forms
  - Accident or injury reports
  - Chemical inventory
  - Material Safety data sheets (MSDSs)
  - Records of industrial hygiene monitoring (exposure to chemicals, noise, temperature, and measurements of ventilation)
  - Audiometric testing records
  - Job/task hazard assessments/determinations
  - List of required/approved personal protective equipment
  - Respirator fit testing records
  - Emergency response plan
  - Testing, inspection, and maintenance records for fixed and portable fire suppression equipment
  - Evacuation/emergency egress map.

• **Other information may include:**
  - HAZID & HAZOP studies
  - Life Cycle Assessments
  - Community related initiatives such as regular meetings and stakeholder participation programs.
Appendix 8: Guidelines for Conducting Effective Audits

Communication and Interpretive Skills
Communication involves relationships. It is therefore important to get off to a good start. Audits, and by association Auditors, are often viewed by auditees as threatening.

Strong communication, questioning, listening and observation skills are important for the audit to be effective.

The English language contains over 600,000 words of which the average person uses some 2000. The most common 500 words have on average 28 different meanings. Unless the Auditor takes time to clarify and verify findings, there is much potential for inaccurate results.

Perception, interpretation and meaning all influence the process. A message or statement simply being misheard or misread can impact and confuse audit findings.

Find common ground early in the conduct of an audit. The best way to relax people is to get them talking. People like to talk about themselves and what interests them i.e. their families, hobbies etc.

Effective Questioning
There are a number of questioning techniques that can be employed to open discussions, accumulate data, promote involvement, determine understanding and keep discussions on track. Such questions include the following:

- **Open** questions Used to get the auditee talking
- **Probing** questions Used to uncover core issues
- **Challenging** questions Used when answers contradict, they can counteract generalisations, exaggerations or dismissive behaviour
- **Reflecting** questions Used to test understanding
- **Closed** questions Used to direct, keep on track and check facts

The following tips describe effective questioning techniques:

- Use an open and friendly approach
- Be aware of your own body language
- Ask lots of open questions such as “Explain to me …”, “Tell me more about...”
- Use closed questions sparingly.

Effective Listening
Communication is a two way process and there is a requirement to listen as well as speak. Listening involves more than simply hearing what has been said. Effective listening can be actively promoted as follows:

- stop talking
- show the auditee you want to listen
- be aware of distractions
- listen with empathy
- pause before you respond to the auditee
- make sure you understand by paraphrasing
- take notes openly
- be patient, do not interrupt

Listening is an active process which is enhanced by summarising what the auditee has said and then repeating it back.

Effective Observation
The more familiar one is with a subject, the less observant or careful one tends to be. This is why most accidents happen near or at home. It is important for an Auditor not to become complacent, nor to allow pre-conceived ideas and assumptions to influence and observation. Always verify understanding of what has been observed. Observations must be substantiated with Objective Evidence.
General Auditing Tips
Below are some tips that can be employed during an audit to render the process more transparent and effective.

- Take notes openly;
- Increase transparency by good communication and involvement of auditees;
- Lay open procedures – it’s not an examination;
- Don’t set people up;
- Focus on results of activities – remember, the system must not only exist but be effective;
- Keep good follow-up notes;
- Use terms like “show me”, “can I see” to lead you to audit evidence;
- Avoid behaviour that polarises Auditors from auditees;
- Avoid use of words such as “why”, “you”, “but” and absolutes such as “always” or “never”;
- Don’t nit pick. Put findings in perspective;
- Don’t criticise;
- Do not force your preconceived ideas on auditees;
- Use a phrase like “is there any reason why” to ensure the validity of your audit findings;
- As you find problems, discuss them. Don’t wait until the closing meeting;
- Move around and make sure you talk to people;
- Focus on the macro first – then the micro.
**Glossary**

Please refer to the following glossary for terms and acronyms used in the RJC System documents:

