



Sustainable  
*Eel* Group

# The SEG

# Assurance System



# The SEG Assurance System

## Versions Issued

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## 1. Introduction

### 1.1 The Sustainable Eel Group - 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 in 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 and Oversight 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 (the SEG Standard System). It includes those auditors that are sub-contracted to the CAB to conduct audits / assessments of clients against the SEG Standard.

## 2. Purpose of this document

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

This document outlines 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;
- Procedures to be implemented in instances of issues or concerns regarding the Assurance and Oversight 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 standard system can be found at: <http://www.sustainableeelgroup.org/the-seg-standard-system/>.

## 2.2 Status

The SEG Board 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 Standard System](#) on our website: [www.sustainableeelgroup.org](http://www.sustainableeelgroup.org). Those using and applying it are responsible for ensuring they use the latest version.

### 3.2 SEG responsibilities

- 3.2.1 The SEG Board 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.
- 3.2.2 The tasks of development, revision and maintenance of the SEG Standard System is delegated to the SEG Standard System Manager, who shall develop processes in consultation with stakeholders and colleagues, for approval by the SEG Board.
- 3.2.3 The development and revision of a SEG Standard is delegated to the SEG System Manager who shall co-ordinate that with the support of a SEG Standard Team, appointed by the SEG Board. The SEG Standard team shall develop or revise a Standard for approval by the Board. See also [102 SEG Standard Development and Revision Procedure](#), [119 SEG Standard Team Terms of Reference](#) and [004 SEG Governance Summary](#), all available at: [SEG Standard System](#).

### 3.3 CAB responsibilities

CABs approved by SEG are responsible for making certification decisions as well as certificate suspension and withdrawal decisions. 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.

### 3.4 Eligibility

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 System. Certification will only be granted by approved CABs, and only to those demonstrating ongoing conformity with the SEG Standard.

Any CAB may apply to SEG for approval, subject to the eligibility criteria in Section 7.

## 4. Risk management

SEG operates a 018 Risk Management System that will be published in the [SEG Standard 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 SEG Document Management System, SEG Management Review System, SEG Risk Management System, and SEG Monitoring, Evaluation and Learning System. All are or will be published on our web-page: [SEG Standard System](#).

### 5.2 Audit procedures

#### 5.2.1 Initial self-assessment

5.2.1.1 Prior to arranging a full audit, clients shall be required to complete a self-assessment exercise using the [SEG Reporting Portal](#) in order to become a 'SEG Client'. Clients shall discuss with the CAB to ensure the client is clear on the extent of their organisation to be assessed. See guidance for 'organisation' in the [103 SEG Standard](#).

5.2.1.2 The self-assessment exercise shall enable the client to provide and declare essential information to the CAB in advance of a full audit. It shall also enable the client to understand the SEG Standard System, how well their current procedures meet the SEG Standard and therefore how much preparatory or corrective work is needed before proceeding to full application and audit.

#### 5.2.2 Binding Legal Agreement

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

5.2.2.1 the scope, timing and cost of the audit. The scope shall include the extent of the organisation under assessment. See guidance for 'organisation' in the [103 SEG Standard](#).

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

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

5.2.2.4 commitments by the CAB to treat data confidentially and securely and to adhere to the [011 SEG Data Management System](#); and

5.2.2.5 acknowledgement that data and audit outcomes will be shared openly with SEG and that SEG will issue a publicly available audit report.

#### 5.2.3 Initial on-site audit

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

5.2.3.1 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;

- 5.2.3.2 Tour of operation. The CAB shall complete a full audit of the client's operation, including tours of farms and/or observing fishing activities, subject to the sampling requirements identified in Section 5.6;
- 5.2.3.3 Discussion and assessment against standard. The CAB shall assess the client against the standard. The CAB shall collect evidence at every stage;
- 5.2.3.4 Final meeting. Final discussion and initial findings;
- 5.2.3.5 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 requirements for the component(s) against which they have been assessed. The report will make a recommendation on certification. The draft assessment report will 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 final report with no further amendments; and
- 5.2.3.6 Final Report. Within 60 days (an extension can be agreed between the CAB and client in extenuating circumstances) of the last day of the on-site portion of the audit, the final report (incorporating any clarifications agreed through the process of review with the client) shall then be sent to the CAB's decision-making entity, who has the authority to award the certificate under contract agreement with SEG. Final reports, certificates and final certification correspondence, shall be forwarded to SEG. SEG shall publish final reports and certificates for publication on its website.
- 5.2.3.7 The initial audit shall consider evidence from a period of 5 years prior to the audit.

