

Form 3 - Public Disclosure Form

This form shall be submitted by the CAB no less than thirty (30) calendar days prior to any onsite audit. Any changes to this information shall be submitted to the ASC within five (5) days of the change and not later than 10 days before the planned audit. If later, a new announcement is submitted and another 30 days rule will apply.*

The information on this form shall be public and should be posted on the ASC website within three (3) days of submission.*

This form shall be written to be readable to the stakeholders and other interested parties.

This form should be translated into local languages when appropriate

PDF 1 Public Disclosure Form

PDF 1.1 Name of CAB

PDF 1.2 Date of Submission

PDF 1.3 CAB Contact Person

PDF 1.3.1 Name of Contact Person

PDF 1.3.2 Position in the CAB's-organisation

PDF 1.3.3 Mailing address

PDF 1.3.4 Email address

PDF 1.3.5 Phone number

PDF 1.3.6 Other

PDF 1.4 ASC Name of Client

PDF 1.4.1 Name of Contact Person

PDF 1.4.2 Position in the client's organisation

PDF 1.4.3 Mailing address

PDF 1.4.4 Email address

PDF 1.4.5 Phone number

PDF 1.4.6 Other

PDF 1.5 Unit of Certification

PDF 1.5.1 Single Site

PDF 1.5.2 Multi-site

PDF 1.5.3 Group certification

PDF 1.6 Sites to be audited

Site Name	GPS Coordinates	Other Location Information	Planned Site Audit(s)	Date of planned audit
Sonora Point	50.421427, -125.303361	N/a	18-21 April 2017	18-21 April 2017

PDF 1.7 Species and Standards

Standard	Species (scientific name) produced	Included in scope (Yes/No)	ASC endorsed standard to be used	Version Number
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PDF 1.8 Planned Stakeholder Consultation(s) and How Stakeholders can Become Involved

Name/organisation	Relevance for this audit	How to involve this stakeholder (in-person/phone interview/input submission)	When stakeholder may be contacted	How this stakeholder will be contacted
ASC	scheme owner		public disclosure	email
Campbell River Council	government		public disclosure	email
Sayward Town Council	government		public disclosure	email
K'ómoks First Nation	First Nation		public disclosure	email
We Wai Kai & Wei Wai Kum First Nation	First Nation		public disclosure	email
Homalco First Nation	First Nation		public disclosure	email
Ducks Unlimited	conservation		public disclosure	email
Pacific Salmon Foundation	conservation		public disclosure	email
David Suzuki Foundation	conservation		public disclosure	email
Living Oceans Society	conservation		public disclosure	email
Coast Forestry Products Association	forestry		public disclosure	email
Canadian Pacific Sustainable Fishers Society	fisheries		public disclosure	email
Vanvouver Island North Tourism	tourism		public disclosure	email
James Walkus Fishing Company	contractors/suppliers		public disclosure	email
Flurers Smokery	contractors/suppliers		public disclosure	email
Skretting	contractors/suppliers		public disclosure	email
Noboco	contractors/suppliers		public disclosure	email
BC Centre for Aquatic Health Sciences	research		public disclosure	email
BC Salmon Farmers Association	industry		public disclosure	email
Canadian Aquaculture Industry Association	industry		public disclosure	email
United Steelworkers	industry		public disclosure	email

PDF 1.9 Proposed Timeline

PDF 1.9.1 Contract Signed:	7th February 2017
PDF 1.9.2 Start of audit:	April 2017
PDF 1.9.3 Onsite Audit(s):	18-21 April 2017
PDF 1.9.4 Determination/Decision:	18 August 2017

PDF 1.10 Audit Team

Column1	Name	ASC Registration Reference
PDF 1.10.1 Lead Auditor	Matthew James	
PDF 1.10.2 Technical Experts	Chris Findlay	
PDF 1.10.3 Social Auditor	Leon Reed	

ASC Audit Report - Opening

General Requirements

- C1** Audit reports shall be written in English and in the most common language spoken in the areas where the operation is located.
- C2** Audit reports may contain confidential annexes for commercially sensitive information.
 - C2.1** The CAB shall agree the content of any commercially sensitive information with the applicant, which can still be accessible by the ASC and the appointed accreditation body upon request as stipulated in the certification contract.
 - C2.2** The public report shall contain a clear overview of the items which are in the confidential annexes.
 - C2.3** Except for the annexes that contain commercially sensitive information all audit reports will be public.
- C3** The CAB is solely responsible for the content of all reports, including the content of any confidential annexes.
- C4 Reporting Deadlines* for certification and re-certification audit reports**
 - C4.1** Within thirty (30) days of the completing of the audit the CAB shall submit a draft report in English and the national or most common language spoken in the area where the operation is located.
 - C4.2** Within five (5) days the ASC should post the draft report to the ASC website.
 - C4.3** The CAB shall allow stakeholders and interested parties to comment on the report for fifteen (15) days.
 - C4.4** Within twenty (20) days of the close of comments, the CAB shall submit the final report to the ASC in English and the national or most common language spoken in the area where the operation is located.
 - C4.5** Within five (5) days the ASC should post the final report to the ASC website.
 - C4.6** Audit reports shall contain accurate and reproducible results.
- C5 Reporting Deadlines* for surveillance audit reports**
 - C5.1** Within ninety (90) days of the completing of the audit the CAB shall submit a final report in English and the national or most common language spoken in the area where the operation is located.
 - C5.2** Within five (5) days the ASC should post the final report to the ASC website.
 - C5.3** Audit reports shall contain accurate and reproducible results.

1 Title Page

1.1 Name of Applicant	Marine Harvest Canada Inc.
1.2 Report Title [e.g. Public Certification Report]	Public Certification Report
1.3 CAB name	Acoura Marine Ltd
1.4 Name of Lead Auditor	Matthew James
1.5 Names and positions of report authors and reviewers	Matthew James, Lead Auditor. Chris Findlay, Technical Expert. Leon Reed, Social Auditor.
1.6 Client's Contact person: Name and Title	Katherine Dolmage, Certification Manager
1.7 Date	18th August 2017

2 Table of Contents

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3 Glossary

Terms and abbreviations that are specific to this audit report and that are not otherwise defined in the ASC glossary

UOC: Unit Of Certification
MHC: Marine Harvest Canada
BC: British Columbia
PAR: Pacific Aquaculture Regulations
DFO: Department of Fisheries and Oceans
HR: Human Resources
IBA: Impact and Benefit agreement
CEAA: Canadian Environmental Assessment Agency
FHMP: Fish Health Management Plan
IUCN: International Union for the Conservation of Nature
ROV: Remotely Operated Vehicle
UPEI: University of Prince Edward Island
PFRC: Pacific Fisheries Resource Conservation Council
BAP: Best Aquaculture Practices
IUU: Illegal, Unreported and Unregulated (fishing)
CFIA: Canadian Food Inspection Agency
OIE: Office Internationale des Epizooties (World Organisation for Animal Health)
OSH: Occupational Safety and Health
BOD: Biochemical Oxygen Demand
PFMA: Pacific Fishery Management Area

4 Summary

A concise summary of the report and findings. The summary shall be written to be readable to the stakeholders and other interested parties.

4.1	A brief description of the scope of the audit	Atlantic salmon grow out site using net pens.
4.2	A brief description of the operations of the unit of certification	Sonora Point grow out site for Atlantic salmon located in the Campbell River production area. The site is composed of 12 of 30x30 metre square steel cages. These were stocked between August 5th and September 20th 2016 by fish averaging 1,700g transferred from The MH Canada Port Elizabeth site. Harvesting is expected to be completed by August 2017.
4.3	Type of unit of certification (<i>select only one type of unit of certification in the list</i>)	Single farm
4.4	Type of audit (<i>select all the types of audit that apply in the list</i>)	Initial
4.5	A summary of the major findings	A good overall level of compliance with the ASC Standard was found by the audit team, two Major non-conformances relating to safety meetings and to the disinfection of diving suits were identified, these are provided in more detail at the end of the report.
4.6	The Audit determination	Acoura Marine propose to certify the Sonora Point farm, subject to acceptable corrective actions being put in place for Minor non-conformities and the closure of any major non-conformities. Acoura Marine will also take account of any stakeholder communications received.

5 CAB Contact Information

- | | | |
|-----|---------------------------|--|
| 5.1 | CAB Name | Acoura Marine Ltd |
| 5.2 | CAB Mailing Address | 6 Redheughs Rigg, Edinburgh, EH12 9DQ, UK |
| 5.3 | Email Address | asc@acoura.com |
| 5.4 | Other Contact Information | N/A |

6 Background on the Applicant

- | | | |
|-----|--|---|
| 6.1 | Information on the Public Disclosure Form (Form 3) except 1.2-1.3 All information updated as necessary to reflect the audit as conducted. | Information as declared on Public disclosure form. |
| 6.2 | A description of the unit of certification (<i>for initial audit</i>) / changes, if any (<i>for surveillance and recertification audits</i>) | Atlantic Salmon production at the Sonora Point farm. |
| 6.3 | Other certifications currently held by the unit of certification | Global Aquaculture Alliance / Best Aquaculture Practices Salmon Farm Standard |
| 6.4 | Other certification(s) obtained before this audit | Global Aquaculture Alliance / Best Aquaculture Practices Salmon Farm Standard |
| 6.5 | Estimated annual production volumes of the unit of certification of the <u>current</u> year | 3000 tonnes for 2017 Production. |
| 6.6 | <u>Actual</u> annual production volumes of the unit of certification of the <u>previous</u> year (<i>mandatory for surveillance and recertification</i>) | Assessment audit |
| 6.7 | Production system(s) employed within the unit of certification (<i>select one or more in the list</i>) | Net pens |
| 6.8 | Number of employees working at the unit of certification | Five |

7 Scope

- | | | |
|-----|--|---|
| 7.1 | The Standard(s) against which the audit was conducted, including version number | ASC Salmon Standard V1.0 |
| 7.2 | The species produced at the applicant farm | Atlantic salmon (<i>Salmo salar</i>) |
| 7.3 | A description of the scope of the audit including a description of whether the unit of certification covers all production or harvest areas (i.e. ponds) managed by the operation or located at the included sites, or whether only a sub-set of these are included in the unit of certification. If only a sub-set of production or harvest areas are included in the unit of certification these shall be clearly named. | Scope of the audit covers all cages located at the Sonora Point site. |

7.4 The names and addresses of any storage, processing, or distribution sites included in the operation (including subcontracted operations) that will potentially be handling certified products, up until the point where product enters further chain

The ASC Chain of Custody audit starts from the point at which the salmon are uplifted from the farm site. Chain of custody # ASC-C-00540 takes responsibility for the wellboat contract. Most recent audit carried out by Global Trust, with a CoC certificate valid to 19th January 2018.

7.5 Description of the receiving water body(ies).

Sonora Point is located on the northern side of Sonora Island in Nodales Channel. The Johnstone Strait region is characterized by rapid tidal streams, constricted passages and constantly agitated water that rarely stratifies.

8 Audit Plan

8.1 The names of the auditors and the dates when each of the following were undertaken or completed: conducting the audit, writing of the report, reviewing the report, and taking the certification decision.

Matthew James, Leon Reed. Audits conducted 18 to 21 April 2017. Draft report completed 15 May 2017.

8.2 Previous Audits (if applicable):

8.2.1 Initial audit - mm/yyyy

NC reference number	Standard clause reference	Closing deadline - status - closing date of each NC
	Majors 1.1.1., 6.5.1 Minors 3.1.4, 5.1.4, 5.4.4, 6.5.3, 8.4	Majors closed before certification decision. Minors to be closed within 12 months of audit date.
		Jul-18

Surveillance audit 1 - mm/ yyyy

Surveillance audit 2 - mm/ yyyy

Recertification audit - mm/ yyyy

Unannounced audit - mm/ yyyy

NC close-out audit - mm/ yyyy

Scope extension audit mm/ yyyy

8.4 Audit plan as implemented including:

8.4.1 Desk Reviews

8.4.2 Onsite audits

8.4.3 Stakeholder interviews and Community meetings

8.4.4 Draft report sent to client

8.4.5 Draft report sent to ASC

8.5.5 Final report sent to Client and ASC

Dates	Locations
4th April 2017	
18-21 April 2017	
15th May 2017	
6th June 2017	
Aug-17	

8.7 Names and affiliations of individuals consulted or otherwise involved in the audit including: representatives of the client, employees, contractors, stakeholders and any observers that participated in the audit.

Certification Manager - Katherine Dolmage
 Site Manager - Andre Marthinsen
 First Nation and Community Relations Manager - Leith Paganoni
 HR Manager - Tina Garlinsky - Gonsky
 Freshwater Planner - Juan Carlos Sanchez-Millar
 Health and Safety Manager - Blaine Trembley
 staff during the audit process

Site

8.8 Stakeholder submissions, including written or other documented information and CAB written responses to each submission.

Name of stakeholder (if permission given to make name public)	Relevance to be contacted	Date of contact	CAB responded Yes/No	Brief summary of points Raised	Use of comment by CAB	Response sent to stakeholder
Living Oceans Society	conservation	29/07/2017	Yes	Discovery Island farms. Port Elizabeth as intermediary farm. Timescale for closing minor NCs. Water monitoring. ABM scheme. PTI score. Water use and discharge.	Further information provided to the stakeholder as explanations.	17-Aug-17

AUDIT MANUAL - ASC Salmon Standard
Created by the Salmon Aquaculture Dialogue

Scope: species belonging to the genus *Salmo* and *Oncorhynchus*

PRINCIPLE 1: COMPLY WITH ALL APPLICABLE NATIONAL LAWS AND LOCAL REGULATIONS

Criterion 1.1 Compliance with all applicable local and national legal requirements and regulations

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
1.1.1	<p>Indicator: Presence of documents demonstrating compliance with local and national regulations and requirements on land and water use</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain digital or hard copies of applicable land and water use laws.</p> <p>b. Maintain original (or legalised copies of) lease agreements, land titles, or concession permit on file as applicable.</p> <p>c. Keep records of inspections for compliance with national and local laws and regulations (if such inspections are legally required in the country of operation).</p> <p>d. Obtain permits and maps showing that the farm does not conflict with national preservation areas.</p> <p>e. Others, please describe</p>	<p>The PAR license for Sonora Point (Facility Number 380) is AQFF 116037 2016/2017. Land file number is 1403144. PFMA area 13 v- 26 Expires December 18th, 2017 BC Provisional Aquaculture licence 1403144 expiry 30th June 2016 Navigable waters protection act. License of occupation. Forestry land and ministry of lands and MH Canada natural resources license number 1407749. Expiry 30/6/17. DFO auditing and enforcement activities confirm GPS co-ordinates as accurate, lice monitoring fish health record in place, FHMP compliance, Benthic surveys and site debris controls. The last audit is available on the DFO website July 16th 2015, with a deficiency noted for record keeping. North Vancouver island marine plan shows the farm is in a wildlife management plan area and consequently licences are issued on an annual basis due to wild Sockeye salmon from Fraser river being present (large fluctuations in numbers have occurred over recent years)</p>	Compliant	
1.1.2	<p>Indicator: Presence of documents demonstrating compliance with all tax laws</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain records of tax payments to appropriate authorities (e.g. land use tax, water use tax, revenue tax). Note that CABs will not disclose confidential tax information unless client is required to or chooses to make it public.</p> <p>b. Maintain copies of tax laws for jurisdiction(s) where company operates.</p> <p>c. Register with national or local authorities as an "aquaculture activity".</p> <p>d. Others, please describe</p>	<p>Typical taxes include federal corporate income tax, federal and provincial consumer taxes, payroll taxes, property taxes most are filed monthly except the property taxes which are on an annual basis. A report from an independent company (Hay Group) was provided both for taxes and for insurance purposes, MH is stock market listed so information is made public. The demand for taxes shows that MHC Canada is classed as a fish farmer of Atlantic salmon. Property assessment notice for 2016 provided.</p>	Compliant	
1.1.3	<p>Indicator: Presence of documents demonstrating compliance with all relevant national and local labor laws and regulations</p> <p>Requirement: Yes</p>	<p>a. Maintain copies of national labor codes and laws applicable to farm (scope is restricted to the farm sites within the unit certification.)</p> <p>b. Keep records of farm inspections for compliance with national labor laws and codes (only if such inspections are legally required in the country of operation).</p>	<p>The BC Employment Standards Act - this details minimum wages and rights for employees and collective agreements and bargaining. The Minister of Labor, Citizens Services and Open Government is the relevant Authority. The minimum wage is \$10.85 / hour confirmed from September 2016 and the minimum work age is confirmed as fifteen. Living wage is listed at \$16.76 / hour for the Qualicum area which is the closest evaluated area to Campbell River.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Applicability: All	c. Others, please describe			
1.1.4	Indicator: Presence of documents demonstrating compliance with regulations and permits concerning water quality impacts Requirement: Yes Applicability: All	a. Obtain permits for water quality impacts where applicable. b. Compile list of and comply with all discharge laws or regulations. c. Maintain records of monitoring and compliance with discharge laws and regulations as required. d. Others, please describe	There is no separate permission required to demonstrate indicators for water quality impacts for the marine sites in the licenses issued. There is a government database (accessed on www.gov.bc.ca) showing all the companies in Canada that discharge into the water . The two relevant hatcheries Ocean Falls facility ref. 1689 permit AQFW 112568 2015 expiry June 18th 2024. and Dalrymple Facility Ref.47 permit AQFW 112571 2015 expiry June 18th 2024. are listed	Compliant	
PRINCIPLE 2: CONSERVE NATURAL HABITAT, LOCAL BIODIVERSITY AND ECOSYSTEM FUNCTION					
<i>Criterion 2.1 Benthic biodiversity and benthic effects [1]</i>					
2.1.1	Indicator: Redox potential or [2] sulphide levels in sediment outside of the Allowable Zone of Effect (AZE) [3], following the sampling methodology outlined in Appendix I-1 Requirement: Redox potential > 0 millivolts (mV) or Sulphide ≤ 1,500 micromoles / l Applicability: All farms except as noted in [1]	a. Prepare a map of the farm showing boundary of AZE (30 m) and GPS locations of all sediment collections stations. If the farm uses a site-specific AZE, provide justification [3] to the CAB. b. If benthos throughout the full AZE is hard bottom, provide evidence to the CAB and request an exemption from 2.1.1c-f, 2.1.2 and 2.1.3. c. Inform the CAB whether the farm chose option #1 or option #2 to demonstrate compliance with the requirements of the Standard. d. Collect sediment samples in accordance with the methodology in Appendix I-1 (i.e. at the time of peak cage biomass and at all required stations). e. For option #1, measure and record redox potential (mV) in sediment samples using an appropriate, nationally or internationally recognized testing method. f. For option #2, measure and record sulphide concentration (uM) using an appropriate, nationally or internationally recognized testing method. g. Submit test results to ASC as per Appendix VI at least once for each production cycle. If site has hard bottom and cannot complete tests, report this to ASC. h. Others, please describe	Sampling follows the requirements of the BC government legislation (methodology according to the Pacific aquaculture regulations as per the Aquaculture Activities Regulations Guidance Document). Variance request VR 22 is cited on the principle that the intent of the standard is met by the currently imposed sampling processes Exemption request accepted for Sonora Point on the basis that the substrate is 'hard bottom' from Katherine Dolmage. DFO communication relating to lack of monitoring requirement - compliance due to Beggiatoa levels dated June 22nd 2016, transect recordings note a uniformity across the samples. Sulphide sampling occurs as part of the legislative requirement. Peak biomass was anticipated to be reached 11th April with first harvest next day . Current stock of @ 552,141 averaging 5.07 kgs, biomass of 2801 tonnes.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
2.1.2	<p>Indicator: Faunal index score indicating good [4] to high ecological quality in sediment outside the AZE, following the sampling methodology outlined in Appendix I-1</p> <p>Requirement: AZTI Marine Biotic Index (AMBI [5]) score \leq 3.3, or Shannon-Wiener Index score $>$ 3, or Benthic Quality Index (BQI) score \geq 15, or Infaunal Trophic Index (ITI) score \geq 25</p> <p>Applicability: All farms except as noted in [1]</p>	<p>a. Prepare a map showing the AZE (30 m or site specific) and sediment collections stations (see 2.1.1).</p> <p>b. Inform the CAB whether the farm chose option #1, #2, #3, or #4 to demonstrate compliance with the requirement.</p> <p>c. Collect sediment samples in accordance with Appendix I-1 (see 2.1.1).</p> <p>d. For option #1, measure, calculate and record AZTI Marine Biotic Index [5] score of sediment samples using the required method.</p> <p>e. For option #2, measure, calculate and record Shannon-Wiener Index score of sediment samples using the required method.</p> <p>f. For option #3, measure, calculate and record Benthic Quality Index (BQI) score of sediment samples using the required method.</p> <p>g. For option #4, measure, calculate and record Infaunal Trophic Index (ITI) score of sediment samples using the required method.</p> <p>h. Retain documentary evidence to show how scores were obtained. If samples were analysed and index calculated by an independent laboratory, obtain copies of results.</p> <p>i. Submit faunal index scores to ASC (Appendix VI) at least once for each production cycle.</p> <p>j. Others, please describe</p>	N/A for this indicator as the site is classified as hard bottom.	N/A	N/A
2.1.3	<p>Indicator: Number of macrofaunal taxa in the sediment within the AZE, following the sampling methodology outlined in Appendix I-1</p> <p>Requirement: \geq 2 highly abundant [6] taxa that are not pollution indicator species</p> <p>Applicability: All farms except as</p>	<p>a. Document appropriate sediment sample collection as for 2.1.1a and 2.1.1c, or exemption as per 2.1.1b.</p> <p>b. For sediment samples taken within the AZE, determine abundance and taxonomic composition of macrofauna using an appropriate testing method.</p> <p>c. Identify all highly abundant taxa [6] and specify which ones (if any) are pollution indicator species.</p> <p>d. Retain documentary evidence to show how taxa were identified and how counts were obtained. If samples were analysed by an independent lab, obtain copies of results.</p>	N/A for this indicator as the site is classified as hard bottom.		N/A