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation</td>
<td>Recognition of an auditor’s competence to carry out verification assessments and evaluate conformance against a standard.</td>
</tr>
<tr>
<td>AML</td>
<td>Anti-money laundering.</td>
</tr>
<tr>
<td>APELL</td>
<td>Awareness and Preparedness for Emergencies at the Local Level.</td>
</tr>
<tr>
<td>Applicable Law</td>
<td>The relevant national and/or state and/or local laws of the country or countries in which the Member operates.</td>
</tr>
<tr>
<td>ASM</td>
<td>Artisanal and Small-scale Mining.</td>
</tr>
<tr>
<td>Assessment Manual</td>
<td>Instructions for Members and Auditors on how to carry out Self Assessments and Verification Assessments.</td>
</tr>
<tr>
<td>Assessment Questions</td>
<td>A set of questions designed to assess a Member’s performance against the Code of Practices and its Provisions. Members and Auditors use the same Assessment Questions.</td>
</tr>
<tr>
<td>Assessment Tools</td>
<td>Documents or software that provide guidance and/or record information and evidence required to carry out a Self Assessment or Verification.</td>
</tr>
<tr>
<td>Assessor</td>
<td>Employee(s) or person(s) commissioned by a Member to conduct a Self Assessment.</td>
</tr>
<tr>
<td>Auditor</td>
<td>An independent, third party person or organisation meeting the RJC’s objective selection criteria and accredited to carry out Verification.</td>
</tr>
<tr>
<td>Biodiversity</td>
<td>The variability among living organisms from all sources including, inter alia, terrestrial, marine and other aquatic ecosystems and the ecological complexes of which they are part; this includes diversity within species, between species and of ecosystems.</td>
</tr>
<tr>
<td>Bribery</td>
<td>The offering, promising or giving, as well as demanding or accepting of any undue advantage, whether directly or indirectly, to or from:</td>
</tr>
<tr>
<td></td>
<td>• A public official;</td>
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<td></td>
<td>• A political candidate, party or official; or</td>
</tr>
<tr>
<td></td>
<td>• Any private sector Employee (including a person who directs or works for a private sector enterprise in any capacity).</td>
</tr>
<tr>
<td>Business ethics</td>
<td>Ethical rights and duties existing between businesses and society.</td>
</tr>
<tr>
<td>Business Partners</td>
<td>An organisation or business Entity with which an Entity has direct business relations (excluding end consumers, but including Contractors, customers, Suppliers and joint venture Partners) and that buys and/or sells a product or service that directly contributes to the extraction, manufacture or sale of Diamond and Gold Jewellery products. For the avoidance of doubt, this does not include Entities that provide support products and services, for example, equipment, office supplies and utilities. Nor does it include Entities that provide separate components, not part of the Diamond and Gold supply chain, such as batteries, springs and similar items.</td>
</tr>
<tr>
<td>Certification</td>
<td>An attestation by the RJC, based on the results of a Verification Assessment by an accredited Auditor, that the Member has achieved the required level of Conformance against the Code of Practices.</td>
</tr>
<tr>
<td>Certification Period</td>
<td>The period of time that Certification is valid, after which time the Certification must be renewed through a new Verification Assessment. Certification Periods are for one year or three years duration based on the findings of the Verification Assessment.</td>
</tr>
<tr>
<td>Certification Recommendation and Summary Report</td>
<td>A summary report from the Lead Auditor to the RJC Management Team on a Member’s overall performance against the Code of Practices and a recommendation for or against certification.</td>
</tr>
<tr>
<td>Certification Scope</td>
<td>The Certification Scope is defined by the Member and covers those parts of the Member’s business (i.e. Facilities and activities) that actively contribute to the Diamond and/or Gold Jewellery supply chain.</td>
</tr>
<tr>
<td><strong>Certified Member</strong></td>
<td>A Member certified by the RJC that its business practices have been found, through Verification by an Auditor, to meet the required level of Conformance with the Code of Practices.</td>
</tr>
<tr>
<td>----------------------</td>
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</tr>
<tr>
<td><strong>CFT</strong></td>
<td>Combating the finance of terrorism.</td>
</tr>
<tr>
<td><strong>Child</strong></td>
<td>Any person less than 15 years of age, unless local national / local minimum age law stipulates a higher age for work or mandatory schooling, in which case the higher age would apply. If, however, the local national / local minimum wage is set at 14 years of age in accordance with the developing countries exceptions under ILO convention 138, the lower age would apply.</td>
</tr>
<tr>
<td><strong>Child Labour</strong></td>
