



## Worldwide Responsible Accredited Production (WRAP) Certification Program

### Closing Meeting Summary

<b>A. Facility name:</b> <i>(in English &amp; local language, if needed)</i>	Nafa Apparels Ltd. নাফা এ্যাপারেলস লি:
<b>B. Facility address:</b>	Hizalhati, Baraopara Kaliakoir, Dhaka, Bangladesh 1449.
<b>C. Facility WRAP ID #:</b>	15258
<b>D. Audit Date:</b> (e.g., July 18-19, 2017)	January 20-21, 2020.
<b>E. Monitoring firm name &amp; address:</b>	SGS Bangladesh Limited. House No: 37, Road No: 24, Gulshan-1, Dhaka-1212.
<b>F. The above audit conducted at this facility found that:</b>	<input type="checkbox"/> The facility was in compliance with the WRAP Principles. <input checked="" type="checkbox"/> The facility had non-compliances. Please refer to the Corrective Action Plan for details.
<b>G. Please list Principles under CAP:</b> (e.g., P1, P5)	P-1, P-6, P-8 & P-12.
<b>H. Name of lead auditor:</b>	Imran Ahmed
<b>I. Name and title of facility representative:</b>	Md. Lutfar Rahman (Ripon)-General Manager (Admin, HR, Compliance & Operation).
<b>J. Names and titles of other attendees at the Closing Meeting:</b>	<ol style="list-style-type: none"> <li>1. Molla Zakir Hossain-DGM- (Admin, HR, Compliance &amp; Operation).</li> <li>2. Kamrul Islam-Manager (Admin &amp; HR).</li> <li>3. Mahbub ul Alam- Sr. Manager-Admin &amp; HR.</li> <li>4. Mazharul Islam-Sr. Executive (EMS)</li> <li>5. Md. Omar Sharif-Deputy Manager, Corporate Head Office</li> <li>6. Mosharaf Hossain-Deputy Manager, Corporate Head Office.</li> </ol>
<b>K. Additional notes if any:</b>	None.



## Worldwide Responsible Accredited Production (WRAP) Certification Program Corrective Action Plan

If no non-compliances or observations were raised, simply note no NC  
**AND** lead auditor and facility representative *still* need to sign this document.

This "Corrective Action Plan" shall be used to summarize all facility non-compliances and observations and to document a corrective action plan that both the auditor and facility management believe is reasonable to ensure compliance, realignment and continuous adherence to WRAP's Principles and local/national laws.

This form should be used in the following manner:

- Document all non-compliances and observations individually on the form below, prior to the closing meeting and use the form as an agenda during the closing meeting;
- During the closing meeting, ensure that management understands the findings;
- Management shall come up with its own corrective actions for all non-compliances and observations;
- Each non-compliance must be rated as follows:

### Major

- Systematic violations of local/national law and/or WRAP Principles, and/or any health and safety condition that might pose significant risk to workers' basic rights and/or safety
- Failure of management systems, including excessive minor non-compliances that reveal an underlying dysfunction  
*Note: If there are several minor non-compliances against the same Principle, it may warrant a major non-compliance on internal monitoring (i.e. Q1.4)*
- Non-transparency
- Issues that require on-site verification, especially those that can only be fully validated with worker interviews and/or addressed through worker training
- Failure of addressing, within the projected completion date, non-compliances raised during the initial/follow-up audits in this audit cycle

### Minor

- Occasional or isolated violations of local/national law and/or WRAP Principles that do not seriously compromise workers' basic rights and/or safety
- Non-compliances that do not require onsite verification, worker interviews and/or worker training
- Minor situations that do not affect a large number of workers

### Observation

- Currently not a non-compliance but could potentially become one if timely actions are not taken (internal monitoring can help identify such issues); for example, certificates/permits that are valid during the audit but look set to expire in the near future with no indication that the facility has taken the steps necessary to ensure timely renewal. In addition, under certain circumstances (outlined in detail under WRAP Principle 6), excessive working hours will also be noted as an observation (instead of a non-compliance)  
(outlined in detail under WRAP Principle 6), excessive working hours will also be noted as an observation (instead of a non-compliance)

## Corrective Action Plan

Please document only one non-compliance/observation per row.