#### 5.2.4 Requirements for all audits

- 5.2.4.1 The CAB shall apply data quality control processes to ensure that audit reports are accurate.
- 5.2.4.2 A register of assessed clients will be maintained on the [SEG website](#). Certificates and assessment reports will also be published, linked to that register, to provide full transparency and be open to public scrutiny. Commercially confidential information in assessment reports may be removed or redacted.

### 5.3 **Surveillance audits**

- 5.3.1 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 the completion of the following table:

Table 1. Deciding on surveillance program

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	

5.3.2 The relevant audit frequencies are provided in 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

5.3.3 Certified clients shall be sent a reminder that a surveillance audit is due a minimum of two (2) 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. Should the audit not occur, the certificate of the organisation will be suspended, unless the organisation can demonstrate extenuating circumstances and also provide a suitable time-frame for the completion of the audit.

5.3.4 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 certification body.

- 5.3.5 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 Audit intensity

- 5.4.1 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;
  - b) the size of business;
  - 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).

#### 5.5 Audit scope

- 5.5.1 All organisations must be assessed against Component 1.
- 5.5.2 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.
- 5.5.3 Where the organisation being assessed is an entity applying for certification on behalf of fishers, conformance to components of Section 4 of [211 Group Certification](#) shall be assessed.

#### 5.6 Audit sampling

- 5.6.1 In instances where there are multiple items of like pieces of objective evidence for a single indicator (i.e. there are multiple fish tanks on a fish farm) it is often necessary to select a sample of evidence to review during the audit.
- 5.6.2 Where sampling is used the auditor shall select a random 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.
- 5.6.3 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) randomization, 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).
- 5.6.4 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.
- 5.6.5 The CAB shall increase the sample size in situations where there is a high degree of variation in the sample of objective evidence observed.
- 5.6.6 In surveillance audits, the CAB shall strive to select objective evidence which was not sampled in previous audits unless this preferential sampling will clearly indicate 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 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

## 5.7 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:

### 5.7.1 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 have not been involved in the audit process.

### 5.7.2 Certification decision

- a) The CAB shall be responsible for and shall retain authority for its decisions relating to certification.
- 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 Standard Manager.
- e) CABs are required to use competent personnel other than the auditor or audit team to make impartial decisions on compliance.

## 5.8 Technical experts and interpreters

5.8.1 CABs are required to 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 as well as the names and affiliations of these experts and a declaration of interest shall be included in audit reports.

5.8.2 During oversight activities SEG shall also 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 a declaration of interest shall be included.

## 5.9 Exceptions

5.9.1 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.

### 5.9.2 Extraordinary circumstances identified pre-audit

5.9.2.1 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.

5.9.2.2 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.

### 5.9.3 Extraordinary circumstances identified during the audit

5.9.3.1 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.

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

## 5.10 Group Audit

5.10.1 In instances where the audit is for a group of fishers within a fishery being certified then the CAB shall select a random sample of fishers according to Table 3.

5.10.2 The sample of fishers to observe during the audit shall be chosen according to a sampling strategy developed by the auditor. In developing the sampling strategy, the auditor shall prioritize, as applicable, the following objectives:

- a) maximum representation of variability within the sample (for example, if there are fishers departing from different locations a sample across locations may be taken); or
- b) maximum potential of identifying non-conformances which might be present (if there is a known problem, for example, with a fishery out of one location a sample may focus on tanks of eels of a younger age class; and
- c) randomization, where possible, of the sample of fishers observed (for example, if there are three fishers departing from the same high risk location, a random sample amongst them shall be chosen). 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.

5.10.3 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.

5.10.4 Note that in [211 Group Certification](#), there are requirements for the organisers of fishery certifications to implement a local Group Internal Procedure to document how they will exert local control in the fishery. The CAB shall audit the documentation and implementation of those procedures.

## 5.11 Report content and publication

5.11.1 Audit reports shall be written using the SEG approved template and must contain the following 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 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 5.9); and
- m) any sampling strategies employed and any associated comments.