<td>Any work by a Child, except as provided for by ILO Convention 138 (a lower minimum age of 13 (12 in developing countries) for ‘light work’ which neither harms a young person’s development nor prejudices school attendance). Child Labour is work that deprives children of their childhood, their potential and their dignity, and is harmful to their social, physical and mental development.</td>
</tr>
<tr>
<td><strong>CIBJO</strong></td>
<td>World Jewellery Confederation</td>
</tr>
<tr>
<td><strong>Code of Practices (COP)</strong></td>
<td>A set of standards that define responsible ethical, human rights, social, and environmental practices, applicable to all RJC Members throughout the Diamond and/or Gold Jewellery supply chain.</td>
</tr>
<tr>
<td><strong>Collective bargaining</strong></td>
<td>A process through which employers (or their organisations) and workers’ associations (or in their absence, freely designated workers’ representatives) negotiate terms and conditions of work.</td>
</tr>
<tr>
<td><strong>Community</strong></td>
<td>Term generally applied to the inhabitants of immediate and surrounding areas who are affected in some way by a company’s activities; these effects may be economic and social as well as environmental in nature.</td>
</tr>
<tr>
<td><strong>Community development</strong></td>
<td>Process whereby people increase the strength and effectiveness of their communities, improve their quality of life, enhance their participation in decision making and achieve greater long term control over their lives. It is done with, rather than for, communities, thereby reflecting local people’s needs and priorities.</td>
</tr>
<tr>
<td><strong>Community engagement</strong></td>
<td>Two way information sharing and decision making process covering community issues and priorities as well as the concerns and needs of the business. Beyond just listening, the aim is to ensure mutual understanding and responsiveness by all parties to enable them to manage decisions that have the potential to affect all concerned.</td>
</tr>
<tr>
<td><strong>Conflict Diamond</strong></td>
<td>Rough Diamond used by rebel movements or their allies to finance conflict aimed at undermining legitimate governments, as described in relevant United Nations Security Council (UNSC) resolutions insofar as they remain in effect or in other similar UNSC resolutions which may be adopted in the future, and as understood as recognised in United Nations General Assembly (UNGA) Resolution 55/56, or in other similar UNGA resolutions which may be adopted in future.</td>
</tr>
<tr>
<td><strong>Conformance</strong></td>
<td>The Member’s business practices, including the policies, systems, procedures and processes, perform in a manner that conforms to the Code of Practices.</td>
</tr>
<tr>
<td><strong>Continual improvement</strong></td>
<td>An ongoing process of enhancing performance and management systems against the Code of Practices.</td>
</tr>
<tr>
<td><strong>Contractor</strong></td>
<td>An individual, company or other legal Entity that carries out work or performs services pursuant to a contract for services for a Member. This includes subcontractors.</td>
</tr>
<tr>
<td><strong>Control</strong></td>
<td>Control by a Member is defined as:</td>
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<tr>
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</tr>
<tr>
<td>1. Direct or indirect ownership, or Control (alone or pursuant to an agreement with other Members) of 50% or more of the voting equities/rights (or equivalent) of the controlled business or Facility; and/or</td>
<td></td>
</tr>
<tr>
<td>2. Direct or indirect (including pursuant to an agreement with other Members) power to remove, nominate or appoint at least half of the members of the Board of the directors or management (or equivalent of the controlled business or Facility; and/or</td>
<td></td>
</tr>
<tr>
<td>3. Day-to-day or executive management of the controlled business or Facility; or</td>
<td></td>
</tr>
<tr>
<td>4. Any legally recognised concept of ‘Control’ analogous to those described in (1) to (2) above in a relevant jurisdiction.</td>
<td></td>
</tr>
<tr>
<td>Although the above defines ‘Control’ in a corporate context, the same principles will apply by analogy to other organisational arrangements, including Franchisees, Licensees and Control by an individual or a family, where applicable.</td>
<td></td>
</tr>
<tr>
<td><strong>Corrective action</strong></td>
<td>An action implemented by a Member to eliminate the cause of a non-conformance in order to prevent a recurrence.</td>
</tr>
<tr>
<td><strong>Corrective Action Plans</strong></td>
<td>Plans with set milestones developed by Members to address non-conformances identified during the Self Assessment or Verification Assessment.</td>
</tr>
<tr>
<td><strong>Corruption</strong></td>
<td>The misuse of entrusted power for private gain.</td>
</tr>
<tr>
<td><strong>Critical Breach</strong></td>
<td>A Major Non-Conformance against a Provision deemed to be critical to the integrity of the RJC system. Critical Provisions are identified in section 7.2 of the Certification Handbook.</td>
</tr>
<tr>
