The Sustainable *Eel* Group

Assurance System

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3.5	1 October 2026	Series of changes to be compatible with SEG Standard Version 8. Following consultation	SEG Board

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1. Introduction

1.1 The Sustainable Eel Group (SEG) - our purpose

The European eel population has declined significantly since the early 1980s. It was once very common and widely spread across its range from North Africa, through Europe and up to Scandinavia, and supported fishing, associated trade and livelihoods.

The reduced population is a risk to the species itself, wildlife and ecosystems and the socio-economics of communities that fish for, trade and eat eel.

Our primary purpose is to assist the recovery of the European eel, with multiple concurrent benefits to habitats, communities, traditions and economies that rely on it.

Our work and strategies are designed to support the recovery of the European eel, and the European Commission's 'Eel Regulation' (Council Regulation (EC) No 1100/2007). The primary objective of this Regulation is a framework for the eel's recovery and, as described in Article 1, 'the protection and sustainable use of the stock of European eel'.

The SEG Standard, one of our principal strategies, has been developed and designed as a code of conduct for best practice in the commercial eel sector, to support the recovery of the European eel and to meet the objectives of the Eel Regulation. This Assurance System describes the rules and procedures to be applied to support the effective working of the SEG Standard.

1.2 Definition

The term Conformity Assessment Body (CAB) shall be any organisation(s) approved by SEG to operate the SEG Standard Certification programme. It includes those auditors that are sub-contracted to the CAB to conduct audits / assessments of clients to the SEG Standard.

1.3 Rationale

SEG has developed an assurance structure and activities, including a 3rd party assessment system, and associated claims management, that seeks the highest possible level of integrity. SEG deems this approach particularly necessary in a sector where covert and illegal trade has been common. This is to provide credibility to those actors at all points in a complex supply chain who wish to achieve and demonstrate the probity of their actions.

In our 3rd party assessment system we will appoint CABs that have a proven track record and credibility in providing such assurance services.

2. Purpose of this document

2.1 This document describes the Assurance System for the Sustainable Eel Group (SEG) Standard.

This document details SEG's Assurance programme and defines:

- Responsibilities and opportunities within the SEG Assurance System;
- Requirements and procedures for application, provisional approval, and approval of Conformity Assessment Bodies (CABs);
- Oversight of CAB activities, ensuring auditing competence;
- Procedures for reviewing the Assurance System;
- Procedures and methodologies that CABs and SEG are required to follow; and
- Procedures to be implemented in instances of issues or concerns regarding the Assurance System.

The system has been tailored to correspond to the narrow focus and relatively small size of the SEG programme. The full suite of documentation to define and manage the SEG System can be found at: http://www.sustainableeelgroup.org/the-seg-standard-system/.

2.2 Status

The SEG Board has approved this document and, as standard system owner, SEG holds responsibility for its content.

3. Applicability, responsibilities and eligibility

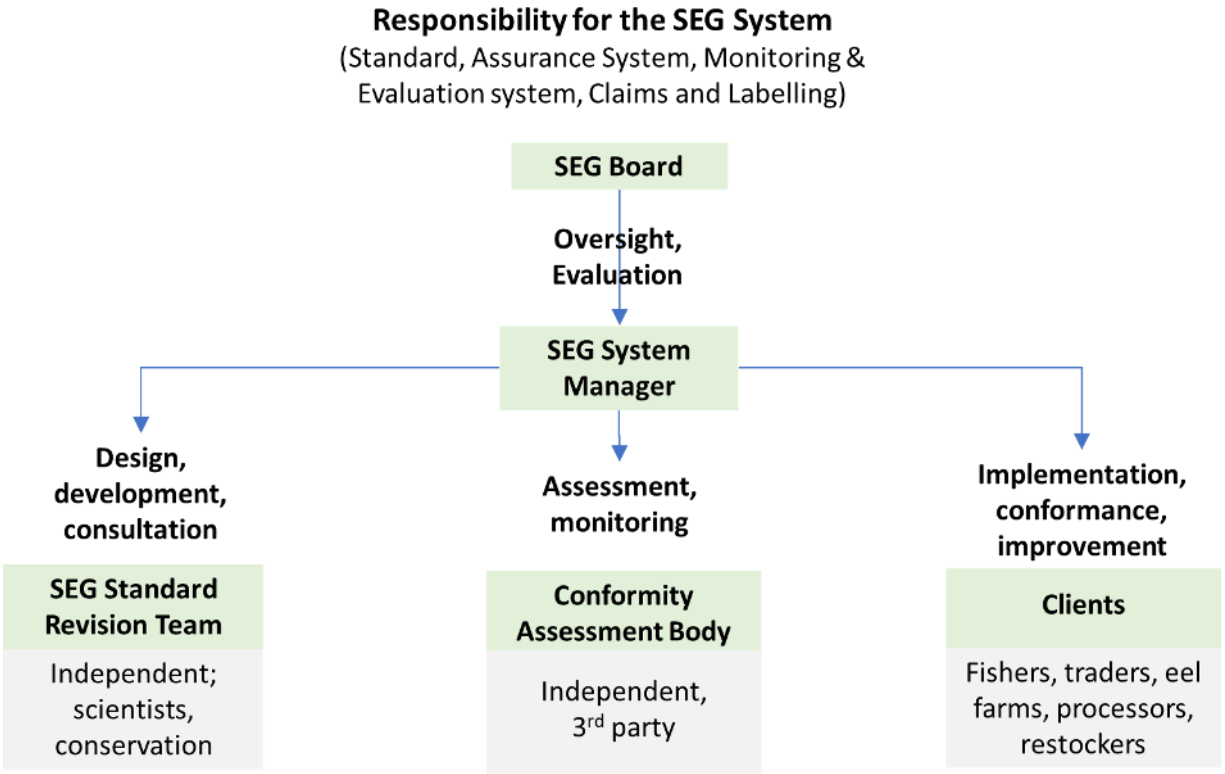
3.1 Applicability

This system is for SEG use and the use of SEG, CABs and auditors. It is published in the page SEG System on our website: www.sustainableeelgroup.org. Those using and applying it are responsible for ensuring they use the latest version.

3.2 SEG responsibilities

3.2.1 See also 102 SEG Standard Development and Revision Procedure, 119 SEG Standard Revision Team Terms of Reference and 004 SEG Governance Summary, all available at: SEG System.

3.2.2 Responsibilities for the SEG System, (1) for design, development and consultation and (2) for implementation, assessment and monitoring, is summarised in the diagram below.



3.2.3 **Governing procedures for the Sustainable Eel Group** are defined in document 004 SEG Governance Summary.

3.2.4 The procedure for the development and revision of a SEG Standard (to include Assurance and Monitoring, Evaluation and Learning [MEL] Systems) are defined in 102 SEG Standard Development and Revision Procedure.

3.2.5 Key responsibilities for the development, revision and approval of a SEG Standard are summarised as follows:

3.3 SEG Board of Directors ('SEG Board')

The SEG Board:

a) is responsible for the overall functioning and improvement of the Assurance System, including information management and risk management systems, oversight of CABs, as well as CAB approval, and suspension and withdrawal of CAB approval;
b) mandates the development or revision of a SEG Standard;
c) approves the SEG Standard Development & Revision Procedures, including the Terms of Reference for a Standard and for development or revision plus associated Assurance and MEL Systems,
d) appoints the SEG System Manager and the members of the SEG Standard Revision Team via a stakeholder application process;
e) approves the finalised SEG Standard (and subsequent substantive revisions) and associated Assurance and MEL Systems solely on the basis that:
    i. the SEG Standard Development & Revision procedures have been implemented to the Board's satisfaction and
    ii. the resulting SEG Standard meets the specified Terms of Reference.

