

# Solar Stewardship Initiative Assurance Manual

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## Version History

Version	Date	Description
1	November 2023	First version issued as approved by the SolarPower Europe and SEUK Board

## About this document

The SSI Assurance Manual has been primarily written for Assessment Bodies (ABs) and Assessors carrying out assessment activities against the SSI Standard. It also describes the roles and responsibilities of all parties involved in the SSI assurance system and aims to provide the transparency that is needed for stakeholders to understand the SSI certification process. This document should be used by SSI Members to understand the assurance process.

This document specifies the processes that apply when:

- Preparing for an assessment against the SSI Standard.
- Verifying conformance of a Site against the requirements of the SSI Standard.
- Taking certification decisions and issuing certificates based on recommendations from independent and approved third-party Assessment Bodies.
- Determining activities to be carried out after initial certification.

This document is aligned with relevant requirements outlined in the ISEAL Assurance Standard Setting Code v2.

**Table of Contents**

**1. The Solar Stewardship Initiative ..... 5**

**2. Roles and Responsibilities ..... 5**

**2.1 SSI Members ..... 5**

**2.2 SSI Secretariat ..... 5**

**2.3 Approved Assessment Bodies and Assessors ..... 6**

**3. SSI Member Application..... 6**

**3.1 Defining the assessment scope ..... 6**

**3.1.1 Processors/Manufacturers..... 6**

**3.1.2 Developers ..... 7**

**3.2 Self-assessment..... 7**

**3.3 Recognition of external standards and schemes..... 7**

**4. Pre-assessment activities..... 7**

**4.1 Determining the assessment technique..... 7**

**4.2 Determining the Assessment duration..... 8**

**4.4 Planning Stakeholder identification and input..... 9**

**4.5 Selecting assessment team..... 9**

**4.5.1 Conflicts of interest..... 9**

**4.5.2 Technical Experts and Translators ..... 9**

**4.5 Confirming the assessment plan ..... 9**

**5. Site assessment process ..... 10**

**5.1 Opening meeting..... 10**

**5.2 Evaluation of Site or Sites..... 10**

**5.2.1 Gathering objective evidence..... 10**

**5.2.2 Review of documents and records..... 10**

**5.2.3 Worker Interviews..... 10**

**5.2.4 Site tour..... 10**

**5.3 Closing meeting..... 11**

**6. Assessment conclusions ..... 11**

**6.1 Conformance ratings ..... 11**

**6.2 Corrective Action Plans ..... 11**

**6.3 Assessment report ..... 12**

**7. Post-assessment activities..... 12**

**7.1 Certification decision..... 12**

**7.2 Public summary report ..... 13**

**8. Surveillance frequency and re-certification ..... 13**



9.	<i>Reporting changes</i> .....	14
10.	<i>Suspension and withdrawal</i> .....	14
11.	<i>Complaints and appeals mechanism</i> .....	14
12.	<i>Annex</i> .....	14
1.	<i>Glossary</i> .....	14
2.	<i>Summary Report Template (tbd)</i> .....	14

## 1. The Solar Stewardship Initiative

The Solar Stewardship Initiative (SSI) was created by Solar Power Europe and Solar Energy UK. It works with manufacturers, developers, installers, and purchasers across the global solar value chain to collaboratively foster responsible production, sourcing, and stewardship of materials. The SSI's mission is to enhance end-to-end transparency, sustainability, and ESG performance across the solar supply chain. Businesses actively involved in the solar value chain can apply to join the SSI and get certified against the SSI Standard.

The SSI's core objectives are to:

- Ensure the energy transition is just, inclusive, and respects people's human rights.
- Establish mechanisms to enhance supply-chain integrity in the global solar industry.
- Enable continuous improvement of ESG performance.
- Build confidence of regulators, customers and business partners in the sustainability of the solar value chain.

