



Roundtable on
Sustainable Biomaterials

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RSB – ROUNDTABLE ON SUSTAINABLE BIOMATERIALS

RSB Grievance Procedure

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Objectives and summary

The aim of this procedure is to ensure that grievances against the implementation of RSB policies and procedures, recognised certification bodies, their certification decisions, and RSB members are handled in a timely, comprehensive, consistent, transparent, and effective manner, via secure, accessible, and user-friendly internal and external reporting channels.

This document explains the grievance process, and refers to the work of: the RSB Secretariat, RSB-accredited Certification Bodies, RSB Members, Oversight Body and Participating Operators.

The term “grievance” is hereby intended to have similar meaning as the terms “complaint,” “dispute,” “challenge,” “conflict,” and any similar term connoting dissatisfaction with some aspect of the RSB system, such as compliance of a Participating Operator or a Certification Body with official RSB standards or procedures, as well as the general functioning of the RSB governance or multi-stakeholder dialog.

Although this procedure is aimed at formal grievances, the processes outlined can be used for any allegation brought to the attention of RSB, RSB Certification Bodies or RSB Oversight Body.

As required in RSB-STD-30-001, in RSB-PRO-70-001 and in RSB-PRO-75-001, Participating Operators, Certification Bodies and Oversight Body shall have their own grievance processes. These should be readily accessible to communities, employees and other stakeholders so that these parties can raise their concerns and gain redress. Such grievance process should also be consistent with the process outlined in this procedure, whereby concerns are recorded and the details of what actions were agreed and taken are logged, and where resolutions are mutually agreed and appropriately documented.

Changes from the previous version (RSB-STD-65-001, Version 2.0)

- a) The RSB Secretariat, and RSB Members are now allowed to bring grievances.
- b) Certification Bodies and Accreditation Bodies are allowed to use different terminology (Section C).
- c) The report following investigations (Section J) is now due within 90 days (60 previously).
- d) The scope of issues has increased to include allegations of breaches by the RSB Secretariat of their own policies, or of an RSB Member against the Membership Agreement.
- e) The procedure no longer requires agreement by consensus on the resolution of the grievance. This did not seem appropriate for grievances related to certification or accreditation decisions.
- f) The procedure no longer requires parties to agree to hire a mediator for unresolved grievances. This did not seem feasible given that one of the disputing parties may be external to the RSB system.
- g) If an appeal is considered a regular grievance by an Accreditation Body, then the normal process and timeline (Section J) apply.
- h) Documentation now required for only 5 years, not 10

Changes from the previous version (RSB-STD-65-001, Version 3.0)

- a) Competent national or regional authorities were added to the parties eligible to submit grievances

Changes from the previous version (RSB-STD-65-001, Version 3.1)

- a) Moved the responsibilities of the Accreditation Body to that of the Oversight Body.
- b) Provided more guidance for the protection of the persons reporting the infringement or complaint

Comments on and review of this document

Any party can make comments on the procedures described in this document by writing to the RSB Secretariat. The Secretariat will undertake a regular review of this document every three years, or earlier if deemed necessary by the Secretariat or RSB Board. The review shall take into account any comments received and the actual working practices of the Secretariat. Changes regarding wording or minor operational details can be approved by the Secretariat. Major changes shall be approved by the RSB Board.

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A. Guiding principles

Grievances should be dealt with in a timely, comprehensive, consistent, transparent, and effective manner. The following are the guiding principles for dealing with grievances:

- Issues between parties should be resolved at the lowest level possible.
- Communication is to be open and fluid and parties should have adequate notice to respond and participate in the process.
- Communication is to be timely and decision-making is to be as expeditious as possible.
- Persons involved in investigating the case and making decisions are to declare any personal interest, be unbiased, and act without prejudice and in good faith.
- The process is to be conducted in a way that is fair to all the parties involved.
- Wherever possible, parties should be entitled to enquire about and respond to the evidence of the other party.
- Decisions should take into account relevant considerations and mitigating circumstances, and ignore irrelevant considerations.

B. Scope

This grievance process covers the following organisations:

Table 1	
Organisation	Roles and responsibilities
Participating Operator	Organisations involved in the production of biomass or its derivatives, which successfully applied for entering the RSB certification process. <i>Note:</i> all participating operators do not necessarily obtain RSB certification, as some of them may fail during the audit process.
Certification Body	Organisations accredited by a National Accreditation Body (NAB) to audit and certify against the ISO 17065 Standard. A Certification Body makes the decision on an Operator's compliance with the RSB Standards and issues the RSB Certificate.
RSB Secretariat	The RSB Secretariat has responsibility for the development of the RSB Standards, including managing stakeholder consultation. It is to implement the RSB Vision and Mission in accordance with the governance processes set out by the RSB Board of Directors and Assembly of Delegates.
RSB Members	The obligations and responsibilities of RSB Members are outlined in the RSB Articles of Association and include upholding the vision and mission of the RSB and conducting affairs in a manner suitable to supporting the vision and mission of the RSB.
Oversight Body	The RSB Oversight Body is responsible for maintaining oversight of the RSB Certification Bodies and ensuring that they are carrying out their duties in a responsible and professional manner. It does this through witness audits and audit report reviews. For further details on their role and responsibilities, please see RSB-PRO-85-001 Oversight Body Requirements and Responsibilities.