3.4 SEG Chairperson

a) The SEG Chairperson shall be independent of the interests represented at the Board. He/she shall seek to gain a balanced consensus of views in the aim to get the best outcomes for SEG and the range of those different interests.
b) Where there is not consensus or there is an equal balance of different views on any subject, the Chairperson may provide a casting vote, again with the objective of aiming to get the best balance of outcomes for those interested in sustainability for the European eel.

3.5 SEG System Manager

a) The SEG System Manager shall be the lead and project manager, responsible for the design and management of the SEG System.
b) They shall be appointed by the SEG Board.
c) Delegated by the Board, the SEG System Manager is responsible for the tasks of development, revision and maintenance of the SEG Standard and SEG System, and developing processes in consultation with stakeholders and colleagues, for approval by the SEG Board.

3.6 SEG Standard Revision Team

a) The purpose of the SEG Standard Revision team is to bring a balance of different sector views to review the comments from stakeholders, to draft and recommend the most appropriate improvements to the next version of the SEG Standard, and associated Assurance and MEL Systems.
b) The SEG Standard Revision Team drafts a SEG Standard or revision in accordance with the 102 SEG Standard Development and Revision Procedure, for approval by the SEG Board.

c) It shall be independent from the SEG Board, having been appointed via an application process managed and overseen by the SEG Board, and chaired by the SEG System Manager.
d) It shall consist of at least one person with each social, economic and environmental interests.
e) It may have advisors co-opted or contracted to assist its development; such advisors shall be appointed with the approval of the SEG Board.
f) The SEG Standard Revision Team:-
    i. drafts and manages the development or revision of a standard, in accordance with the 102 SEG Standard Development and Revision Procedure, for approval by the SEG Board.
    ii. provides comment to the elements of the SEG System – the series of procedures and guidance that support the standard, for example, the Assurance system, the MEL system, guidance and training for auditing, certification procedures etc.
    iii. Recommends the final versions and publication of the standard and supporting systems for approval to the SEG Board.
g) The full terms of Reference for the SEG Standard Revision Team are at 119 SEG Standard Revision Team Terms of Reference.

3.7 CAB responsibilities

3.7.1 CABs approved by SEG are responsible for operating this Assurance System for certification to the SEG Standard under contract agreement.
3.7.2 CABs are also responsible for maintenance and oversight of competence as well as impartiality, conflict-of-interest and complaints management as set out in this document.

3.8 Eligibility for certification and approval

3.8.1 Any participants in fishing, ranching and aquaculture of the European eel, *Anguilla anguilla* (L.) and the trade, transportation and processing of eels and eel products are eligible to apply for certification under the SEG Standard.
3.8.2 Certification will only be granted by approved CABs, and only to those demonstrating ongoing conformity with the SEG Standard.
3.8.3 Any CAB may apply to SEG for approval, subject to the eligibility criteria in Section 8.

4. Risk management

SEG operates 018 Risk Management System that includes management of threats to the integrity of assurance.

5. Operating procedures

5.1 Documented management system

Management of the SEG Assurance System is as in this document, as well as the 013 SEG Document Management System, 014 SEG Standard System Management Review, 018 SEG Risk Management System, and 301 SEG Monitoring, Evaluation and Learning System.
The certification process is summarised in 213 SEG – CAB Certification Procedure, also available at: https://www.sustainableeelgroup.org/how-to-apply-for-seg-certification/

5.2 The organisation being certified – Ultimate Beneficial Owner

The organisation seeking certification shall be considered according to its Ultimate Beneficial Owner (UBO).

5.2.1 The organisation or business seeking SEG certification must be audited in full – it is not sufficient to have selected parts of the organisation certified. This is to ensure transparency and traceability and to show that the whole organisation is committed to it – not just selected parts.

5.2.2 Similarly, an Ultimate beneficial Owner (UBO), or an affiliated or subsidiary organisation, cannot be certified for one company when another under their ownership has been prosecuted within the past 3 years, or is under investigation for illegal activity related to eel fishing or trade.

5.2.3 An 'organisation' in this context is a company or group of companies that have a common ownership, leadership, management or control by a person, company or organisation. The UBO may also bear responsibility or a group of companies.

5.2.4 Whilst a whole organisation beneath a UBO must be audited and certified, if or when any entity within it were to fail a subsequent audit or inspection, the corrective action or suspension or withdrawal of the certificate shall only apply to those entities that have not achieved the standard.

5.2.5 Where there is a major breach, legal investigation or prosecution, it applies to the whole organisation, according to the usual procedures in our Assurance System.

5.2.5 Assessment of the UBO is a specific Criterion in the SEG standard.

5.3 Audit procedures

5.3.1 Initial self-assessment

5.3.1.1 Prior to arranging a full audit, clients shall be required to complete a self-assessment exercise in order to become a 'SEG Client'. Clients shall discuss with an approved CAB to ensure the client is clear on the extent of their organisation to be assessed. See definition for 'organisation' in 5.2 above.

5.3.1.2 The self-assessment exercise shall enable the client to provide and declare essential information to an approved CAB in preparation for a full audit. It shall also enable the client to understand the SEG Standard and therefore how much preparatory or corrective work is needed before proceeding to full application and audit.

5.3.2 Binding Legal Agreement

Prior to initiating an audit the client must enter a binding legal agreement with an approved CAB. The agreement shall include:

5.3.2.1 the scope, timing and cost of the audit. The scope shall include the extent of the organisation under assessment.

5.3.2.2 requirements for the client to ensure that there are no outstanding payments relating to certification;

5.3.2.3 requirements for the client to provide data and information required by the SEG Monitoring, Evaluation and Learning System;

5.3.2.4 commitments by the SEG approved CAB to treat data confidentially and securely and to adhere to the 011 SEG Data Management System; and

5.3.2.5 acknowledgement that data and audit outcomes will be shared with SEG.

5.3.3 Initial on-site audit

An on-site audit will be required for the initial certification of all clients. This will consist of the following:

5.3.3.1 Pre-audit agreement. Prior to the audit, the client and CAB will discuss and identify what components of the standard are included in the scope of the audit. The client shall be asked to outline its processes from start to end. The client must be made aware that the CAB must have access to all records held by the client in order to be able to verify their findings.

5.3.3.2 Tour of operation. The CAB shall complete a full audit of the client's operation, including tours of sites and/or observing fishing activities, subject to the sampling requirements identified in Section 5.7.

5.3.3.3 Discussion and assessment against standard. The CAB shall assess the client against the relevant components of the standard. The CAB shall collect evidence at every stage.

Note that where clients hold national registrations or certificates that support specific criteria, those certificates shall be used as evidence – it is not necessary to audit the client again for those criteria.

5.3.3.4 Gaining information and input from clients and stakeholders.

a) Evidence for assessments is primarily sourced from the client, shall relate to the indicators as set out for the criteria in the SEG Standard, and it is the client's responsibility to source and provide full and true information to support their application.

b) The initial audit shall consider evidence from a period of 5 years prior to the audit.

c) In collecting evidence for the assessment, information must sometimes be collected from other stakeholders and sources. Such occasions and sources are specified in the criteria of the SEG Standard. For example: (1) Criterion 1.1: CABs must seek evidence from enforcement agencies and other similar sources that the client has no relevant convictions; (2) Criterion 2.3: CABs must seek evidence from the local fisheries authority that fishers are complying with fisheries regulations, for example submitting catch record; (3) Criterion 4.3 CABs must seek evidence from the customers of eel traders that mortality is within the specified limits.

d) As part of the assurance process, CABs shall give the opportunity for relevant stakeholders to provide input on assessment of clients' conformity or performance. Such stakeholders shall include statutory bodies, fisheries agencies, enforcement agencies, local and national NGOs. As assessment reports shall not be provided, due the presence of confidential information, stakeholders shall be asked to provide feedback on their beliefs or evidence about the client's conformity with the SEG Standard.