5.11.2 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.

5.11.3 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 Scoring

5.12.1 Auditors shall evaluate each of the relevant criteria for the component(s) within the audit scope. For each criterion where a Responsible Indicator and an Aspiring Indicator is given, the auditor will assign a finding of 'Responsible', 'Aspiring' or 'Major non-conformance'.

5.12.2 The Aspiring indicators are descriptions of the boundaries of a 'Minor non-conformance'. Each audit finding outside of (below) those indicators shall be regarded as a 'Major non-conformance'.

5.12.3 For each criterion, there shall be a description of the findings, comparing them to the criteria in the standard, to help give clear reasoning for the subsequent decision for the indicator given: 'Responsible', 'Aspiring' or 'Major non-conformance'.

5.12.4 Where a group of fishers is evaluated, in addition to evaluating conformance to the Standard, auditors shall evaluate each component of Section 4 of [211 Group Certification](#) shall and assign a rating. The Standard components shall be assigned ratings as per requirement 5.12.1. The Group Certification components shall be assigned ratings of:

- a) 'minor non-conformance' where non-conformance is related to an isolated incident. Minor non-conformances issued to a group shall have a timeline of 3 months; or
- b) 'major non-conformance' where non-conformance is systemic. In all instances, where more than 50% of the fishers in the group do not achieve a component of the SEG Standard a major non-conformance against Section 4.5 of [211 Group Certification](#) would be issued. Major non-conformances shall result in a suspension of the certificate.

5.12.5 Further, the following shall apply when non-conformances are found in samples of groups:

- a) Non-conformances by less than 25% of fishers in the sample assessed during the audit shall result in the provision of a CAR requiring resolution within 12 months to maintain certification;
- b) Non-conformances of 25 – 50% of fishers in the sample assessed during the audit shall result in a CAR requiring resolution within 3 months to maintain certification;

c) Non-conformance by of more than 50% of the sample assessed during the audit shall lead to a CAR requiring resolution within 1 month to maintain certification.

5.12.6 Additionally, where the entity applying for certification notifies the CAB of non-conformances identified within the group of fishers, the CAB shall issue non-conformances as described in 211 Group Certification Section 4.5 e – f.

5.12.7 The CAB may also suggest Opportunities For Improvement to the client. While this information must be documented in the audit report, it must be clear to the client that the information is not normative and that they can choose the path of improvements that best suits their organisation.

### **5.13 Audit outcomes**

5.13.1 The client must achieve 100% 'Responsible' indicators of Component 1 (Core Component) to achieve the SEG standard and certification.

5.13.2 A finding of 'major non-conformance' for any criterion in the audit scope will result in a failure to achieve or maintain certification.

5.13.3 The client must then meet at least 50% of the remaining indicators, weighted according to the standard at the Responsible level to achieve the SEG standard. In this circumstance:

a) the less than 50% non-compliant weighted scores must meet the criteria for 'minor non-compliances';

b) the audit report will identify which indicators have been met at the Aspiring level. The client will be expected to have improved at least one of those to the Responsible level by the time of the following audit, usually after 24 months; otherwise a major non-conformance and suspension will be issued. The aim is for all clients to continuously improve to the 100% Responsible level.

5.13.4 Where a client has 100% 'Responsible' indicators of Component 1 and does not have any major non-conformances but has less than 50% of other indicators as Aspiring, it does not achieve certification and the client shall be classified as 'Aspiring'. This indicates that the client has entered the SEG certification programme and is committed to making improvements to meet the full requirements. The client shall have a maximum of 24 months to rectify at least one of the minor non-compliances to above the threshold for certification and then, when confirmed as rectified by the CAB, a certificate shall be awarded. Where minor non-compliances are not closed within 24 months the client shall recommence the application process.