Participating Operators, accredited Certification Bodies, Oversight Body, and the RSB Secretariat are to publish and follow a grievance process in accordance with this procedure. The process should be easily accessible to all stakeholders. If a Certification Body has an existing procedure that covers all of its auditing and certification, it can be applied to RSB so long as it meets or exceeds the requirements of this procedure. In cases where it does not, the additional requirements of this procedure will need to be adopted by the Certification Body.

C. Resources needed to implement this procedure

As required in RSB-STD-30-001 (Standard for Participating Operators), RSB-PRO-70-001 (General Requirements for Certification Bodies) and RSB-PRO-85-001 - Oversight Body Requirements and Responsibilities, Participating Operators, accredited Certification Bodies and the recognised Oversight Body shall amend their existing grievance mechanisms in line with the process outlined in this procedure.

Certification Bodies and Oversight Body may use an alternative terminology to refer to grievances (e.g. “complaints”, “appeals”, “disputes”, “conflicts”, etc.) as long as their resolution mechanisms are in line with the process outlined in this procedure.

Sufficient resources shall be allocated to the implementation of these mechanisms.

Participating Operators, Certification Bodies, Oversight Body, and RSB Secretariat shall appoint a person who functions as a Grievance Manager. This person is responsible for investigating and responding to grievances. These organisations also have the option to outsource this responsibility to a third-party so long as that third-party meets all of the obligations of this procedure.

In all cases, the Grievance Manager or designate is to be unbiased and to act without prejudice and in good faith with the aim of resolving any grievance. Any personal interest in any case shall be declared and the Grievance Manager or designate shall recuse him/herself from any issue where there is a clear conflict of interest and appoint another person to act in his/her stead.

The Participating Operator, the Certification Bodies, the Oversight Body, and RSB Secretariat are to recognise that additional staff time may be needed to conform to these processes, and they should each have funds allocated to investigations and fulfilment of the grievance process.

D. Eligibility

Parties that are eligible to make grievances are:

- (1) Participating Operators and their employees, in case of grievances in relation with their employer’s compliance with RSB standards;
- (2) Auditors and certification bodies;
- (3) Oversight Body;
- (4) RSB Members
- (5) RSB Secretariat staff members;
- (6) Third parties with a material interest in the activities of the RSB, Certified Participating Operators, Accredited CBs, Accreditation Bodies and Oversight Body, including community

groups, NGOs, trade unions and competent national or regional authorities (e.g. competent authorities of EU Member States).

E. Prior Action

Before a formal grievance is presented, the party which has a grievance is to make all reasonable attempts to resolve it directly with the person/organisation in question and to give the respondent an opportunity to respond to and/or rectify the situation. For grievances against a Participating Operator, the Operator’s own grievance and complaints process should be first used before resorting to the formal grievance procedures described in this document.

Participating Operators, Certification Bodies and Oversight Body who are subject to the grievance shall alert the RSB Secretariat to the grievance and explain what is being done to resolve the situation.

F. Filing a Formal Grievance

If dialogue between the parties does not resolve the situation, then the party may present a formal grievance. The party which brings forth the grievance shall demonstrate that they made a good faith effort to resolve the grievance directly with the person/organisation in question.

The types of grievances that are considered by this procedure, and the Accountable Organisation to whom the grievance should be addressed, are outlined in the table below.

Table 2	
Grievance Type	Grievance to be filed with
Allegation of a breach of Standards by a Participating Operator.	Certification Body
Quality of an audit or certification services and certification decisions.	Certification Body/Oversight Body
Alleged failure of an Oversight Body to follow policies and operating procedures, including managing and monitoring the performance of accredited Certification Bodies.	Oversight Body
Alleged failure to follow RSB Standards governance processes and/or policies and operating procedures (including the process for standards development and related terms of reference)	RSB Secretariat
Grievance against an RSB Member for its behavior and/or failure to comply with its membership requirements.	RSB Secretariat

Any other type of grievance may be considered, but could be deemed inadmissible. The grievance should be based on events occurring within the past twelve months.

If the grievance is filed with the wrong organisation, then that organisation shall let the party know that the grievance is not accepted, and indicate with which organisation they need to file the grievance.