NC # & rating (Major, Minor or Observation)	WRAP clause number (e.g., Q8.4) and relevant local/national laws	Non-compliances	A. Facility's corrective action plan B. Projected completion date C. Responsible person's name and title
1 Observation	In accordance with WRAP question- 1 & rule 16(5) of Bangladesh Labor Rules 2015	Based on management interview & documents review it was noted that the facility had recruited 71 security guards from third party security company [50 (Male-38 & Female-12) from "Robust Security and Logistic Services (Pvt.) Ltd" and & 21 (Male-21) "Defense Security Services (Pvt.) Ltd".] instead of recruiting them security guards by the facility itself. Note that, facility had also 05 own recruited security officer, who were working permanently in the factory.	A. We will hire own security guards within 06 months. B. January 25, 2020 C. Mr. Mosharaf Hossain-Manager (Admin & compliance)
2 Minor /Closed	In accordance with WRAP principle 8  NA	Based on the plant tour and management interview it was noted that, kitchen was found in the facility premises of Building-02 (3 storied building) at ground floor away from the production building.  <u>This above mention issue closed on January 21, 2020 during 2<sup>nd</sup> day of audit.</u>  issue closed:  Based on the plant tour on 2 <sup>nd</sup> day of audit and management interview it was observed that, facility management removed the kitchen from inside the facility premises.	A. We will remove kitchen from factory premises. /NA B. January 25, 2020 /NA C. Mr. Dr. Rokonuzzaman (Medical Officer) /NA
3 Minor	In accordance with WRAP principle 8.29 and with section 78.a (1) of Bangladesh Labor law, 2006 (Amendment -2013)	Following PPE related issue noted through the plant tour,  1. approximately 10% overlock and flatlock machine operators were not using face mask at sewing section during work.  2. Randomly checked 03 out of 05 construction workers were not using required PPE like: hand gloves, safety helmet, safety belt etc. during work.	A. We will further aware them of using relevant PPE during working hours. B. January 25, 2020 C. Mr. Dr. Rokonuzzaman (Medical Officer)

4 Minor	In accordance with WRAP question 8.45	It was noted through facility visit that, loose electric wire was found in different floor at 6th storied under construction building inside in the facility premises.	A. We will remove the loose wire and take corrective action shortly. B. January 25, 2020 C. Mr. Dr. Rokonuzzaman (Medical Officer)
05 Minor	In accordance with WRAP principle 8.67 & Bangladesh Labour Law 2006, section 63(I) D (iii)	Based from factory tour it was noted that, around 10% eye shield of overlock machines were found displaced from its own position while working at sewing section.	A. We will further aware them of using relevant machine safety guard during working hours. B. January 25, 2020 C. Mr. Dr. Rokonuzzaman (Medical Officer)
06 Minor	In accordance with WRAP Principle 12.8a	Facility does not maintain a proper system to check visitor's identification for documentation purpose upon arrival. For example, during audit on January 20-21; 2020, auditor's photo ID was not checked, and facility did not screen the visitor's bag metal detector for security purpose.	A. We will ensure proper system to check visitor's identification for documentation purpose. B. January 10, 2020 C. Mr. Tozammel Hoque-Deputy General Manager.
07 Major	In accordance with WRAP Principle 12.10	Insufficient security control measures were identified at restricted area as 01 out of 02 exit door of packing & finished goods area at 2 <sup>nd</sup> floor in building -01 were found almost open and not restricted for unauthorized people.	A. We will take necessary step on that area to ensure CTPAT requirements. B. January 25, 2020 C. Mr. Tozammel Hoque-Deputy General Manager.
08 Minor	In accordance with WRAP Principle 12.26a	Based on the peroneal computer password verification, facility management interview & documents review that, facility management could not show any kind of evidence for automated systems to periodic passwords change of computer's users and no server peroneal computer found in facility.	A. We will take corrective action regarding the automated systems for a periodic change of passwords of computers users B. January 10, 2020 C. Mr. Tozammel Hoque-Deputy General Manager.

<p>09 Major</p>	<p>In accordance with WRAP principle 12.25 (b)</p>	<p>Based on facility management interview and CCTV record review, it was noted that facility have recording system for CCTV cameras from 08 :00 am to 08: 00 pm daily instead of consecutive 24 hours for 30 days.</p> <p>Noted that, facility did not have any CCTV record for weekend or holidays.</p>	<p>A. We will take CCTV record for weekend and holidays in next time.</p> <p>B. April 30, 2020.</p> <p>C. Mr. Tozammel Hoque-Deputy General Manager.</p>
---------------------	--	--	--

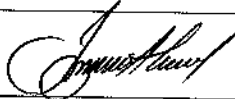
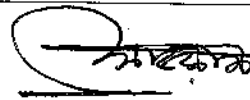
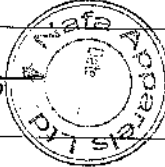
*\* Please continue to Signature page to acknowledge the result of the audit*

## Signature Page

1. Leave one signed copy of CAP and signature pages with management
2. Retain one signed copy for report submission to WRAP
3. *Insert FULL scanned copy of this page immediately following CAP pages*
4. If facility does NOT agree with an NC(s)/observation(s), facility must contact WRAP to explain their position

**By signing below, both parties acknowledge and agree with the RESULTS of the audit.**

### Initial Audit Signatures

<i>Date of the audit:</i>	January 20-21, 2020
<i>Name of lead auditor:</i>	Imran Ahmed
<i>Signature of lead auditor:</i>	
<i>Name and title of facility representative:</i>	Md. Lutfar Rahman (Ripon)-General Manager (Admin, HR, Compliance & Operation).
<i>Signature of facility representative:</i>	 

### Onsite Follow-Up Signatures (If Applicable)

<i>Date of the audit:</i>	NA
<i>Name of lead auditor:</i>	NA
<i>Signature of lead auditor:</i>	NA
<i>Name and title of facility representative:</i>	NA
<i>Signature of facility representative:</i>	NA