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	noted in [1]	e. Submit counts of macrofaunal taxa to ASC (Appendix VI) at least once for each production cycle.		N/A	
		f. Others, please describe			
2.1.4	<p>Indicator: Definition of a site-specific AZE based on a robust and credible [7] modelling system</p> <p>Requirement: Yes, within three years of the publication [8] of the SAD standard (i.e. full compliance by June 13, 2015)</p> <p>Applicability: All farms except as noted in [1]</p>	<p>a. Undertake an analysis to determine the site-specific AZE and depositional pattern before 3 years have passed since publication of the Standard on June 13, 2012.</p> <p>b. Maintain records to show how the analysis (in 2.1.4a) is robust and credible based on modelling using a multi-parameter approach [7].</p> <p>c. Maintain records to show that modelling results for the site-specific AZE have been verified with > 6 months of monitoring data.</p> <p>d. Others, please describe</p>			
Criterion 2.2 Water quality in and near the site of operation [12]					
2.2.1	<p>Indicator: Weekly average percent saturation [13] of dissolved oxygen (DO) [14] on farm, calculated following methodology in Appendix I-4</p> <p>Requirement: ≥ 70% [15]</p> <p>Applicability: All farms except as noted in [15]</p>	<p>a. Monitor and record on-farm percent saturation of DO at a minimum of twice daily using a calibrated oxygen meter or equivalent method. For first audits, farm records must cover ≥ 6 months.</p> <p>b. Provide a written justification for any missed samples or deviations in sampling time.</p> <p>c. Calculate weekly average percent saturation based on data.</p> <p>d. If any weekly average DO values are < 70%, or approaching that level, monitor and record DO at a reference site and compare to on-farm levels (see Instructions).</p> <p>e. Arrange for auditor to witness DO monitoring and calibration while on site.</p> <p>f. Submit results from monitoring of average weekly DO as per Appendix VI to ASC at least once per year.</p> <p>g. Others, please describe</p>	DO readings supplied back to January 2016, complete weekly values confirmed as included. DO readings vary between 69.8 and 4.51 mg/l (lowest value provided of 4.1 mg/l date corresponding to @50% saturation. Reference site give variance of 3 - 11% saturation values, site confirmed as in excess of 500 metres from site (1,500m) as required. Confirmation of logging during on-site inspection, Steinsvik camera system and probes record directly to site PC. Records also available on site, reference station location confirmed by GPS when sampling.	Compliant	
2.2.2	<p>Indicator: Maximum percentage of weekly samples from 2.2.1 that fall under 2 mg/liter DO</p> <p>Requirement: 5%</p> <p>Applicability: All</p>	<p>a. Calculate the percentage of on-farm samples taken for 2.2.1a that fall under 2 mg/l DO.</p> <p>b. Submit results from 2.2.2a as per Appendix VI to ASC at least once per year.</p> <p>c. Others, please describe</p>	No samples below 4.1 mg/l recorded.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
2.2.3	<p>Indicator: For jurisdictions that have national or regional coastal water quality targets [16], demonstration through third-party analysis that the farm is in an area recently [17] classified as having “good” or “very good” water quality [18]</p> <p>Requirement: Yes [19]</p> <p>Applicability: All farms except as noted in [19]</p>	<p>a. Inform the CAB whether relevant targets and classification systems are applicable in the jurisdiction. If applicable, proceed to "2.2.3.b". If not applicable, take action as required under 2.2.4</p> <p>b. Compile a summary of relevant national or regional water quality targets and classifications, identifying the third-party responsible for the analysis and classification.</p> <p>c. Identify the most recent classification of water quality for the area in which the farm operates.</p> <p>d. Others, please describe</p>	<p>The water quality guidelines document referenced is the Canadian Councils of Ministers of the environment 'water quality guidelines for the protection of aquatic life' (2003) and the specified parameter for marine water quality is Nitrate concentration for which the short term guideline value given is 1,500 mg/l and the long term value is 200 mg/l. The 2017 report titled "Marine Harvest Nutrient Monitoring and Data Analysis" confirms that site-level samples are in line with CCME guidelines.</p>	Compliant	
2.2.4	<p>Indicator: For jurisdictions without national or regional coastal water quality targets, evidence of weekly monitoring of nitrogen and phosphorous [20] levels on farm and at a reference site, following methodology in Appendix I-5</p> <p>Requirement: Yes</p> <p>Applicability: All farms except as noted in [19]</p>	<p>a. Develop, implement, and document a weekly monitoring plan for N, NH4, NO3, total P, and ortho-P in compliance with Appendix I-5, testing a minimum of once weekly in both locations. For first audits, farm records must cover ≥ 6 months.</p> <p>b. Calibrate all equipment according to the manufacturer's recommendations.</p> <p>c. Submit data on N and P to ASC as per Appendix VI at least once per year.</p> <p>d. Others, please describe</p>	N/A, covered by monitoring for Marine Area water quality guidelines	N/A	
2.2.5	<p>Indicator: Demonstration of calculation of biochemical oxygen demand (BOD [21]) of the farm on a production cycle basis</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Collect data throughout the course of the production cycle and calculate BOD according to formula in the instruction box.</p> <p>b. Submit calculated BOD as per Appendix VI to ASC for each production cycle.</p> <p>c. Others, please describe</p>	<p>Previous cycle information included in the transparency checklist current cycle to be added on completion. Previous cycle calculation for BOD is 5,023,064.5</p>	Compliant	
Criterion 2.3 Nutrient release from production					
2.3.1	<p>Indicator: Percentage of fines [22] in the feed at point of entry to the farm [23] (calculated following methodology in Appendix I-2)</p> <p>Requirement: < 1% by weight of</p>	<p>a. Determine and document a schedule and location for quarterly testing of feed. If testing prior to delivery to farm site, document rationale behind not testing on site.</p> <p>b. If using a sieving machine, calibrate equipment according to manufacturer's recommendations.</p>	<p>ASC Site manual (August 7th 2015) specifies the sampling procedure as laid out in the appendix 1-2. Most recent quarterly sample January confirmed as 0.03%, interview with site staff TL confirms mixing requirements for analysis are carried out according to the site ASC Handbook which quotes the Appendix 1 - 2 procedure. Manual sieves are centrally located and distributed as required</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	the feed	c. Conduct test according to detailed methodology in Appendix I-2 and record results for the pooled sample for each quarter. For first audits, farms must have test results from the last 3 months.			
	Applicability: All farms except as noted in [23]	d. Others, please describe			
Criterion 2.4 Interaction with critical or sensitive habitats and species					
2.4.1	<p>Indicator: Evidence of an assessment of the farm's potential impacts on biodiversity and nearby ecosystems that contains at a minimum the components outlined in Appendix I-3</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Perform (or contract to have performed) a documented assessment of the farm's potential impact on biodiversity and nearby ecosystems. The assessment must address all components outlined in Appendix I-3.</p> <p>b. If the assessment (2.4.1a) identifies potential impact(s) of the farm on biodiversity or nearby critical, sensitive or protected habitats or species, prepare plan to address those potential impacts.</p> <p>c. Keep records to show how the farm implements plan(s) from 2.4.1b to minimize potential impacts to critical or sensitive habitats and species.</p> <p>d. Others, please describe</p>	Fisheries and Oceans Canada assessment (dated 2004) determined that the site is "unlikely to cause significant adverse environmental effects". with government requirements for site location considered and approved, species identified in the "BC species and ecosystems explorer website" considered by the company covering fauna and flora, e.g. Steller sea lion noted as not commonly seen around site.	Compliant	
2.4.2	<p>Indicator: Allowance for the farm to be sited in a protected area [24] or High Conservation Value Areas [25] (HCVAs)</p> <p>Requirement: None [26]</p> <p>Applicability: All farms except as noted in [26]</p>	<p>a. Provide a map showing the location of the farm relative to nearby protected areas or High Conservation Value Areas (HCVAs) as defined above (see also 1.1.1a).</p> <p>b. If the farm is <u>not</u> sited in a protected area or High Conservation Value Area as defined above, prepare a declaration attesting to this fact. In this case, the requirements of 2.4.2c-d do not apply.</p> <p>c. If the farm <u>is</u> sited in a protected area or HCVA, review the scope of applicability of Indicator 2.4.2 (see Instructions above) to determine if your farm is allowed an exception to the requirements. If yes, inform the CAB which exception (#1, #2, or #3) is allowed and provide supporting evidence.</p> <p>d. If the farm is sited in a protected area or HCVA and the exceptions provided for Indicator 2.4.2 <u>do not apply</u>, then the farm does not comply with the requirement and is ineligible for ASC certification.</p> <p>e. Others, please describe</p>	Richard Opala, Regulatory affairs manager statement dated 16th April 2014 specifies that governmental restrictions would not permit such activity to take place, also confirmed by examination of BC Government maps showing restricted areas and farms indicated to be outwith these. Sonora Point is @6 kilometres away from the Thurston Bay RCA but confirmed as outside it (DFO Rock Fish conservation area 13 map) Government requirement for by catch recording and rock fish species identification occurs on sites (site have ID charts)	Compliant	
Criterion 2.5 Interaction with wildlife, including predators [27]					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
2.5.1	<p>Indicator: Number of days in the production cycle when acoustic deterrent devices (ADDs) or acoustic harassment devices (AHDs) were used</p> <p>Requirement: 0, within three years of the date of publication [28] of the SAD standard (i.e. full compliance by June 13, 2015)</p> <p>Applicability: All</p>	<p>a. Prepare a written statement affirming that the farm's management is committed to eliminate all usage of acoustic deterrent devices (ADDs) or acoustic harassment devices (AHDs) by June 13, 2015.</p> <p>b. Compile documentary evidence to show that no ADDs or AHDs were used by the farm after June 13, 2015 (applicable only after the specified date).</p> <p>-</p> <p>d. Others, please describe</p>	ADD use is prohibited in the area by government edict. No usage confirmed during site inspection.	N/A	
2.5.2	<p>Indicator: Prior to the achievement of 2.5.1, if ADDs or AHDs are used, maximum percentage of days [29] in the production cycle that the devices are operational</p> <p>Requirement: ≤ 40%</p> <p>Applicability: All, until June 13, 2015</p>	<p>a. Maintain a log for the use of any ADDs or AHDs on farm that includes recording the number of days (24-hour cycles) during which the devices were used.</p> <p>b. Calculate the percentage of days in the production cycle that the devices were operational in the most recent complete production cycle.</p> <p>-</p> <p>d. Submit data on number of days that ADDs/AHDs were used to the ASC as per Appendix VI. Data must be sent to ASC on an ongoing basis (i.e. at least once per year and for each production cycle).</p> <p>e. Others, please describe</p>	ADD use is prohibited in the area by government edict. No usage confirmed during site inspection.	N/A	
2.5.3	<p>Indicator: Number of mortalities [30] of endangered or red-listed [31] marine mammals or birds on the farm</p> <p>Requirement: 0 (zero)</p> <p>Applicability: All</p>	<p>a. Prepare a list of all predator control devices and their locations.</p> <p>b. Maintain a record of all predator incidents.</p> <p>c. Maintain a record of all mortalities of marine mammals and birds on the farm identifying the species, date, and apparent cause of death.</p> <p>d. Maintain an up-to-date list of endangered or red-listed marine mammals and birds in the area (see 2.4.1)</p> <p>-</p> <p>f. Others, please describe</p>	Each cage group has a protective predator exclusion net. Net maintenance by divers (SW957 - 22nd June 2016) and non-diver (i.e. lifting) procedure SW958 (Updated March 24th 2017) specified to ensure nets are a. properly tensioned and b. have no damage.. Replacement policy for predator nets confirmed in place. No predator incidents recorded. Site inspection raised no particular concerns of potential risks to wildlife. Red-listed species identified by Policy Document SW965 updated March 2017. Document includes provincial designation, COSEWIC status, Canadian Species at Risk Act (SARA) and conservation priority.	Compliant	
	<p>Indicator: Evidence that the following steps were taken prior to lethal action [32] against a predator:</p> <p>1. All other avenues were pursued</p>	<p>a. Provide a list of all lethal actions that the farm took against predators during the previous 12-month period. Note: "lethal action" is an action taken to deliberately kill an animal, including marine mammals and birds.</p>	No lethal actions or predator mortalities record for this site confirmed for the required time period.		

	Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
2.5.4	<p>prior to using lethal action 2. Approval was given from a senior manager above the farm manager 3. Explicit permission was granted to take lethal action against the specific animal from the relevant regulatory authority</p> <p>Requirement: Yes [33]</p> <p>Applicability: All except cases where human safety is endangered as noted in [33]</p>	<p>b. For each lethal action identified in 2.5.4a, keep record of the following: 1) a rationale showing how the farm pursued all other reasonable avenues prior to using lethal action; 2) approval from a senior manager above the farm manager of the lethal action; 3) where applicable, explicit permission was granted by the relevant regulatory authority to take lethal action against the animal.</p> <p>c. Provide documentary evidence that steps 1-3 above (in 2.5.4b) were taken prior to killing the animal. If human safety was endangered and urgent action necessary, provide documentary evidence as outlined in [33].</p> <p>d. Others, please describe</p>	Compliant	
2.5.5	<p>Indicator: Evidence that information about any lethal incidents [35] on the farm has been made easily publicly available [34]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. For all lethal actions (see 2.5.4), keep records showing that the farm made the information available within 30 days of occurrence.</p> <p>b. Ensure that information about all lethal actions listed in 2.5.5a are made easily publicly available (e.g. on a website).</p> <p>c. Others, please describe</p>	No lethal actions or predator mortalities record for this site confirmed for the required time period.	Compliant
2.5.6	<p>Indicator: Maximum number of lethal incidents [35] on the farm over the prior two years</p> <p>Requirement: < 9 lethal incidents [36], with no more than two of the incidents being marine mammals</p> <p>Applicability: All</p>	<p>a. Maintain log of lethal incidents (see 2.5.4a) for a minimum of two years. For first audit, > 6 months of data are required.</p> <p>b. Calculate the total number of lethal incidents and the number of incidents involving marine mammals during the previous two year period.</p> <p>c. Send ASC the farm's data for all lethal incidents [35] of any species other than the salmon being farmed (e.g. lethal incidents involving predators such as birds or marine mammals). Data must be sent to ASC on an ongoing basis (i.e. at least once per year and for each production cycle).</p> <p>d. Others, please describe</p>	No lethal actions or mortalities of predatory animals likely to try to feed upon farmed salmon (as determined in the audit manual) are recorded for this site confirmed covering the required time period.	Compliant
2.5.7	<p>Indicator: In the event of a lethal incident, evidence that an assessment of the risk of lethal incident(s) has been undertaken and demonstration of concrete steps taken by the farm to reduce</p>	<p>a. Keep records showing that the farm undertakes an assessment of risk following each lethal incident and how those risk assessments are used to identify concrete steps the farm takes to reduce the risk of future incidents.</p>	Not required due to there being no lethal incidents	N/A

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
2.5.7	Steps taken by the farm to reduce the risk of future incidences Requirement: Yes Applicability: All	b. Provide documentary evidence that the farm implements those steps identified in 2.5.7a to reduce the risk of future lethal incidents. c. Others, please describe	1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	N/A	
PRINCIPLE 3: PROTECT THE HEALTH AND GENETIC INTEGRITY OF WILD POPULATIONS					
<i>Criterion 3.1 Introduced or amplified parasites and pathogens [38,39]</i>					
3.1.1	Indicator: Participation in an Area-Based Management (ABM) scheme for managing disease and resistance to treatments that includes coordination of stocking, fallowing, therapeutic treatments and information-sharing. Detailed requirements are in Appendix II-1. Requirement: Yes Applicability: All except farms that release no water as noted in [38]	a. Keep record of farm's participation in an ABM scheme. b. Submit to the CAB a description of how the ABM (3.1.1a) coordinates management of disease and resistance to treatments, including: - coordination of stocking; - fallowing; - therapeutic treatments; and - information sharing. c. Provide the CAB access to documentation which is sufficient for the auditor to evaluate the ABM's compliance with all requirements in Appendix II-1, including definition of area, minimum % participation in the scheme, components, and coordination requirements. d. Submit dates of fallowing period(s) as per Appendix VI to ASC at least once per year. e. Others, please describe	Co-ordinated Area Management Production (CAMP) is being developed by DFO. From DFO website, located in Salmonid Fish Health Zone 3-2 (Campbell river) DFO records Pacific Fishery Management Area 13, sub area 26. Specialist oversight of treatments in areas requiring 'area management ' internal to MH is demonstrated to be in place (by Vet Diane Morrison) and this is not deemed necessary for this site due to location Following confirmed as between 29th December 2014 and 18th January 2016 from transparency checklist backed up by Aquafarmer records. MH Canada wishes to apply the VR (145) submitted by SAI Global relating to the participation in an ABM as the neighbouring farms are run by MH Canada (Duncan and Doyle)so fall under there operational control. And are covered by DFO pacific management area 3-2 and restrictions therein applied. Cermaq has two sites in the same zone but 25 kms distant by water so deemed outwith any potentially useful ABM agreement. Other MH sites exist however are followed regardless of this.	Compliant	
3.1.2	Indicator: A demonstrated commitment [40] to collaborate with NGOs, academics and governments on areas of mutually agreed research to measure possible impacts on wild stocks Requirement: Yes	a. Retain records to show how the farm and/or its operating company has communicated with external groups (NGOs, academics, governments) to agree on and collaborate towards areas of research to measure impacts on wild stocks, including records of requests for research support and collaboration and responses to those requests. b. Provide non-financial support to research activities in 3.1.2a by either: - providing researchers with access to farm-level data; - granting researchers direct access to farm sites; or - facilitating research activities in some equivalent way.	Expertise and data sharing provided for the WWF Project (April 2013 - April 2014 - Advancing the science and management of cumulative impacts also part funded by MH Canada resulted in a report "Cumulative effects in Marine Ecosystems" also Sea lice research work carried out at the Vancouver Aquarium. Collaboration with UPEI, University of Toronto, DFO research; Broughton Archipelago Management Project published the 2015 paper "Spatial patterns of sea lice infection among wild and captive salmon in western Canada". The sea lice monitoring report "Report on sea lice assessment on wild salmon collected in the Strait of George, Discovery Islands and Johnstone strait BC" conducted by the DFO with analysis and the report being written by CAHS In addition April 2013 - April 2014 - "Advancing the science and management of cumulative impacts~ funded by MH Canada resulted in a report "Cumulative effects in Marine Ecosystems" also Sea lice research work carried out at the Vancouver Aquarium. No projects relating to issues of wild stocks or Salmon farming in general are stated to have been rejected. New Projects (and ongoing)in the Marine Environmental Research Program are	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Applicability: All except farms that release no water as noted in [38]	<p>c. When the farm and/or its operating company denies a request to collaborate on a research project, ensure that there is a written justification for rejecting the proposal.</p> <p>d. Maintain records from research collaborations (e.g. communications with researchers) to show that the farm has supported the research activities identified in 3.1.2a.</p> <p>e. Others, please describe</p>	supported including the use of cleaner fish (the Perch and Keel Perch)		
3.1.3	<p>Indicator: Establishment and annual review of a maximum sea lice load for the entire ABM and for the individual farm as outlined in Appendix II-2</p> <p>Requirement: Yes</p> <p>Applicability: All except farms that release no water as noted in [38]</p>	<p>a. Keep records to show that a maximum sea lice load has been set for: - the entire ABM; and - the individual farm.</p> <p>b. Maintain evidence that the established maximum sea lice load (3.1.3a) is reviewed annually as outlined in Appendix II-2, incorporating feedback from the monitoring of wild salmon where applicable (See 3.1.6).</p> <p>c. Provide the CAB access to documentation which is sufficient for the auditor to evaluate whether the ABM has set (3.1.3a) and annually reviewed (3.1.3.b) maximum sea lice load in compliance with requirements in Appendix II-2.</p> <p>d. Submit the maximum sea lice load for the ABM to ASC as per Appendix VI at least once per year.</p> <p>e. Others, please describe</p>	Maximum motile lice load value calculated as required of 2,154,081 at maximum stocking level of fish (averaged over last 3 inputs and working from maximum potential biomass calculations) and a trigger level of 3 motiles per fish. For each farm . Confirmed reviewed every July. Wild fish lice levels are monitored and a report by BC Centre for Aquatic Health Sciences report (spring collection information provided), link to MH website (confirmed as working) included in transparency checklist and accessible at www.marineharvest.ca	Compliant	
		<p>a. Prepare an annual schedule for testing sea lice that identifies timeframes of routine testing frequency (at a minimum, monthly) and for high-frequency testing (weekly) due to sensitive periods for wild salmonids (e.g. during and immediately prior to outmigration of juveniles).</p> <p>b. Maintain records of results of on-farm testing for sea lice. If farm deviates from schedule due to weather [41] maintain documentation of event and rationale.</p>	<p>Accessible on the MH website (ASC data reporting page at www.marineharvest.ca) listed in transparency checklist (sites under assessment) with weekly postings, weekly sampling February 1st to June 30th with weekly information and posting dates logged on excel spreadsheet. Results confirmed as easily available. NC as no monitoring sample recorded for week of 11th April 2017 and no record of any acceptable reason for this.</p>		No monitoring sample recorded for week of 11th April 2017 and there was no record of any acceptable reason for this.

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
3.1.4	<p>Indicator: Frequent [41] on-farm testing for sea lice, with test results made easily publicly available [42] within seven days of testing</p> <p>Requirement: Yes</p> <p>Applicability: All except farms that release no water as noted in [38]</p>	<p>c. Document the methodology used for testing sea lice ('testing' includes both counting and identifying sea lice). The method must follow national or international norms, follows accepted minimum sample size, use random sampling, and record the species and life-stage of the sea lice. If farm uses a closed production system and would like to use an alternate method (i.e. video), farm shall provide the CAB with details on the method and efficacy of the method.</p> <p>d. Make the testing results from 3.1.4b easily publicly available (e.g. posted to the company's website) within seven days of testing. If requested, provide stakeholders access to hardcopies of test results.</p> <p>e. Keep records of when and where test results were made public.</p> <p>f. Submit test results to ASC (Appendix VI) at least once per year.</p> <p>g. Others, please describe</p>	<p>1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team.</p> <p>2. Replace explanatory text in the 'Audit Evidence' column as appropriate.</p> <p>3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.</p>	Minor	
3.1.5	<p>Indicator: In areas with wild salmonids [43], evidence of data [44] and the farm's understanding of that data, around salmonid migration routes, migration timing and stock productivity in major waterways within 50 kilometres of the farm</p> <p>Requirement: Yes</p> <p>Applicability: All farms operating in areas with wild salmonids except farms that release no water as noted in [38]</p>	<p>a. Identify all salmonid species that naturally occur within 75 km of the farm through literature search or by consulting with a reputable authority. If the farm is not in an area with wild salmonids, then 3.1.5b and c do not apply.</p> <p>b. For species listed in 3.1.5a, compile best available information on migration routes, migration timing (range of months for juvenile outmigration and returning salmon), life history timing for coastal resident salmonids, and stock productivity over time in major waterways within 50 km of the farm.</p> <p>c. From data in 3.1.5b, identify any sensitive periods for wild salmonids (e.g. periods of outmigration of juveniles) within 50 km of the farm.</p> <p>-</p> <p>e. Others, please describe</p>	<p>Majority are Chum and Pink with some Sockeye, Chinook and Coho. Sensitive period determined by the Local Government and adopted by MHC. DFO Pacific Salmon outlook for 2017 by watershed and species provided, 80 outlook units were categorised with 32 at or above target abundance with 31 'of some conservation concern' and 22 with mixed outlook. Awareness of wild salmon migration for staff demonstrated due to the increased counting of lice during March - June. Identification of sensitive period confirmed as government determined and relates to Pink and Chum salmon as these are the smallest and determined to be most susceptible. The defined sensitive period is designed to overlap different species.</p>	Compliant	
	<p>Indicator: In areas of wild salmonids, monitoring of sea lice levels on wild out-migrating salmon</p>	<p>a. Inform the CAB if the farm operates in an area of wild salmonids. If not, then Indicator 3.1.6 does not apply.</p> <p>b. Keep records to show the farm participates in monitoring of sea lice on wild salmonids.</p>			