<td>Identification of a Critical Breach requires Members and Auditors to immediately notify the RJC Management Team. Disciplinary proceedings against the Member will be automatically triggered if the RJC is notified by the Auditor.</td>
<td></td>
</tr>
<tr>
<td><strong>Diamond</strong></td>
<td>A natural mineral consisting essentially of pure carbon crystallised with a cubic structure in the isometric system. Its hardness in the Mohs scale is 10; its specific gravity is approximately 3.52; it has a refractive index of 2.42 and it can be found in many colours.</td>
</tr>
<tr>
<td><strong>Discipline</strong></td>
<td>A means to correct or improve job-related behaviour or performance.</td>
</tr>
<tr>
<td><strong>Discrimination</strong></td>
<td>Where people are treated differently because of certain characteristics – such as race, colour, sex, religion, political opinion, national extraction or social origin – which results in the impairment of equality of opportunity and treatment.</td>
</tr>
<tr>
<td><strong>EITI</strong></td>
<td>Extractive Industries Transparency Initiative</td>
</tr>
<tr>
<td><strong>Emergency</strong></td>
<td>An abnormal occurrence that can pose a threat to the Safety or Health of Employees, Contractors, Visitors, customers, or local communities, or which can cause damage to assets or the Environment.</td>
</tr>
<tr>
<td><strong>Employee</strong></td>
<td>An individual who has entered into or works under a contract of employment or a contract of service or apprenticeship, whether express or implied, and (if it is express) whether oral or in writing, or as defined by Applicable Law, with a Member.</td>
</tr>
<tr>
<td><strong>Employment relationship</strong></td>
<td>The legal link between employers and Employees that exists when a person performs work or services under certain conditions in return for remuneration.</td>
</tr>
<tr>
<td><strong>Entity</strong></td>
<td>A business or similar which operates one or more Facilities where there is ownership or Control of that Entity by the Member. The Entity can constitute part or whole of the Member.</td>
</tr>
<tr>
<td><strong>Environment</strong></td>
<td>Surroundings in which the Facility operates, including air, water, land, natural resources, flora, fauna, habitats, ecosystems, biodiversity, humans (including human artefacts, culturally significant sites and social aspects) and their interaction. The Environment in this context extends from within an operation to the global system.</td>
</tr>
<tr>
<td><strong>Facilitation payments</strong></td>
<td>Facilitation payments are paid to receive preferential treatment for something that the payment receiver is otherwise still required to do.</td>
</tr>
<tr>
<td>Facility</td>
<td>A Facility is premises that is:</td>
</tr>
<tr>
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</tr>
<tr>
<td>• Owned by or under the Control of a Member; and</td>
<td>• Actively contributes to the Diamond and/or Gold Jewellery supply chain.</td>
</tr>
<tr>
<td>Finance of terrorism</td>
<td>Any kind of financial support to those who encourage, plan or engage in terrorism.</td>
</tr>
<tr>
<td>Fit for Work</td>
<td>“Fit for Work” means that an individual is in a state (physical, mental and emotional) which allows them to perform their assigned duties effectively and in a manner which does not threaten their own or others’ Safety and Health.</td>
</tr>
<tr>
<td>Forced labour</td>
<td>Any work or service exacted by governments, companies or individuals under the menace of penalty, and which a person has not offered voluntarily to do. It also refers to work or service that is demanded as a means of repayment of debt.</td>
</tr>
<tr>
<td>Franchising/Licensing</td>
<td>Arrangement whereby Member intellectual property rights are licensed to third parties not under the Control of the Member for the purposes of enabling those third parties to produce, market or sell all or part of products or services that contain a Member’s brand name, trademark or other intellectual property.</td>
</tr>
<tr>
<td>Freedom of association</td>
<td>The right of workers and employers to freely form and join groups for the promotion and defence of occupational interests.</td>
</tr>
<tr>
<td>Gold</td>
<td>A rare yellow metallic element with the chemical symbol ‘Au’. It is a mineral with specific hardness of 2.5-3 on the Mohs scale of hardness and the atomic number 79.</td>
</tr>
<tr>
<td>Hazard</td>
<td>A source of potential harm, injury or detriment.</td>
</tr>
<tr>
<td>Hazardous Substance</td>
<td>Any material that poses a threat to human Health and/or the Environment.</td>
</tr>
<tr>
<td>Health</td>
<td>A state of physical, mental and social well-being and not merely the absence of disease or infirmity.</td>
</tr>
<tr>
<td>Health and safety</td>
<td>The aim of health and safety initiatives is to prevent accidents and injury to personal wellbeing arising out of, linked with or occurring in the course of work. This is done by minimising, as far as is reasonably practicable, the causes of hazards inherent in the working environment.</td>
</tr>
<tr>
<td>Human rights</td>