### **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.

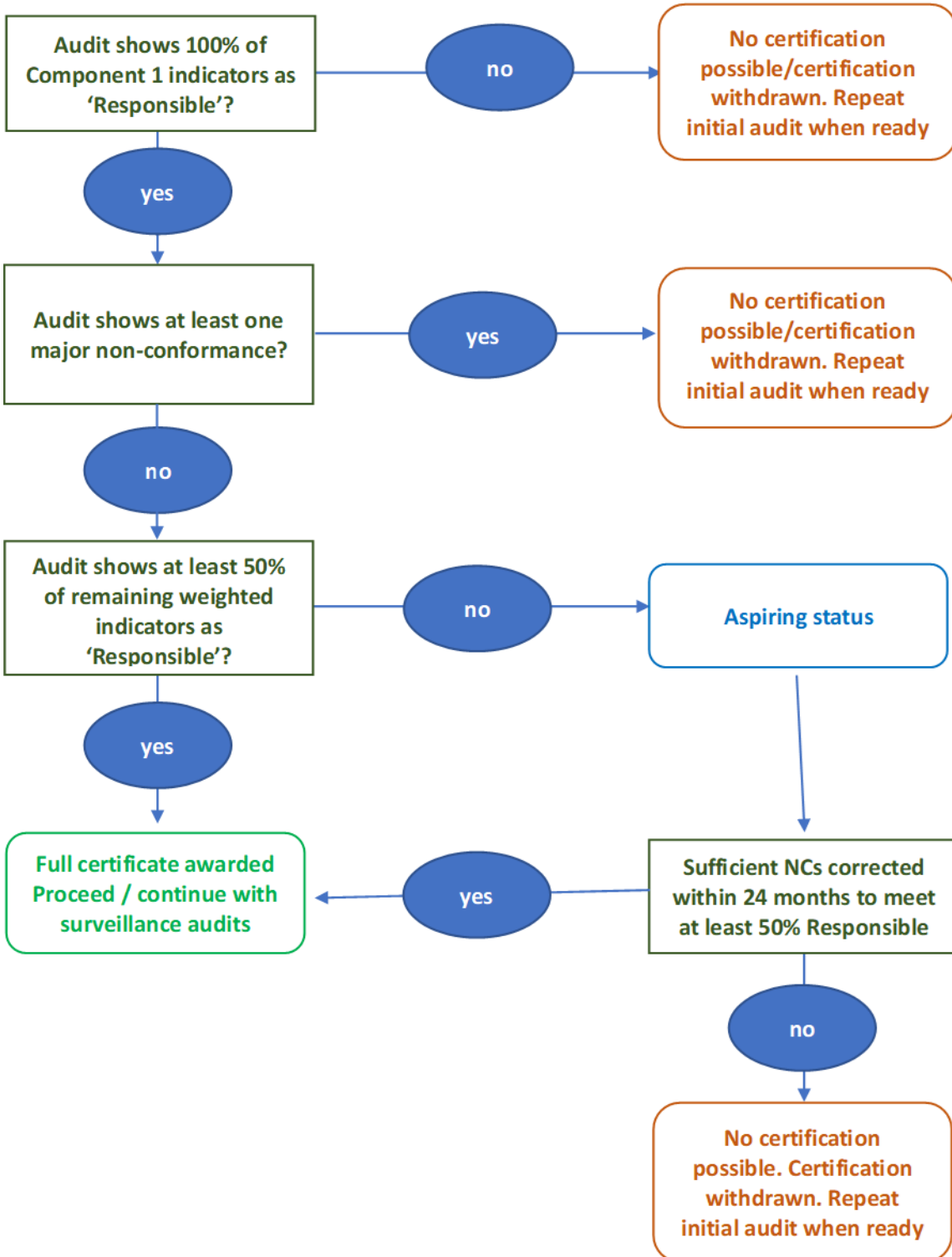
5.14.2 The defined time limit for a client to remediate non-conformities is 24 months.

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 Charts

This decision chart summarises certification decision processes for initial and surveillance audits.

- NB.
1. Self Assessment first completed by client
  2. Auditor completes full assessment.
  3. NC = non-compliance



## 5.16 Continuous improvement

5.16.1 Clients are only certified when they meet the full 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 major non-conformity
- e) > 50% minor non-conformities = Aspiring
- f) =/< 50% minor conformities = Fully Certified

5.16.2 By moving through these categories, clients are demonstrating continuous improvement in their operations to achieve compliance with the SEG Standard.

5.16.3 SEG makes a major revision to the standard every 5 years, and with minor revisions as necessary in between. In each revision, the bar is raised so that practices have to be improved to achieve the standard. In this way, the SEG standard drives continuous improvement in practices in the commercial eel sector.