G. Required Information

Parties filing a grievance shall provide the following information in writing to the accountable organisation:

- (1) Basic information about yourself/your organisation
- (2) Details about the grievance (including details of all relevant stakeholders and a detailed summary of the issues)
- (3) Evidence to support the grievance (this includes verifiable information, records, observations, personal knowledge and/or statements of fact, which can be qualitative or quantitative)
- (4) Expected outcomes, including alternatives for resolution of the dispute;
- (5) Evidence of the steps already taken to resolve the grievance directly (including if the parties have applied to or employed an external mediation process)

The accountable organisation has the right to return incomplete complaints to the submitting party, with an explanation of what is needed to constitute a complete submission that can then be further processed.

H. Maintaining Anonymity

If the party feels that they shall maintain anonymity throughout the grievance process, they shall declare this at the time of filing a formal grievance as well as explain why anonymity shall be maintained. If anonymity is requested, the organisation with which the grievance is filed will consider the request and may grant anonymity, unless the organisation's internal rules prohibits anonymous submissions.

If anonymity cannot be granted for any reason, the party that filed the grievance has the right to rescind the grievance. If anonymity is granted, the RSB Secretariat, Oversight Body and/or Certification Bodies will protect the identity of the party throughout the process.

As a method of protection for the grievance maker, they may request that their identity or any information they provide which may identify them remain anonymous for the entirety of the process.

This Grievance Procedure shall ensure the protection of persons who report infringements or log complainants in good faith in accordance with the principles of Directive (EU) 2019/1937 as per Article 3(1) of the IR.

Specifically protection of the persons reporting the infringement or complaint shall be ensured through the following:

- Access to a secure and accessible internal and external reporting channel through the RSB Secretariat.
- The grievance maker may request that the identity or any information they provide which may identify them remains anonymous for the entirety of the process.
- RSB limits access to grievance records by restricting access to RSB personnel who are not involved in the process for whistleblowers / confidential complaints. RSB stores information in a secure, confidential server.
- RSB conducts annual awareness meetings for employees and relevant personnel within the RSB Secretariat and Board to ensure the above requirements are met and understood.

I. Inadmissible Requests

The following grievances are inadmissible:

- (1) Grievances that are trivial, vexatious or appear to have been generated to gain competitive advantage.
- (2) Grievances that are not supported by compelling, objective evidence. Save for exceptional circumstances, complaints cannot be investigated where they are based on hearsay alone.
- (3) Grievances that recommend changes to the published standards or supporting documents.

Note: These should be addressed not as a grievance, but addressed through RSB-PRO-15-001 which outlines the procedure for changes to standards.

- (4) Grievances from interested parties concerning private disputes between them (or those they represent).
- (5) Cases where grievances do not explicitly relate to RSB standards, policies, or activities.

J. Grievance Process

i. Acknowledge Receipt

The accountable organisation will acknowledge receipt of the grievance, informing the party that submitted that its grievance is being reviewed for standing. This is to occur in writing within five business days.

The accountable organisation will also inform the party against whom the grievance is made and share the details of the grievance. This is to occur in writing within five business days.

The accountable organisation will log the grievance and save all relevant materials.

The RSB Secretariat is to present a summary of all grievances and their subsequent actions (including those of the Oversight Body and Certification Bodies) to the RSB Board of Directors on a quarterly basis.

ii. Determine admissibility

Using the criteria above, the Grievance Manager is to determine whether or not the grievance is admissible.

If the grievance is not admissible and denied, all parties shall be informed within five business days.

The party that filed the grievance may appeal the decision. In the case of an appeal of admissibility the party is to send the original grievance, the written response from the Accountable Organisation, and the rationale for the appeal to the party identified below:

<u>Denied Admissibility:</u>		<u>Submit Appeal To:</u>
Certifying Body	?	Oversight Body
Oversight Body	?	RSB Secretariat
RSB Secretariat	?	RSB Board of Directors

Appeals should be filed within 10 days of the denial of admissibility, following the procedure for appeals of the Accountable Organisation where relevant. When the appeal is received, the Grievance Manager will inform the Accountable Organisation that denied admissibility and the party to whom the grievance is against that an admissibility appeal has been made.

The organisation which has received the appeal has ten days in which to uphold the denial or to overrule and make the grievance admissible. If denial is upheld, then no investigation will proceed and no more appeals can be made. If the organisation rules that the grievance is admissible, the Accountable Organisation that originally denied admissibility shall investigate the grievance.

iii. Determine the investigation process

If the grievance is admitted, the Grievance Manager will define an investigation process and share this with the relevant parties within fifteen business days.

iv. Conduct investigation

The Grievance Manager will conduct the investigation him/herself or nominate an individual to carry out the investigation. The investigation will be based upon written documentary evidence supplied by both the party that has brought the grievance and the party which is the subject of the grievance. The investigator should make efforts to allow the two parties to counter the evidence of the other, if agreed to by the parties. The investigator may solicit and collect any additional information necessary, including conducting telephone and email interviews. The investigator may request a field inspection to augment the documentary evidence.