<td>Universal rights and freedoms regarded as belonging to all people, above the laws of any individual nation. Human rights in the RJC System specifically include those articulated in the Universal Declaration of Human Rights, the ILO Declaration on Fundamental Principles and Rights at Work, and Applicable Law.</td>
</tr>
<tr>
<td>Indigenous Peoples</td>
<td>There is no universally accepted definition of “Indigenous Peoples”. The term is used here in a generic sense to refer to a distinct social and cultural group possessing the following characteristics in varying degrees:</td>
</tr>
<tr>
<td>• Self-identification as members of a distinct indigenous cultural group and recognition of this identity by others;</td>
<td>• Collective attachment to geographically distinct habitats or ancestral territories in the project area and to the natural resources in these habitats and territories;</td>
</tr>
<tr>
<td>• Customary cultural, economic, social, or political institutions that are separate from those of the dominant society or culture;</td>
<td>• An indigenous language, often different from the official language of the country or region.</td>
</tr>
<tr>
<td>• An indigenous language, often different from the official language of the country or region.</td>
<td>ICMM International Council on Mining and Metals</td>
</tr>
<tr>
<td>IFC</td>
<td>International Finance Corporation</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organisation</td>
</tr>
<tr>
<td>ISO</td>
<td>International Organisation for Standardisation</td>
</tr>
<tr>
<td>IUCN</td>
<td>International Union for the Conservation of Nature</td>
</tr>
<tr>
<td>Jewellery</td>
<td>For the application of the RJC system, an adornment made of Precious Metals (including Gold) and/or set with gem stones (including Diamonds). Jewellery includes, but is not limited to, bracelets, rings, necklaces, earrings and watches.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>------</td>
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</tr>
<tr>
<td>Key Biodiversity Areas</td>
<td>Key Biodiversity Areas (KBAs) are places of international importance for the conservation of biodiversity through protected areas and other governance mechanisms. They are identified nationally, based on their importance in maintaining species populations.</td>
</tr>
<tr>
<td>Kimberley Process Certification Scheme (KPCS)</td>
<td>A joint government, international diamond industry and civil society initiative to stem the flow of Conflict Diamonds.</td>
</tr>
<tr>
<td>Lead Auditor</td>
<td>A Lead Auditor is responsible for the efficient and effective conduct and completion of a Verification Assessment for a Member and may co-ordinate a team of Auditors.</td>
</tr>
<tr>
<td>Legal compliance</td>
<td>Acting within, or under the direction of, Applicable Law.</td>
</tr>
</tbody>
</table>
| Major Non-Conformance | The Member’s business practices including the policies, systems, procedures and processes perform in a manner that is not conformant with the Code of Practices. Major Non-Conformances are defined as the occurrence of one or more of the following situations:  
- The total absence of implementation of a required provision;  
- A Member-wide systemic failure or total lack of controls required to manage business risks related to the RJC System;  
- A situation where the Member’s business practices have not identified relevant legislative or regulatory requirements, or there is a non-compliance of legislative or regulatory requirements and/or inadequate attempt to rectify the non-complying condition;  
- A group of related, repetitive or persistent Minor Non-Conformances indicating inadequate implementation;  
- Any finding or observation supported with objective evidence to prove a Critical Breach, or which raises serious doubts as to whether the Member has the business practices to avoid any Critical Breach. |
| Management system | Management processes and documentation that collectively prove a systematic framework for ensuring that tasks are performed correctly, consistently and effectively to achieve the desired outcomes, and to drive continual improvement in performance. |
| Mark | Any Mark, sign, device, imprint, stamp, brand, label, ticket, letter, word or figure. |
| Member | Any business that:  
- is actively involved for commercial reasons in the Diamond and/or Gold Jewellery supply chain; and  
- is exempt from the role of consultant, advisor or any other similar entity; and  
- commits to the prevailing RJC Principles and Code of Practices on business ethics, social, human rights and environmental performance and management systems; and  
- commits to a Verification Assessment by an Auditor under the RJC System; and  
- undertakes the payment of the annual RJC commercial membership fee;  
- is eligible to become a RJC Commercial Member.  
The Member may consist of one or more Entities and/or Facilities.  
In RJC System documents, the term ‘Member’ refers specifically to RJC Commercial Members. |
| Member Verification Report | A comprehensive report to the Member from the Lead Auditor on the findings of the Verification Assessment and an evaluation of the Member’s conformance with the RJC Codes of Practice. |
**Mining Facility**