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
3.1.6	<p>juveniles or on coastal sea trout or Arctic char, with results made publicly available. See requirements in Appendix III-1.</p> <p>Requirement: Yes</p> <p>Applicability: All farms operating in areas with wild salmonids except farms that release no water as noted in [38]</p>	<p>c. Provide the CAB access to documentation which is sufficient for the auditor to evaluate whether the methodology used for monitoring of sea lice on wild salmonids is in compliance with the requirements in Appendix III-1.</p> <p>d. Make the results from 3.1.6b easily publicly available (e.g. posted to the company's website) within eight weeks of completion of monitoring.</p> <p>e. Submit to ASC the results from monitoring of sea lice levels on wild salmonids as per Appendix VI.</p> <p>f. Others, please describe</p>	<p>Sampling carried out by the DFO with analysis and the report written by CAHS on behalf of MH Canada, Greig, Cermaq and the DFO. Results confirmed to be published on the company website (http://marineharvest.ca/planet/salmon_certification/wild-salmonid-lice-monitoring) annually. Mainstream Biological sampling underway for 2017, analysis will again be carried out by CAHS and the report written by Mainstream.</p>	Compliant	
3.1.7	<p>Indicator: In areas of wild salmonids, maximum on-farm lice levels during sensitive periods for wild fish [45]. See detailed requirements in Appendix II, subsection 2.</p> <p>Requirement: 0.1 mature female lice per farmed fish</p> <p>Applicability: All farms operating in areas with wild salmonids except farms that release no water as noted in [38]</p>	<p>a. Inform the CAB if the farm operates in an area of wild salmonids. If not, then Indicator 3.1.7 does not apply.</p> <p>b. Establish the sensitive periods [45] of wild salmonids in the area where the farm operates. Sensitive periods for migrating salmonids is during juvenile outmigration and approximately one month before.</p> <p>c. Maintain detailed records of monitoring on-farm lice levels (see 3.1.4) during sensitive periods as per Appendix II-2.</p> <p>d. Provide the CAB with evidence there is a 'feedback loop' between the targets for on-farm lice levels and the results of monitoring of lice levels on wild salmonids (Appendix II-2).</p> <p>e. Others, please describe</p>	<p>BC Government determined dates of 1st March to 30th June used. VR 141 accepts the DFO limits for lice, appended paper (VR 88) supports the difference between BC and other areas where only one treatment option is available. Slice treatment confirmed as triggered by monitoring indicator of >3 motile lice per fish. Records confirm weekly sampling as being company policy since February 8th 2017 regardless of whether or not within the defined sensitive period.</p>	Compliant	
Criterion 3.2 Introduction of non-native species					
	<p>Indicator: If a non-native species is being produced, demonstration that the species was widely</p>	<p>a. Inform the CAB if the farm produces a non-native species. If not, then Indicator 3.2.1 does not apply.</p> <p>b. Provide documentary evidence that the non-native species was widely commercially produced in the area before publication of the SAD Standard (i.e. before June 13, 2012).</p> <p>c. If the farm cannot provide evidence for 3.2.1b, provide documentary evidence that the farm uses only 100% sterile fish that includes details on accuracy of sterility effectiveness.</p>	<p>M H Canada farm Atlantic Salmon (<i>Salmo salar</i>) on this site. Atlantic Salmon are not native to Pacific. Atlantic Salmon have been farmed commercially in British Columbia since 1980s (Ref Fisheries and Oceans Canada, 'Farming the seas-A Timeline).Atlantic Salmon have been commercially farmed since the 1980's, more than 76, 000 tonnes produced in British Columbia in 2015. Ref http://www.dfo-mpo.gc.ca/aquaculture/sector-secteur/species-especes/salmon-saumon-eng.htm</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
3.2.1	commercially produced in the area by the date of publication of the SAD standard Requirement: Yes [47] Applicability: All farms except as noted in [47]	d. If the farm cannot provide evidence for 3.2.1b or 3.2.1c, provide documented evidence that the production system is closed to the natural environment and for each of the following: 1) non-native species are separated from wild fish by effective physical barriers that are in place and well maintained; 2) barriers ensure there are no escapes of reared fish specimens that might survive and subsequently reproduce [47]; and 3) barriers ensure there are no escapes of biological material [47] that might survive and subsequently reproduce (e.g. UV or other effective treatment of any effluent water exiting the system to the natural environment). - f. Others, please describe		Compliant	
3.2.2	Indicator: If a non-native species is being produced, evidence of scientific research [48] completed within the past five years that investigates the risk of establishment of the species within the farm's jurisdiction and these results submitted to ASC for review [49] Requirement: Yes, within five years of publication of the SAD standard [50,51] Applicability: All	a. Inform the ASC of the species in production (Appendix VI). b. Inform the CAB if the farm produces a non-native species. If not, then Indicator 3.2.2 does not apply. c. If yes to 3.2.2b, provide evidence of scientific research completed within the past five years that investigates the risk of establishment of the species within the farm's jurisdiction. Alternatively, the farm may request an exemption to 3.2.2c (see below). d. If applicable, submit to the CAB a request for exemption that shows how the farm meets all three conditions specified in instruction box above. e. Submit evidence from 3.2.2c to ASC for review. f. Others, please describe	N/A until June 2017	N/A	
3.2.3	Indicator: Use of non-native species for sea lice control for on-farm management purposes Requirement: None Applicability: All	a. Inform the CAB if the farm uses fish (e.g. cleaner fish or wrasse) for the control of sea lice. b. Maintain records (e.g. invoices) to show the species name and origin of all fish used by the farm for purposes of sea lice control. c. Collect documentary evidence or first hand accounts as evidence that the species used is not non-native to the region. d. Others, please describe	N/A no use of any species of cleaner fish stated, supported by observation during site visit, Two species of Perch being trialled at DFO laboratories for possible future use.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
Criterion 3.3 Introduction of transgenic species					
3.3.1	Indicator: Use of transgenic [53] salmon by the farm Requirement: None Applicability: All	a. Prepare a declaration stating that the farm does not use transgenic salmon.	Confirmed by declaration provided (23 November 2015) Marine Harvest does not produce, farm or sell transgenic salmon, additionally internal control of broodstock and eggs confirms control of stock.	Compliant	
		b. Maintain records for the origin of all cultured stocks including the supplier name, address and contact person(s) for stock purchases.			
		c. Ensure purchase documents confirm that the culture stock is not transgenic.			
		d. Others, please describe			
Criterion 3.4 Escapes [55]					
3.4.1	Indicator: Maximum number of escapees [56] in the most recent production cycle Requirement: 300 [57] Applicability: All farms except as noted in [57]	a. Maintain monitoring records of all incidences of confirmed or suspected escapes, specifying date, cause, and estimated number of escapees.	Farm Manager states no escapes suspected, records including count positive within counter accuracy limits and reporting to DFO federal government support this. No requirement for previous cycle information as this is an assessment audit. Indication of 'no escapes included in transparency submissions.	Compliant	
		b. Aggregate cumulative escapes in the most recent production cycle.			
		c. Maintain the monitoring records described in 3.4.1a for at least 10 years beginning with the production cycle for which farm is first applying for certification (necessary for farms to be eligible to apply for the exception noted in [57]).			
		d. If an escape episode occurs (i.e. an incident where > 300 fish escaped), the farm may request a rare exception to the Standard [57]. Requests must provide a full account of the episode and must document how the farm could not have predicted the events that caused the escape episode.			
		e. Submit escape monitoring dataset to ASC as per Appendix VI on an ongoing basis (i.e. at least once per year and for each production cycle).			
		f. Others, please describe			
3.4.2	Indicator: Accuracy [58] of the counting technology or counting method used for calculating stocking and harvest numbers	a. Maintain records of accuracy of the counting technology used by the farm at times of stocking and harvest. Records include copies of spec sheets for counting machines and common estimates of error for hand-counts.	Counting technology confirmed as Aquascan counter with accuracy stated by company literature as in excess of 98% (http://www.aquascan.com/event/dolink/famid/131698) in use in hatcheries other than at Ocean falls where the count at vaccination is used. SOP 269 for number controls confirms procedures to ensure accurate counts at input. Roy Kristian wellboat confirmed as using Aquascan CSF 3150 counters(printed documentation provided for accuracy) with Orca Chief using VAKI Macro counters (website reference for accuracy confirmation provided count variance at end of cycle listed as +21,375 fish.	Compliant	
		b. If counting takes place off site (e.g. pre-smolt vaccination count), obtain and maintain documents from the supplier showing the accuracy of the counting method used (as above).			

	Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
Requirement: ≥ 98% Applicability: All	c. During audits, arrange for the auditor to witness calibration of counting machines (if used by the farm). - e. Submit counting technology accuracy to ASC as per Appendix VI on an ongoing basis (i.e. at least once per year and for each production cycle). f. Others, please describe			
3.4.3 Indicator: Estimated unexplained loss [59] of farmed salmon is made publicly available Requirement: Yes Applicability: All	a. Maintain detailed records for mortalities, stocking count, harvest count, and escapes (as per 3.4.1). b. Calculate the estimated unexplained loss as described in the instructions (above) for the most recent full production cycle. For first audit, farm must demonstrate understanding of calculation and the requirement to disclose EUL after harvest of the current cycle. c. Make the results from 3.4.3b available publicly. Keep records of when and where results were made public (e.g. date posted to a company website) for all production cycles. d. Submit estimated unexplained loss to ASC as per Appendix VI for each production cycle. - f. Others, please describe	Detailed records supplied and summary included in transparency checklist, count variance at end of cycle listed as positive so no issues. (EUL calculated as (number of fish stocked-mortality on site-harvest number)/harvest number which correlates with the counter accuracy declared, there is no suspicion of any escapes from either stock numbers at harvest or other factors.	Compliant	
	a. Prepare an Escape Prevention Plan and submit it to the CAB before the first audit. This plan may be part of a more comprehensive farm planning document as long as it addresses all required elements of indicator 3.4.4.	Net check for Pen 2 - Net number G30 - 1415, confirmed in site record (net log) with strength test results supplied from Badinotti giving 313lbs below waterline and 227lbs bottom of net. net manufactured January 2014 and tested 4th July 2016, Staff training in Escape controls and drills confirmed. "escape kit" present to rapidly cater for any discovered issues, risk assessments provided. Net servicing carried out by Badinotti Net Services		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
3.4.4	<p>Indicator: Evidence of escape prevention planning and related employee training, including: net strength testing; appropriate net mesh size; net traceability; system robustness; predator management; record keeping and reporting of risk events (e.g., holes, infrastructure issues, handling errors, reporting and follow up of escape events); and worker training on escape prevention and counting technologies</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>b. If the farm operates an open (net pen) system, ensure the plan (3.4.4a) covers the following areas:</p> <ul style="list-style-type: none"> - net strength testing; - appropriate net mesh size; - net traceability; - system robustness; - predator management; - record keeping; - reporting risk events (e.g. holes, infrastructure issues, handling errors); - planning of staff training to cover all of the above areas; and - planning of staff training on escape prevention and counting technologies. <p>c. If the farm operates a closed system, ensure the plan (3.4.4a) covers the following areas:</p> <ul style="list-style-type: none"> - system robustness; - predator management; - record keeping; - reporting risk events (e.g. holes, infrastructure issues, handling errors); - planning of staff training to cover all of the above areas; and - planning of staff training on escape prevention and counting technologies. <p>d. Maintain records as specified in the plan.</p> <p>e. Train staff on escape prevention planning as per the farm's plan.</p> <p>-</p> <p>g. Others, please describe</p>	<p>including disinfection to 65c for 1 hour. This is in conflict with the MH Canada Net Loft Biosecurity Procedure (SW 823) which states 70c for 10 minutes as a minimum temperature though it is accepted that in microbiological terms the net result will be the same.</p>	Compliant	
PRINCIPLE 4: USE RESOURCES IN AN ENVIRONMENTALLY EFFICIENT AND RESPONSIBLE MANNER					
<i>Criterion 4.1 Traceability of raw materials in feed</i>					
		<p>a. Maintain detailed records of all feed suppliers and purchases including contact information and purchase and delivery records.</p> <p>b. Inform each feed supplier in writing of ASC requirements pertaining to production of salmon feeds and send them a copy of the ASC Salmon Standard.</p>			