## 2. Roles and Responsibilities

### 2.1 SSI Members

The roles and responsibilities of SSI members to be assessed include to:

- Sign and abide by the SSI Principles.
- Communicate and train relevant personnel on the SSI Standard and adjust internal systems to meet the requirements of the Standard.
- Carry out a self-assessment against the requirements of the SSI Standard within six (6) months of signing the SSI Principles and prepare relevant documents, training, and other evidence in preparation for the assessment.
- Provide the chosen SSI approved assurance body (AB) and its assessors with access to relevant Sites, facilities, personnel, documentation, records, and any other relevant information as requested.
- Complete an assessment by an SSI-approved AB within 8-10 months of signing the SSI Principles in order to be certified within one (1) year of signing the SSI Principles.
- Provide access to the SSI Secretariat personnel or the Secretariat's externally appointed agent to relevant Sites, facilities, personnel, documentation, records, and any other relevant information as requested for the purpose of witnessing the initial assessment.
- Inform the chosen SSI-approved AB of any health, safety, security or other relevant information whilst onsite.
- Facilitate interviews with Site management, workers and other stakeholders.
- Support the Assessors with stakeholder identification.
- Identify the root causes of identified non-conformances by defining and implementing corrections and corrective action to address the non-conformances.
- Implement Corrective Action Plans (CAPs), as appropriate, to achieve and maintain conformance with the requirements of the SSI Standard.
- Inform the SSI Secretariat and AB of any changes to their business and their activities, and of any incident that might impact their governance, social or environmental performance
- Cooperate in the resolution of concerns, complaints and appeals, as requested

### 2.2 SSI Secretariat

The roles and responsibilities of the SSI Secretariat include to:

- Develop, review and update the SSI Standard(s) and related assurance documents.
- Develop and maintain cost-effective and user-friendly tools and guidance for the SSI certification process.
- Oversee the quality, integrity and credibility of SSI certification.

- Maintain and update the recognition of external standards and schemes deemed as equivalent.
- Approve independent third-party ABs and Assessors to conduct SSI assessments against the SSI Standard(s).
- Provide member and assessor training and support.
- Make certification decisions based on assessment body recommendations or outsourced decision-making external panel.
- Issue SSI certificates and maintain up-to-date information regarding members' certification status on the SSI platform.

### **2.3 Approved Assessment Bodies and Assessors**

The roles and responsibilities of SSI approved ABs and Assessors in the certification process include to:

- Conduct independent SSI assessments against the SSI Standard(s).
- Verify information included in the self-assessment, including the certification scope.
- Identify any non-conformances which require corrective action by the Member.
- If any critical breach is identified, immediately report the breach to the Member and the SSI Secretariat.
- Provide recommendations to SSI on certification decisions.
- Recognise when assessment objectives are unattainable and report the reasons to the Member under assessment and the SSI Secretariat.
- Prepare assessment reports for the Member and the SSI Secretariat in the agreed format.
- Review Members' progress on CAPs following the completion of an SSI assessment.

The Assessment Body and Assessor Approval Procedure outlines the process for approving ABs, maintaining AB approval and approving Assessors.

## **3. SSI Member Application**

Companies wishing to be certified against the SSI Standard must first become SSI Members. Companies should apply for SSI membership by contacting the SSI Secretariat. As a first step, the SSI Secretariat will conduct a due diligence check which, if successful, will allow the company to formally apply for SSI membership in the relevant category. Once the company has completed the due diligence check, signed the SSI Principles, and paid the associated fees, the company is confirmed as an SSI Member.

The SSI Secretariat and the SSI Member will agree on the appointment of the chosen AB from the list of SSI-approved ABs.

ABs must verify that only Sites belonging to companies that have a valid SSI membership can proceed to the assessment stage. In case of doubt, ABs should contact the SSI Secretariat for confirmation.