The parties shall provide to the investigator the means, resources and authority necessary to execute the investigation in a timely, comprehensive, consistent, transparent, and effective manner. Failure to cooperate could result, for instance, in suspension of the certificate of a Participating Operators, of the accreditation of a Certification Body, or a recommendation to the RSB Assembly of Delegates that an RSB membership be terminated.

The investigator is to prepare a written report with his/her findings and recommendations, including the possibility to conduct a field investigation. The report should be completed within 90 days of receipt of the formal grievance. The parties should agree with whom the report can be shared. If the timeline is to be different (e.g. in case a field investigation is not immediately possible due to seasonality of operations or for security reasons), this is to be clearly explained to all parties involved.

K. Potential outcomes

If the conclusion of the investigator is that the allegations are unfounded, the parties will be informed of that finding and the party that brought the grievance can pursue an appeal under the procedure outlined in the next section.

In the case of a breach of standards where the evidence supports the allegation, the Certification Body or the Oversight Body is to follow their Standard Operating Procedure for managing disputes, complaints, and appeals. This may include convening an internal appeals committee or certification committee to rule on the findings and measures.

In the case of poor quality auditing/certification processes on the part of the Certification Body, it is the Oversight Body's sole discretion to determine the action.

Possible outcomes and next steps are outlined in the table below.

Table 3

Finding	Possible Outcomes / Next Steps
Breach of Standards by a Certified Operator	-A subsequent audit will focus on the issue -Corrective actions are recommended, agreed to and implemented within an agreed-upon timeframe -Suspension of a certificate -Decertification of the Operator
Breach of RSB Standards or Policies by a Certification Body (e.g. Poor quality auditing/certification processes)	-Improvements to operating procedures are published and implemented within an agreed-upon timeframe -Probationary period, suspension or termination of an auditor -Suspension of accreditation as an RSB Certification Body ¹ -Withdrawal of Accreditation to the RSB
Failure of RSB Secretariat to follow governance processes/policies/operating procedures	-Acknowledge failures and revisit processes/policies/operating procedures -Determine corrective actions/improve operating procedures -Probation or termination of staff
RSB Member in violation of membership requirements	-Recommend to the Assembly of Delegates probation or suspension of a member -Suspension of membership

Other recommendations, outcomes, and next steps may be considered.

All investigation reports concerning a Certification Body are to be shared with the Oversight Body, and the RSB Secretariat.

L. Appeals

If either party is unhappy with the findings of the investigation and the outcomes, they have thirty business days in which to appeal. Appeals may be submitted to the organisation overseeing the activities of the Accountable Organisation with which the grievance was originally filed (see below). Where relevant, the appeal shall follow the procedure for appeals of the organisation to which the appeal is submitted. The appeal shall be received in writing and shall contain the rationale for the appeal.

<u>Accountable Organisation:</u>		<u>Submit Appeal To:</u>
Certifying Body	<input type="checkbox"/>	Oversight Body
Oversight Body	<input type="checkbox"/>	RSB Secretariat
RSB Secretariat	<input type="checkbox"/>	RSB Board of Directors

Only one appeal is allowed. In the case of an appeal, an internal committee within the organisation which receives the appeal will be convened to review it and make a decision on the case within 30 days, except when an Oversight Body considers the appeal equivalent to a new complaint, in which case the process and related timeline described in section J may apply.

¹ The Oversight Body should determine a process for what happens to Operators currently certified by the suspended or discredited CB.

The outcome of the appeals process is final.

M. Confidentiality

RSB aims to make each Operator, Certification Body or Oversight Body grievance transparent and will do this via an online tracking tool which posts the grievance and the relevant actions.

RSB may in some cases wish to protect the privacy and integrity of the parties involved by keeping the grievance and subsequent actions and decisions confidential. This decision is at RSB's sole discretion.

N. Record-keeping

Records including the investigation report and all other written materials will be saved by the Accountable Organisation for a minimum period of five years.

O. Use of the RSB label and name

At any point in the process, the RSB Secretariat may require that use of the RSB label or any other public affiliation with RSB be suspended while investigations and resolutions are ongoing.

P. Legal disclaimer

The processes outlined in this procedure are not intended to replace, contravene or otherwise alter the requirements of any applicable national, state or local governmental statutes, laws, regulations, ordinances, or other requirements.

This procedure gives general guidance only and should not be regarded as a complete and authoritative statement on the subject matter contained herein.