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.1.1	<p>Indicator: Evidence of traceability, demonstrated by the feed producer, of feed ingredients that make up more than 1% of the feed [62].</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>c. For each feed producer used by the farm, confirm that an audit of the producer was recently done by an audit firm or CAB against an ASC-acknowledged certification scheme. Obtain a copy of the most recent audit report for each feed producer.</p> <p>d. For each feed producer, determine whether the farm will use method #1 or method #2 (see Instructions above) to show compliance of feed producers. Inform the CAB in writing.</p> <p>e. Obtain declaration from feed supplier(s) stating that the company can assure traceability of all feed ingredients that make up more than 1% of the feed to a level of detail required by the ASC Salmon Standard [62].</p> <p>-</p> <p>g. Others, please describe</p>	<p>Company confirms only Skretting feed used. Skretting Canada audit report for BAP provided (Certificate 1451 expiry 22nd October 2017) Feed label declarations and recipe information confirms traceability requirement backed up by traceability and systems management components of audits carried out. The mass balance method of confirming compliance has been selected by MH Canada sent by email March 8th Site confirmed as using Skretting Optiline premium at time of audit.</p>	Compliant	
Criterion 4.2 Use of wild fish for feed [63]					
4.2.1	<p>Indicator: Fishmeal Forage Fish Dependency Ratio (FFDRm) for grow-out (calculated using formulas in Appendix IV- 1)</p> <p>Requirement: < 1.35</p> <p>Applicability: All</p>	<p>a. Maintain a detailed inventory of the feed used including: - Quantities used of each formulation (kg); - Percentage of fishmeal in each formulation used; - Source (fishery) of fishmeal in each formulation used; - Percentage of fishmeal in each formulation derived from trimmings; and - Supporting documentation and signed declaration from feed supplier.</p> <p>b. For FFDRm calculation, exclude fishmeal derived from rendering of seafood by-products (e.g. the "trimmings" from a human consumption fishery).</p> <p>c. Calculate eFCR using formula in Appendix IV-1 (use this calculation also in 4.2.2 option #1).</p> <p>d. Calculate FFDRm using formulas in Appendix IV-1.</p> <p>e. Submit FFDRm to ASC as per Appendix VI for each production cycle.</p> <p>f. Others, please describe</p>	<p>Feed batch numbers are logged on PC, Aquafarmer records track usage by pen. Feed bag labels display basic ingredient information. Skretting has supplied lists of species used in fish meal and fish oil production including the species used in by-products by email June 27th 2016. Species listed are European Sprat, Lesser Sand eel, Norway pout (all North Sea origin). Gulf Menhaden from the Gulf of Mexico FFDRm of 0.57 provided with 11.4% forage fish fishmeal inclusion stated. From an eFCR of 1.205, calculations are confirmed as being calculated from the Calculated for previous production cycle, completed June 26, 2016.</p>	Compliant	
	<p>Indicator: Fish Oil Forage Fish</p>	<p>a. Maintain a detailed inventory of the feed used as specified in 4.2.1a.</p>	<p>Feed records confirmed by Aquafarmer FFDRo of 2.31 so compliant with the standard, calculations confirmed from excel spreadsheet, submission to ASC</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.2.2	Dependency Ratio (FFDRo) for grow-out (calculated using formulas in Appendix IV- 1), OR Maximum amount of EPA and DHA from direct marine sources [64] (calculated according to Appendix IV-2) Requirement: FFDRo < 2.95 or (EPA + DHA) < 30 g/kg feed Applicability: All	b. For FFDRo and EPA+DHA calculations (either option #1 or option #2), exclude fish oil derived from rendering of seafood by-products (e.g. the "trimmings" from a human consumption fishery). c. Inform the CAB whether the farm chose option #1 or option #2 to demonstrate compliance with the requirements of the Standard. d. For option #1, calculate FFDRo using formulas in Appendix IV-1 and using the eFCR calculated under 4.2.1c. e. For option #2, calculate amount of EPA + DHA using formulas in Appendix IV-2. f. Submit FFDRo or EPA & DHA to ASC as per Appendix VI for each production cycle. g. Others, please describe	confirmed on transparency checklist.	Compliant	
Criterion 4.3 Source of marine raw materials					
4.3.1	Indicator: Timeframe for all fishmeal and fish oil used in feed to come from fisheries [65] certified under a scheme that is an ISEAL member [66] and has guidelines that specifically promote responsible environmental management of small pelagic fisheries Requirement: < 5 years after the date of publication [67] of the SAD standards (i.e. full compliance by June 13, 2017) Applicability: All	a. Prepare a policy stating the company's support of efforts to shift feed manufacturers purchases of fishmeal and fish oil to fisheries certified under a scheme that is an ISEAL member and has guidelines that specifically promote responsible environmental management of small pelagic fisheries. b. Prepare a letter stating the farm's intent to source feed containing fishmeal and fish oil originating from fisheries certified under the type of certification scheme noted in 4.3.1a c. Starting on or before June 13, 2017, use feed inventory and feed supplier declarations in 4.2.1a to develop a list of the origin of all fish products used as feed ingredients. d. Starting on or before June 13, 2017, provide evidence that fishmeal and fish oil used in feed come from fisheries [65] certified under a scheme that is an ISEAL member [66] and has guidelines that specifically promote responsible environmental management of small pelagic fisheries. e. Others, please describe	N/A until June 2017 however Marine Harvest Corporate Policy on sustainable salmon feed (8th November 2013) covers the requirement.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.3.2	<p>Indicator: Prior to achieving 4.3.1, the FishSource score [68] for the fishery(is) from which all marine raw material in feed is derived</p> <p>Requirement: All individual scores ≥ 6, and biomass score ≥ 8</p> <p>Applicability: All, until June 13, 2017</p>	<p>a. Record FishSource score for each species from which fishmeal or fish oil was derived and used as a feed ingredient (all species listed in 4.2.1a).</p> <p>b. Confirm that each individual score ≥ 6 and the biomass score is ≥ 8.</p> <p>c. If the species is not on the website it means that a FishSource assessment is not available. Client can then take one or both of the following actions:</p> <ol style="list-style-type: none"> 1. Contact FishSource via Sustainable Fisheries Partnerships to identify the species as a priority for assessment. 2. Contract a qualified independent third party to conduct the assessment using the FishSource methodology and provide the assessment and details on the third party qualifications to the CAB for review. <p>-</p> <p>e. Others, please describe</p>	<p>Fish Source scores have been provided covering the mass balance derived quantities of fish meal and fish oil required to produce ASC approved feed. All submitted scores were in compliance with the required criteria. Skretting corporate document dated November 2015 covers the requirement, in addition a cross check on listed species (e.g. Herring - Denmark NE Atlantic listed at 8.4 - 10 - 10 - 10 (biomass) - 9.3 and North Sea Herring - Norway NE Atlantic as 8.4 - 8.1 - 10 - 8 (biomass) - 7.4 by category as listed. It is noted that the scores listed dated from 2014 and it was unclear at time of audit if these were the values at time of purchase. More up-to-date information still shows the species concerned to be compliant.</p>	Compliant	
4.3.3	<p>Indicator: Prior to achieving 4.3.1, demonstration of third-party verified chain of custody and traceability for the batches of fishmeal and fish oil which are in compliance with 4.3.2.</p> <p>Requirement: Yes</p> <p>Applicability: All, until June 13, 2017</p>	<p>a. Obtain from the feed supplier documentary evidence that the origin of all fishmeal and fish oil used in the feed is traceable via a third-party verified chain of custody or traceability program.</p> <p>b. Ensure evidence covers all the species used (as consistent with 4.3.2a, 4.2.1a, and 4.2.2a).</p> <p>c. Others, please describe</p>	<p>Covered by Marine Harvest Corporate policy on Sustainable Salmon Feed requirements (13th April 2015). Confirmed by traceability component of BAP certification (Certificate 1451 expiry 22nd October 2017)</p>	Compliant	
	<p>Indicator: Feed containing fishmeal and/or fish oil originating from by-products [69] or trimmings from IUU [70] catch or from fish species that are categorized as vulnerable,</p>	<p>a. Compile and maintain, consistent with 4.2.1a and 4.2.2a, a list of the fishery of origin for all fishmeal and fish oil originating from by-products and trimmings.</p> <p>b. Obtain a declaration from the feed supplier stating that no fishmeal or fish oil originating from IUU catch was used to produce the feed.</p>	<p>Skretting declaration confirms that no fish meal or fish oil used originates from IUU caught fish. Covered by Marine Harvest Corporate policy on Sustainable Salmon Feed requirements (13th April 2015). Skretting declaration June 2014 confirms that no fish meal or fish oil used originates from fish species that are categorized as vulnerable, endangered or critically endangered, according to the IUCN Red List of Threatened Species and includes analysis of the 15 species listed as used with no issues arising.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.3.4	<p>endangered or critically endangered, according to the IUCN Red List of Threatened Species [71]</p> <p>Requirement: None [72]</p> <p>Applicability: All except as noted in [72]</p>	<p>c. Obtain from the feed supplier declaration that the meal or oil did not originate from a species categorized as vulnerable, endangered or critically endangered, according to the IUCN Red List of Threatened Species [71] and explaining how they are able to demonstrate this (i.e. through other certification scheme or through their independent audit).</p> <p>d. If meal or oil originated from a species listed as “vulnerable” by IUCN, obtain documentary evidence to support the exception as outlined in [72].</p> <p>e. Others, please describe</p>		Compliant	
Criterion 4.4 Source of non-marine raw materials in feed					
4.4.1	<p>Indicator: Presence and evidence of a responsible sourcing policy for the feed manufacturer for feed ingredients that comply with recognized crop moratoriums [75] and local laws [76]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Compile and maintain a list of all feed suppliers with contact information. (See also 4.1.1a)</p> <p>b. Obtain from each feed manufacturer a copy of the manufacturer’s responsible sourcing policy for feed ingredients showing how the company complies with recognized crop moratoriums and local laws.</p> <p>c. Confirm that third party audits of feed suppliers (4.1.1c) show evidence that supplier’s responsible sourcing policies are implemented.</p> <p>d. Others, please describe</p>	The Skretting supplier declarations provided cover relevant sourcing requirements along with BAP Feed Mill certification confirmed as current (Certificate 1451 expiry 22nd October 2017) Marine Harvest Canada confirm Skretting is sole supplier used.	N/A	
4.4.2	<p>Indicator: Percentage of soya or soya-derived ingredients in the feed that are certified by the Roundtable for Responsible Soy (RTRS) or equivalent [77]</p> <p>Requirement: 100%, within five years of the publication [78] of the SAD standards</p> <p>Applicability: All, after June 13, 2017</p>	<p>a. Prepare a policy stating the company’s support of efforts to shift feed manufacturers’ purchases of soya to soya certified under the Roundtable for Responsible Soy (RTRS) or equivalent.</p> <p>b. Prepare a letter stating the farm’s intent to source feed containing soya certified under the RTRS (or equivalent)</p> <p>c. Notify feed suppliers of the farm’s intent (4.4.2b).</p> <p>d. Obtain and maintain declaration from feed supplier(s) detailing the origin of soya in the feed.</p> <p>e. Starting on or before June 13, 2017, provide evidence that soya used in feed is certified by the Roundtable for Responsible Soy (RTRS) or equivalent [77]</p> <p>f. Others, please describe</p>	N/A until June 2017. Email declaration received from Skretting stating that no soya is used in the feed supplied.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.4.3	<p>Indicator: Evidence of disclosure to the buyer [79] of the salmon of inclusion of transgenic [80] plant raw material, or raw materials derived from transgenic plants, in the feed</p> <p>Requirement: Yes, for each individual raw material containing > 1% transgenic content [81]</p> <p>Applicability: All</p>	<p>a. Obtain from feed supplier(s) a declaration detailing the content of soya and other plant raw materials in feed and whether it is transgenic.</p> <p>b. Disclose to the buyer(s) a list of any transgenic plant raw material in the feed and maintain documentary evidence of this disclosure. For first audits, farm records of disclosures must cover > 6 months.</p> <p>c. Inform ASC whether feed contains transgenic ingredients (yes or no) as per Appendix VI for each production cycle.</p> <p>d. Others, please describe</p>	<p>Email declarations received from Skretting stating separately that a) no soya is used in the feed supplied and b) Canola oil and Corn Gluten are used and these products may contain >1% transgenic content. The transparency checklist includes indication that transgenic ingredients are used.</p>	Compliant	
Criterion 4.5 Non-biological waste from production					
4.5.1	<p>Indicator: Presence and evidence of a functioning policy for proper and responsible [83] treatment of non-biological waste from production (e.g., disposal and recycling)</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Prepare a policy stating the farm's commitment to proper and responsible treatment of non-biological waste from production. It must explain how the farm's policy is consistent with best practice in the area of operation.</p> <p>b. Prepare a declaration that the farm does not dump non-biological waste into the ocean.</p> <p>c. Provide a description of the most common production waste materials and how the farm ensures these waste materials are properly disposed of.</p> <p>d. Provide a description of the types of waste materials that are recycled by the farm.</p> <p>e. Others, please describe</p>	<p>Materials storage, handling and waste disposal plan in plan SW 963 (last review June 2016) covers required elements and includes prohibition of dumping of non-biological waste into the ocean. Fresh water facilities make individual arrangements for recycling as confirmed at audit for Ocean Falls by Shearwater Marine invoice for pallets of waste, oil disposal by same transport to Hetherington for disposal.</p>	Compliant	
4.5.2	<p>Indicator: Evidence that non-biological waste (including net pens) from grow-out site is either disposed of properly or recycled</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Provide a description of the most common production waste materials and how the farm ensures these waste materials are properly disposed of. (see also 4.5.1c)</p> <p>b. Provide a description of the types of waste materials that are recycled by the farm. (See also 4.5.1d)</p> <p>c. Inform the CAB of any infractions or fines for improper waste disposal received during the previous 12 months and corrective actions taken..</p> <p>d. Maintain records of disposal of waste materials including old nets and cage equipment.</p> <p>e. Others, please describe</p>	<p>Recycling confirmed by separation and uplift from site for plastics, glass and paper on site, also feed bags and pallets. Feed delivery companies are contracted as part of the service contract to remove recyclable waste. Skretting Sales Manager Erin Agostini confirms waste is picked up by Global Wood Waste Inc. for processing, Letter of confirmation sighted 18th September 2015.</p>	Compliant	
Criterion 4.6 Energy consumption and greenhouse gas emissions on farms [84]					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.6.1	<p>Indicator: Presence of an energy use assessment verifying the energy consumption on the farm and representing the whole life cycle at sea, as outlined in Appendix V- 1</p> <p>Requirement: Yes, measured in kilojoule/mt fish/production cycle</p> <p>Applicability: All</p>	<p>a. Maintain records for energy consumption by source (fuel, electricity) on the farm throughout each production cycle.</p> <p>b. Calculate the farm's total energy consumption in kilojoules (kj) during the last production cycle.</p> <p>c. Calculate the total weight of fish in metric tons (mt) produced during the last production cycle.</p> <p>d. Using results from 4.6.1b and 4.6.1c, calculate energy consumption on the farm as required, reported as kilojoule/mt fish/production cycle.</p> <p>e. Submit results of energy use calculations (4.6.1d) to ASC as per Appendix VI for each production cycle.</p> <p>f. Ensure that the farm has undergone an energy use assessment that was done in compliance with requirements of Appendix V-1.</p> <p>g. Others, please describe</p>	<p>1,911,562 KJ / Metric Tonnes of fish produced, calculated for production for the previous production cycle with a spread sheet developed by MH Norway based on a total harvest biomass for the site of 3,801.141 tonnes harvested, initial stocking biomass of 723.735 tonnes giving a biomass gain of 3,077 tonnes</p>	Compliant	
4.6.2	<p>Indicator: Records of greenhouse gas (GHG [85]) emissions [86] on farm and evidence of an annual GHG assessment, as outlined in Appendix V-1</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain records of greenhouse gas emissions on the farm.</p> <p>b. At least annually, calculate all scope 1 and scope 2 GHG emissions in compliance with Appendix V-1.</p> <p>c. For GHG calculations, select the emission factors which are best suited to the farm's operation. Document the source of those emissions factors.</p> <p>d. For GHG calculations involving conversion of non-CO₂ gases to CO₂ equivalents, specify the Global Warming Potential (GWP) used and its source.</p> <p>e. Submit results of GHG calculations (4.6.2d) to ASC as per Appendix VI at least once per year.</p> <p>f. Ensure that the farm undergoes a GHG assessment as outlined in Appendix V-1 at least annually.</p> <p>g. Others, please describe</p>	<p>Confirmed as listed in the transparency checklist, Diesel, Propane, Gasoline are considered. Electricity is generated by diesel generators and values achieved from UK government conversion values from 2013 documentation with monthly updates. GHG emissions to date (details are updated quarterly) as 362,494 kgs Co2 equivalent from energy use on farm determined from a value of 1,911,563 KJ /mt produced.</p>	Compliant	
	<p>Indicator: Documentation of GHG emissions of the feed [87] used during the previous production cycle, as outlined in Appendix V, subsection 2</p>	<p>a. Obtain from feed supplier(s) a declaration detailing the GHG emissions of the feed (per kg feed).</p> <p>b. Multiply the GHG emissions per unit feed by the total amount of feed from each supplier used in the most recent completed production cycle.</p>	<p>Confirmed as calculated for Sonora Point with a value of 205,862,672 Kg CO₂ equivalent for the previous production cycle from 4,456 tonnes feed. Note that this was calculated by MH Canada from data supplied by Skretting.</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.6.3	<p>Requirement: Yes, within three years of the publication [88] of the SAD standards (i.e. by June 13, 2015)</p> <p>Applicability: All, after June 13, 2015</p>	<p>c. If client has more than one feed supplier, calculate the total sum of emissions from feed by summing the GHG emissions of feed from each supplier.</p> <p>d. Submit GHG emissions of feed to ASC as per Appendix VI for each production cycle.</p> <p>e. Others, please describe</p>	<p>1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team.</p> <p>2. Replace explanatory text in the 'Audit Evidence' column as appropriate.</p> <p>3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.</p>	Compliant	
Criterion 4.7 Non-therapeutic chemical inputs [89,90]					
4.7.1	<p>Indicator: For farms that use copper-treated nets [91], evidence that nets are not cleaned [92] or treated in situ in the marine environment</p> <p>Requirement: Yes</p> <p>Applicability: All farms except as noted in [89]</p>	<p>a. Prepare a farm procedure for net cleaning and treatment that describes techniques, technologies, use of off-site facilities, and record keeping.</p> <p>b. Maintain records of antifoulants and other chemical treatments used on nets.</p> <p>c. Declare to the CAB whether copper-based treatments are used on nets.</p> <p>d. If copper-based treatments are used, maintain documentary evidence (see 4.7.1b) that farm policy and practice does not allow for heavy cleaning of copper-treated nets in situ.</p> <p>e. Inform ASC whether copper antifoulants are used on farm (yes or no) as per Appendix VI for each production cycle.</p> <p>f. Others, please describe</p>	<p>Company policy for MH Canada has excluded use of Copper antifoulant treatments since 2009 with treated nets removed from the system by 2012. Company states SW 135 net maintenance document confirms company policy of pressure washing and schedules.</p>	Compliant	
4.7.2	<p>Indicator: For any farm that cleans nets at on-land sites, evidence that net-cleaning sites have effluent treatment [93]</p> <p>Requirement: Yes</p> <p>Applicability: All farms except as noted in [89]</p>	<p>a. Declare to the CAB whether nets are cleaned on-land.</p> <p>b. If nets are cleaned on-land, obtain documentary evidence from each net-cleaning facility that effluent treatment is in place.</p> <p>c. If yes to 4.7.2b, obtain evidence that effluent treatment used at the cleaning site is an appropriate technology to capture of copper in effluents.</p> <p>d. Others, please describe</p>	<p>N/A as no copper treated nets in use; nets are cleaned in situ with mechanical cleaners, Only standard biological debris cleaned off by Badinotti net services pre-servicing with waste sent to 7 mile landfill in Mount Waddington district with DFO and Ministry of Environment.</p>	N/A	
	<p>Indicator: For farms that use copper nets or copper-treated nets, evidence of testing for copper level</p>	<p>a. Declare to the CAB whether the farm uses copper nets or copper-treated nets. (See also 4.7.1c). If "no", Indicator 4.7.3 does not apply.</p>	<p>N/A as no copper treated nets in use.</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
4.7.3	in the sediment outside of the AZE, following methodology in Appendix I-1 Requirement: Yes Applicability: All farms except as noted in [89]	b. If "yes" in 4.7.3a, measure and record copper in sediment samples from the reference stations specified in 2.1.1d and 2.1.2c which lie outside the AZE. c. If "yes" in 4.7.3a, maintain records of testing methods, equipment, and laboratories used to test copper level in sediments from 4.7.3b. d. Others, please describe		N/A	
4.7.4	Indicator: Evidence that copper levels [94] are < 34 mg Cu/kg dry sediment weight OR in instances where the Cu in the sediment exceeds 34 mg Cu/kg dry sediment weight, demonstration that the Cu concentration falls within the range of background concentrations as measured at three reference sites in the water body Requirement: Yes Applicability: All farms except as noted in [89] and excluding those farms shown to be exempt from Indicator 4.7.3	a. Inform the CAB whether: 1) farm is exempt from Indicator 4.7.4 (as per 4.7.3a), or 2) Farm has conducted testing of copper levels in sediment. b. Provide evidence from measurements taken in 4.7.3b that copper levels are < 34 mg Cu/kg dry sediment weight. c. If copper levels in 4.7.4b are ≥ 34 mg Cu/kg dry sediment weight, provide evidence the farm tested copper levels in sediments from reference sites as described in Appendix I-1 (also see Indicators 2.1.1 and 2.1.2). d. Analyse results from 4.7.4c to show the background copper concentrations as measured at three reference sites in the water body. e. Submit data on copper levels in sediments to ASC as per Appendix VI for each production cycle. f. Others, please describe	N/A as no copper treated nets in use.	N/A	
4.7.5	Indicator: Evidence that the type of biocides used in net antifouling are approved according to legislation in the European Union, or the United States, or Australia Requirement: Yes Applicability: All farms except as noted in [89]	a. Identify all biocides used by the farm in net antifouling. b. Compile documentary evidence to show that each chemical used in 4.7.5a is approved according to legislation in one or more of the following jurisdictions: the European Union, the United States, or Australia. c. Others, please describe	MH Canada confirms no biocides used on nets. Inspections of nets during site inspection supports this declaration.	Compliant	
PRINCIPLE 5: MANAGE DISEASE AND PARASITES IN AN ENVIRONMENTALLY RESPONSIBLE MANNER					
<i>Criterion 5.1 Survival and health of farmed fish [95]</i>					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.1.1	<p>Indicator: Evidence of a fish health management plan for the identification and monitoring of fish diseases and parasites</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Prepare a fish health management plan that incorporates components related to identification and monitoring of fish disease and parasites. This plan may be part of a more comprehensive farm planning document.</p> <p>b. Ensure that the farm's current fish health management plan was reviewed and approved by the farm's designated veterinarian [96].</p> <p>c. Others, please describe</p>	<p>Salmonid Health Management Plan, updated October 2015 evidence of review by Diane Morrison provided with submission to DFO for annual approval. Health Department back up for mortality events determination, manager and staff trained and experienced.</p>	Compliant	
5.1.2	<p>Indicator: Site visits by a designated veterinarian [96] at least four times a year, and by a fish health manager [97] at least once a month</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain records of visits by the designated veterinarian [96] and fish health managers [97]. If schedule cannot be met, a risk assessment must be provided.</p> <p>b. Maintain a current list of personnel who are employed as the farm's designated veterinarian(s) [96] and fish health manager(s) [97].</p> <p>c. Maintain records of the qualifications of persons identified in 5.1.2b.</p> <p>d. Others, please describe</p>	<p>Monthly visits confirmed by Visitors log, all by MH employees as listed other than KB of CAHS, BSc. Qualification Diane Morrison qualified from the Ontario Veterinary College 1992 and has worked with Marine Harvest since September 2000, Mykolas Kamaitis vet from University of Guelph and employed since May 2016, BB (Senior fish health technician) and TM (Fish health technician) are both BSc. Graduates</p>	Compliant	
5.1.3	<p>Indicator: Percentage of dead fish removed and disposed of in a responsible manner</p> <p>Requirement: 100% [98]</p> <p>Applicability: All</p>	<p>a. Maintain records of mortality removals to show that dead fish are removed regularly and disposed of in a responsible manner.</p> <p>b. Collect documentation to show that disposal methods are in line with practices recommended by fish health managers and/or relevant legal authorities.</p> <p>c. For any exceptional mortality event where dead fish were not collected for post-mortem analysis, keep a written justification.</p> <p>d. Others, please describe</p>	<p>Mortality removal observed during on-site inspection; dead fish are stored in sealed tubs prior to uplift and disposal by approved contractor, process detailed in MH SOP SW 124. Mortality records checked with cause allocated in each case, logged in database and summarised in the transparency checklist submitted to ASC. All mortality logged with 3.06% as 'without diagnosis' (primarily due to decomposition). No exceptional mortality events recorded.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.1.4	<p>Indicator: Percentage of mortalities that are recorded, classified and receive a post-mortem analysis</p> <p>Requirement: 100% [99]</p> <p>Applicability: All</p>	<p>a. Maintain detailed records for all mortalities and post-mortem analyses including:</p> <ul style="list-style-type: none"> - date of mortality and date of post-mortem analysis; - total number of mortalities and number receiving post-mortem analysis; - name of the person or lab conducting the post-mortem analyses; - qualifications of the individual (e.g. veterinarian [96], fish health manager [97]); - cause of mortality (specify disease or pathogen) where known; and - classification as 'unexplained' when cause of mortality is unknown (see 5.1.6). <p>b. For each mortality event, ensure that post-mortem analyses are done on a statistically relevant number of fish and keep a record of the results.</p> <p>c. If on-site diagnosis is inconclusive and disease is suspected or results are inconclusive over a 1-2 week period, ensure that fish are sent to an off-site laboratory for diagnosis and keep a record of the results (5.1.4a).</p> <p>d. Using results from 5.1.3a-c, classify each mortality event and keep a record of those classifications.</p> <p>e. Provide additional evidence to show how farm records in 5.1.4a-d cover all mortalities from the current and previous two production cycles (as needed).</p> <p>f. Submit data on numbers and causes of mortalities to ASC as per Appendix VI on an ongoing basis (i.e. at least once per year and for each production cycle).</p> <p>g. Others, please describe</p>	<p>1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team.</p> <p>2. Replace explanatory text in the 'Audit Evidence' column as appropriate.</p> <p>3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.</p> <p>Aquafarmer database was checked and records were examined , in addition a mortality uplift of a pen to remove dead fish was observed. The farm worker who carried out the operation internally examined each fish (the fish sampled were relatively fresh and supported the farms attestation for daily removal) and recorded his interpretation of cause for the database. Sampling of fish where concerns are raised are stated to be passed to fish health team however there is no clear procedure which covers what level of mortality should be flagged to the health department. Health Department available for analysis of any unexplained mortalities which may arise along with MH Canada Lab back up based in Campbell River. Third Party assistance available under contract from BC Centre for Aquatic Health Sciences also located in Campbell River. Records were confirmed as submitted to the ASC in the required Transparency checklist.</p>	Minor	Whilst a level of understanding was exhibited at interview there is no clear procedure which covers what level of mortality should be flagged to the health department.
5.1.5	<p>Indicator: Maximum viral disease-related mortality [100] on farm during the most recent production cycle</p>	<p>a. Calculate the total number of mortalities that were diagnosed (see 5.1.4) as being related to viral disease.</p> <p>b. Combine the results from 5.1.5a with the total number of unspecified and unexplained mortalities from the most recent complete production cycle. Divide this by the total number of fish produced in the production cycle (x100) to calculate percent maximum viral disease-related mortality.</p>	<p>Using the ASC's designated methodology for determining possible viral cause for mortalities (including poor performers, lesions and 'without diagnoses' categories a value of 4.84% was obtained which is below the threshold of 10% possible viral cause. the without diagnoses component of this totalled 3.06% for the previous production cycle (2014 year class completed June 26th 2016) Current cycle to date shows an 'unexplained ' mortality figure of 3.9%</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Requirement: ≤ 10% Applicability: All	c. Submit data on total mortality and viral disease-related mortality to ASC as per Appendix VI on an ongoing basis (i.e. at least once per year and for each production cycle). d. Others, please describe			
5.1.6	Indicator: Maximum unexplained mortality rate from each of the previous two production cycles, for farms with total mortality > 6% Requirement: ≤ 40% of total mortalities Applicability: All farms with > 6% total mortality in the most recent complete production cycle.	a. Use records in 5.1.4a to calculate the unexplained mortality rate (%) for the most recent full production cycle. If rate was ≤ 6%, then the requirement of 5.1.6 does not apply. If total mortality rate was > 6%, proceed to 5.1.6b. b. Calculate the unexplained mortality rate (%) for each of the two production cycles immediately prior to the current cycle. For first audit, calculation must cover one full production cycle immediately prior to the current cycle. c. Submit data on maximum unexplained mortality to ASC as per Appendix VI for each production cycle. d. Others, please describe	Using the ASC's designated methodology for determining unexplained mortality a value of 4.84% was obtained which is below the threshold of 10% possible viral cause stipulated for compliance in 5.1.5 and also the <40% figure stated here.	Compliant	
5.1.7	Indicator: A farm-specific mortalities reduction program that includes defined annual targets for reductions in mortalities and reductions in unexplained mortalities Requirement: Yes Applicability: All	a. Use records in 5.1.4a to assemble a time-series dataset on farm-specific mortalities rates and unexplained mortality rates. b. Use the data in 5.1.7a and advice from the veterinarian and/or fish health manager to develop a mortalities-reduction program that defines annual targets for reductions in total mortality and unexplained mortality. c. Ensure that farm management communicates with the veterinarian, fish health manager, and staff about annual targets and planned actions to meet targets. d. Others, please describe	Site specific mortality reduction plan provided for Sonora Point provided including operational changes designed to assist the achievement of the reduced mortality goal set	Compliant	
Criterion 5.2 Therapeutic treatments [101]					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.2.1	<p>Indicator: On-farm documentation that includes, at a minimum, detailed information on all chemicals [102] and therapeutants used during the most recent production cycle, the amounts used (including grams per ton of fish produced), the dates used, which group of fish were treated and against which diseases, proof of proper dosing, and all disease and pathogens detected on the site</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain a detailed record of all chemical and therapeutant use that includes:</p> <ul style="list-style-type: none"> - name of the veterinarian prescribing treatment; - product name and chemical name; - reason for use (specific disease) - date(s) of treatment; - amount (g) of product used; - dosage; - mt of fish treated; - the WHO classification of antibiotics (also see note under 5.2.8); and - the supplier of the chemical or therapeutant. <p>b. If not already available, assemble records of chemical and therapeutant use to address all points in 5.2.1a for the previous two production cycles. For first audits, available records must cover one full production cycle immediately prior to the current cycle.</p> <p>c. Submit information on therapeutant use (data from 5.2.1a) to ASC as per Appendix VI on an ongoing basis (i.e. at least once per year and for each production cycle).</p> <p>d. Others, please describe</p>	<p>Any medicants used were confirmed as prescribed by D.Morrison (veterinary qualifications provided) and recorded the reason for treatment, dose and quantity of active ingredient Slice treatment for December 2016 Rx:16 - 114 Weight of population treated information was also provided. No antibiotic usage was required, only a single Slice treatment for this cycle and the preceding cycle. The required information was recorded as submitted to ASC within the transparency checklist which was cross checked with records in Aquafarmer database. and site paper 'drug treatment record'</p>	Compliant	
5.2.2	<p>Indicator: Allowance for use of therapeutic treatments that include antibiotics or chemicals that are banned [103] in any of the primary salmon producing or importing countries [104]</p> <p>Requirement: None</p> <p>Applicability: All</p>	<p>a. Prepare a list of therapeutants, including antibiotics and chemicals, that are proactively banned for use in food fish for the primary salmon producing and importing countries listed in [104].</p> <p>b. Maintain records of voluntary and/or mandatory chemical residue testing conducted or commissioned by the farm from the prior and current production cycles.</p> <p>c. -</p> <p>d. Others, please describe</p>	<p>No antibiotic usage recorded for farm over the past and current production cycle. Pre-harvest checks confirmed for Slice (24 samples recorded for 28th December 2016) and random checks on e.g. dioxins, PCBs carried out across the group, no positives stated.</p>	Compliant	
	<p>Indicator: Percentage of medication events that are</p>	<p>a. Obtain prescription for all therapeutant use in advance of application from the farm veterinarian (or equivalent, see [96] for definition of veterinarian).</p>	<p>Confirmed as prescribed by D. Morrison form Aquafarmer and transparency checklist records, site drug treatment log confirmed to go back two production cycles with records back to 2001.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.2.3	prescribed by a veterinarian Requirement: 100% Applicability: All	b. Maintain copies of all prescriptions and records of veterinarian responsible for all medication events. Records can be kept in conjunction with those for 5.2.1 and should be kept for the current and two prior production cycles. c. Others, please describe		Compliant	
5.2.4	Indicator: Compliance with all withholding periods after treatments Requirement: Yes Applicability: All	a. Incorporate withholding periods into the farm's fish health management plan (see 5.1.1a). b. Compile and maintain documentation on legally-required withholding periods for all treatments used on-farm. Withholding period is the time interval after the withdrawal of a drug from the treatment of the salmon before the salmon can be harvested for use as food. c. Show compliance with all withholding periods by providing treatment records (see 5.2.1a) and harvest dates for the most recent production cycle. d. Others, please describe	Reference to a Canadian Government website covers therapeutants permitted for use and includes details of withdrawal periods. http://www.hc-sc.gc.ca/dhp-mpps/vet/legislation/pol/aquaculture_anim-eng.php . Withholding periods confirmed to be controlled by Aquafarmer which blocks release of fish populations for harvest if any withdrawal period has not been completed. Sampling of database records confirmed compliance.	Compliant	
5.2.5	Indicator: Maximum farm level cumulative parasiticide treatment index (PTI) score as calculated according to the formula in Appendix VII Requirement: PTI score \leq 13 Applicability: All	a. Using farm data for therapeutants usage (5.2.1a) and the formula presented in Appendix VII, calculate the cumulative parasiticide treatment index (PTI) score for the most recent production cycle. Calculation should be made and updated on an ongoing basis throughout the cycle by farm manager, fish health manager, and/or veterinarian. b. Provide the auditor with access to records showing how the farm calculated the PTI score. c. Submit data on farm level cumulative PTI score to ASC as per Appendix VI for each production cycle. d. Others, please describe	Single parasiticide treatment with Slice record for December 2016 confirmed as submitted to ASC in transparency record	Compliant	
	Indicator: For farms with a cumulative PTI \geq 6 in the most recent production cycle	a. Review PTI scores from 5.2.5a to determine if cumulative PTI \geq 6 in the most recent production cycle. If yes, proceed to 5.2.6b; if no, Indicator 5.2.6 does not apply.	Single parasiticide treatment for most recent completed production cycle, with Slice recorded for 17th - 24th December 2016, PTI value of 3.2, so value $<$ 6.		

	Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.2.6 recent production cycle, demonstration that parasiticide load [105] is at least 15% less that of the average of the two previous production cycles Requirement: Yes, within five years of the publication of the SAD standard (i.e. by June 13, 2017) Applicability: All farms with a cumulative PTI ≥ 6 in the most recent production cycle	b. Using results from 5.2.5 and the weight of fish treated (kg), calculate parasiticide load in the most recent production cycle [105]. c. Calculate parasiticide load in the two previous production cycles as above (5.2.6b) and compute the average. Calculate the percent difference in parasiticide load between current cycle and average of two previous cycles. For first audit, calculation must cover one full production cycle immediately prior to the current cycle. d. As applicable, submit data to ASC on parasiticide load for the most recent production cycle and the two previous production cycles (Appendix VI). e. Others, please describe		Compliant	
5.2.7 Indicator: Allowance for prophylactic use of antimicrobial treatments [106] Requirement: None Applicability: All	a. Maintain records for all purchases of antibiotics (invoices, prescriptions) for the current and prior production cycles. b. Maintain a detailed log of all medication-related events (see also 5.2.1a and 5.2.3) c. Calculate the total amount (g) and treatments (#) of antibiotics used during the current and prior production cycles (see also 5.2.9). d. Others, please describe	No Antibiotic treatments carried out at Sonora Point site	N/A	
5.2.8 Indicator: Allowance for use of antibiotics listed as critically important for human medicine by the World Health Organization (WHO [107]) Requirement: None [108] Applicability: All	a. Maintain a current version of the WHO list of antimicrobials critically and highly important for human health [107]. b. If the farm has <u>not</u> used any antibiotics listed as critically important (5.2.8a) in the current production cycle, inform the CAB and proceed to schedule the audit. c. If the farm <u>has</u> used antibiotics listed as critically important (5.2.8a) to treat any fish during the current production cycle, inform the CAB prior to scheduling audit. d. If yes to 5.2.8c, request an exemption from the CAB to certify only a portion of the farm. Prior to the audit, provide the CAB with records sufficient to establish details of treatment, which pens were treated, and how the farm will ensure full traceability and separation of treated fish through and post- harvest. e. Others, please describe	WHO List v5 2016 confirmed as available on site. No antibiotic treatments carried out at Sonora Point site	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.2.9	<p>Indicator: Number of treatments [109] of antibiotics over the most recent production cycle</p> <p>Requirement: ≤ 3</p> <p>Applicability: All</p>	<p>a. Maintain records of all treatments of antibiotics (see 5.2.1a). For first audits, farm records must cover the current and immediately prior production cycles in a verifiable statement.</p> <p>b. Calculate the total number of treatments of antibiotics over the most recent production cycle and supply a verifiable statement of this calculation.</p> <p>c. Others, please describe</p>	No antibiotic treatments carried out at Sonora Point site	N/A	
5.2.10	<p>Indicator: If more than one antibiotic treatment is used in the most recent production cycle, demonstration that the antibiotic load [110] is at least 15% less than that of the average of the two previous production cycles</p> <p>Requirement: Yes [111], within five years of the publication of the SAD standard (i.e. full compliance by June 13, 2017)</p> <p>Applicability: All</p>	<p>a. Use results from 5.2.9b to show whether more than one antibiotic treatment was used in the most recent production cycle. If not, then the requirement of 5.2.10 does not apply. If yes, then proceed to 5.2.10b.</p> <p>b. Calculate antibiotic load (antibiotic load = the sum of the total amount of active ingredient of antibiotic used in kg) for most recent production cycle and for the two previous production cycles. For first audit, calculation must cover one full production cycle immediately prior to the current cycle.</p> <p>c. Provide the auditor with calculations showing that the antibiotic load of the most recent production cycle is at least 15% less than that of the average of the two previous production cycles.</p> <p>d. Submit data on antibiotic load to ASC as per Appendix VI (if applicable) for each production cycle.</p> <p>e. Others, please describe</p>	Not applicable until June 2017	N/A	
5.2.11	<p>Indicator: Presence of documents demonstrating that the farm has provided buyers [112] of its salmon a list of all therapeutants used in production</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Prepare a procedure which outlines how the farm provides buyers [112] of its salmon with a list of all therapeutants used in production (see 4.4.3b).</p> <p>b. Maintain records showing the farm has informed all buyers of its salmon about all therapeutants used in production.</p> <p>c. Others, please describe</p>	An annually updated document listing the CFIA Therapeutant Residue Monitoring List employed for possible treatments by the company is provided to customers, additionally Marine Harvest Canada undertake to update their suppliers with a listing of any potential treatments that might be used on fish sold to them. All potential treatments are confirmed as approved by the CFIA.	Compliant	
Criterion 5.3 Resistance of parasites, viruses and bacteria to medicinal treatments					
	<p>Indicator: Bio-assay analysis to</p>	a. In addition to recording all therapeutic treatments (5.2.1a), keep a record of all cases where the farm uses two successive medicinal treatments.	N/A as only single Slice treatment applied.		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.3.1	determine resistance when two applications of a treatment have not produced the expected effect Requirement: Yes Applicability: All	b. Whenever the farm uses two successive treatments, keep records showing how the farm evaluates the observed effect of treatment against the expected effect of treatment. c. For any result of 5.3.1b that did not produce the expected effect, ensure that a bio-assay analysis of resistance is conducted. d. Keep a record of all results arising from 5.3.1c. e. Others, please describe		N/A	
5.3.2	Indicator: When bio-assay tests determine resistance is forming, use of an alternative, permitted treatment, or an immediate harvest of all fish on the site Requirement: Yes Applicability: All	a. Review results of bio-assay tests (5.3.1d) for evidence that resistance has formed. If yes, proceed to 5.3.2b. If no, then Indicator 5.3.2 is not applicable. b. When bio-assay tests show evidence that resistance has formed, keep records showing that the farm took one of two actions: - used an alternative treatment (if permitted in the area of operation); or - immediately harvested all fish on site. c. Others, please describe	N/A as only single Slice treatment applied.	N/A	
Criterion 5.4 Biosecurity management [113]					
5.4.1	Indicator: Evidence that all salmon on the site are a single-year class [114] Requirement: 100% [115] Applicability: All farms except as noted in [115]	a. Keep records of the start and end dates of periods when the site is fully fallow after harvest. b. Provide evidence of stocking dates (purchase receipts, delivery records) to show that there were no gaps > 6 months for smolt inputs for the current production cycle. - d. Others, please describe	Transfer records and Aquafarmer entries indicate a single year class in place on site. No commercial advantage would be gained by mixing year classes. Harvesting of previous year class completed 26th June 2016 with restocking commencing 5th August 2016	Compliant	
	Indicator: Evidence that if the farm suspects an unidentifiable transmissible agent, or if the farm	a. For mortality events logged in 5.1.4a, show evidence that the farm promptly evaluated each to determine whether it was a statistically significant increase over background mortality rate on a monthly basis [116]. The accepted level of significance (for example, $p < 0.05$) should be agreed between farm and CAB. b. For mortality events logged in 5.1.4a, record whether the farm did or did not suspect (yes or no) an unidentified transmissible agent.	Mortality events are monitored by site staff with back up from Fish health team personnel, Aquafarmer records confirm trends, any increase in mortality is noted and investigated as appropriate. Any mortality events noted as significant have cause allocated,		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.4.2	<p>experiences unexplained increased mortality, [116] the farm has:</p> <ol style="list-style-type: none"> Reported the issue to the ABM and to the appropriate regulatory authority Increased monitoring and surveillance [117] on the farm and within the ABM Promptly [118] made findings publicly available <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>c. Proceed to 5.4.2d if, during the most recent production cycle, either:</p> <ul style="list-style-type: none"> results from 5.4.2a showed a statistically significant increase in unexplained mortalities; or the answer to 5.4.2b was 'yes'. <p>Otherwise, Indicator 5.4.2 is not applicable.</p> <p>d. If required, ensure that the farm takes and records the following steps:</p> <ol style="list-style-type: none"> Report the issue to the ABM and to the appropriate regulatory authority; Increase monitoring and surveillance [117] on the farm and within the ABM; and Promptly (within one month) make findings publicly available. <p>e. As applicable, submit data to ASC as per Appendix VI about unidentified transmissible agents or unexplained increases in mortality. If applicable, then data are to be sent to ASC on an ongoing basis (i.e. at least once per year and for each production cycle).</p> <p>f. Others, please describe</p>		Compliant	
5.4.3	<p>Indicator: Evidence of compliance [119] with the OIE Aquatic Animal Health Code [120]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Maintain a current version of the OIE Aquatic Animal Health Code on site or ensure staff have access to the most current version.</p> <p>b. Develop policies and procedures as needed to ensure that farm practices remain consistent with the OIE Aquatic Animal Health Code (5.4.3a) and with actions required under indicator 5.4.4.</p> <p>-</p> <p>d. Others, please describe</p>	<p>Sharepoint site includes links to the OIE website, see below for policy document review comment. Version dated 2016 accessible. It was noted that Jan 25th and March 20th 60-day dive inspections do not record confirmation of disinfection of equipment, divers are non-MH specific, site specific equipment is only BCD and dive suit so confirmation of disinfection of fins, masks, regulators is not present.</p>	Major	<p>January 25th and March 20th 60-day dive inspections do not record confirmation of disinfection of equipment, divers are non-MH specific, site specific equipment is only BCD and dive suit so confirmation of disinfection of fins, masks, regulators is not present.</p>
	<p>Indicator: If an OIE-notifiable disease [121] is confirmed on the farm, evidence that:</p> <ol style="list-style-type: none"> the farm has, at a minimum, immediately culled the pen(s) in 	<p>a. Ensure that farm policies and procedures in 5.4.3a describe the four actions required under Indicator 5.4.4 in response to an OIE-notifiable disease on the farm.</p> <p>b. Inform the CAB if an OIE-notifiable disease has been confirmed on the farm during the current production cycle or the two previous production cycles. If yes, proceed to 5.4.4c. If no, then 5.4.4c and 5.4.4d do not apply.</p>	<p>Confirmed through examination of Mortality records that no OIE notifiable diseases have been recorded for this site. Farm policies do cover the requirements of the OIE notifiable disease determinants however this is not summarised in a specific policy or procedure.</p>		<p>Farm policies do cover the requirements of the OIE notifiable disease determinants however this is not summarised in a specific policy or procedure.</p>

	Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
5.4.4 which the disease was detected 2. the farm immediately notified the other farms in the ABM [122] 3. the farm and the ABM enhanced monitoring and conducted rigorous testing for the disease 4. the farm promptly [123] made findings publicly available Requirement: Yes Applicability: All	c. If an OIE-notifiable disease was confirmed on the farm (see 5.4.4b), then retain documentary evidence to show that the farm: 1) immediately culled the pen(s) in which the disease was detected; 2) immediately notified the other farms in the ABM [122] 3) enhanced monitoring and conducted rigorous testing for the disease; and 4) promptly (within one month) made findings publicly available. d. As applicable, submit data to ASC as per Appendix VI about any OIE-notifiable disease that was confirmed on the farm. If applicable, then data are to be sent to ASC on an ongoing basis (i.e. at least once per year and for each production cycle). - f. Others, please describe		Minor	
PRINCIPLE 6: DEVELOP AND OPERATE FARMS IN A SOCIALLY RESPONSIBLE MANNER				
6.1 Freedom of association and collective bargaining [124]				
6.1.1 Indicator: Evidence that workers have access to trade unions (if they exist) and union representative(s) chosen by themselves without managerial interference Requirement: Yes Applicability: All	a. Workers have the freedom to join any trade union, free of any form of interference from employers or competing organizations set up or backed by the employer. Farms shall prepare documentation to demonstrate to the auditor that domestic regulation fully meets these criteria. b. Union representatives (or worker representatives) are chosen by workers without managerial interference. ILO specifically prohibits "acts which are designated to promote the establishment of worker organizations or to support worker organizations under the control or employers or employers' organizations." c. Trade union representatives (or worker representatives) have access to their members in the workplace at reasonable times on the premises. d. Be advised that workers and union representatives (if they exist) will be interviewed to confirm the above. e. Others, please describe	There is a Code of Conduct, which is provided to all employees and they are tested to show they have understood the Code of conducts. The Code of Conduct is accessible via intranet, which also allows access to human resources Policy & Procedure Manual. Code of Conduct section 5.3. Relates to this area and states "Marine Harvest recognises the right of all workers and employees freely to form and join groups for the promotion and defence of their occupational interests, including the right to engage in collective bargaining". The workers confirmed that that the above information was provided to them.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.1.2	<p>Indicator: Evidence that workers are free to form organizations, including unions, to advocate for and protect their rights</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Employment contract explicitly states the worker's right of freedom of association.</p> <p>b. Employer communicates that workers are free to form organizations to advocate for and protect work rights (e.g. farm policies on Freedom of Association; see 6.12.1).</p> <p>c. Be advised that workers will be interviewed to confirm the above.</p> <p>d. Others, please describe</p>	<p>The worker's right to freedom of association is Stated in the contract of employment and within 5.3 of the code of conduct.</p> <p>Employees sign to state that they have been trained and tested on the Code of Conduct.</p> <p>The workers confirmed that the Code of Conduct was provided to them and that they had been trained and tested. The training records show that training happened, and the results are available on the training systems.</p>	Compliant	
6.1.3	<p>Indicator: Evidence that workers are free and able to bargain collectively for their rights</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Local trade union, or where none exists a reputable civil-society organization, confirms no outstanding cases against the farm site management for violations of employees' freedom of association and collective bargaining rights.</p> <p>b. Employer has explicitly communicated a commitment to ensure the collective bargaining rights of all workers.</p> <p>c. There is documentary evidence that workers are free and able to bargain collectively (e.g. collective bargaining agreements, meeting minutes, or complaint resolutions).</p> <p>d. Others, please describe</p>	<p>No outstanding cases against the farm site management for violations of employees' freedom of association and collective bargaining rights.</p> <p>The employer has explicitly communicated a commitment to ensure the collective bargaining rights of all workers as stated in 6.1.1 & 6.1.2. The documentary evidence shows that workers are free and able to bargain collectively. Detailed in the Code of Conduct and training records.</p>	Compliant	
Criterion 6.2 Child labor					
6.2.1	<p>Indicator: Number of incidences of child [125] labor [126]</p> <p>Requirement: None</p> <p>Applicability: All except as noted in [125]</p>	<p>a. In most countries, the law states that minimum age for employment is 15 years. There are two possible exceptions: - in developing countries where the legal minimum age may be set to 14 years (see footnote 125); or - in countries where the legal minimum age is set higher than 15 years, in which case the legal minimum age of the country is followed.</p> <p>If the farm operates in a country where the legal minimum ages is not 15, then the employer shall maintain documentation attesting to this fact.</p>	<p>Ages of all workers stored on Human Resources management system. There are no persons employed under the age of 15. Marine Harvest state in section 5.4 of the code of conduct " Marine Harvest is committed to the abolition of child labour, and all forms of forced or compulsory labour." "Marine Harvest considers the minimum age for employment as not lower than the age of completion of compulsory schooling as set by national law, and in any event not lower than 15 years of age."</p> <p>Identification is held on file for all farm employees and is signed and verified by senior Management at the point of employment.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
		b. Minimum age of permanent workers is 15 or older (except in countries as noted above). c. Employer maintains age records for employees that are sufficient to demonstrate compliance. d. Others, please describe			
6.2.2	Indicator: Percentage of young workers [127] that are protected [128] Requirement: 100% Applicability: All	a. Young workers are appropriately identified in company policies & training programs, and job descriptions are available for all young workers at the site. b. All young workers (from age 15 to less than 18) are identified and their ages are confirmed with copies of IDs. c. Daily records of working hours (i.e. timesheets) are available for all young workers. d. For young workers, the combined daily transportation time and school time and work time does not exceed 10 hours. e. Young workers are not exposed to hazards [129] and do not perform hazardous work [130]. Work on floating cages in poor weather conditions shall be considered hazardous. f. Be advised that the site will be inspected and young workers will be interviewed to confirm compliance. g. Others, please describe	There is a policy stating the rules on employing young workers. The Marine Harvest code of conduct section 5.4 sets out the main rules. Young workers risk assessments are carried out and displayed within the working areas. All young workers assessed before employment commences. All workers including young workers have the working hours recorded on a time management system. No young workers employed at the time of the audit.	Compliant	
c					
6.3.1	Indicator: Number of incidences of forced, [131] bonded [132] or compulsory labor Requirement: None Applicability: All	a. Contracts are clearly stated and understood by employees. Contracts do not lead to workers being indebted (i.e. no 'pay to work' schemes through labor contractors or training credit programs). b. Employees are free to leave workplace and manage their own time. c. Employer does not withhold employee's original identity documents. d. Employer does not withhold any part of workers' salaries, benefits, property or documents in order to oblige them to continue working for employer. e. Employees are not to be obligated to stay in job to repay debt. f. Maintain payroll records and be advised that workers will be interviewed to confirm the above. g. Others, please describe	All employees are provided with contracts of employment. Workers have signed all contracts of employment. Through documentation checks, it confirmed that all working hours are conducted on a voluntary basis. The employer does not withhold employee's original identity documents. The employer does not withhold any part of workers' salaries, benefits, property or documents to oblige them to continue working for the employer. No employees are repaying debt. All of the above was confirmed by the employees within the interviews.	Compliant	
Criterion 6.4 Discrimination [133]					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.4.1	<p>Indicator: Evidence of comprehensive [134] and proactive anti-discrimination policies, procedures and practices</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Employer has written anti-discrimination policy in place, stating that the company does not engage in or support discrimination in hiring, remuneration, access to training, promotion, termination or retirement based on race, caste, national origin, religion, disability, gender, sexual orientation, union membership, political affiliation, age or any other condition that may give rise to discrimination.</p> <p>b. Employer has clear and transparent company procedures that outline how to raise, file, and respond to discrimination complaints.</p> <p>c. Employer respects the principle of equal pay for equal work and equal access to job opportunities, promotions and raises.</p> <p>d. All managers and supervisors receive training on diversity and non-discrimination. All personnel receive non-discrimination training. Internal or external training acceptable if proven effective.</p> <p>e. Others, please describe</p>	<p>Stated in Marine Harvest Code of conduct section 5.2 & 6.1. The anti-discrimination policy that is in place, states that the company does not engage in or support discrimination in hiring, remuneration, access to training, promotion, termination or retirement based on race, caste, national origin, religion, disability, gender, sexual orientation, union membership, political affiliation, age or any other condition that may give rise to discrimination. Discrimination complaints are dealt with through the grievance procedures. Grievance procedures are communicated to all workers.</p> <p>All employees are respected with regards equal treatment. All managers have been trained in equality and diversity.</p>	Compliant	
6.4.2	<p>Indicator: Number of incidences of discrimination</p> <p>Requirement: None</p> <p>Applicability: All</p>	<p>a. Employer maintains a record of all discrimination complaints. These records do not show evidence for discrimination.</p> <p>b. Be advised that worker testimonies will be used to confirm that the company does not interfere with the rights of personnel to observe tenets or practices, or to meet needs related to race, caste, national origin, religion, disability, gender, sexual orientation, union membership, political affiliation or any other condition that may give rise to discrimination.</p> <p>c. Others, please describe</p>	<p>The facility has a procedure in place to document of all discrimination complaints. To date, there have not been any complaints. There is no evidence of discrimination. Workers interviewed stated that the company did not discriminate against them. Workers interviewed had not experienced or heard of any issues with regards to discrimination.</p>	Compliant	
Criterion 6.5 Work environment health and safety					
6.5.1	<p>Indicator: Percentage of workers trained in health and safety practices, procedures [135] and policies on a yearly basis</p>	<p>a. Employer has documented practices, procedures (including emergency response procedures) and policies to protect employees from workplace hazards and to minimize risk of accident or injury. The information shall be available to employees.</p> <p>b. Employees know and understand emergency response procedures.</p>	<p>The facility has established procedures and policies to protect employees. Good health and safety standards were observed during the tour. Employees are trained in emergency response procedures. The training has been recorded within the onsite training systems and displayed on the employee notice boards. Health and safety training is carried by an external company every year. Ongoing training carried out on an online training software management systems. Marine Harvest tries to ensure that the overall training levels are above 80 percent. It is the responsibility of the site managers to ensure that this level is achieved. This site has achieved 89 percent. However, there where three Health and Safety issues raised:</p>	Major	<p>1. Monthly safety meeting notes are not signed off by management</p> <p>2. Confined spaces below the silos have ladders that are not secured.</p> <p>3. Life Jackets are not being worn by employees in the process of transferring from the crew boats to the site house.</p>

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Requirement: 100% Applicability: All	c. Employer conducts health and safety training for all employees on a regular basis (once a year and immediately for all new employees), including training on potential hazards and risk minimization, Occupational Safety and Health (OSH) and effective use of PPE. d. Others, please describe	The three Health and Safety issues are; 1. Monthly safety meeting notes are not signed off by management 2. Confined spaces below the silos have ladders that are not secured. 3. Life Jackets are not being worn by employees in the process of transferring from the crew boats to the site house.		
6.5.2	Indicator: Evidence that workers use Personal Protective Equipment (PPE) effectively Requirement: Yes Applicability: All	a. Employer maintains a list of all health and safety hazards (e.g. chemicals). b. Employer provides workers with PPE that is appropriate to known health and safety hazards. c. Employees receive annual training in the proper use of PPE (see 6.5.1c). For workers who participated in the initial training(s) previously an annual refreshment training may suffice, unless new PPE has been put to use. d. Be advised that workers will be interviewed to confirm the above. e. Others, please describe	A full list of MSDS is available within the health and safety standards documentation and stored on all site computers. The site has carried out risk assessments for all operations and has identified the PPE required for each task. The site uses the risk assessment to understand the risks and eliminate the risks where possible. The site understands that Personal Protective Equipment should only be used where it is not possible to reduce the risk without the use of Personal Protective Equipment. Employees all receive induction training which includes the correct and proper use of Personal Protective Equipment. There are modules that are built into the online health & Safety management system that employees have to completed each year. The site manager ensures this training is carried out and recorded. Workers confirmed within interview process that Personal Protective Equipment was provided and training was provided if required.	Compliant	
6.5.3	Indicator: Presence of a health and safety risk assessment and evidence of preventive actions taken Requirement: Yes Applicability: All	a. Employer makes regular assessments of hazards and risks in the workplace. Risk assessments are reviewed and updated at least annually (see also 6.5.1a). b. Employees are trained in how to identify and prevent known hazards and risks (see also 6.5.1c). c. Health and safety procedures are adapted based on results from risk assessments (above) and changes are implemented to help prevent accidents. d. Others, please describe	Site Risk Assessments are lacking some expected detail and do not fully analyse risk correctly. The site manager has not completed the Risk Assessment course that is on the company internal training (DATS).	Minor	Site Risk Assessments are lacking some expected detail and do not fully analyse risk correctly. The site manager has not completed the Risk Assessment course that is on the company internal training (DATS).
	Indicator: Evidence that all health-	a. Employer records all health- and safety-related accidents. b. Employer maintains complete documentation for all occupational health and safety violations and investigations.	Facility records all health & safety related accidents. Accidents are investigated by the Health & Safety Manager. Monitoring systems have been implemented to review year on year results. The facility has systems to maintain documentation for all occupational health and safety violations and investigations.		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.5.4	and safety-related accidents and violations are recorded and corrective actions are taken when necessary Requirement: Yes Applicability: All	c. Employer implements corrective action plans in response to any accidents that occur. Plans are documented and they include an analysis of root cause, actions to address root cause, actions to remediate, and actions to prevent future accidents of similar nature. d. Employees working in departments where accidents have occurred can explain what analysis has been done and what steps were taken or improvements made. e. Others, please describe	Employees stated within the interview process that accidents were investigated and steps were taken and improvements made if required.	Compliant	
6.5.5	Indicator: Evidence of employer responsibility and/or proof of insurance (accident or injury) for 100% of worker costs in a job-related accident or injury when not covered under national law Requirement: Yes Applicability: All	a. Employer maintains documentation to confirm that all personnel are provided sufficient insurance to cover costs related to occupational accidents or injuries (if not covered under national law). Equal insurance coverage must include temporary, migrant or foreign workers. Written contract of employer responsibility to cover accident costs is acceptable evidence in place of insurance. b. Others, please describe	Insurance is available for all workers to ensure that they are compensated to cover costs related to occupational accidents. Public liability insurance is also available to cover all over parties.	Compliant	
6.5.6	Indicator: Evidence that all diving operations are conducted by divers who are certified Requirement: Yes Applicability: All	a. Employer keeps records of farm diving operations and a list of all personnel involved. In case an external service provider was hired, a statement that provider conformed to all relevant criteria must be made available to the auditor by this provider. b. Employer maintains evidence of diver certification (e.g. copies of certificates) for each person involved in diving operations. Divers shall be certified through an accredited national or international organization for diver certification. c. Others, please describe	Employer keeps records of farm diving operation. All external divers are given full details of the operations that are required. All diving certification was provided. All divers have the required accreditations. Checks of certifications are made by Marine Harvest before each "60 day" dive..	Compliant	
Criterion 6.6 Wages					
		a. Employer keeps documents to show the legal minimum wage in the country of operation. If there is no legal minimum wage in the country, the employer keeps documents to show the industry-standard minimum wage.	Wages are recorded on an electronic accounting system and verified. All pay is in line or above minimum wage requirements. All workers confirmed that wages are paid correctly.		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.6.1	<p>Indicator: The percentage of workers whose basic wage [136] (before overtime and bonuses) is below the minimum wage [137]</p> <p>Requirement: 0 (None)</p> <p>Applicability: All</p>	<p>b. Employer's records (e.g. payroll) confirm that worker's wages for a standard work week (≤ 48 hours) always meet or exceed the legal minimum wage. If there is no legal minimum wage, the employer's records must show how the current wage meets or exceeds industry standard. If wages are based on piece-rate or pay-per-production, the employer's records must show how workers can reasonably attain (within regular working hours) wages that meet or exceed the legal minimum wage.</p> <p>c. Maintain documentary evidence (e.g. payroll, timesheets, punch cards, production records, and/or utility records) and be advised that workers will be interviewed to confirm the above.</p> <p>d. Others, please describe</p>		Compliant	
6.6.2	<p>Indicator: Evidence that the employer is working toward the payment of basic needs wage [138]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Proof of employer engagement with workers and their representative organizations, and the use of cost of living assessments from credible sources to assess basic needs wages. Includes review of any national basic needs wage recommendations from credible sources such as national universities or government.</p> <p>b. Employer has calculated the basic needs wage for farm workers and has compared it to the basic (i.e. current) wage for their farm workers.</p> <p>c. Employer demonstrates how they have taken steps toward paying a basic needs wage to their workers.</p> <p>d. Others, please describe</p>	MHC use Hays group to assist with setting pay levels and carry out here own reviews to ensure that levels are correct. There are details of living wages for BC available which states the living wage is \$16.42 MHC starting wage is \$17.00	Compliant	
6.6.3	<p>Indicator: Evidence of transparency in wage-setting and rendering [139]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Wages and benefits are clearly articulated to workers and documented in contracts.</p> <p>b. The method for setting wages is clearly stated and understood by workers.</p> <p>c. Employer renders wages and benefits in a way that is convenient for the worker (e.g. cash, check, or electronic payment methods). Workers do not have to travel to collect benefits nor do they receive promissory notes, coupons or merchandise in lieu of payment.</p> <p>d. Be advised that workers will be interviewed to confirm the above.</p> <p>e. Others, please describe</p>	<p>Wages and benefits are documented before the point of employment. Wages have also been agreed with the union and are documented the collective bargaining agreement.</p> <p>Employees are paid every two weeks by electronic bank transfer.</p> <p>Employees confirmed within interview process that information was available and electronic transfer payments are made directly to their bank accounts.</p>	Compliant	
Criterion 6.7 Contracts (labor) including subcontracting					
	<p>Indicator: Percentage of workers who have contracts [141]</p>	a. Employer maintains a record of all employment contracts.	All employees are provided with a contract of employment, and a copy of the contract was available in the personnel files. There was no evidence of Labor		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.7.1	<p>who have contracts [141]</p> <p>Requirement: 100%</p> <p>Applicability: All</p>	<p>b. There is no evidence for labor-only contracting relationships or false apprenticeship schemes.</p> <p>c. Be advised that workers will be interviewed to confirm the above.</p> <p>d. Others, please describe</p>	<p>only contracts or false apprenticeships. Employees confirmed that there are no, Labor only contracts or false apprenticeships.</p>	Compliant	
6.7.2	<p>Indicator: Evidence of a policy to ensure social compliance of its suppliers and contractors</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Farm has a policy to ensure that all companies contracted to provide supplies or services (e.g. divers, cleaning, maintenance) have socially responsible practices and policies.</p> <p>b. Producing company has criteria for evaluating its suppliers and contractors. The company keeps a list of approved suppliers and contractors.</p> <p>c. Producing company keeps records of communications with suppliers and subcontractors that relate to compliance with 6.7.2.</p> <p>d. Others, please describe</p>	<p>Where Marine Harvest uses subcontractors, they check that the companies have socially responsible practices and policies. Marine Harvest keeps a list of approved suppliers and contractors. Marine Harvest keeps records of communications with suppliers and subcontractors.</p>	Compliant	
Criterion 6.8 Conflict resolution					
6.8.1	<p>Indicator: Evidence of worker access to effective, fair and confidential grievance procedures</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Employer has a clear labor conflict resolution policy for the presentation, treatment, and resolution of worker grievances in a confidential manner.</p> <p>b. Workers are familiar with the company's labor conflict policies and procedures. There is evidence that workers have fair access.</p> <p>c. Maintain documentary evidence (e.g. complaint or grievance filings, minutes from review meetings) and be advised that workers will be interviewed to confirm the above.</p> <p>d. Others, please describe</p>	<p>There is a complaint procedure detailed in the HR Policy which explains the reporting procedure including bullying and harassment and confidentiality policy.</p> <p>All employees have access to policies through the intranet. This was confirmed through employee interviews.</p> <p>All communication such as Complaints, grievances and discipline is recorded within the employee personnel file. All communications are detailed in writing with the employee personnel files.</p>	Compliant	
6.8.2	<p>Indicator: Percentage of grievances handled that are addressed [142] within a 90-day timeframe</p> <p>Requirement: 100%</p> <p>Applicability: All</p>	<p>a. Employer maintains a record of all grievances, complaints and labor conflicts that are raised.</p> <p>b. Employer keeps a record of follow-up (i.e. corrective actions) and timeframe in which grievances are addressed.</p> <p>c. Maintain documentary evidence and be advised that workers will be interviewed to confirm that grievances are addressed within a 90-day timeframe.</p> <p>d. Others, please describe</p>	<p>The established grievance policy and procedures are well documented. Any grievances that are raised are documented in the employee personnel files and have agreed on action plans if required.</p> <p>None of the workers interviewed had any grievances so unable to confirm. The company policy is to respond to each stage of the process within 14 days. Also, see 6.8.1</p>	Compliant	
Criterion 6.9 Disciplinary practices					