5.3.3.5 Final meeting. Final discussion, present and initial findings and explain next steps.

5.3.3.6 Draft Report. Following the completion of an initial certification audit the CAB shall, within 30 days, complete a draft report describing the client's performance against each of the criteria for the component(s) against which they have been assessed. The report shall make a recommendation on certification. The draft assessment report shall first be sent to the client for comment, to check that it is factually correct, and the client is satisfied with the content. Should the client not comment within two weeks of the report being sent, the CAB shall produce the draft report with no further amendments; and

5.3.3.7 Final Report. Within 60 days (or longer if mutually agreed), of the Client and CAB forming the contract, the final report (incorporating any clarifications agreed through the process of review

with the client) shall be sent to the CAB's decision-making entity, who has the authority to award the certificate under contract agreement with SEG.

5.3.3.8 The decision, final reports, certificates and final certification correspondence, shall be forwarded to the client and SEG within 14 days of being provided the final report.

5.3.3.9 SEG shall maintain a register of assessed clients on its website. Certificates will also be a published, linked to that register, to provide full transparency, within 7 days of receipt from the CAB.

5.3.4 Requirements for all audits

5.3.4.1 The CAB shall apply data quality control processes to ensure that audit reports are accurate.

5.4 Surveillance audits

5.4.1 A certified client shall be required to follow a set surveillance audit program as determined by a risk assessment process that is required to be completed by the CAB at the completion of each initial audit. This risk assessment shall be implemented by application of the following table:

Table 1. Deciding on surveillance programme

Question	Performance of Client at Audit	Yes	No
1	Has the client been part of any external investigation which may be a breach of the SEG standard or law, or been suspended from any other certification standard?	Enhanced Surveillance	Go to Q2
2	Has the client had their certification suspended for any reason since the last on-site audit	Enhanced Surveillance	Go to Q3
3	Does the client only buy and sell product (does not physically handle it?)	Minimum Surveillance	Go to Q4
4	All other scenarios	Standard Surveillance	

5.4.2 The relevant audit frequencies are provided in the Table 2 below:

Table 2. Audit frequencies

	Certification Audit	Year 1	Year 2	Year 3	Year 4 Recertification Audit
Minimum Surveillance	On-Site Audit	No audit	Remote Audit	No audit	On-Site Audit
Standard Surveillance	On-Site Audit	No Audit	On-Site Audit	No Audit	On-Site Audit

Enhanced Surveillance	On-Site Audit	On-Site Audit	On-Site Audit	On-Site Audit	On-Site Audit

5.4.3 Certified clients shall be sent a reminder that a surveillance audit is due a minimum of three (3) months before the anniversary date of the audit. It is then the client's responsibility to book and organise the audit. Audits can be advanced or delayed by up to 3 months of the anniversary date, or longer in extenuating circumstances. Should the audit not occur, the certificate of the organisation will be suspended, unless the organisation can demonstrate extenuating circumstances (see section 5.16) and also provide a suitable time-frame for the completion of the audit.

5.4.4 A remote audit shall consist of a desk-based study plus remote video or telephone communications if suitable. The client shall be asked to provide documentation showing the system in place. Should the documentation provided not be satisfactory then an on-site audit may be required. Final audit reports for remote audits are due within 60 days of the date that documentation is due to be delivered to the CAB.

5.4.5 The procedures for an on-site surveillance audit are the same as for the initial certification audit, other than looking at objective evidence in the period since the last audit.

5.4.6 Where a client has had a certificate withdrawn due to non-conformances, re-assessment shall be on-site. Where a certificate has lapsed due to non renewal within the last 24 months, re-assessment may be remote.

5.5 Audit duration

5.5.1 The duration of the audit shall be determined by the CAB and will depend on the size of the organisation of the client to be audited. It shall be a minimum of one day (total time including report writing) and is not normally likely to be more than five days. Audit intensity will be based on an evaluation of:

a) the type of business (more complex business will indicate a longer audit);
b) the size of business (larger businesses will indicate a longer audit);
c) the number of facilities or fishermen to be sampled, if applicable;
d) audit type (initial audits will likely have a higher level of intensity versus surveillance audits); and
e) whether the audit is on-site versus remote; and
f) in a surveillance or re-certification audit, the outcomes of the previous audit(s).

5.6 Audit scope

5.6.1 All organisations must be assessed against Component 1.

5.6.2 As documented within the SEG Standard, additional components will be included in the audit scope dependent on the client's business activities. For example, a client that both fishes for glass eels and cultures them would need to pass both component 2: Glass Eel Fishing and component 5: Eel Farming.

5.6.3 Whenever a Component is being assessed, all criteria within that Component are to be included in that assessment, unless any described exceptions apply.

5.7 Audit sampling

5.7.1 In instances where there are multiple items of like pieces of objective evidence for a single indicator (e.g. multiple fishers in a fishery, multiple fish tanks on a fish farm) it is usually necessary to select a sample of evidence to review during the audit.

5.7.2 Where sampling is used the auditor shall select a randomised sample according to Table 3 except where the audit is for either:

a) multiple sites within an organisation which conducts buying and trading; or
b) multiple sites within an organisation which conducts eel farming; or
c) multiple sites within an organisation which conducts processing

in which cases the CAB shall sample all sites within the certification scope.

5.7.3 The sample of objective evidence to observe during the audit shall be chosen according to a sampling strategy developed by the CAB. In developing the sampling strategy, the auditor shall prioritise, as applicable, the following objectives:

a) maximum representation of variability within the sample (for example, if there are tanks with different ages of eels a sample across ages shall be taken); or
b) maximum potential of identifying non-conformances which might be present (if there is a known problem, for example, with younger eels a sample shall focus on tanks of eels of a younger age class); and
c) randomisation, where possible, of the sample of items reviewed (for example, if there are three tanks of the same eel class, a random sample amongst them shall be chosen).

5.7.4 It may not be possible to address all three sampling objectives simultaneously. In all cases, the sampling strategy, including the rationale and objectives sought, shall be outlined in the audit report.

5.7.5 The CAB shall increase the sample size in situations where there is a high degree of variation in the sample of objective evidence observed.

5.7.6 In surveillance audits, the CAB shall strive to select objective evidence which was not sampled in previous audits unless this preferential sampling would clearly indicate to the client which objective evidence will be included in the current audit (for example, on a site which has three tanks and two were observed during the initial audit, it would be obvious to the client that the remaining tank would be selected in the next surveillance audit and the auditor is not be constrained to having to sample the one remaining).

Table 3. Audit sample minimum size

Number of items	Minimum number of items observed during an initial audit	Minimum number of items observed during a surveillance audit
1	1	1
2-4	2	1
5-9	3	1
10-16	4	2
17-25	5	2
26-36	6	3
37-49	7	4
50+	Square root rounded up	Square root divided by two rounded up

5.8 Certification review and decision

CABs are required to have procedures for technical reviews of audit reports and certification decisions. These must include as a minimum:

5.8.1 Certification review

The CAB shall assign at least one person to review all information and results related to the audit. This review shall be carried out by a person(s) who has not been involved in the audit process.

5.8.2 Certification decision

a) CABs shall use competent personnel other than the auditor or audit team to make impartial decisions on compliance.
b) The CAB shall assign at least one person to make the certification decision based on all information related to the audit, its review and other relevant information.
c) The review and certification decision may be completed concurrently by the same person or persons.
d) When the CAB requires clarity with interpretation of the standard, the CAB shall seek clarification with the SEG System Manager.
e) The CAB shall be responsible for and shall retain authority for its decisions relating to certification.