### **3.1 Defining the assessment scope**

#### **3.1.1 Processors/Manufacturers**

All Sites and associated activities that are directly related to the purchasing of raw materials and manufacturing of polysilicon, ingots, wafers, cells and modules, and other component manufacturing, and which are under the control of the Member, must be included in the scope of the assessment and evaluated. 'Control' is understood as direct or indirect ownership, direct or indirect power to remove, nominate or appoint at least 50% of the members of the board or management, day-to-day executive management, or any legally recognised concept analogous to these. When certain activities are subcontracted, the AB must evaluate the risks associated with these activities and whether an onsite visit should be included as part of the assessment.



### 3.1.2 Developers

A Standard for Developers is currently being developed and the Assurance Manual will be updated once the Standard for Developers has been published.

### 3.2 Self-assessment

The member must complete the self-assessment to prepare for the initial assessment. Once an AB is selected, the AB should use the information and documentation obtained about the Member during the self-assessment process to evaluate the Member's readiness for assessment but should refrain from advising the Member on how to adapt its systems in areas where deficiencies have been identified.

### 3.3. Recognition of external standards and schemes

The SSI acknowledges that SSI Members may have undergone third-party audits or assessments as part of their involvement in other sustainability standards or certification systems covering operating areas and practices like those covered by the SSI Standard. The SSI recognises as 'equivalent' other sustainability systems, certifications, and externally assured management systems where they match and meet the requirements of the SSI Standard. The list of SSI Recognised Standards and Assurance Frameworks is provided in a separate document and updated regularly. The SSI reserves all rights to recognise all or parts of any other standard and assurance system as equivalent to the SSI Standard.

In the course of an SSI assessment, where there is evidence that a credible independent assessment or third-party certification has identified and documented a level of conformance that is equivalent to the expectations of an SSI Standard criteria, that criteria will be considered met and will not require further verification by the AB.

## 4. Pre-assessment activities

The AB should collect sufficient information about the Site through the application process and member self-assessment to plan the assessment technique, assessment duration, extent of personnel and worker interviews, stakeholder input and to draft a contract with the member. An AB-Member contract must be in place before the assessment activities can begin. The AB-Member contract must specify that:

- The Member is required to make available all documents, records and personnel (including contractors) where the activities and services covered by the documents and records and carried out by the personnel are within the scope of the assessment.
- The Member consents to the SSI Secretariat or an externally appointed agent observing assessments conducted by the AB.

### 4.1 Determining the assessment technique

All assessments must be conducted onsite. However certain activities may be conducted off-site (remotely) if deemed appropriate and in line with Table 1.

**Table 1: Remote activities eligibility check**

Audit Activity	Remote audit eligibility check
<b>Opening and closing meetings</b> The purpose of the opening meeting is to provide an explanation of how the audit activities will be undertaken. The purpose of the closing meeting is to present the assessment conclusions.	Can be conducted remotely.
<b>Site tour</b> The purpose of the Site tour is to observe the physical conditions and current practices in all areas of the Site.	Not eligible.
<b>Document review</b> Review of documents, such as policies, procedures, records, payslips, employment contracts, etc.	Can be conducted remotely using: → Remote tools (e.g., screen sharing.)

	→ Digital platforms to share self-assessment details and documentation.
<b>Management interviews</b> Interviews with senior management and management.	Can be conducted remotely.
<b>Worker interviews</b> Confidential interviews with a representative sample of the Member's workforce, both individually and in groups.	Not eligible.
<b>Stakeholder input</b> Written or in-person feedback from individual(s) or group(s) that have an interest in any activity of the Site.	Can be conducted remotely if travel or time restrictions apply.

#### 4.2 Determining the Assessment duration

There are factors to consider when determining the assessment duration including:

- Number of individual and group interviews to be conducted (see Table 3.)
- Existing certifications of the Site and any external equivalent recognition standards (see section Recognition of External Standards and Schemes.)
- Assessment scope (see section Defining the Assessment Scope.)
- Assessment technique (see Table 1.)
- Number of Stakeholder interviews (see 4.4 Planning Stakeholder identification and input)

The estimated assessment durations are provided as guidelines in Table 2 and are based on the number of employees at the Site. Should the assessment duration fall below the guidance, an explanation/rationale must be given for the discrepancy.