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
6.9.1	<p>Indicator: Incidences of excessive or abusive disciplinary actions</p> <p>Requirement: None</p> <p>Applicability: All</p>	<p>a. Employer does not use threatening, humiliating or punishing disciplinary practices that negatively impact a worker's physical and mental health or dignity.</p> <p>b. Allegations of corporeal punishment, mental abuse [144], physical coercion, or verbal abuse will be investigated by auditors.</p> <p>c. Be advised that workers will be interviewed to confirm there is no evidence for excessive or abusive disciplinary actions.</p> <p>d. Others, please describe</p>	<p>None of the policies or procedures used is threatening, humiliating or has any punishing disciplinary practices. The practice of the disciplinary does not impact the workers physically or mentally.</p>	Compliant	
6.9.2	<p>Indicator: Evidence of a functioning disciplinary action policy whose aim is to improve the worker [143]</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Employer has written policy for disciplinary action which explicitly states that its aim is to improve the worker [143].</p> <p>b. Maintain documentary evidence (e.g. worker evaluation reports) and be advised that workers will be interviewed to confirm that the disciplinary action policy is fair and effective.</p> <p>c. Others, please describe</p>	<p>The company has written policy disciplinary action that "explicitly" states to improve the worker. The company does have performance management policy, so this should be noted alongside the disciplinary policy.</p> <p>None of the workers had been involved with a disciplinary procedure but confirmed workers are regularly evaluated and reviewed.</p>	Compliant	
Criterion 6.10 Working hours and overtime					
6.10.1	<p>Indicator: Incidences, violations or abuse of working hours and overtime laws [145]</p> <p>Requirement: None</p> <p>Applicability: All</p>	<p>a. Employer has documentation showing the legal requirements for working hours and overtime in the region where the farm operates. If local legislation allows workers to exceed internationally accepted recommendations (48 regular hours, 12 hours overtime) then requirements of the international standards apply.</p> <p>b. Records (e.g. time sheets and payroll) show that farm workers do not exceed the number of working hours allowed under the law.</p> <p>c. If an employer requires employees to work shifts at the farm (e.g. 10 days on and six days off), the employer compensates workers with an equivalent time off in the calendar month and there is evidence that employees have agreed to this schedule (e.g. in the hiring contract).</p> <p>d. Be advised that workers will be interviewed to confirm there is no abuse of working hours and overtime laws.</p>	<p>The company holds document for Employment Standards Act for BC for working regulations. The working shift pattern is carried out over two weeks. The shift pattern consists of 8 days on and 6 days off. The averaged hours over the 2 weeks is 40 hours per week.</p> <p>Working hours are provided by site managers to the payroll and working hours' department. The workers confirm that working hours are correct before this. Records on 'Dayforce' system show that workers are not exceeding the working hours that are allowed.</p> <p>The shift pattern is agreed before the commencement of employment. The contract of employment clearly stated the contracted working hours. Workers confirmed that the facility did not abuse the working hour's regulations and laws.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
		e. Others, please describe			
6.10.2	<p>Indicator: Overtime is limited, voluntary [146], paid at a premium rate and restricted to exceptional circumstances</p> <p>Requirement: Yes</p> <p>Applicability: All except as noted in [146]</p>	<p>a. Payment records (e.g. payslips) show that workers are paid a premium rate for overtime hours.</p> <p>b. Overtime is limited and occurs in exceptional circumstances as evidenced by farm records (e.g. production records, time sheets, and other records of working hours).</p> <p>c. Be advised that workers will be interviewed to confirm that all overtime is voluntary except where there is a collective bargaining agreement which specifically allows for compulsory overtime.</p> <p>d. Others, please describe</p>	<p>The employees are paid a premium rate for overtime hours they are paid 150% for the first 2 hours and 200% for any hours worked after that. The Time Solutions System confirmed that overtime is infrequent. The employees confirmed that overtime is rare and is voluntary.</p>	Compliant	
Criterion 6.11 Education and training					
6.11.1	<p>Indicator: Evidence that the company encourages and sometimes supports education initiatives for all workers (e.g., courses, certificates and degrees)</p> <p>Requirement: Yes</p> <p>Applicability: All</p>	<p>a. Company has written policies related to continuing education of workers. Company provides incentives (e.g. subsidies for tuition or textbooks, time off prior to exams, flexibility in work schedule) that encourage workers to participate in educational initiatives. Note that such offers may be contingent on workers committing to stay with the company for a pre-arranged time.</p> <p>b. Employer maintains records of worker participation in educational opportunities as evidenced by course documentation (e.g. list of courses, curricula, certificates, degrees).</p> <p>c. Be advised that workers will be interviewed to confirm that educational initiatives are encouraged and supported by the company.</p> <p>d. Others, please describe</p>	<p>The company encourages employees to increase knowledge and participate in training courses and supports the workers in doing this. As stated in HR policy section 9 Employee training and development bad education assistance programs. All training records are maintained on the DATS system. Workers confirmed that they are encouraged to learn and be involved with training courses. Other than compulsory health and safety training workers dictate the speed of additional training.</p>	Compliant	
Criterion 6.12 Corporate policies for social responsibility					
6.12.1	<p>Indicator: Demonstration of company-level [148] policies in line with the standards under 6.1 to 6.11 above</p> <p>Requirement: Yes</p>	<p>a. Company-level policies are in line with all social and labor requirements presented in 6.1 through 6.11.</p> <p>b. Company-level policies (see 6.12.1a) are approved by the company headquarters in the region where the site applying for certification is located.</p> <p>c. The scope of corporate policies (see 6.12.1a) covers all company operations relating to salmonid production in the region (i.e. all smolt production facilities, grow-out facilities and processing plants).</p>	<p>The Code of Conduct Policy and also the HR Policy are in line with all social and labour requirements. The Senior Management Team approves corporate policy in Campbell River. The scope of all corporate policies cover all company operations. All documentation was provided and reviewed.</p>	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Applicability: All	d. The site that is applying for certification provides auditors with access to all company-level policies and procedures as are needed to verify compliance with 6.12.1a (above).			
		e. Others, please describe			
PRINCIPLE 7: BE A GOOD NEIGHBOR AND CONSCIENTIOUS CITIZEN					
Criterion 7.1 Community engagement					
7.1.1	Indicator: Evidence of regular and meaningful [149] consultation and engagement with community representatives and organizations Requirement: Yes Applicability: All	a. The farm pro-actively arranges for consultations with the local community at least twice every year (bi-annually). b. Consultations are meaningful. OPTIONAL: the farm may choose to use participatory Social Impact Assessment (pSIA) or an equivalent method for consultations. c. Consultations include participation by representatives from the local community who were asked to contribute to the agenda. d. Consultations include communication about, or discussion of, the potential health risks of therapeutic treatments (see Indicator 7.1.3). e. Maintain records and documentary evidence (e.g. meeting agenda, minutes, report) to demonstrate that consultations comply with the above. f. Be advised that representatives from the local community and organizations may be interviewed to confirm the above. g. Others, please describe	There is a community engagement letter it is an invitation sent to the Mayor of each community it covers the direction of the company and initiatives that are being developed. There is an agreement in place with the FN in this area. The company recently sent out communication to all the local communities with details on new technology, Therapeutic Treatments, opportunities for future growth and information regarding certification. The community engagement letter states the agenda. Notes are taken during the meeting and follow up emails are sent out to stake holders No representatives made themselves available to the auditors.	Compliant	
7.1.2	Indicator: Presence and evidence of an effective [150] policy and mechanism for the presentation, treatment and resolution of complaints by community stakeholders and organizations	a. Farm policy provides a mechanism for presentation, treatment and resolution of complaints lodged by stakeholders, community members, and organizations. b. The farm follows its policy for handling stakeholder complaints as evidenced by farm documentation (e.g. follow-up communications with stakeholders, reports to stakeholder describing corrective actions).	Marine Harvest has a policy Doc#5/FW905 External Complaint resolution. External complaints are logged by Director Of Public affairs Ian Roberts. A log has been created. The Log details who raised the complaint and the nature of the complaint. The company policy is all complaints are passed to the communications manager and then forwarded to senior management should it be required. The complaints procedure is detailed and sets out the requirements for handling each complaint No stakeholders, representatives from the local community requested any form of engagement with the auditors	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Requirement: Yes Applicability: All	c. The farm's mechanism for handling complaints is effective based on resolution of stakeholder complaints (e.g. follow-up correspondence from stakeholders). d. Be advised that representatives from the local community, including complainants where applicable, may be interviewed to confirm the above. e. Others, please describe			
7.1.3	Indicator: Evidence that the farm has posted visible notice [151] at the farm during times of therapeutic treatments and has, as part of consultation with communities under 7.1.1, communicated about potential health risks from treatments Requirement: Yes Applicability: All	a. Farm has a system for posting notifications at the farm during periods of therapeutic treatment. (use of anaesthetic baths is not regarded a therapeutic) b. Notices (above) are posted where they will be visible to affected stakeholders (e.g. posted on waterways for fishermen who pass by the farm). c. Farm communicates about the potential health risks from treatments during community consultations (see 7.1.1) d. Be advised that members of the local community may be interviewed to confirm the above. e. Others, please describe	Notices are posted on the site if Therapeutic Treatments are being carried out. The signage that is used was seen during the farm inspection. The signage used is clear and can be seen by anyone passing the farm. Notices are posted on the side farm house so that it can be seen by anyone entering the site. This has been communicated in the engagement letter as detailed 7.1.1 No stakeholders, representatives from the local community requested any form of engagement with the auditors	Compliant	
Criterion 7.2 Respect for indigenous and aboriginal cultures and traditional territories					
	Indicator: Evidence that indigenous groups were consulted as required by relevant local and/or national laws and regulations	a. Documentary evidence establishes that the farm does or does not operate in an indigenous territory (to include farms that operate in proximity to indigenous or aboriginal people [152]). If not then the requirements of 7.2.1 do not apply. b. Farm management demonstrates an understanding of relevant local and/or national laws and regulations that pertain to consultations with indigenous groups.	Marine Harvest is operating in some indigenous territories and has several agreements (IBA) in place with FN groups; in the case of the Sonora Point site the agreements are with the K'omoks and the Homalco First Nations These agreements demonstrate that Marine Harvest is aware of Local, national laws and regulations for each FN group. There is a spreadsheet detailing agreements with each FN. There is also a log sheet that records all meetings, calls and communication. No indigenous representatives requested meeting the auditors.		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
7.2.1	<p>Requirement: Yes</p> <p>Applicability: All farms that operate in indigenous territories or in proximity to indigenous or aboriginal people [152]</p>	<p>c. As required by law in the jurisdiction: - farm consults with indigenous groups and retains documentary evidence (e.g. meeting minutes, summaries) to show how the process complies with 7.2.1b; OR - farm confirms that government-to-government consultation occurred and obtains documentary evidence.</p> <p>d. Be advised that representatives from indigenous groups may be interviewed to confirm the above.</p> <p>e. Others, please describe</p>		Compliant	
7.2.2	<p>Indicator: Evidence that the farm has undertaken proactive consultation with indigenous communities</p> <p>Requirement: Yes [152]</p> <p>Applicability: All farms that operate in indigenous territories or</p>	<p>a. See results of 7.2.1a (above) to determine whether the requirements of 7.2.2 apply to the farm.</p> <p>b. Be advised that representatives from indigenous communities may be interviewed to confirm that the farm has undertaken proactive consultations.</p> <p>c. Others, please describe</p>	<p>Marine Harvest is operating in some indigenous territories and have several agreements (IBA) in place with FN. No indigenous groups requested any form of engagement with the auditors.</p>	Compliant	
7.2.3	<p>Indicator: Evidence of a protocol agreement, or an active process [153] to establish a protocol agreement, with indigenous communities</p> <p>Requirement: Yes</p> <p>Applicability: All farms that operate in indigenous territories or in proximity to indigenous or aboriginal people [152]</p>	<p>a. See results of 7.2.1a (above) to determine whether the requirements of 7.2.3 apply to the farm.</p> <p>b. Maintain evidence to show that the farm has either: 1) reached a protocol agreement with the indigenous community and this fact is documented; or 2) continued engagement in an active process [153] to reach a protocol agreement with the indigenous community.</p> <p>c. Be advised that representatives from indigenous communities may be interviewed to confirm either 7.2.3b1 or b2 (above) as applicable.</p> <p>d. Others, please describe</p>	<p>Marine Harvest is operating in some indigenous territories and has several agreements (IBA) in place with FN. The agreements demonstrate that Marine Harvest is aware of Local, national laws and regulations for each FN. There are agreements in place as detailed in 7.2.1 and continuous engagements as detailed 7.2.1 No indigenous groups requested any form of engagement with the auditors</p>	Compliant	
Criterion 7.3 Access to resources					
	<p>Indicator: Changes undertaken</p>	<p>a. Resources that are vital [155] to the community have been documented and are known by the farm (i.e. through the assessment process required under Indicator 7.3.2).</p>	<p>As detailed in CEAA screening report Marine Harvest Canada does not have exclusive use of the location the farms are located in. There is no restriction of access and report notes that the FN has no issues with the use of the location. No stakeholders, representatives from the local community requested any</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
7.3.1	restricting access to vital community resources [154] without community approval Requirement: None Applicability: All	b. The farm seeks and obtains community approval before undertaking changes that restrict access to vital community resources. Approvals are documented. c. Be advised that representatives from the community may be interviewed to confirm that the farm has not restricted access to vital resources without prior community approval. d. Others, please describe	form of engagement with the auditors	Compliant	
7.3.2	Indicator: Evidence of assessments of company's impact on access to resources Requirement: Yes Applicability: All	a. There is a documented assessment of the farm's impact upon access to resources. Can be completed as part of community consultations under 7.1.1. b. Be advised that representatives from the community may be interviewed to generally corroborate the accuracy of conclusions presented in 7.3.2a. c. Others, please describe	The CEAA report for the site includes consultation with FN, local community and government. It is noted in the report that FN has no issues with the license application. No stakeholders, representatives from the local community requested any form of engagement with the auditors.	Compliant	
INDICATORS AND STANDARDS FOR SMOLT PRODUCTION					
SECTION 8: STANDARDS FOR SUPPLIERS OF SMOLT					
<i>Standards related to Principle 1</i>					
8.1	Indicator: Compliance with local and national regulations on water use and discharge, specifically providing permits related to water quality Requirement: Yes Applicability: All Smolt Producers	a. Identify all of the farm's smolt suppliers. For each supplier, identify the type of smolt production system used (e.g. open, semi or closed systems) and submit this information to ASC (Appendix VI). b. Where legal authorisation related to water quality are required, obtain copies of smolt suppliers' permits. c. Obtain records from smolt suppliers showing monitoring and compliance with discharge laws, regulations, and permit requirements as required. e. Others, please describe	All smolts supplied by MH farms at Ocean Falls (flow through) and Dalrymple (Closed) Fisheries & Oceans Canada Facility reference 47 - Dalrymple - Licence no. AQFW 112571 2015 expiry June 18th 2024. BC Provincial Aquaculture Licence PR083 expiry 30th June 2017. Fisheries & Oceans Canada Facility Reference1689 - Ocean Falls - Licence no. AQFW 112568 2015 Expiry June 18th 2024 BC Provincial Aquaculture Licence 5406670 expiry 30th June 2027.	Compliant	
8.2	Indicator: Compliance with labor laws and regulations Requirement: Yes Applicability: All Smolt Producers	a. Obtain declarations from smolt suppliers affirming compliance with labor laws and regulations. b. Keep records of supplier inspections for compliance with national labor laws and codes (only if such inspections are legally required in the country of operation; see 1.1.3a) c. Others, please describe	Farms are Marine Harvest farms so covered by this audit	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
<i>Standards related to Principle 2</i>					
8.3	<p>Indicator: Evidence of an assessment of the farm's potential impacts on biodiversity and nearby ecosystems that contains the same components as the assessment for grow-out facilities under 2.4.1</p> <p>Requirement: Yes</p> <p>Applicability: All Smolt Producers</p>	<p>a. Obtain from the smolt supplier(s) a documented assessment of the smolt site's potential impact on biodiversity and nearby ecosystems. The assessment must address all components outlined in Appendix I-3.</p> <p>b. Obtain from the smolt supplier(s) a declaration confirming they have developed and are implementing a plan to address potential impacts identified in the assessment.</p> <p>c. Others, please describe</p>	<p>Carried out Mainstream Biological Consulting for MH Canada November 2014 Ocean Falls and Dalrymple hatcheries. Recommendations for the Ocean falls site from the report including a shift to recirculation units from flow-through confirmed by BC Ministry of Environment to result in a reduction of environmental impact, confirmed to be have been completed January 2015 (Site Manager Ken Madison email). Previous plan will effectively be superseded for Dalrymple by site improvement plans and once completed the plan will be reviewed again. Prior to works starting potential impacts were considered within the planning application.</p>	Compliant	
8.4	<p>Indicator: Maximum total amount of phosphorus released into the environment per metric ton (mt) of fish produced over a 12-month period (see Appendix VIII-1)</p> <p>Requirement: 5 kg/mt of fish produced over a 12-month period; within three years of publication of the SAD standards, 4 kg/mt of fish produced over a 12-month period</p> <p>Applicability: All Smolt Producers</p>	<p>a. Obtain records from smolt suppliers showing amount and type of feeds used for smolt production during the past 12 months.</p> <p>b. For all feeds used by the smolt suppliers (result from 8.4a), keep records showing phosphorus content as determined by chemical analysis or based on feed supplier declaration (Appendix VIII-1).</p> <p>c. Using the equation from Appendix VIII-1 and results from 8.4a and b, calculate the total amount of phosphorus added as feed during the last 12 months of smolt production.</p> <p>d. Obtain from smolt suppliers records for stocking, harvest and mortality which are sufficient to calculate the amount of biomass produced (formula in Appendix VIII-1) during the past 12 months.</p> <p>e. Calculate the amount of phosphorus in fish biomass produced (result from 8.4d) using the formula in Appendix VIII-1.</p> <p>f. If applicable, obtain records from smolt suppliers showing the total amount of P removed as sludge (formula in Appendix VIII-1) during the past 12 months.</p> <p>g. Using the formula in Appendix VIII-1 and results from 8.4a-f (above), calculate total phosphorus released per ton of smolt produced and verify that the smolt supplier is in compliance with requirements.</p> <p>h. Others, please describe</p>	<p>Confirmed on MHC aquafarmer database. VR 92 applied for Ocean Falls (Discharge direct into sea water value calculated as 7.6 kg/mt) . Feed supplied by Skretting Canada (XT range) in the main with a small percentage from Skretting France (SP range) Total Phosphorous in feed calculated for Dalrymple as 3.21 metric tonnes (1.4% of feed fed as an average across the content for feed sizes used) Total Phosphorous in feed calculated for Ocean Falls as 5.42 metric tonnes (1.4% of feed fed as an average across the content for feed sizes used) Total Biomass produced calculated for Dalrymple as 331 metric tonnes. Total Biomass produced calculated for Ocean Falls as 408 metric tonnes. Value calculated for Dalrymple 1.6 kg/mt produced. VR raised for future sampling to be at point of effluence due to potential inaccuracies in calculating sludge phosphate levels, however this does not affect the ongoing certification and is simply an attempt to make the effluent sampling process more valid going forward</p>	Minor	Sludge phosphorous levels are noted to be variable (Dalrymple) and accuracy of calculations based on these is consequently not robust.