5.9 Technical experts and interpreters

5.9.1 CABs shall ensure that interpreters or technical experts they employ or contract are independent of the client, unless this is not feasible due to logistical constraints, in which case these constraints, as well as efforts to overcome them and the names and affiliations of these experts and a declaration of interest shall be included in audit reports.

5.9.2 During oversight activities, SEG shall also ensure that interpreters or technical experts they employ or contract are independent of the CAB being assessed or their client, unless this is not feasible due to logistical constraints, in which case a declaration of interest shall be included.

5.10 Exceptions

5.10.1 In extraordinary circumstances an exception to the requirements of this assurance process may be necessary. Extraordinary circumstances could include situations such as:

a) civil unrest;
b) an issue of health or safety which cannot be mitigated;
c) extreme weather events; or
d) exceptional and unpredictable social and environmental situations, for example pandemics.

5.10.2 Extraordinary circumstances identified pre-audit

5.10.2.1 In the event of an extraordinary circumstance the CAB shall inform SEG and request a variance to any requirements of this assurance process which are not able to be implemented. Exceptions and mitigating actions must be approved prior to implementation. Some potential mitigating actions may be:

a) conducting the audit remotely;
b) postponing the audit and/or extending the expiration date of a certificate;
c) delaying assessment of some components of the standard; and/or
d) altering the sampling strategy etc.

5.10.2.2 In situations where exceptions and mitigating actions are not approved in advance of the audit SEG may request corrective action by the CAB, at the CAB's expense.

5.10.3 Extraordinary circumstances identified during the audit

5.10.3.1 In some situations, an extraordinary circumstance could arise during an audit and the CAB would need to make an immediate decision; prior notification to SEG may not be possible. In this case the CAB shall inform SEG as soon as possible of the extraordinary circumstance, the exception made and any mitigating actions taken. SEG will determine if additional mitigating actions are required. An agreement to how the cost of the additional mitigating action will be covered will be required.

5.10.4 Some exceptions to specific criteria are specified in the Standard and shall be applied in the audit as appropriate.

5.11 Group Audits

5.11.1 In the SEG Standard the only identified 'Groups' are groups of fishers who operate within a fishery. The terms 'Group' and 'Fishery' are interchangeable here.

5.11.2 The aim of a Group audit is to verify the established management system of the fishery and verify a sample of fishers / locations / types of fishing included in the fishery.

5.11.3 Whilst a Group Certification procedure is not mandatory, the application of and good compliance with such a procedure shall result in a high conformance rating for Criterion 2.3 of the Standard .

5.11.4 The auditor shall refer to 211 Group Certification, which defines Group audit and certification procedures in more detail. In that, there are requirements for the group manager to implement a local Group Internal Procedure to document how they will exert local control in the fishery. Stratification shall take place where the fishery can be classified into distinct sub-groups, i.e. different fishing methods and/or recognised different fishery boundaries. If stratification is required, auditors shall follow the sampling procedure for each sub-group independently.

5.12 Report content and publication

5.12.1 Audit reports shall be written using the SEG approved template and shall contain the following minimum information:

a) unit of certification (e.g. geographic location, fishing method, life-stage, eligible fishers);
b) organisation assessed; if a fishery, the name of the fishery and a list of fishermen assessed;
c) audit methodology;
d) audit schedule;
e) audit intensity and rationale;
f) audit scope;
g) objective evidence and source(s) used to verify a client's performance for each of the criteria for the component(s) against which they have been assessed;
h) client's performance against each of the criteria for the component(s) against which they have been assessed;
i) auditor's finding for each of the criteria for the component against which they have been assessed;
j) risk assessment and surveillance audit schedule;
k) the percentage responsibility score and recommendation on certification (against each of the components that have been assessed);
l) any exceptional circumstances and mitigating actions (see 5.10);
m) any sampling strategies employed and any associated comments;

n) any corrective action(s) required, which will also be specified in a Corrective Actions Report (CAR).

5.12.2 The report findings for the client's performance should contain content of sufficient quantity and quality of information that an outside reader can verify that the client's performance score in relation to the SEG standard.

5.12.3 All audit reports shall be provided to the client and SEG who shall treat them in confidence, according to the 011 SEG Data Management System.

5.12.4 SEG shall publish certificates and the outcomes of assessment (not the assessment reports themselves due to data confidentiality) for the previous five years on the SEG website at: https://www.sustainableeelgroup.org/seg-certificate-register/

5.13 Audit outcomes

5.13.1 Auditors shall evaluate each of the relevant criteria for the component(s) within the audit scope. For each criterion the auditor will assign a finding of EITHER:

- Fully compliant ('Responsible') OR:
- Minor non-conformance OR:
- Major non-conformance OR:
- Critical non conformance.

5.13.2 The auditor shall provide a description of the findings, comparing them to the indicators in the standard, to help give clear reasoning for the subsequent decision for the indicator given

5.13.3 Ideally, a client is aiming to meet 100% compliance for all criteria (= 100% 'Responsible'). But a client can be certified with 75% of criteria at full compliance, as long as the remaining criteria are at 'minor non-compliance'.

5.13.4 The following shall apply according to levels of compliance:

Level	Compliance	Outcome
1	• 100% conformance	• **Certified. 100% 'Responsible'. No improvements needed before next audit**
2	• 75 - 99% conformance • 1 – 25% minor non-conformances	• **Certified** • Client must rectify 50% of those minor-non-conformances by next audit in 2 years. • If the required improvements are not made by the required date they would receive a CAR and have certificate suspended and would have to produce and work on an Improvement Plan until it is demonstrated that the threshold for Certified is reached.
3	• 51 - 74% Conformance • No Major non-conformances • 75 – 99% conformance • 1 major non-conformance	• **Can be 'conditionally' certified for a maximum of 3 months** • Conditional on: (1) Provision of a credible Improvement Plan (2) the major non-conformance or the threshold level of minor non-conformances being rectified within 3 months • If required improvements are not made by the required date the CAR would be maintained, Conditional Certification would be withdrawn and the Client would

		have to produce and work on an Improvement Plan until it is demonstrated that the threshold for Certified is reached.
4	• 51 – 74% Conformance • 1 Major non-conformance	• **Cannot certify** • Can conditionally certify when, via an Improvement Plan, at least one of those major non-conformances meets that in Level 3 above • Can certify when, via an Improvement Plan. both major non-conformances meet that in Level 1 or 2 above
	• 2 major non-conformances	
5	• Critical non-conformance	• Any critical non-conformance would mean **cannot certify** until they are resolved, via an Improvement Plan, according the Levels described above

5.13.6 The CAB may also suggest 'Opportunities For Improvement' to the client. While this information must be documented in the audit report, the comments must remain generic in nature. The auditor shall make it clear to the client that they do not provide specific solutions to the client on how to resolve a non-compliance. It is the responsibility of the client to choose the improvements or solutions that best suits their organisation. The CAB shall identify where there are gaps in compliance, or where improvements could be made, via a Corrective Actions Report, but not to propose or provide solutions.

5.13.7 It is the client's responsibility to develop and implement an Improvement Plan, to enable them to make the relevant corrective actions and achieve certification.