A Facility that extracts Diamonds or Gold, or minerals containing saleable quantities of Diamonds or Gold, from the earth.

For the avoidance of doubt:

- Facilities in the exploration to pre-commissioned stages of the mine lifecycle are not visited as part of the Verification Assessment. Business practices in these stages of the mine lifecycle can be evidenced, where necessary and appropriate, by desktop review of policies, systems, procedures and processes.
- A Mining Facility is excluded from RJC Certification if riverine tailings disposal is used at that Facility. However all other COP provisions apply at that Facility and it can be included in the Verification Scope.
- A Mining Facility is not included in the Certification Scope if there is no saleable Diamonds or Gold, for example where Gold is a trace element in mineral concentrate, process by-products, or wastes.
- A Mining Facility producing multiple commodities or products, including Diamonds and/or Gold, can be excluded from the Certification Scope if there is a parallel certification system applicable to other commodities produced by the Mining Facility that is evaluated by the RJC to be technically equivalent to the RJC system.

**Mining Supplement**

Additional mining-specific Standards under development, which will be incorporated into the Code of Practices. They will be applicable to Member’s mining Facilities.

**Minor Non-Conformance**

The Member’s business practices including the policies, systems, procedures and processes perform in a manner that is not wholly conformant with the Code of Practices. Minor Non-Conformances are defined as the occurrence of one or more of the following situations:

- An isolated lapse of either performance, discipline or control of the Member’s business practices, which does not lead to a Major Non-Conformance of the RJC Code of Practices; and/or
- A finding which may not be an actual breach of the RJC Code of Practices at this point in time, but is judged to be a potential inadequacy in the Member’s business practices during the Certification Period.

**Money laundering**

The process by which the financial proceeds of crime are disguised to conceal their illegal origin.

**NGOs**

Non-government organizations

**Non-Conformance**

A situation where the Member’s business practices do not conform with the RJC Code of Practices.

**Objective Evidence**

Verifiable information, records, observations and/or statements of fact and can be qualitative or quantitative.

**OECD**

Organisation for Economic Co-operation and Development

**Overtime**

Hours worked in addition to those of a regular schedule.

**Partners**

Individuals or organisations, including joint venture partners, government agencies and other stakeholders and excluding Contractors, in commercial arrangements and/or executing projects or programs of work with Member(s).

**PPE**

Personal Protective Equipment. Refers to protective clothing and other garments such as gloves, protective footwear, helmets, goggles and ear plugs, all designed to protect the wearer from exposure to job related occupational hazards.

**Policy**

A statement of principles and intentions.

**Pollution**

The presence of a substance in the Environment that because of its chemical composition or quantity prevents the functioning of natural processes and produces undesirable environmental and Health effects.

**POPs**

Persistent organic pollutants

**Precious Metal**

Gold, palladium, platinum and silver and an alloy of any of those metals and any other metal and an alloy thereof that is designated by relevant regulations as a Precious Metal.

**Procedure**

A specified manner to conduct an activity or a process. Procedures can be documented or not.