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
<i>Standards related to Principle 3</i>					
8.5	<p>Indicator: If a non-native species is being produced, the species shall have been widely commercially produced in the area prior to the publication [156] of the SAD standards</p> <p>Requirement: Yes [157]</p> <p>Applicability: All Smolt Producers except as noted in [157]</p>	<p>a. Obtain written evidence showing whether the smolt supplier produces a non-native species or not. If not, then Indicator 8.5 does not apply.</p> <p>b. Provide the farm with documentary evidence that the non-native species was widely commercially produced in the area before publication of the SAD Standard. (See definition of area under 3.2.1).</p> <p>c. If the smolt supplier cannot provide the farm with evidence for 8.5b, provide documentary evidence that the farm uses only 100% sterile fish.</p> <p>d. If the smolt supplier cannot provide the farm with evidence for 8.5b or 8.5c, provide documented evidence for each of the following: 1) non-native species are separated from wild fish by effective physical barriers that are in place and well maintained; 2) barriers ensure there are no escapes of reared fish specimens that might survive and subsequently reproduce; and 3) barriers ensure there are no escapes of biological material that might survive and subsequently reproduce.</p> <p>e. Retain evidence as described in 8.5a-d necessary to show compliance of each facility supplying smolt to the farm.</p> <p>f. Others, please describe</p>	<p>Atlantic Salmon are a non-native species to West Coast Canada; Government website (DFO) states Atlantic Salmon were introduced @1985 from West Coast Scotland origin.</p>	Compliant	
	<p>Indicator: Maximum number of</p>	<p>a. Obtain documentary evidence to show that smolt suppliers maintained monitoring records of all incidences of confirmed or suspected escapes, specifying date, cause, and estimated number of escapees.</p> <p>b. Using smolt supplier records from 8.6a, determine the total number of fish that escaped. Verify that there were fewer than 300 escapees from the smolt production facility in the most recent production cycle.</p>	<p>Dalrymple smolt supply farms is a Recirculation unit, minimal risk of escape. No Escapes reported or suspected from either site with Ocean falls having multiple screens with daily checks in place.</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
8.6	escapes [158] in the most recent production cycle Requirement: 300 fish [159] Applicability: All Smolt Producers except as noted in [159]	c. Inform smolt suppliers in writing that monitoring records described in 8.6a must be maintained for at least 10 years beginning with the production cycle for which the farm is first applying for certification (necessary for farms to be eligible to apply for the exception noted in [159]).		Compliant	
		d. If an escape episode occurs at the smolt production facility (i.e. an incident where > 300 fish escaped), the farm may request a rare exception to the Standard [159]. Requests must provide a full account of the episode and must document how the smolt producer could not have predicted the events that caused the escape episode.			
		e. Others, please describe			
8.7	Indicator: Accuracy [160] of the counting technology or counting method used for calculating the number of fish Requirement: ≥98% Applicability: All Smolt Producers	a. Obtain records showing the accuracy of the counting technology used by smolt suppliers. Records must include copies of spec sheets for counting machines and common estimates of error for hand-counts.	Counting confirmed at grading for each site with accuracy of counters confirmed by data sheets on website to be >98%	Compliant	
		b. Review records to verify that accuracy of the smolt supplier's counting technology or counting method is ≥ 98%.			
		c. Others, please describe			
Standards related to Principle 4					
8.8	Indicator: Evidence of a functioning policy for proper and responsible treatment of non-biological waste from production (e.g., disposal and recycling) Requirement: Yes Applicability: All Smolt Producers	a. From each smolt supplier obtain a policy which states the supplier's commitment to proper and responsible treatment of non-biological waste from production. It must explain how the supplier's policy is consistent with best practice in the area of operation.	Waste policies apply across both Freshwater and Seawater sites within MH Canada.	Compliant	
		b. Others, please describe			
	Indicator: Presence of an energy-use assessment verifying the	a. Obtain records from the smolt supplier for energy consumption by source (fuel, electricity) at the supplier's facility throughout each year. b. Confirm that the smolt supplier calculates total energy consumption in kilojoules (kj) during the last year.	Total Biomass produced calculated for Dalrymple as 331 metric tonnes. Total Biomass produced calculated for Ocean Falls as 445.8 metric tonnes. Annual energy calculations provided for 2016 for each site 24,594 Kj/Metric tonne for Ocean Falls and 57,347 Kj/ metric tonne for Dalrymple. This is expressed on an annual basis as the facilities run on a 'continuous production basis (i.e. there is no 'cyclical' element).		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
8.9	energy consumption at the smolt production facility (see Appendix V subsection 1 for guidance and required components of the records and assessment) Requirement: Yes, measured in kilojoule/mt fish/production cycle Applicability: All Smolt Producers	c. Obtain records to show the smolt supplier calculated the total weight of fish in metric tons (mt) produced during the last year. d. Confirm that the smolt supplier used results from 8.9b and 8.9c to calculate energy consumption on the supplier's facility as required and that the units are reported as kilojoule/mt fish/production cycle. e. Obtain evidence to show that smolt supplier has undergone an energy use assessment in compliance with requirements of Appendix V-1. Can take the form of a declaration detailing a-e. f. Others, please describe	1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Compliant	
8.10	Indicator: Records of greenhouse gas (GHG [161]) emissions [162] at the smolt production facility and evidence of an annual GHG assessment (See Appendix V, subsection 1) Requirement: Yes Applicability: All Smolt Producers	a. Obtain records of greenhouse gas emissions from the smolt supplier's facility. b. Confirm that, on at least an annual basis, the smolt supplier calculates all scope 1 and scope 2 GHG emissions in compliance with Appendix V-1. c. For GHG calculations, confirm that the smolt supplier selects the emission factors which are best suited to the supplier's operation. Confirm that the supplier documents the source of the emissions factors. d. For GHG calculations involving conversion of non-CO2 gases to CO2 equivalents, confirm that the smolt suppliers specify the Global Warming Potential (GWP) used and its source. e. Obtain evidence to show that the smolt supplier has undergone a GHG assessment in compliance with requirements Appendix V-1 at least annually. f. Others, please describe	GHG calculation 2,018,685 KG CO2 e for Dalrymple and 1,219,951 kg CO2e for Ocean Falls for the production year 2015. Calculations and conversion factors as used by sea farms to obtain results.	Compliant	
Standards related to Principle 5					
8.11	Indicator: Evidence of a fish health management plan, approved by the designated veterinarian, for the identification and monitoring of fish diseases and parasites	a. Obtain a copy of the supplier's fish health management plan for the identification and monitoring of fish disease and parasites. b. Keep documentary evidence to show that the smolt supplier's health plans were approved by the supplier's designated veterinarian.	Salmonid Health Management Plan, updated October 2015 evidence of review by Diane Morrison provided with submission to DFO for annual approval. Health Department back up for mortality events determination, manager and staff at both sites trained and experienced.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Requirement: Yes Applicability: All Smolt Producers	c. Others, please describe			
8.12	Indicator: Percentage of fish that are vaccinated for selected diseases that are known to present a significant risk in the region and for which an effective vaccine exists [163] Requirement: 100% Applicability: All Smolt Producers	a. Maintain a list of diseases that are known to present a significant risk in the region, developed by farm veterinarian and supported by scientific evidence. b. Maintain a list of diseases for which effective vaccines exist for the region, developed by the farm veterinarian and supported by scientific evidence. c. Obtain from the smolt supplier(s) a declaration detailing the vaccines the fish received. d. Demonstrate, using the lists from 8.12a-c above, that all salmon on the farm received vaccination against all selected diseases known to present a significant risk in the regions for which an effective vaccine exists. e. Others, please describe	Vaccination confirmed by records and in discussion with Dalrymple site manager Lance Page, three vaccines applied to all stock as previously listed.	Compliant	
8.13	Indicator: Percentage of smolt groups [164] tested for select diseases of regional concern prior to entering the grow-out phase on farm Requirement: 100% Applicability: All Smolt Producers	a. Obtain from the smolt supplier a list of diseases of regional concern for which smolt should be tested. List shall be supported by scientific analysis as described in the Instruction above. b. Obtain from the smolt supplier(s) a declaration and records confirming that each smolt group received by the farm has been tested for the diseases in the list (8.13a). c. Others, please describe	Government identified list of six Viral, two bacterial and two protozoan pathogens. These pathogens are tested to the 'schedule 2' requirements prior to moving smolts to sites between any of the seven zones supported by a "transfer of fish attestation form" from the DFO.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
8.14	<p>Indicator: Detailed information, provided by the designated veterinarian, of all chemicals and therapeutants used during the smolt production cycle, the amounts used (including grams per ton of fish produced), the dates used, which group of fish were treated and against which diseases, proof of proper dosing and all disease and pathogens detected on the site</p> <p>Requirement: Yes</p> <p>Applicability: All Smolt Producers</p>	<p>a. Obtain from the smolt supplier(s) a detailed record of all chemical and therapeutant use for the fish sold to the farm that is signed by their veterinarian and includes:</p> <ul style="list-style-type: none"> - name of the veterinarian prescribing treatment; - product name and chemical name; - reason for use (specific disease) - date(s) of treatment; - amount (g) of product used; - dosage; - mt of fish treated; - the WHO classification of antibiotics (also see note under 5.2.8); and - the supplier of the chemical or therapeutant. <p>b. Others, please describe</p>	<p>Treatments applied are available through the Aquafarmer system, Diane Morrison (Company vet) is also responsible for Therapeutant control and prescription. Aquafarmer records confirm there have been no treatments involving antibiotic use over the most recent production cycle at this site (the stock did receive a Florfenicol treatment whilst at the Ocean Falls hatchery prior to movement to Sonora Point)</p>	Compliant	
8.15	<p>Indicator: Allowance for use of therapeutic treatments that include antibiotics or chemicals that are banned [165] in any of the primary salmon producing or importing countries [166]</p> <p>Requirement: Yes</p> <p>Applicability: All Smolt Producers</p>	<p>a. Provide to the smolt supplier the list (see 5.2.2a) of therapeutants, including antibiotics and chemicals, that are proactively banned for use in food fish for the primary salmon producing and importing countries listed in [166].</p> <p>b. Inform smolt supplier that the treatments on the list cannot be used on fish sold to a farm with ASC certification.</p> <p>c. Compare therapeutant records from smolt supplier (8.14) to the list (8.15a) and confirm that no therapeutants appearing on the list (8.15a) were used on the smolt purchased by the farm.</p> <p>d. Others, please describe</p>	<p>Confirmed on MHC aquafarmer database. Prescription records also provided.</p>	Compliant	
8.16	<p>Indicator: Number of treatments of antibiotics over the most recent production cycle</p> <p>Requirement: ≤ 3</p> <p>Applicability: All Smolt Producers</p>	<p>a. Obtain from the smolt supplier records of all treatments of antibiotics (see 8.14a).</p> <p>b. Calculate the total number of treatments of antibiotics from their most recent production cycle.</p> <p>c. Others, please describe</p>	<p>Aquafarmer records confirm there have been no treatments involving antibiotic use over the most recent production cycle at the Dalrymple site. Some of the Ocean Falls origin fish were treated using Aquaflo single treatment, Rx 15 -076 prescription (October 2015)</p>	Compliant	
	<p>Indicator: Allowance for use of</p>	<p>a. Provide to smolt supplier(s) a current version of the WHO list of antimicrobials critically and highly important for human health [167].</p>	<p>Aquaflo (Florfenicol) confirmed as not being critically important on the 2016 WHO list.</p>		

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
8.17	antibiotics listed as critically important for human medicine by the WHO [167] Requirement: None [168] Applicability: All Smolt Producers	b. Inform smolt supplier that the antibiotics on the WHO list (8.17a) cannot be used on fish sold to a farm with ASC certification. c. Compare smolt supplier's records for antibiotic usage (8.14, 8.15a) with the WHO list (8.17a) to confirm that no antibiotics listed as critically important for human medicine by the WHO were used on fish purchased by the farm. d. Others, please describe		Compliant	
8.18	Indicator: Evidence of compliance [169] with the OIE Aquatic Animal Health Code [170] Requirement: Yes Applicability: All Smolt Producers	a. Provide the smolt supplier with a current version of the OIE Aquatic Animal Health Code (or inform the supplier how to access it from the internet). b. Inform the supplier that an ASC certified farm can only source smolt from a facility with policies and procedures that ensure that its smolt production practices are compliant with the OIE Aquatic Animal Health Code. c. Obtain a declaration from the supplier stating their intent to comply with the OIE code and copies of the smolt suppliers policies and procedures that are relevant to demonstrate compliance with the OIE Aquatic Animal Health Code. d. Others, please describe	All smolts are supplied internally, farms have access through MH Canada Sharepoint site links.	Compliant	
Standards related to Principle 6					
8.19	Indicator: Evidence of company-level policies and procedures in line with the labor standards under 6.1 to 6.11 Requirement: Yes Applicability: All Smolt Producers	a. Obtain copies of smolt supplier's company-level policies and procedures and a declaration of compliance with the labor standards under 6.1 to 6.11. b. Review the documentation and declaration from 8.19a to verify that smolt supplier's policies and procedures are in compliance with the requirements of labor standards under 6.1 to 6.11. c. Others, please describe	Confirmed as per the social audit section of this audit.	Compliant	
Standards related to Principle 7					
8.20	Indicator: Evidence of regular consultation and engagement with community representatives and organizations Requirement: Yes	a. From each smolt supplier obtain documentary evidence of consultations and engagement with the community. b. Review documentation from 8.20a to verify that the smolt supplier's consultations and community engagement complied with requirements. c. Others, please describe	Confirmed as per the social audit section of this audit.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
8.21	Indicator: Evidence of a policy for the presentation, treatment and resolution of complaints by community stakeholders and organizations	a. Obtain a copy of the smolt supplier's policy for presentation, treatment and resolution of complaints by community stakeholders and organizations. b. Others, please describe	Confirmed as per the social audit section of this audit.	Compliant	
8.22	Indicator: Where relevant, evidence that indigenous groups were consulted as required by relevant local and/or national laws and regulations Requirement: Yes Applicability: All Smolt Producers	a. Obtain documentary evidence showing that the smolt supplier does or does not operate in an indigenous territory (to include farms that operate in proximity to indigenous or aboriginal people (see Indicator 7.2.1). If not then the requirements of 8.22 do not apply. b. Obtain documentation to demonstrate that, as required by law in the jurisdiction: smolt supplier consulted with indigenous groups and retains documentary evidence (e.g. meeting minutes, summaries) to show how the process complies with 7.2.1b; OR smolt supplier confirms that government-to-government consultation occurred and obtains documentary evidence. c. Others, please describe	Confirmed as per the social audit section of this audit.	Compliant	
8.23	Indicator: Where relevant, evidence that the farm has undertaken proactive consultation with indigenous communities Requirement: Yes Applicability: All Smolt Producers	a. See results of 8.22a (above) to determine whether the requirements of 8.23 apply to the smolt supplier. b. Where relevant, obtain documentary evidence that smolt suppliers undertake proactive consultations with indigenous communities. c. Others, please describe	Confirmed as per the social audit section of this audit.	Compliant	
ADDITIONAL REQUIREMENTS FOR OPEN (NET-PEN) PRODUCTION OF SMOLT					
8.24	Indicator: Allowance for producing or holding smolt in net pens in water bodies with native salmonids Requirement: None Applicability: All Smolt Producers Using Open Systems	a. Obtain a declaration from the farm's smolt supplier stating whether the supplier operates in water bodies with native salmonids. b. Request smolt suppliers to identify all water bodies in which they operate net pens for producing smolt and from which facilities they sell to the client. c. For any water body identified in 8.24b as a source of smolt for the farm, determine if native salmonids are present by doing a literature search or by consulting with a reputable authority. Retain evidence of search results.	No smolts produced by net-pen production.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
		d. Others, please describe			
8.25	Indicator: Allowance for producing or holding smolt in net pens in any water body	a. Take steps to ensure that by June 13, 2017 the farm does not source smolt that was produced or held in net pens. b. Others, please describe	No smolts produced by net-pen production.	N/A	
8.26	Indicator: Evidence that carrying capacity (assimilative capacity) of the freshwater body has been established by a reliable entity [171] within the past five years [172], and total biomass in the water body is within the limits established by that study (see Appendix VIII-5 for minimum requirements) Requirement: Yes Applicability: All Smolt Producers Using Open Systems	a. For the water body(s) where the supplier produces smolt for the client (see 8.24b), obtain a copy of the most recent assessment of assimilative capacity. b. Identify which entity was responsible for conducting the assessment (8.26a) and obtain evidence for their reliability. c. Review the assessment (8.26a) to confirm that it establishes a carrying capacity for the water body, it is less than five years old, and it meets the minimum requirements presented in Appendix VIII-5. d. Review information to confirm that the total biomass in the water body is within the limits established in the assessment (8.26a). e. If the study in 8.26a is more than two years old and there has been a significant increase in nutrient input to the water body since completion, request evidence that an updated assessment study has been done. f. Others, please describe	No smolts produced by net-pen production.	N/A	
8.27	Indicator: Maximum baseline total phosphorus concentration of the water body (see Appendix VIII-6) Requirement: ≤ 20 µg/l [174] Applicability: All Smolt Producers Using Open Systems	a. Obtain documentary evidence to show that smolt suppliers conducted water quality monitoring in compliance with the requirements of Appendix VIII-6. b. Obtain from smolt suppliers a map with GPS coordinates showing the sampling locations. c. Obtain from smolt suppliers the TP monitoring results for the past 12 months and calculate the average value at each sampling station. d. Compare results to the baseline TP concentration established below (see 8.29) or determined by a regulatory body.	No smolts produced by net-pen production.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
		e. Confirm that the average value for TP over the last 12 months did not exceed 20 ug/l at any of the sampling stations nor at the reference station. f. Others, please describe			
8.28	<p>Indicator: Minimum percent oxygen saturation of water 50 centimetres above bottom sediment (at all oxygen monitoring locations described in Appendix VIII-6)</p> <p>Requirement: ≥ 50%</p> <p>Applicability: All Smolt Producers Using Open Systems</p>	<p>a. Obtain evidence that smolt supplier conducted water quality monitoring in compliance with the requirements (see 8.27a).</p> <p>b. Obtain from smolt suppliers the DO monitoring results from all monitoring stations for the past 12 months.</p> <p>c. Review results (8.28b) to confirm that no values were below the minimum percent oxygen saturation.</p> <p>d. Others, please describe</p>	No smolts produced by net-pen production.	N/A	
8.29	<p>Indicator: Trophic status classification of water body remains unchanged from baseline (see Appendix VIII-7)</p> <p>Requirement: Yes</p> <p>Applicability: All Smolt Producers Using Open Systems</p>	<p>a. Obtain documentary evidence from the supplier stating the trophic status of water body if previously set by a regulator body (if applicable).</p> <p>b. If the trophic status of the waterbody has not been classified (see 8.29a), obtain evidence from the supplier to show how the supplier determined trophic status based on the concentration of TP.</p> <p>c. As applicable, review results from 8.29b to verify that the supplier accurately assigned a trophic status to the water body in accordance with the table in Appendix VIII-7 and the observed concentration of TP over the past 12 months.</p> <p>d. Compare the above results (8.29c) to trophic status of the water body as reported for all previous time periods. Verify that there has been no change.</p> <p>e. Others, please describe</p>	No smolts produced by net-pen production.	N/A	
8.30	<p>Indicator: Maximum allowed increase in total phosphorus concentration in lake from baseline (see Appendix VIII-7)</p> <p>Requirement: 25%</p>	<p>a. Determine the baseline value for TP concentration in the water body using results from either 8.29a or 8.29b as applicable.</p> <p>b. Compare the baseline TP concentration (result from 8.30a) to the average observed TP concentration over the past 12 months (result from 8.27e).</p>	No smolts produced by net-pen production.	N/A	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence 1. Write down all audit evidence for each compliance criterion (CC). Audit evidence (including evidence of conformity and nonconformity) should be recorded so that the audit can be repeated by a different audit team. 2. Replace explanatory text in the 'Audit Evidence' column as appropriate. 3. If you see any Compliance Criteria which is not listed below, please describe also in the cells below.	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Applicability: All Smolt Producers Using Open Systems	c. Verify that the average observed TP concentration did not increase by more than 25% from baseline TP concentration. d. Others, please describe			
8.31	Indicator: Allowance for use of aeration systems or other technological means to increase oxygen levels in the water body Requirement: None	a. Obtain a declaration from the farm's smolt supplier stating that the supplier does not use aeration systems or other technological means to increase oxygen levels in the water bodies where the supplier operates. b. Others, please describe	No smolts produced by net-pen production.	N/A	
ADDITIONAL REQUIREMENTS FOR SEMI-CLOSED AND CLOSED PRODUCTION OF SMOLTS					
8.32	Indicator: Water quality monitoring matrix completed and submitted to ASC (see Appendix VIII-2) Requirement: Yes [177] Applicability: All Smolt Producers Using Semi-Closed or Closed Production Systems	a. Obtain records from smolt suppliers showing that water quality monitoring was conducted at least quarterly (i.e. once every 3 months) over the last 12 months. b. Obtain water quality monitoring matrix from smolt suppliers and review for completeness. c. Submit the smolt supplier's water quality monitoring matrix to ASC as per Appendix VIII-2 and Appendix VI at least once per year. d. Others, please describe	Confirmed as submitted in the ASC transparency documentation	Compliant	
8.33	Indicator: Minimum oxygen saturation in the outflow (methodology in Appendix VIII-2) Requirement: 60% [178,179] Applicability: All Smolt Producers Using Semi-Closed or Closed Production Systems	a. Obtain the water quality monitoring matrix from each smolt supplier (see 8.32b). b. Review the results (8.33a) for percentage dissolved oxygen saturation in the effluent to confirm that no measurements fell below 60% saturation. c. If a single DO reading (as reported in 8.33a) fell below 60%, obtain evidence that the smolt supplier performed daily continuous monitoring with an electronic probe and recorder for at least a week demonstrating a minimum 60% saturation at all times (Appendix VIII-2). d. Others, please describe	Confirmed as submitted in the ASC transparency documentation	Compliant	
8.34	Indicator: Macro-invertebrate surveys downstream from the farm's effluent discharge demonstrate benthic health that is similar or better than surveys upstream from the discharge (methodology in Appendix VIII-3)	a. Obtain documentation from smolt supplier(s) showing the results of macro-invertebrate surveys. b. Review supplier documents (8.34a) to confirm that the surveys followed the prescribed methodology (Appendix VIII-3).	Dalrymple sampled twice in 2016 (February and July) sampling by Mainstream Environmental with analysis / report by Biologica with no indication of concern expressed, some seasonal variance noted.	Compliant	