5.14 Remediation and consequences

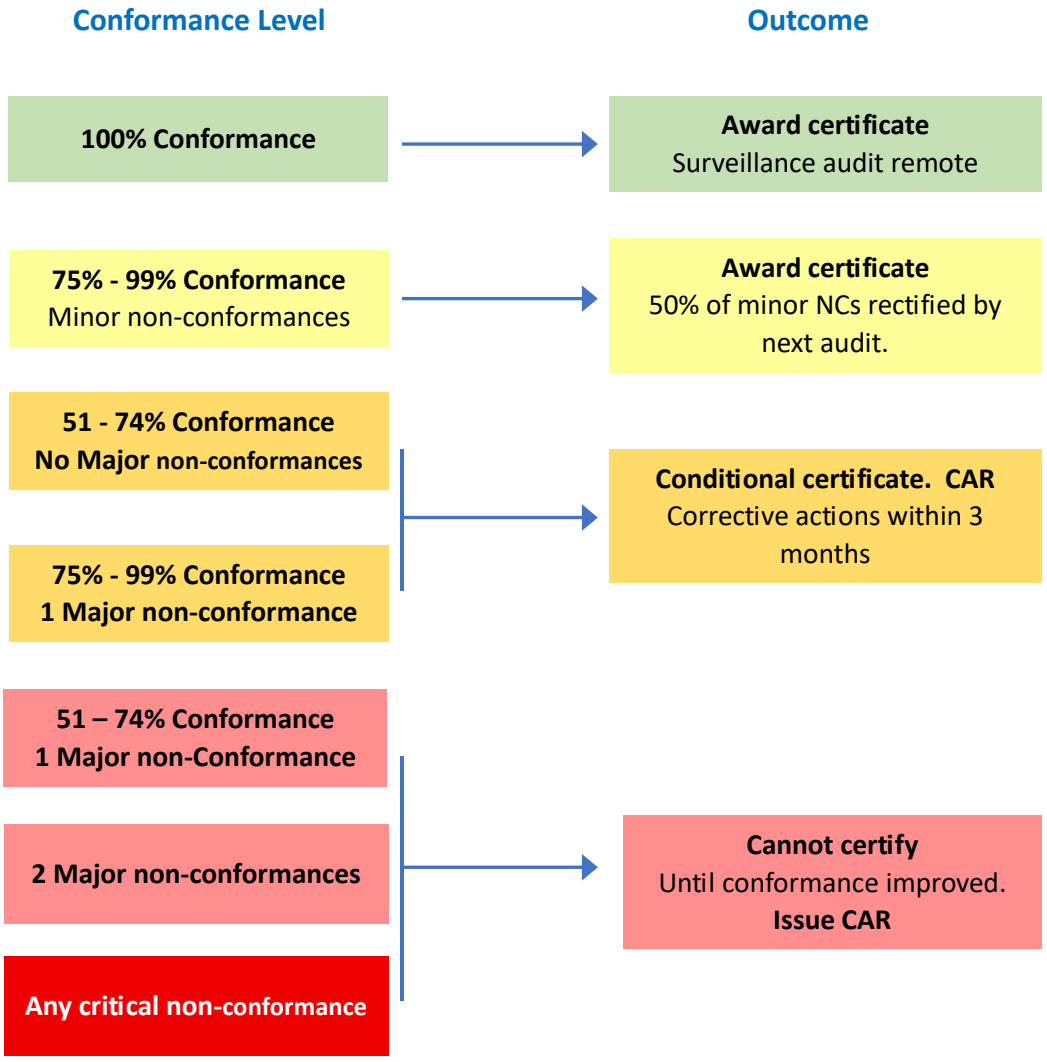
5.14.1 CABs have no role in remediating non-conformities as it is up to the client to address any findings of non-conformance then to request the CAB to re-evaluate the scoring.

5.14.2 Other than as defined in this document for Groups, the maximum time limit for a client to remediate non-conformities is 3 months for Major and 24 months for 50% of Minor.

5.14.3 If non-conformities are remediated and closed within those time limits, the client shall be classified as certified accordingly, otherwise they shall be downgraded accordingly.

5.15 Decision Chart

This decision chart summarises the certification decision processes for all audits.



Key

NC = Non Conformance

CAR = Corrective Action Report

5.16 Extenuating circumstances

CABs have the authority to flex some of these procedures if there are extenuating circumstances.

5.16.1 Examples of extenuating circumstances are (but are not limited to):

b) People being unavailable foir audit for genuine reasons, e.g. sickness

c) Extreme weather or other unplanned or unexpected events that impact on operations or audit,

5.16.2 Examples of procedures that might be adjusted are (but are not limited to):

a) Extending the certificate expiry date or audit time

b) Extending the date for completion of Corrective Actions

5.16.3 When extenuating circumstances are applied and procedures changed:

a) The CAB shall record them in the audit report

b) If in doubt, the CAB shall seek interpretation and agreement from the SEG System Manager.

5.17 Interpretation and language

5.17.1 If the CAB requires interpretation or clarification of any part of the SEG System they shall refer to the SEG System Manager.

5.17.2 If there is a dispute between the CAB and a client that they cannot resolve, it may be referred to SEG for interpretation or mediation.

5.17.3 All SEG System documents are written first in English. They may be translated into other languages by people or by artificial intelligence (AI). Where there is a difference of interpretation caused by the translating process, the English version shall be the default to be applied.

5.18 Continuous improvement

5.18.1 Clients are only certified when they meet the certification requirements. To reach that they will have moved through all or some of the following categorisations:

a) Non-SEG Client
b) Applicant
c) Client
d) Client with critical non-conformity = Not certified. Improvement Plan needed
e) Client with 2 major non-conformities = Not certified. Improvement Plan needed
f) Client with one major non-conformity = Conditionally Certified (up to 3 months). Improvement Plan needed
g) Client with up to 25% minor non-conformities = Certified. 50% Improvements needed by next audit
h) Client with no non-conformities = Fully Certified. '100% Responsible'

5.18.2 Clients are required to make improvements between audits to improve their conformance towards the 100% Responsible level.

5.18.3 In this way, the SEG Standard drives continuous improvement in practices in the commercial eel sector. By moving through these categories, clients are demonstrating continuous improvement in their operations to achieve compliance with the SEG Standard.

5.18.4 SEG makes a major revision to the standard every 5 years, and with minor revisions as necessary in between. In each revision, improvements are made so that practices are improved further to achieve the Standard.

6. Certification

6.1 SEG Certification means that a client:

a) has achieved compliance with the components of the Standard relevant to that business;
b) has demonstrated best practice: 'responsible' practices, and a contribution to the recovery of the eel stock;
c) is trading in responsibly sourced, SEG Certified eel.

6.2 Issuing certificates

6.2.1 Certificates will be issued by the CAB and shall include the following details:

a) The client's name and address.
b) The components that the client is certified against (the audit scope).
c) The certificate number.
d) The issue date.
e) The expiry date (four years after the issue date).

f) Date of next surveillance audit.
g) Signature of an appropriate signatory of the issuing CAB.
h) If the certificate is conditional, with a reference to documentation (the audit report or covering letter) to indicate the steps needed to achieve full certification, and the consequences of not doing so.
i) Branding to indicate the CAB and SEG, according to agreement between SEG and the CAB.

6.2.2 **Expiration of certificates and re-audit dates**

a) As a default, certificates shall expire four years after issue, subject to surveillance audits being carried out in between, according to the risk assessment in 5.4.
b) For fisheries and traders, expiry dates shall be after the end of the fishing season, but within 3 months of that,
c) For eel farms and processors, expiry dates shall be the anniversary of the certification date.
d) Audits shall be undertaken on active operations. So, for fisheries, these can only be done during the fishing season.

6.2.3 CABs shall retain authority for decisions related to their assessments (i.e. the decision-making is not outsourced).

6.3 Conditions of certificates

6.3.1 The certificate shall last for a maximum of four years but may be suspended or withdrawn at any time should evidence become available to demonstrate the client is no longer compliant with the standard (e.g. if a client were to receive a finding of two major non-conformances or a critical non-conformance in a surveillance audit).

6.3.2 The client shall be sent a copy of the certificate and conditions for its use.

6.3.3 Certificates are not transferable between clients. When a certified client merges with, acquires or is acquired by another company, the certificate cannot be transferred to the new client(s). A new assessment shall be arranged as the organisation and Ultimate Beneficial Owner will have changed.