**Table 2: Guidance on assessment duration**

Number of employees on site	Assessment duration (estimated resource days)
1-100	2.5 – 3
101-500	3 - 4.5
501-1000	5 – 6.5
1001 – 2000	7 - 8.5
2001 – 5000	9 - 11
>5001	11+

#### 4.3 Determining interview sample size

**Table 3: Interview sample size for initial and recertification-audit\***

No. of workers excl. management	Individual Interviews	Group Interviews	Total workers Interviewed	Worker Files/Time and Wage Records	Effective Time Spent on Interviews
1-100	6 or total workers if < 5	1 group of 4	10	10	2.5 hours
101-500	6	4 groups of 5	26	26	6 hours
501-1000	12	6 groups of 5	42	42	8.5 hours
1001-2000	20	8 groups of 4	52	52	12.5 hours
2000+	22	8 groups of 5	62	62	14 hours

\*Source: Sedex Members Ethical Trade Audit (SMETA) Best Practice Guidance

In addition to the direct worker interviews as per guidelines listed in Table 3 above, the assessors should also interview contracted workers.

Should the sample size for interviews be lower, an explanation/rationale must be given in the assessment report.



#### **4.4 Planning Stakeholder identification and input**

At least four (4) weeks before the start of the assessment, a list of affected stakeholders must be compiled in consultation with the member. The AB must have a mechanism that allows stakeholder comments to be submitted at any time during the assessment and during the validity of a certificate and which describes how comments received will be taken into consideration. Stakeholders should be invited to provide input in writing. They may also be identified for interviews in which case dates for interviews must be confirmed.

#### **4.5 Selecting the assessment team**

Assessment team members must:

- Be free of conflict of interest.
- Be comparable to that of the Member in terms of its gender composition and strive towards cultural diversity.
- Include at least two Assessors including the Lead Assessor.
- Not have audited the same company for a maximum of three (3) consecutive assessments.
- Have the required language skills.

##### **4.5.1 Conflicts of interest**

Lead Assessors and Assessors must be independent and free of conflicts of interest in relation to the Member being evaluated. The main categories of conflict of interests are generally considered to be self-interest, self-review, advocacy, familiarity and intimidation.

If perceived or actual conflicts of interest might exist, it is the responsibility of the Assessor to disclose those prior to accepting an assessment. When in doubt about whether an existing relationship may pose a conflict of interest, the Assessor or AB should initiate disclosure and discussion with SSI at the earliest opportunity.

##### **4.5.2 Technical Experts and Translators**

Technical experts and interpreters/translators must be independent from the Member. When they are used, this must be agreed with the Member in advance.

The AB must ensure that technical expert's role is limited to advising the assessment team on issues related to the expert's area of expertise. Technical experts and interpreters/translators must not participate actively in the assessment unless they are specifically qualified by the AB as assessors for that purpose.

##### **4.5.3 Confirming the assessment plan**

The assessment plan should be drafted and shared with the Member at least two weeks before the start of the assessment and must include:

- Assessment objectives.
- Dates, places and times of the onsite visit.
- Meetings to be held with Site management.
- Number and types of worker interviews to be held.
- Dates, places and times of interviews with external stakeholders (if applicable).
- Time for document review.
- Dates and time for opening and closing meetings.

The AB must provide the SSI Secretariat and Member with the name and, when requested, background information on each member of the assessment team, with sufficient time for the Member to object to the appointment of any particular assessor, interpreter/translator or technical expert.