		Compliance Criteria (Use as guidance for audit only)	Audit evidence	Evaluation (Per indicator, select one category in the drop-down menu)	Description of NC Provide an explanation of the reason(s) for the classification of any NCs or non-applicability
	Requirement: Yes Applicability: All Smolt Producers Using Semi-Closed or Closed Production Systems	c. Review supplier documents (8.34a) to confirm the survey results show that benthic health is similar to or better than upstream of the supplier's discharge. d. Others, please describe			
8.35	Indicator: Evidence of implementation of biosolids (sludge) Best Management Practices (BMPs) (Appendix VIII-4) Requirement: Yes Applicability: All Smolt Producers Using Semi-Closed or Closed Production Systems	a. Maintain a copy of smolt supplier's biosolids (sludge) management plan and confirm that the plan addresses all requirements in Appendix VIII-2. b. Obtain from smolt suppliers a process flow diagram (detailed in Appendix VIII-2) showing how the farm is dealing with biosolids responsibly. c. Obtain a declaration from smolt supplier stating that no biosolids were discharged into natural water bodies in the past 12 months. d. Obtain records from smolt suppliers showing monitoring of biosolid (sludge) cleaning maintenance, and disposal as described in Appendix VIII-2. e. Others, please describe	Biosolids / sludge removal discussed with site manager of Dalrymple, Sludge is removed by municipal trucks @ monthly, settlement areas at outflow with secondary run off . N/A for Ocean Falls due to direct discharge	Compliant	

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
Ref# be
provided
by:

NCF 1	CAB	NC Reference	3.1.4	
NCF 2	CAB	NC Detected by	M.James	
NCF 3	CAB	Date Detected	20th April 2017	
NCF 4	CAB	Audit Reference	3.1.4	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.		No
NFC 6		Justification for applying the approved variation or interpretation.		N/A
NCF 6	CAB	Status of NC	Open	
NCF 7	CAB		Closed	x
NCF 8	CAB	Grade of NC	Major	
NCF 9	CAB		Minor	x
NCF 10	CAB		Observation	
NCF 11	CAB	Deadline for closing the nonconformity		12 Months
NCF 12	CAB	Explanation for deadline for closing the nonconformity		ASC Standard requirement
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard
NCF 14	CAB		Clause Number	3.1.4 a
NCF 15	CAB		Text of Requirement	Prepare an annual schedule for testing sea lice that identifies timeframes of routine testing frequency (at a minimum, monthly) and for high-frequency testing (weekly) due to sensitive periods for wild salmonids (e.g. during and immediately prior to outmigration of juveniles).
NCF 16	CAB	Description of the nonconformity		No monitoring sample recorded for week of 11th April 2017 and there was no record of any acceptable reason for this. Sampling has not been carried out as per the requirements of the standard.
NCF 17	CAB	Statement of evidence detected		Lack of record for the week specified.
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)		None Katherine Dolmage 15 May 2017

NCF 19	CAB	Response (include the name of the author and date submitted)	N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)	Harvesting taking place. Katherine Dolmage 15th May 2017
NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Procedure is now in place to cover future sampling requirements, counts will take place at pens other than those being harvested. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted as appropriate. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Procedure is now in place to cover future sampling requirements, counts will take place at pens other than those being harvested. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	N/A
NCF 27		Justification for extension request	N/A
NCF 28	CAB	Extension request approval	N/A
NCF 29		Reason(s) for approval/ disapproval	N/A
NCF 30		Date on which the nonconformity was closed	Closed 22nd May 2017

Non-conformity Report Form

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Text to
be
Ref# provided
by:

NCF 1	CAB	NC Reference		5.1.4	
NCF 2	CAB	NC Detected by		M.James	
NCF 3	CAB	Date Detected		20th April 2017	
NCF 4	CAB	Audit Reference		5.1.4	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.		No	
NFC 6		Justification for applying the approved variation or interpretation.		N/A	
NCF 6	CAB	Status of NC	Open	<input checked="" type="checkbox"/>	
NCF 7	CAB		Closed	<input type="checkbox"/>	
NCF 8	CAB	Grade of NC	Major	<input type="checkbox"/>	
NCF 9	CAB		Minor	<input checked="" type="checkbox"/>	
NCF 10	CAB		Observation	<input type="checkbox"/>	
NCF 11	CAB	Deadline for closing the nonconformity		12 Months	
NCF 12	CAB	Explanation for deadline for closing the nonconformity		ASC Standard requirement	
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard	
NCF 14	CAB		Clause Number	5.1.4	
NCF 15	CAB		Text of Requirement	For each mortality event, ensure that post-mortem analyses are done on a statistically relevant number of fish and keep a record of the results. If on-site diagnosis is inconclusive and disease is suspected or results are inconclusive over a 1-2 week period, ensure that fish are sent to an off-site laboratory for diagnosis and keep a record of the results.	
NCF 16	CAB	Description of the nonconformity		Sampling of fish where concerns are raised are stated to be passed to fish health team however there is no clear procedure which covers at what level mortality should be flagged to the health department.	
NCF 17	CAB	Statement of evidence detected		Whilst a level of understanding was exhibited at interview there is no clear procedure which covers what level of mortality should be flagged to the health department.	
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)		None Katherine Dolmage 15 May 2017	

NCF 19	CAB	Response (include the name of the author and date submitted)	N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)	Belief that the current process was correct. Katherine Dolmage 15th May 2017
NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Procedure will be updated, mortality classification SOP to be updated to include metrics and/or details on when and how to contact fish health.. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Procedure will be updated, mortality classification SOP to be updated to include metrics and/or details on when and how to contact fish health.. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	20-Apr-18
NCF 27		Justification for extension request	The client needs the extended time to implement the changes.
NCF 28	CAB	Extension request approval	extension deadline 20 April 2018
NCF 29		Reason(s) for approval/ disapproval	approved
NCF 30		Date on which the nonconformity was closed	open

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
Ref# be
provided
by:

NCF 1	CAB	NC Reference		5.4.3	
NCF 2	CAB	NC Detected by		M.James	
NCF 3	CAB	Date Detected		20th April 2017	
NCF 4	CAB	Audit Reference		5.4.3	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.		No	
NFC 6		Justification for applying the approved variation or interpretation.		N/A	
NCF 6	CAB	Status of NC	Open		
NCF 7	CAB		Closed	x	
NCF 8	CAB	Grade of NC	Major	x	
NCF 9	CAB		Minor		
NCF 10	CAB		Observation		
NCF 11	CAB	Deadline for closing the nonconformity		3 Months	
NCF 12	CAB	Explanation for deadline for closing the nonconformity		ASC Standard requirement	
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard	
NCF 14	CAB		Clause Number	5.4.3	
NCF 15	CAB		Text of Requirement	Develop policies and procedures as needed to ensure that farm practices remain consistent with the OIE Aquatic Animal Health Code (5.4.3a) and with actions required under indicator 5.4.4.	
NCF 16	CAB	Description of the nonconformity		Jan 25th and March 20th; 60-day dive inspections do not record disinfection of equipment, divers are non-MH specific, site specific equipment is only BCD and dive suit so confirmation of disinfection of fins, masks, regulators is not present.	
NCF 17	CAB	Statement of evidence detected		Lack of records present.	
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)		None Katherine Dolmage 15 May 2017	

NCF 19	CAB	Response (include the name of the author and date submitted)	N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)	On-site recording did not confirm this. Katherine Dolmage 15th May 2017
NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Discussed requirements for verifying dive plans with all sites, including gear disinfection. Meeting with fish health/production to develop clear guidelines for dive biosecurity, dive contract amended. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Discussed requirements for verifying dive plans with all sites, including gear disinfection. Meeting with fish health/production to develop clear guidelines for dive biosecurity, dive contract amended. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	N/A
NCF 27		Justification for extension request	N/A
NCF 28	CAB	Extension request approval	N/A
NCF 29		Reason(s) for approval/ disapproval	N/A
NCF 30		Date on which the nonconformity was closed	Closed 22nd May 2017

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
be
Ref# provided
by:

NCF 1	CAB	NC Reference		5.4.4	
NCF 2	CAB	NC Detected by		M.James	
NCF 3	CAB	Date Detected		20th April 2017	
NCF 4	CAB	Audit Reference		5.4.4	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.			No
NFC 6		Justification for applying the approved variation or interpretation.			N/A
NCF 6	CAB	Status of NC	Open		x
NCF 7	CAB		Closed		
NCF 8	CAB	Grade of NC	Major		
NCF 9	CAB		Minor		x
NCF 10	CAB		Observation		
NCF 11	CAB	Deadline for closing the nonconformity			12 Months
NCF 12	CAB	Explanation for deadline for closing the nonconformity			ASC Standard requirement
NCF 13	CAB	Requirement Reference	Source Document		ASC Salmon Standard
NCF 14	CAB		Clause Number		5.4.4
NCF 15	CAB		Text of Requirement		Ensure that farm policies and procedures in 5.4.3a describe the four actions required under Indicator 5.4.4 in response to an OIE-notifiable disease on the farm.
NCF 16	CAB	Description of the nonconformity			No specific policy in place to cover the criterion
NCF 17	CAB	Statement of evidence detected			Farm policies do cover the requirements of the OIE notifiable disease determinants however this is not summarised in a specific policy or procedure.
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)			None Katherine Dolmage 15 May 2017
NCF 19	CAB	Response (include the name of the author and date submitted)			N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)			Belief that health department and policies covered the requirement. Katherine Dolmage 15th May 2017
NCF 21	CAB	Response (include the name of the author and date submitted)			Accepted. M.James 22nd May 2017

NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	ASC SOP documents to be updated to include OIE notification detail. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	ASC SOP documents to be updated to include OIE notification detail. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	20-Apr-18
NCF 27		Justification for extension request	The client needs the extended time to implement the changes.
NCF 28	CAB	Extension request approval	extension deadline 20 April 2018
NCF 29		Reason(s) for approval/ disapproval	approved
NCF 30		Date on which the nonconformity was closed	open

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
be
Ref# provided
by:

NCF 1	CAB	NC Reference		6.5.1	
NCF 2	CAB	NC Detected by		M.James	
NCF 3	CAB	Date Detected		20th April 2017	
NCF 4	CAB	Audit Reference		6.5.1	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.			No
NFC 6		Justification for applying the approved variation or interpretation.			N/A
NCF 6	CAB	Status of NC	Open		
NCF 7	CAB		Closed	x	
NCF 8	CAB	Grade of NC	Major	x	
NCF 9	CAB		Minor		
NCF 10	CAB		Observation		
NCF 11	CAB	Deadline for closing the nonconformity			3 Months
NCF 12	CAB	Explanation for deadline for closing the nonconformity			ASC Standard requirement
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard	
NCF 14	CAB		Clause Number	6.5.1	
NCF 15	CAB		Text of Requirement	Employer has documented practices, procedures (including emergency response procedures) and policies to protect employees from workplace hazards and to minimize risk of accident or injury.	
NCF 16	CAB	Description of the nonconformity			Documented practices are not being followed in some cases.
NCF 17	CAB	Statement of evidence detected			1. Monthly safety meeting notes are not signed off by management 2. Confined spaces below the silos have ladders that are not secured. 3. Life Jackets are not being worn by all employees in the process of transferring from the crew boats to the site house.
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)			None Katherine Dolmage 15 May 2017

NCF 19	CAB	Response (include the name of the author and date submitted)	N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)	On-site recording did not confirm this. Katherine Dolmage 15th May 2017
NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Email all site managers/site staff regarding requirement for sign off- H&S to review on pre-audit visits including H&S to email all site staff with policy for life jackets, and task crew boat drivers with ensuring policy is followed, procedures are being re-inforced to cover H & S requirements, ladder has been secured. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Procedures as stated above have been reinforced to cover future requirements. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	N/A
NCF 27		Justification for extension request	N/A
NCF 28	CAB	Extension request approval	N/A
NCF 29		Reason(s) for approval/ disapproval	N/A
NCF 30		Date on which the nonconformity was closed	Closed 22nd May 2017

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
be
Ref# provided
by:

NCF 1	CAB	NC Reference		6.5.3	
NCF 2	CAB	NC Detected by		M.James	
NCF 3	CAB	Date Detected		20th April 2017	
NCF 4	CAB	Audit Reference		6.5.3	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.			No
NFC 6		Justification for applying the approved variation or interpretation.			N/A
NCF 6	CAB	Status of NC	Open		<input checked="" type="checkbox"/>
NCF 7	CAB		Closed		<input type="checkbox"/>
NCF 8	CAB	Grade of NC	Major		<input type="checkbox"/>
NCF 9	CAB		Minor		<input checked="" type="checkbox"/>
NCF 10	CAB		Observation		<input type="checkbox"/>
NCF 11	CAB	Deadline for closing the nonconformity			12 Months
NCF 12	CAB	Explanation for deadline for closing the nonconformity			ASC Standard requirement
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard	
NCF 14	CAB		Clause Number	6.5.3	
NCF 15	CAB		Text of Requirement	Employer makes regular assessments of hazards and risks in the workplace. Risk assessments are reviewed and updated at least annually (see also 6.5.1a). Employees are trained in how to identify and prevent known hazards and risks	
NCF 16	CAB	Description of the nonconformity			Site Risk Assessments are lacking some expected detail and do not fully analyse risk correctly. The site manager has not completed the Risk Assessment course that is on the company internal training (DATS).
NCF 17	CAB	Statement of evidence detected			Examination of records and Risk Assessments.
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)			None Katherine Dolmage 15 May 2017
NCF 19	CAB	Response (include the name of the author and date submitted)			N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)			Risk Assessments in place, required further review. Manager training not completed. Katherine Dolmage 15th May 2017

NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Site to update RA training, H&S to visit site to review requirements with all staff. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Training will re-inforce RA quality and safety. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	20-Apr-18
NCF 27		Justification for extension request	The client needs the extended time to implement the changes.
NCF 28	CAB	Extension request approval	extension deadline 20 April 2018
NCF 29		Reason(s) for approval/ disapproval	approved
NCF 30		Date on which the nonconformity was closed	open

Non-conformity Report Form

A copy of this form shall be completed and included in the audit report for each nonconformity raised.

Text to
be
Ref# provided
by:

NCF 1	CAB	NC Reference	8.4	
NCF 2	CAB	NC Detected by	M.James	
NCF 3	CAB	Date Detected	20th April 2017	
NCF 4	CAB	Audit Reference	8.4	
NFC 5		Has a variation or interpretation (Form 1) that relates to this NC been approved by ASC. If so include the ASC variation or interoperation log reference.		No
NFC 6		Justification for applying the approved variation or interpretation.		N/A
NCF 6	CAB	Status of NC	Open	<input checked="" type="checkbox"/>
NCF 7	CAB		Closed	<input type="checkbox"/>
NCF 8	CAB	Grade of NC	Major	<input type="checkbox"/>
NCF 9	CAB		Minor	<input checked="" type="checkbox"/>
NCF 10	CAB		Observation	<input type="checkbox"/>
NCF 11	CAB	Deadline for closing the nonconformity		12 Months
NCF 12	CAB	Explanation for deadline for closing the nonconformity		ASC Standard requirement
NCF 13	CAB	Requirement Reference	Source Document	ASC Salmon Standard
NCF 14	CAB		Clause Number	8.4.
NCF 15	CAB		Text of Requirement	If applicable, obtain records from smolt suppliers showing the total amount of P removed as sludge
NCF 16	CAB	Description of the nonconformity		Sludge phosphorous levels are noted to be variable (Dalrymple) and accuracy of calculations based on these is consequently not robust.
NCF 17	CAB	Statement of evidence detected		Sludge removal records
NCF 18	Client	Statement of any errors of fact in the nonconformity (include the name of the author and date submitted)		None Katherine Dolmage 15 May 2017
NCF 19	CAB	Response (include the name of the author and date submitted)		N/A
NCF 20	Client	Statement of the root cause of the nonconformity (include the name of the author and date submitted)		Method of sludge removal. Katherine Dolmage 15th May 2017

NCF 21	CAB	Response (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 22	Client	Statement of the corrective actions proposed and taken (include the name of the author and date submitted)	Change in method of sampling discharge of effluent monitoring. Katherine Dolmage 15 May 2017
NCF 23	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 24	Client	Statement of the preventive actions proposed and taken (include the name of the author and date submitted)	Change in method of sampling discharge, new effluent system under development, site will develop more effective calculation method. Katherine Dolmage 15 May 2017
NCF 25	CAB	Evaluation by CAB (include the name of the author and date submitted)	Accepted. M.James 22nd May 2017
NCF 26	Client	Request to extend the implementation period for corrective action(s) until	20-Apr-18
NCF 27		Justification for extension request	The client needs the extended time to implement the changes.
NCF 28	CAB	Extension request approval	extension deadline 20 April 2018
NCF 29		Reason(s) for approval/ disapproval	approved
NCF 30		Date on which the nonconformity was closed	open

ASC Audit Report - Traceability

10 Traceability Factor	Description of risk factor if present.	Describe any traceability, segregation, or other systems in place to manage the risk.
10.1 The possibility of mixing or substitution of certified and non-certified product, including product of the same or similar appearance or species, produced within the same operation.	There is deemed to be no opportunity of mixing or substitution of certified with non-certified product either prior to or at harvesting as the whole farm site is within the unit of certification.	Computerised tracking of stock information from hatchery of origin to the point of sale at the Port Hardy Processing Plant
10.2 The possibility of mixing or substitution of certified and non-certified product, including product of the same or similar appearance or species, present during production, harvest, transport, storage, or processing activities.	The auditor considers the opportunity to substitute certified with non-certified product throughout the processing activities is limited. The facility at Port Hardy handles both ASC certified and non-ASC salmon from MH Canada farms but appropriate traceability systems are employed. All finished product can be traced back to the farm and cage of origin by a unique identifier on the label. MH Canada have a system of cross-checking in place for any harvest from certified sites that controls labelling of packs with the ASC logo	Computerised tracking of stock information from hatchery of origin to the point of sale at the Port Hardy processing plant
10.3 The possibility of subcontractors being used to handle, transport, store, or process certified products.	The specialised harvesting vessel used is fully contracted to MH Canada and confirmed by interview that only fish from Sonora Point will be transported at one time. All other activities within the processing system are also fully controlled by MH Canada up to the point of sale.	Computerised tracking of stock information from hatchery of origin to the point of sale at the Port Hardy.
10.4 Any other opportunities where certified product could potentially be mixed, substituted, or mislabelled with non-certified product before the point where product	None identified.	Computerised tracking of stock information from hatchery of origin to the point of sale at the Port Hardy processing plant.
10.5 Detail description of the flow of certified product within the operation and the associated traceability system which allows product to be traced from final sale back to the unit of certification	The fish held at the Sonora Point site will be covered by ASC Certification should this be confirmed by the audit determination. These fish are uplifted and harvested aboard a vessel fully contracted to MH Canada and then transported to the Port Hardy processing facility. All activities are fully controlled by MH Canada using primarily computerised systems logging fish origin by cage through the process.	
10.6 <u>Traceability Determination:</u>		
10.6.1 The traceability and segregation systems in the operation are sufficient to ensure all products identified and sold as certified by the operation originate from the unit of certification, or	The traceability and segregation systems in the operation are sufficient to ensure all products identified and sold as certified by the operation originate from the unit of certification	
10.6.2 The traceability and segregation systems are not sufficient and a separate chain of custody certification is required for the operation before products can be sold as ASC-certified or can be eligible to carry the ASC logo.	See above.	
10.6.3 The point from which chain of custody is required to begin.	The chain of custody is required to begin from the point of uplift by the wellboat contracted to the Port Hardy processing facility through which all MH Canada Sonora Point fish are processed. This facility holds	
10.6.4 Is a separate chain of custody certificate required for the producer?	Yes	

ASC Audit Report - Closing

11 Findings

11.1 A summary table that lists all non-conformities and observations

NC reference	NC Status	Clause Reference	Description of NC	Descriptions of actions pending
	Major - closed	5.4.3	Jan 25th and March 20th; 60-day dive inspections do not record disinfection of equipment, divers are non-MH specific, site specific equipment is only BCD and dive suit so confirmation of disinfection of fins, masks, regulators is not present.	Discussed requirements for verifying dive plans with all sites, including gear disinfection. Meeting with fish health/production to develop clear guidelines for dive biosecurity, dive contract amended
	Minor - closed	3.1.4	No monitoring sample recorded for week of 11th April 2017 and no record of any acceptable reason for this.	Counts will take place at pens other than those being harvested.
	Minor - open	5.1.4	Sampling of fish where concerns are raised are stated to be passed to fish health team however there is no clear procedure which covers at what level mortality should be flagged to the health department.	Mortality classification SOP to be updated to include metrics and/or details on when and how to contact fish health.
	Minor - open	5.4.4	Farm policies do cover the requirements of the OIE notifiable disease determinants however this is not summarised in a specific policy or procedure.	ASC SOP documents to be updated to include OIE notification detail.
	Major - closed	6.5.1	1. Monthly safety meeting notes are not signed off by management. 2. Confined spaces below the silos have ladders that are not secured. 3. Life jackets are not being worn by employees in the process of transferring from the crew boats to the site house.	1. Email all site managers/site staff regarding requirement for sign off- H&S to review on pre-audit visits. 2. Ladder to be secured 3. H&S to email all site staff with policy for life jackets, and task crew boat drivers with ensuring policy is followed

Minor - open	6.5.3	Site Risk Assessments are lacking detail and do not fully analyse risk correctly. The site manager has not completed the Risk Assessment course that is on the company internal training (DATS).	Site to update RA training, H&S to visit site to review requirements with all staff
Minor - open	8.4	Sludge phosphorous levels are noted to be variable (Dalrymple) and accuracy of calculations based on these is consequently not robust.	New effluent system under development, site will develop more effective calculation method

11.2 A copy of the non-conformity report form completed for each non-conformity and observation raised.

11.3 If any approved requests for variations or interpretations have been used, a full copy of the approved variation or interpretation form shall be appended to the report. **If used in raising an NC**, the ASC reference number (NCF 5) and a justification for its use (NCF 6) shall be completed in the NC report form.

12 Evaluation Results

12.1 A report of the results of the audit of the operation against the specific elements in the standard and guidance documents.

See the Audit template section. Harvesting of salmon was witnessed at the Port Hardy harvesting and packing operation during the audit process.
It should be noted that Marine Harvest Canada elected not to redact any information (no information excluded due to confidentiality) from the audit report therefore there is no separate 'redacted' version or Confidential Annexes.

12.2 A clear statement on whether or not the audited **unit of certification** has the capability to consistently meet the objectives of the relevant standard(s).

The audit team are of the opinion that the unit of certification has the capability to consistently meet the objectives of the ASC Salmon Standard.

12.3 In cases where Biodiversity Environmental Impact Assessment (BEIA) or Participatory Social Impact Assessment (PSIA) **is available**,

N/A

13 Decision

13.1 Has a certificate been issued? (yes/no)

Yes

13.2 The Eligibility Date (if applicable)	As the certificate validity date.
13.3 Is a separate coc certificate required for the producer? (yes/no)	Yes, at their Port Hardy harvest and packing operation.
13.4 If a certificate has been issued	
13.4.1 The date of issue and date of expiry of the certificate.	Issued 18th August 2017 - Expires 17th August 2020
13.4.2 The scope of the certificate	Marine Harvest Canada - Sonora Point Farm.
13.4.3 Instructions to stakeholders that any complaints or objections to the CAB decision are to be subject to the CAB's complaints procedure. This section shall include information on where to review the procedure and where further information on complaints can be found.	Complaints, objections, comments or submissions of further information may be passed to Acoura Marine Ltd either during the public comment period or afterwards throughout the validity of the certificate. This can be done via the Acoura website (www.Acoura.com), by email (asc@acoura.com) or by mail (Aquaculture Team, Acoura, 6 Redheughs Rigg, Edinburgh, UK). For complaints, please refer to Acoura's website (www.Acoura.com) for the complaints procedure within Acoura's Certification Regulations document. For other objections, comments or submissions, these will be passed on to the Lead Auditor and Aquaculture Director for consideration and decision on any necessary action. Complaints may also be submitted directly to the ASC at certification@asc.aqua.org , PO Box 19107, 3501 DC Utrecht, The Netherlands. ASI's dispute mechanism can be found on their website - www.accreditation-services.com - which includes information on the handling of incidents, complaints and appeals.

14 Surveillance

14.1 Next planned Surveillance	
14.1.1 Planned date	Jul-18
14.1.2 Planned site	Sonora Point
14.2 Next audit type	
14.2.1 Surveillance 1	X
14.2.2 Surveillance 2	
14.2.3 Re-certification	
14.2.4 Other (specify type)	