6.3.4 The certificate alone does not show, and shall not be used to give the impression, that any individual batch of eel or eel product is SEG certified. Certified products shall have relevant batch labelling to enable assurance of traceability in the chain of custody.

6.3.5 The client may show their certificate to customers to show that they have passed the general requirements of the relevant section of the standard. Clients shall also show them the terms and conditions of use.

6.3.6 The full SEG Standard Certification terms and conditions are documented in 105 SEG Standard Conditions.

6.4 Publication of certificates

All current and expired (up to five years) certificates shall be published on the SEG website.

6.5 Use and communication of assurance status

Communication of certification and assurance status shall be in compliance with the 205 SEG Claims and Labelling Guide.

6.6 Suspension and withdrawal of certificates

6.6.1 As per the table at 5.13.4, certificates shall be suspended by the CAB under the following circumstances:

a) a finding of one critical non-conformance;

b) a finding of two major non-conformances
c) a finding of more than 50% of minor-conformances
d) a validated report that the client has had charges laid under a legal investigation (see Criterion 1.1)
e) a report of the client's suspected breach of the standard is officially 'under investigation' (see 7.3)
f) not meeting the terms and conditions of certification.

6.6.2 The certificate shall be re-instated when the reasons for suspension have been rectified to the satisfaction of the CAB – i.e. to meet the terms of the standard as per the table at 5.13.4.

6.6.3 Certificates will be withdrawn by the CAB under the following circumstances:

a) a surveillance audit is not completed (i.e. the final report written and submitted to SEG for posting on the SEG website) within three (3) months of its anniversary date; or
b) any reason for suspension in 6.6.1 above is not rectified within the required timescale; or
c) the conditions for certification are not met during a surveillance or recertification audit.

6.6.4 Where a certificate has been withdrawn, to become certified again, the client must be fully re-assessed by an approved CAB. The client should satisfy themselves via the self-assessment exercise that they have rectified the reason(s) for withdrawal.

6.6.5 The CAB shall notify SEG of a change in the status of any certificate and SEG shall update the register of certificates accordingly.

7. Appeals, complaints and investigations

7.1 Appeals

7.1.1 CABs shall have a publicly available appeals procedure whereby clients can appeal audit decisions.

7.1.2 Where a client is dissatisfied with the outcome of the appeal to the CAB they may appeal to SEG as the oversight body using the 015 SEG Complaints Procedure.

7.2 Complaints

7.2.1 CABs are required to implement a publicly available and accessible complaints resolution procedure.

7.2.2 Complaints regarding the certification status of CAB clients or the approval of CABs, or any other assurance-related matters may be made directly to SEG, according to the 015 SEG Complaints Procedure.

7.3 Investigations

The management of investigations is described in more detail in the 208 Investigation Procedure.

7.3.1 Stakeholders are invited to provide any feedback, including concerns or suspicions about clients' conformance with the SEG Standard and its associated assurance, at any time, either to the CAB or to SEG at standard@sustainableeelgroup.org. SEG will then require the CAB to investigate. All reports will be treated sensitively and in confidence.

7.3.2 Concerns raised by stakeholders regarding the activities of an existing or potential SEG Standard certificate holder shall be investigated by the CAB that issued their certificate. Any concerns raised first to SEG (or that SEG becomes aware of through media reports or otherwise) will be delegated to the CAB to investigate. SEG approved CABs are required to have open, transparent resolution

policies and processes to address such issues. Only in situations where a party feels that a concern is not satisfactorily addressed by the CAB should it be re-directed to SEG.

7.3.3 All concerns or issues raised to SEG or an approved CAB will be taken seriously and will be investigated sensitively and carefully. Certificates may be suspended or withdrawn for periods between 3 months and 2 years, depending on the severity of any transgression, any mitigating circumstances, and with reference to the timescales in SEG Standard Component 1.1 (Commitment to legality) of the SEG standard. If necessary, the 209 Disciplinary Procedure will also be followed.

7.3.4 Interested parties are invited to report suspected transgressions by contacting the SEG System Manager at: standard@sustainableeelgroup.org.

7.4 Investigation procedure

7.4.1 This is described in document 208 Investigation Procedure. SEG or the CAB will initiate this procedure in the following instances:

a) A stakeholder or enforcement authority reports an alleged transgression to SEG or the CAB.
b) A CAB raises an issue of fraudulent, illegal or suspicious behaviour of a client to SEG as the result of an audit.
c) SEG or the CAB becomes aware of a possible transgression via a media report.

7.5 Misrepresentation and corruption

7.5.1 SEG shall undertake and document monitoring activities to identify and mitigate misrepresentation or corruption. This includes following up of suspended clients to monitor cessation of claims.

7.5.2 Stakeholders should contact standard@sustainableeelgroup.org to report instances of potential misrepresentation or corruption.

8. Oversight of CABs

8.1 CAB Eligibility

8.1.1 CABs are required to conduct an application and provisional approval stage before formal approval.

8.1.2 Only approved CABs, that have entered an appropriate legal contract with SEG shall issue SEG certificates.

8.1.3 CABs are required to be compliant with the latest version of this 202 SEG Assurance System.

8.2 Requirements for CAB application

Applicant CABs are required to provide the following to SEG:-

8.2.1 Head office address, contact name and email.

8.2.2 Evidence of the applicant CAB being a legal entity;

8.2.3 Proof, for each CAB office seeking approval, of valid ISO 17065 compliance (including scope) and / or proof of valid approval or accreditation against other relevant certification standards, such as MSC or ASC;

8.2.4 Evidence of sufficient staff with appropriate competency to manage an auditing and oversight programme of certification to the SEG Standard. This should include details of locations, numbers, and competency of the key CAB personnel, auditors and subcontractors, including language abilities.

8.2.5 Procedures for ongoing auditor and subcontracted auditor training, oversight, performance tracking and calibration.

8.2.6 Evidence of relevant auditors and subcontracted auditors having participated in a training on the SEG standard as outlined in this document.

8.2.7 Evidence of management commitment to the integrity of the SEG programme and sufficient responsiveness to clients.
8.2.8 A copy of a Valid Liability/Indemnity Insurance Certificate with a value of at least €5,000,000.00.
8.2.9 Evidence of the CAB's procedures for quality management, ensuring impartiality and prevention of conflict of interest amongst CAB personnel, auditors, and subcontracted auditors.
8.2.10 Details of all offices of the applicant CAB that would be involved in the SEG programme and in what capacity, and details of the nominated person or persons that are key points of contact for the SEG programme at each office listed above.
8.2.11 Procedures for making certification decisions, including procedures for Technical Review of Audit Reports, Non-conformities, and Corrective Actions.
8.2.12 Details of the charges the CAB will make to clients in the SEG programme.
8.2.13 Evidence of the necessary systems as summarised in CAB Responsibilities, below.
8.2.14 A self-assessment to determine if all competency, resource, and other requirements are fully met;
8.2.15 Evidence of the countries in which it is legally eligible to operate as a CAB;
8.2.16 A formal letter of intent to become an approved CAB.

8.3 CAB provisional approval

8.3.1 Once the SEG Board has reviewed and passed the application documentation, which must be submitted in English, and once the CAB has entered into a legal contract with SEG, SEG will inform the CAB that they are provisionally approved and can start conducting audits against the SEG standard as per their requested approval scope.