## **5. Site assessment process**

### **5.1 Opening meeting**

All assessments must begin with an opening meeting during which the assessment team must confirm with the Site:

- Participants and roles.
- The purpose of the assessment.
- The assessment plan, including how the assessment activities will be undertaken and any visits to other Sites.
- The access required and the type of information needed.
- Confidentiality of the information shared during the assessment.

### **5.2 Evaluation of Site or Sites**

Auditors are required to undertake the evaluation of sites in accordance with ISO 19011:2018 to assess the company's management system, taking into consideration the significance as well as the quality and quantity of the evidence available.

#### **5.2.1 Gathering objective evidence**

The objective of the assessment is to evaluate the extent to which the Site meets SSI Standard requirements and expectations on ESG performance and on traceability (if applicable). A risk-based assessment approach should be used for sample selection and should include document reviews, interviews, and a Site tour in order to cross-check information and evidence received. Assessors are also expected to take an evidence-based approach to determining conformance with the requirements of the SSI Standard and must not provide advice to the Site on how to meet the requirements of the Standard.

#### **5.2.2 Review of documents and records**

The purpose of the document review is to obtain evidence and to determine whether key documents, such as procedures, guidelines, handbooks are available and adequate given the size of the Site. Records reviewed may include e.g.: timecards, payrolls, wage slips, personnel records, job descriptions, environmental disclosures, waste records etc.

#### **5.2.3 Worker Interviews**

The purpose of the interviews is to cross-check information collected during document and record reviews, management interviews, visual observations, and review of stakeholder input. Table 3 provides a breakdown of individual and group interviews to be conducted based on the size of the Site. The selection of workers for interview must be that of the Assessment team and should be representative of the workforce in terms of shift patterns, worker types and gender. The interview selection should consider shift patterns to minimise disruption at the Site. Worker interviews should include direct employees as well as contracted workers.

Interviews must be done in a setting where the workers feel comfortable. To safeguard confidentiality, management must not be present during worker interviews (both individual and group interviews). All information obtained must remain confidential to the workers involved and any findings should only be discussed with management in a general manner.

#### **5.2.4 Site tour**

The purpose Site tour is to observe the physical conditions and current practices in all areas of the Site. The Assessor and assessment team should be able to walk through the entire Site and be able to conduct interviews and take photographs, if agreed in advance.

### 5.3 Closing meeting

The assessment team must conduct a closing meeting at the conclusion of the assessment with the Member's /Site's representative(s) to:

- Highlight positive practices.
- Confirm actions the Site may have to complete and the relevant timeframes before certification can be granted and likely overall score (see Table 6).
- Confirm that the Site is certified only when this is confirmed by the SSI and that it cannot make any claims concerning certification until such time.
- Confirm non-conformances that have been identified during the assessment and their likely categorisation (subject to approval by the SSI), timeframes to address these non-conformances, and the process for verifying their closure.
- Confirm that the Site/Member must inform the SSI of any significant future changes that could affect its status as a certified Member.

A documented summary report may also be shared with the Member during the closing meeting or shortly thereafter. The summary report will also be shared with the SSI Secretariat.

## 6. Assessment conclusions

### 6.1 Conformance ratings

Upon completion of the assessment, the assessment team must compile the list of non-conformances and highlight positive practices and conformances with the Site during the closing meeting.

**Note:** any attempt to prevent the course of the assessment **through fraud, coercion, deception or interference will be considered a critical breach** and must be immediately reported to the SSI Secretariat. The assessment should be suspended, pending an investigation.