**Provision**

A requirement stipulated in the Code of Practices.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Mark</td>
<td>A Mark indicating or purporting to indicate the quality, quantity, fineness, weight, thickness, proportion or kind of Precious Metal in an article.</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>To return disturbed land to a safe, stable and self-sustaining condition.</td>
</tr>
<tr>
<td>Remediation</td>
<td>Putting in place a systemic change or solution to correct an identified problem or non-conformance.</td>
</tr>
<tr>
<td>Remuneration</td>
<td>Includes wages or salaries and any other benefits in cash or in kind, paid by employers to workers.</td>
</tr>
<tr>
<td>RJC</td>
<td>Responsible Jewellery Council.</td>
</tr>
<tr>
<td>RJC Annual Membership Report</td>
<td>A report prepared by the RJC Management Team on Members’ aggregate progress under the RJC system. The report is to be prepared annually and made publicly available.</td>
</tr>
<tr>
<td>RJC Co-ordinator</td>
<td>A person designated by a Member who coordinates and oversees the Self Assessment, Verification Assessment, any Corrective Action Plans and liaison with the RJC Management Team for that Member.</td>
</tr>
<tr>
<td>RJC Management Team</td>
<td>The RJC staff who are employed to carry out the executive functions of the organisation.</td>
</tr>
<tr>
<td>Responsible Jewellery Council System (RJC System)</td>
<td>The Responsible Jewellery Council (RJC) System is a certification system that aims to promote responsible ethical, human rights, social and environmental practices throughout the Jewellery supply chain. The RJC system is defined in the Code of Practices, Guidance Documents and Assessment Tools.</td>
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<tr>
<td>Rights-compatible</td>
<td>A rights-compatible engagement approach or grievance mechanism is one that provides a vehicle for addressing issues – whether or not they relate to substantive human rights issues – in a manner that respects and supports Human Rights.</td>
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<tr>
<td>Risk</td>
<td>Exposure to the consequences of uncertainty. It has two dimensions: the likelihood of something happening and the consequences if it were to happen.</td>
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<tr>
<td>Risk Assessment</td>
<td>The systematic evaluation of the degree of Risk posed by an activity or operation. The process of using the results of Risk analysis to rank and/or compare them with acceptable Risk criteria or goals.</td>
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<tr>
<td>Safety</td>
<td>The condition of being safe and free from danger, Risks or injury.</td>
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<tr>
<td>Sector</td>
<td>A distinct part of the Gold and Diamond Jewellery supply chain. The RJC currently identifies the following Sectors amongst its Membership: Gold and/or Diamond producer, Gold trader, hedger or refiner, Diamond trader and/or cutter and polisher, Gold and/or Diamond Jewellery manufacturer, Gold and/or Diamond Jewellery wholesaler, Gold and/or Diamond Jewellery retailer, Service industry to the Diamond and/or Gold industry (excluding consultants, advisers and auditors), and Trade association involved in whole or part in any of the Sectors above.</td>
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<tr>
<td>Self Assessment</td>
<td>The assessment carried out by Members describing their Entities and Facilities and evaluating their own performance against the requirements of the Code of Practices. Members can use the Self Assessment to gauge their preparedness for a Verification Assessment, improve practices and to identify Objective Evidence required during a Verification Assessment.</td>
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<tr>
<td>Self Assessment Workbook</td>
<td>A workbook designed for Members to use to carry out a Self Assessment.</td>
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<tr>
<td>Simulant</td>
<td>A diamond simulant is any object or product used to imitate Diamond or some or all of its properties and includes any material which does not meet the requirements specified in the definition of Diamond in this glossary.</td>
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<tr>
<td>SoW</td>
<td>System of Warranties</td>
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<tr>
<td>Stakeholder</td>
<td>Those who have an interest in a particular decision, either as individuals or representatives of a group, including people who influence a decision, or can influence it, as well as those affected by it. Stakeholders include non-government organisations, governments, shareholders and workers, as well as local community members.</td>
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<td><strong>Standard</strong></td>
<td>An objective practice, procedure or process that is recognised as integral to the integrity of an organisation’s business and/or products and/or services. For the RJC System, the Code of Practices is the Standard relating to the Diamond and/or Gold Jewellery supply chain.</td>
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<tr>
<td><strong>Suggested Business Improvement</strong></td>
<td>A situation where the systems, procedures and activities are in Conformance with the relevant Provisions of the Code of Practices, but where an Assessor or Auditor determines that there is scope to improve these current processes. A Suggested Business Improvement is offered without prejudice, and its implementation is not mandatory. Subsequent Assessments shall not judge performance based on the implementation of a Suggested Business Improvement.</td>