8.4 Requirements for CAB approval

Following provisional approval, the CAB shall:-

8.4.1 Receive training by SEG in the SEG standard, certification and assurance procedures;
8.4.2 Conduct audits of clients which will be reviewed and overseen by the SEG System Manager.
8.4.3 The SEG System Manager will review how the CAB applies the audit procedures as stipulated in the SEG Assurance System, the interpretation of the application of the standard criteria, and the accuracy and quality of scoring and reporting.
8.4.4 Upon successful completion of the review of three audit reports, the provisionally approved CAB shall be approved by SEG's System Manager and shall be listed as such on the SEG website. The CAB shall issue SEG certificates only after it has been approved by SEG and is listed on the SEG website.

8.5 Requirements of approved CABs

The CAB shall:

8.5.1 Sign a SEG - CAB Agreement with SEG prior to conducting SEG-related auditing activities;
8.5.2 Keep SEG updated with any changes to the information provided during the CAB's application process;
8.5.3 Implement the requirements outlined in the SEG Assurance System;
8.5.4 Assign auditors to SEG audits that meet the competence and training requirements outlined in this document;
8.5.5 Implement an ongoing programme for calibration of auditors and other assurance personnel;
8.5.6 Enable recurring demonstration of auditor competence through evaluation (by SEG or other entities), using verification mechanisms that include witnessing auditor performance.
8.5.7 Where departures from CAB's responsibilities within the Assurance System are identified, a non-conformity will be raised and the CAB shall provide a Root Cause (and extent) Analysis, a Preventative Action and a Correction for any error made, within the timescales specified in 8.5.20;

8.5.8 Audit for and apply the SEG Claims and Labelling Guide for claims made in relation to SEG approval;
8.5.9 Provide specified data and information about audits to SEG to enable SEG to operate its Monitoring, Evaluation and Learning system;
8.5.10 Provide copies of SEG certificates and audit reports, according to the specified template to SEG;
8.5.11 Inform SEG of any changes to the CAB's ISO 17065 or other relevant accreditation status within five working days of the change;
8.5.12 Participate, where requested, in SEG efforts to investigate complaints and incidents of potential transgressions and non-conformance with the standard;
8.5.13 Implement a publicly available appeals procedure whereby clients can appeal assessment decisions.
8.5.14 Have a publicly available and accessible complaints system that investigates and takes appropriate action regarding relevant complaints, within defined timelines, and reviews and takes any necessary corrective actions;
8.5.15 Keep a record of all complaints and resulting actions to be made available for internal audits and management reviews;
8.5.16 Ensure that interpreters or technical experts employed are independent of the client, unless this is not feasible due to logistical constraints. In all cases, the names and affiliations of these experts shall be included in audit reports;
8.5.17 Assist in the organisation of shadow audits;
8.5.18 Maintain systems for ensuring impartiality and avoiding conflicts of interest;
8.5.19 Continue to comply with all SEG Agreements, Standards, Requirements, Policies, Procedures as provided and as amended. This includes co-operation and access to information, staff, and sites as required by SEG.
8.5.20 Take action to investigate, remedy and prevent recurrence of any CAB non-conformities identified by SEG or CAB internal audits. CABs will be expected to provide a root cause and extent analysis leading to preventive action as well as a correction to the identified non-conformity within the following maximum timescales:
a) four months for extent analysis and correction,
b) eight months for root cause and
c) 12 months for preventative action,
overall not exceeding 12 months.
8.5.21 Co-operate with performance monitoring through a Service Levels and Performance Indicators mechanism. CABs will be advised of any areas needing improvement. Unacceptable performance will lead to sanctions as well as possible suspension or withdrawal of approval at SEG's discretion.
8.5.22 Such Performance Indicators shall include (but will be confirmed in the SEG-CAB agreement):
a) Maximum times for responding to clients and organising self-assessments and audits.
b) Maximum times for completion of audit reports, issuing of certificates and follow-up of non-conformances and corrective action reports.
c) Issuing reminders for surveillance audits and completion of corrective actions.
d) Maximum times for responding to communications from SEG.
e) The quality of auditors' work, for example meeting the requirements of audit reports specified in 5.12, and the audit procedures specified in sections 5.2 – 5.15.
8.5.23 Conduct annual internal audits on the achievement of these Service Levels and share the results with SEG.
8.5.24 Take full responsibility for ensuring the quality and integrity of all assurance activities outsourced to another body.

8.6 SEG responsibilities

SEG shall:

8.6.1 Provide training to CABs and their relevant auditors on the SEG Standard as part of the CAB approval process and as needed thereafter, for example when the SEG Standard or Assurance System has been reviewed and updated. Training details are provided in Section 9.

8.6.2 Provide training to SEG personnel entrusted with approval functions on the SEG Standard and ensure they understand the principles of assurance, including approval and oversight. See Section 9.3.

8.6.3 Treat all approved CABs equally with regards to oversight (see 8.6.5). SEG does not apply a risk based approach to oversight of CABs.

8.6.4 Implement an ongoing oversight programme of a CABs to ensure the quality and credibility of certification activities. This oversight will include:

a) Witnessing ('shadowing') of two audits per year;

b) reviewing 100% of each CAB's audit reports and certifications in the first year of the CAB's appointment; 50% in the second year and 10% per year thereafter to assess whether the Assurance System is properly applied.

c) An annual review meeting to review the CAB's application of the Assurance System, to include a review of the meeting of performance indicators specified in the CAB agreement.

8.6.5 Where non-conformities and departures from the Assurance System are identified these shall be brought to the attention of the respective CAB who shall take action as in 8.5.7 to remedy the non-conformity and prevent recurrence. The timescales for this are set out in 8.5.20.

8.6.6 Publish approved CABs at https://www.sustainableeelgroup.org/seg-standard-2-2/conformity-assessment-body/ and Accredited Assessors at https://www.sustainableeelgroup.org/seg-accredited-assessors/

8.6.7 Summarise and publish the certification processes in 213 SEG - CAB Certification Procedure.

8.6.8 Review the Assurance System as described in Section 15.

8.6.9 Apply learning from CAB oversight into the SEG Monitoring, Evaluation and Learning system.

8.7 Termination

SEG may suspend or terminate CAB approval under any of the following conditions:

8.7.1 The CAB repeatedly fails to properly and fully implement the requirements of the Assurance System;

8.7.2 The CAB fails to submit data and information for the SEG Monitoring, Evaluation and Learning System;

8.7.3 The CAB does not undergo a shadow audit as requested by SEG;

8.7.4 The CAB's auditors do not take part in training as requested by SEG;

8.7.5 The CAB or its auditors fail to meet the quality or timescale Performance Indicators as summarised in section 8.5.22, and formalised in the CAB and SEG Agreement;

8.7.6 Failure to adequately address non-conformities.

8.7.7 The CAB may terminate its SEG approval with two months' notice to its SEG certificate holders and SEG.

8.8 Appeals

CABs may appeal SEG's decision not to approve a CAB or to terminate their appointment. To do so they should follow the 015 Complaints Procedure.

9. Competence and training

9.1 SEG Standard Training

9.1.1 CABs, their relevant auditors and SEG personnel carrying out approval functions shall participate in SEG Standard training as requested and delivered by SEG.

9.1.2 The training shall be designed to:

a) Help participants understand the SEG Theory of Change, the SEG Standard, the SEG Assurance System and the SEG overall programme;
b) Provide background on the European eel life history, threats to the species, its conservation status, protective legislation, fishing, farming and the commercial market for European eel;
c) Educate participants in-depth about the components and criteria of the SEG standard, placing emphasis on the most critical issues;
d) Specify how to generate and present audit reports.
e) Understand how to apply the certification process.