## 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) 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 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 withdrawn at any time should evidence become available to demonstrate the client is no longer compliant with the standard (i.e. if a client were to receive a finding of not in 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 denote 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 four 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 Certificates shall be suspended by the CAB under the following circumstances:
  - a) a finding of non-conformance in Component 1 of the standard during a surveillance audit;
  - b) a finding of non-conformance in any other Component of the standard, unless closed within the timelines as shown in the Decision Charts in 5.15
  - c) a report of the client's suspected breach of the standard is officially 'under investigation' (see 6.6.3);
  - d) 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 – within the timelines as shown in the Decision Charts in 5.15.
- 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 5.3.1 above is not rectified within 3 months; or
  - c) an investigation by the CAB into a suspected or confirmed non-conformance or the terms and conditions of certification; or
  - d) 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 the CAB. The client should satisfy themselves via the self-assessment tool that they have rectified the reason(s) for withdrawal.
- 6.6.5 The CAB shall notify SEG of a change in the status of a certificate and SEG shall update the register of certificates accordingly.

## 7. Appeals, complaints and investigations

### 7.1 Appeals

- 7.1.1 CABs are required to implement a publicly available appeals procedure whereby clients can appeal audit decisions.

### 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 Complaints Procedure](#).

### 7.3 Investigations

The management of investigations is described in more detail in the [208 Investigation Procedure](#).

- 7.3.1 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 certification. 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.
- 7.3.2 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 Component 1.1 (Commitment to legality) of the SEG standard. If necessary, the [209 Disciplinary Procedure](#) will also be followed.
- 7.3.3 Interested parties are encouraged to report suspected transgressions by contacting the SEG standard system manager at: [standard@sustainableeelgroup.org](mailto:standard@sustainableeelgroup.org). SEG will then require the CAB to investigate. All reports will be treated sensitively and in confidence.

### 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 stakeholder or enforcement authority reports an alleged transgression to SEG or the CAB.
  - A CAB raises an issue of fraudulent, illegal or suspicious behaviour of a client to SEG as the result of an audit.
  - 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](mailto: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 this [202 SEG Assurance System](#), the latest version available at <https://www.sustainableeelgroup.org/the-seg-standard-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 Action evidence.
- 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 Standard System Manager.
- 8.4.3 The SEG Standard System Manager will review how the CAB applies the audit procedures as stipulated in the SEG Assurance and Oversight 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 Standard 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;
- 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 (available from SEG) to SEG for publication by 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 Agreements, Standards, Requirements, Policies, Procedures as provided and as amended. This includes co-operation and access to information, staff, and sites as required for SEG.
- 8.5.20 Take action to investigate, remedy and prevent recurrence of any 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 a timescale specified by SEG on a case by case basis but not exceeding twelve 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.
- 8.5.23 Conduct annual internal audits on the achievement of these Service Levels share the results with SEG.
- 8.5.24 Take 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 has been reviewed and updated. Training details are provided in Section 8.
- 8.6.2 Maintain a list of approved CABs on the SEG website.
- 8.6.3 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.
- 8.6.4 Implement an ongoing oversight programme of accredited CABs to ensure the quality and credibility of certification activities. This oversight will include:

- a) Witnessing ('shadowing') 10% of audits per year;
- b) reviewing 100% of each CAB's audit reports and certifications in the first year, 50% in the second year and 25% per year thereafter of the CAB's appointment; to assess whether the Assurance System is properly applied.

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. SEG will inform the CAB of the timeframe within which this must be completed.

8.6.6 Review the Assurance System as described in Section 13.

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

8.6.8 Ensure that SEG staff responsible for approval and oversight of CABs have an in-depth knowledge of the SEG standard.

## 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 set out in (section 8.5.22, formalised in the CAB and SEG Agreement).

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

## 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 European eel, its conservation status, protective legislation, fishing and farming of European eel 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.

### 9.2 Competence and training

9.2.1 At a minimum, auditors 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 or ISO 12877  Participation in 5 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 To remain an auditor for the SEG programme thereafter, auditors shall conduct at least 2 SEG audits per year.

### 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 an ISEAL 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 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 pass a course on auditing based upon ISO 19011'.