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<tr>
<td><strong>Supplier</strong></td>
<td>A business entity that provides goods and/or services integral to, and utilised in or for the production of, a Member’s Diamond and/or Gold products.</td>
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<td><strong>Synthetic</strong></td>
<td>A Synthetic diamond is any object or product that has been either partially or wholly crystallised or re-crystallised due to artificial human intervention such that, with the exception of being non-natural, the product meets the requirements specified in the definition of the word “Diamond” in this glossary.</td>
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<tr>
<td><strong>Tailings</strong></td>
<td>Ground rock and effluents that are generated during processing of the ore.</td>
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<td><strong>Third party</strong></td>
<td>A person or body independent of the person or organisation being evaluated, and of user interests in that person or organisation.</td>
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<td><strong>Treated Diamond</strong></td>
<td>A Treated Diamond is any object or product that meets the requirements specified in the definition of the word “Diamond” or the word “Synthetic” as included in this glossary that has been subject to a “Treatment” as defined in this glossary.</td>
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<tr>
<td><strong>Treatment</strong></td>
<td>Treatment means any process, Treatment or enhancement changing, interfering with and/or contaminating the natural appearance or composition of a Diamond other than the historically accepted practices of cutting and polishing. It includes colour (and decolourisation) Treatment, fracture filling, laser and irradiation Treatment and coating.</td>
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<tr>
<td><strong>UDHR</strong></td>
<td>Universal Declaration of Human Rights</td>
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<tr>
<td><strong>UN</strong></td>
<td>United Nations</td>
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<tr>
<td><strong>UNEP</strong></td>
<td>United Nations Environment Program</td>
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<tr>
<td><strong>Uncontrolled Hazard</strong></td>
<td>An identified source of potential harm, injury or detriment (i.e. a Hazard) that lacks recognised and/or approved management, operational or technical controls.</td>
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<td><strong>Verification (auditing)</strong></td>
<td>Confirmation by an Accredited Auditor, through the assessment of Objective Evidence, that the Provisions of the Code of Practices have been fulfilled. The results of Verification are used as the basis for a decision on Certification.</td>
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| **Verification Assessment** | A Verification Assessment comprises the following:  
- A preliminary desktop review of the Member’s Self Assessment Questionnaire and other related information;  
- Selection of a representative set of the Member’s Facilities and business practices to visit and assess;  
- Verification of the Member’s Self Assessment through on-site review at the selected sample of Facilities. |
| **Verification Plan (Audit Plan)** | A Verification Plan, also referred to as an ‘audit plan’, is developed by an Auditor to outline what of the Member’s business practices will be reviewed, by whom and when and in which Facilities, and nominates which Member personnel should be involved. It is developed from the definition of the Verification Scope. |
| **Verification Reports** | Two kinds of reports are generated out of the verification process:  
- A Member Verification Report to the Member;  
- A Certification Recommendation and Summary Report to the RJC Management Team. |
| **Verification Scope** | The Verification Scope is defined by Auditors and includes a selection of Facilities from within the Certification Scope and a selection of Provisions from the Code of Practices that are considered to be the most relevant, taking into consideration the nature, scale and impact of the Member’s business. |
| **Visitor** | A person visiting a Member Facility who is not an Employee or Contractor at that Facility. |
Waste: Solid, liquid or gaseous material that is discarded or no longer needed. Waste can cause pollution and impact on the environment if not properly managed. In the Jewellery supply chain, the main forms of Waste include Hazardous Substances, air and water emissions, and general operational Waste.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>WDC</td>
<td>World Diamond Council</td>
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<tr>
<td>Workers</td>
<td>Persons defined as Employees, Contractors.</td>
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<tr>
<td>WGC</td>
<td>World Gold Council</td>
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<tr>
<td>Working hours</td>
<td>The time during which the persons employed are at the disposal of the employer. Rest periods are time during which the persons employed are not at the disposal of the employer.</td>
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<tr>
<td>World Heritage Sites</td>
<td>Sites established under the World Heritage Convention of 1972.</td>
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<tr>
<td>Young Person</td>
<td>Any worker over the age of a Child as defined above and under the age of 18 years.</td>
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