9.2 Competence and training

9.2.1 At a minimum, CAB personnel and auditors responsible for auditing, technical review and decision making shall possess the following competences before engaging in SEG-related activities:

1. Education and knowledge	2. Work experience	3. Auditor training and experience	4. SEG training
Bachelor's degree in a relevant field, e.g. Environmental Management, Natural Resource Management, Fisheries Biology, Aquaculture, Food Technology. Knowledge of the European Union Council Eel Regulation (EC) No 1100/2007.	5 years of professional experience in an area of work relevant to the fishing or fish farming industry or environmental evaluation.	To pass a course on auditing recognised by IEMA or IRCA for at least one of the following ISO Standards: ISO9001, ISO14001, ISO50001, ISO 12877 or ISO19011. Participation in 3 on-site audits of any fishing, fish farming or fish processing operations for MSC, ASC or other fishery standard audits.	Participation in SEG Standard training.

9.2.2 Ongoing Professional Development

To remain an auditor for the SEG programme thereafter, auditors and responsible for auditing, technical review and decision making shall:

a) conduct at least 2 SEG audits per year,
b) maintain their ISO recognised auditor training accreditation,
c) participate in SEG training in any new or significantly revised elements of the Assurance System,
d) participate in a SEG Standard refresher training every two years.

9.2.3 Recognition of this ongoing competence shall be made by issue of a 'SEG Accredited Assessor' certificate, which shall be published on the SEG website at: https://www.sustainableeelgroup.org/seg-accredited-assessors/

9.3 SEG Personnel Competences

9.3.1 At a minimum, SEG personnel carrying out approval functions shall possess the following competences:

Assurance	SEG training
Understanding of the principles of assurance, including approval and oversight. This may be acquired through e.g. self-study of relevant documentation or a recognised training course. Knowledge of the SEG Standard. Knowledge of the SEG Assurance System. Shadow audits and review of audits as described in 8.6.4	Participation in SEG Standard training as provided by the SEG System Manager.

9.3.2 SEG personnel carrying out shadow audits and quality reviews of audits shall also have 5 years of professional experience in an area of work relevant to the fishing or fish farming industry or environmental evaluation and participate in the SEG Standard training.

9.3.3 As ongoing professional development, such SEG personnel shall:

a) witness (shadow), at least one audit per year,

b) provide quality assurance of CAB audits by reviewing at least two audits per year,

c) participate in a SEG Standard refresher training every two years.

10. Recognition of equivalence

10.1 SEG and the CAB shall recognise equivalent standards, or equivalent components of similar standards. Specific guidance on where this can be applied shall be in the guidance section of the relevant component in the SEG standard.

10.2 At present, the equivalent standards recognised are:

1. the Chain of Custody element of the Marine Stewardship (MSC) and Aquaculture Stewardship Council (ASC) Standards, which are deemed to provide equivalence for the SEG Standard criterion for Traceability.
2. Criterion 5.2: Fish as 'FMFO' in the feed (including juvenile feed) comes from either an MSC certified fishery or a Marin Trust certified factory, or the feed is sourced from an ASC certified feed mill."
3. Where national or EU registrations apply to recognise the client's legal compliance. For example: reporting of catches, Traces documentation, biosecurity, eel farming, food standards, animal transport, water quality discharges.

11. Assurance data, records and document control

11.1 The management and assurance of data (including assurance data) is described in 011 Data Management System.

11.2 The management of system documentation is described in 013 Document Management System.

12. Impartiality

12.1 Independence

12.1.1 The SEG programme is designed to safeguard the independence of assurance. Audits and certification decisions shall be made only by approved CABs whilst approval of CABs and logo licensing rests with SEG. SEG does not charge CABs an approval or other fee, nor do CABs make any payments to SEG.

12.1.2 CABs shall be independent of SEG, and auditors may be employees or contractors to the CAB, but also independent of SEG.

12.1.3 The SEG Board is comprised of a balance of interests: for each social, environmental and commercial interests. This maintains a balanced and independent oversight of the development and operation of the SEG System.

12.1.4 SEG personnel entrusted with approval functions shall not have a commercial or financial relationship with CABs or with any certified clients. If they do, their interest must be clearly declared and managed according the SEG Conflict of Interest Policy.

12.1.5 SEG Standard Revision team members providing commercial sector experience and representation in the development or revision of a standard may have a commercial relationship with a CAB or a certified client, but their interest must be clearly declared and managed according the SEG Conflict of Interest Policy.

12.1.6 Any other conflict of interest or situation that might be perceived as a conflict of interest shall be made known by SEG personnel and the SEG Board to the SEG Chairman, who will decide if and how to manage the situation. Actions may include removing SEG Personnel members from oversight activities such as shadow audits or from approval functions. SEG personnel shall not undertake audits but may shadow audits in their oversight and approval capacity.

12.2 Impartiality and Conflicts of interest

12.2.1 The SEG risk management plan defines potential threats to impartiality and conflicts of interest within its assurance system and how these potential threats and conflicts will be mitigated. The SEG risk management plan also shows mechanisms for monitoring and evaluation of associated risks and mitigations.

12.2.2 The SEG risk management plan includes assessment the potential threats to auditor impartiality and requires CABs to implement practices to mitigate the associated risks.

12.3 Impartial decision-making

12.3.1 CABs are required to use competent personnel other than the auditor or audit team to make impartial decisions on conformance.

13. Contingency Arrangements in the absence of an approved CAB being available

13.1 In the absence of a CAB, SEG can install an independent SEG Standard Panel as a temporary measure. When needed, the Panel is responsible for acting as the CAB and providing independent advice to the SEG Board. This is described in more detail in 214 SEG Standard Panel Terms of Reference When Acting as a CAB.

14. Management review

14.1 SEG conducts management reviews at least once a year according to 014 Standard System Management Review to assess the performance of its assurance system, update classification of risks, and inform improvements. This review draws on analysis of assurance system data to inform those assessments and risk classifications.

14.2 SEG takes preventive measures to manage risks to the integrity of the assurance system and oversees effective implementation of improvements identified in data analysis and management reviews.

15. Assurance System review

15.1 The SEG Assurance system shall be reviewed every five years or as needed based on feedback during implementation, through the SEG Monitoring, Evaluation and Learning system or when a SEG Standard is revised. Reviews will aim at ensuring that the system is sound, adequate and effective. It will take account of:

a) Results of CAB, auditor and SEG personnel training;
b) Insights gathered from CAB review reports, audit reports and shadow audits;
c) Outcomes of Claims and Labelling monitoring activities;
d) Insights gathered from the SEG monitoring, evaluation and learning system;
e) Any input received from stakeholders.

15.2 SEG will provide notification of changes to the SEG Assurance System within thirty days of making a change to the following SEG stakeholders:

a) SEG approved and provisionally approved CABs;
b) SEG personnel;
c) SEG standard certificate holders;
d) All SEG stakeholders via publication on the SEG website.

15.3 Notification will include, minimally:

a) the original requirement;
b) the revised requirement; and
c) the timeline for implementation of the new/revised requirement and any transition arrangements.

16. Availability of information

16.1 SEG will ensure that the following information is made publicly available:

a) A description of the structure of the assurance system including decision-making.
b) Information on data ownership and availability.
c) Criteria for accepting CABs and clients to the scheme.
d) Application procedures for clients.
e) A list of approved CABs.
f) A description of the assessment methodology: types of assessment employed, how clients are assessed, how often, and by whom, and the basis for decisions.
g) Policy on information provision (knowledge sharing) to clients by CABs.
h) How stakeholders can provide input to the assurance and oversight process.
i) Consequences for different levels of non-conformity.

j) A summary of resolved complaints.
k) Steps taken to have confidence in the results of other schemes deemed equivalent or partially equivalent
l) A list of certified clients, their scope of assurance, and expiry date of their certificate
m) Basic information about the results of assessments of both clients and CABs.

17. Stakeholder input

Stakeholders are welcome to provide input on the integrity, content or implementation of the SEG Assurance System at any time. Contact us at standard@sustainableeelgroup.org.

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