## 10. Recognition of Equivalence

- 10.1 SEG and the CAB shall recognise equivalent standards, or equivalent components of similar standards, where they belong to at least ISEAL Community members or, ideally, ISEAL Code Compliant members. 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 only equivalence recognised is the Chain of Custody element of the Marine Stewardship (MSC) and Aquaculture Stewardship Council (ASC) standards, which is deemed to provide equivalence for the SEG standard core component for Traceability. Where a client demonstrates that they have a valid certification for MSC Chain of Custody at the time of an audit,

the SEG standard component for Traceability shall be deemed to be achieved without need for further audit.

## 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 and the client.

12.1.3 The SEG Board is comprised of a balance of interests: two for each science, conservation and the commercial eel sector. This maintains a balanced and independent oversight of the development and operation of the SEG Standard System.

12.1.4 When and where it is needed, SEG can install an independent SEG Standard Panel as a temporary measure in the absence of a CAB. That Panel shall be composed of scientists, conservationists and no-one with any conflicting commercial interest. When needed, the Panel is responsible for acting as the CAB and providing independent advice to the SEG Board.

12.1.5 SEG personnel entrusted with approval functions shall not have a commercial or financial relationship with CABs or with any certified clients.

12.1.6 SEG Standard 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.

12.1.7 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 risks to impartiality and conflicts of interest within its assurance system and how these potential threats risks 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 risks to auditor impartiality and requires CABs to implement practices to mitigate these 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 compliance.

## 13. Management review

- 13.1 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.
- 13.2 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.

## 14. Assurance System review

- 14.1 The SEG Assurance system shall be reviewed every five years or as needed based on feedback during implementation or through the SEG monitoring, evaluation and learning system. Reviews will aim at ensuring that the system is sound, adequate and effective. It will take account of:
- Results of CAB, auditor and SEG personnel training;
  - Insights gathered from CAB review reports, audit reports and shadow audits;
  - Outcomes of claims and labelling monitoring activities;
  - Insights gathered from the SEG monitoring, evaluation and learning system;
  - Any input received from stakeholders.
- 14.2 SEG will provide notification of changes to the SEG Assurance System within thirty days of making a change to the following SEG stakeholders:
- SEG approved and provisionally approved CABs;
  - SEG personnel;
  - SEG standard certificate holders;
  - All SEG stakeholders via publication on the SEG website.
- 14.3 Notification will include, minimally:
- the original requirement;
  - the revised requirement; and
  - the timeline for implementation of the new/revised requirement.

## 15. Availability of information

- 15.1 SEG will ensure that the following information is made publicly available:
- A description of the structure of the assurance system including decision-making.
  - Information on data ownership and availability.
  - Criteria for accepting CABs and clients to the scheme.
  - Application procedures for clients.
  - A list of approved CABs.
  - General information on fees charged to clients and applicants.

- g) A description of the assessment methodology: types of assessment employed, how clients are assessed, how often, and by whom, and the basis for decisions.
- h) Policy on information provision (knowledge sharing) to clients by CABs.
- i) How stakeholders can provide input to the assurance and oversight process.
- j) Consequences for different levels of non-conformity.
- k) A summary of resolved complaints.
- l) Steps taken to have confidence in the results of other schemes deemed equivalent or partially equivalent
- m) A list of certified clients, their scope of assurance, and expiry date of their certificate
- n) Basic information about the results of assessments of both clients and CABs.

## 16. 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](mailto:standard@sustainableeelgroup.org).

## 17. Implementation of this Assurance System

- 17.1 Parts of this updated Assurance System shall come into place immediately, i.e. from 1 July. For example section 8 – Oversight of CABs, as SEG enters into contracts with new CABs.
- 17.2 Other parts shall come into effect to complement the implementation revised SEG Standard, e.g. section 5.10 – 5.15 and section 6. That is currently planned for December 2023.
- 17.3 Some elements of the system may need a transition period for implementation. That will depend on the extent of those changes and stakeholder response to them, which will only become apparent after the planned stakeholder consultation in during this process in 2023.
- 17.4 Following that stakeholder consultation, SEG will make clear to stakeholders of the changes, timelines and transition arrangements, through these published procedures, the SEG Standard, SEG website news items, Twitter and direct email to clients and CABs.



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