Table 4: Conformance Ratings & Description

Conformance Ratings	Description
Major non-conformance	<ul style="list-style-type: none"> <li>→ A systemic failure or total lack of required controls by the Site.</li> <li>→ A total absence of implementation of the requirement</li> <li>→ A breach of law.</li> <li>→ A group of related, repetitive or persistent minor non-conformances indicating inadequate implementation.</li> </ul>
Minor non-conformance	<ul style="list-style-type: none"> <li>→ An isolated lapse of performance, or control.</li> <li>→ A breach which represents low risk to workers/those on Site.</li> <li>→ A policy issue where there is no evidence of material breach.</li> </ul>
Not applicable	<ul style="list-style-type: none"> <li>→ A requirement which cannot be implemented by a Site due to the nature of its operations.</li> </ul>
Conformance	<ul style="list-style-type: none"> <li>→ Systems, policies, procedures and processes perform in a manner that is in line with the intent of the SSI Standard.</li> </ul>

### 6.2 Corrective Action Plans

All non-conformances require the Site to prepare and implement appropriate CAPs. Appropriately qualified and/or experienced personnel should be involved in the development of CAPs, commensurate with the nature

and severity of the non-conformance. The AB and Assessors cannot assist in the development of a Site's CAPs but should evaluate them to determine whether the CAPs are likely to address the non-conformance.

### 6.3 Assessment report

The assessment report of the Site consists of the Summary Report and completed Checklist as drafted by the AB. Together they should give a full, balanced, and accurate description of the Site, its workers, current systems in place and evidence examined during the assessment as well as provide the outcome of the assessment and AB recommendation on certification. The Summary Report and completed Checklist should be written in English in clear and unambiguous language. If agreed upon with the Site, these materials may be written in another language in addition.

The SSI Secretariat will review the Summary Report, Checklist, and AB recommendation on certification and may request further information or clarification to the Assessment team in which case these should be promptly responded to.

The Summary Report and completed Checklist should be sent to the SSI within four (4) weeks of the closing meeting unless major non-conformances still need to be addressed by the Site in which case the SSI must be kept informed of the expected timeline.

## 7. Post-assessment activities

### 7.1 Certification decision

Once the Summary Report, Checklist and AB recommendation on certification have been reviewed by the SSI Secretariat, the SSI Secretariat will make a decision to certify the Member if:

- Major non-conformances have been addressed/closed or downgraded to minor non-conformances.
- No more than 10 minor non-conformances have been raised which have adequate CAPs in place.

Table 5: CAP, timeline, outcome and score

Conformance Ratings	Corrective Action Plan	Timeline	Outcome & Score
Major non-conformance	Root cause Analysis and Corrective Actions to be developed by the Member and sent to the AB.	Corrective Action plan received, reviewed and approved by the AB. A follow-up onsite assessment (or remote depending on the nature of the non-conformance) will usually be required to verify implementation and effectiveness of the Corrective Actions.	No certification until majors non-conformances closed or downgraded to minor non-conformance.
Minor non-conformance	Corrective Actions to be developed by the Member and sent to the AB.	Corrective Action plan received by the AB. Review and effectiveness of Corrective Actions evaluated at subsequent Assessment.	Between 6-10 minor non-conformances = Certification (Certified Bronze.) 5 minors or less= Certification (Certified Silver.)
Conformance	None	None	No minor non-conformances = Certification (Certified Gold.)

The SSI Secretariat will issue a certificate to the Site with a grade assigned and its status changed to Certified Site on the SSI website. The Site will also be informed of its Surveillance Frequency (see section 8 below) based on this grade (see Table 6) and information will be shared on Claims and Labelling requirements related to their new status as a certified Member.

## 7.2 Public summary report

The SSI will prepare a public summary report based on basic information about the certified Site/Member which will be published with the announcement of certification on the SSI website. The summary report will contain a summary description of the Site and outcome of the assessment including grade. Positive and conforming aspects will also be included.

### 1. Surveillance frequency and re-certification

The surveillance frequency will be determined based on the outcome of the initial assessment and grade assigned.

The SSI Secretariat will notify certified members three (3) months before an assessment is due so that arrangements can be made to schedule surveillance and re-certification assessments.

Table 6: Corrective Action Plan, Timeline and Outcome

Year 0 – initial	Year 1 - surveillance	Year 2 - surveillance	Year 3 – re-certification
Gold	No assessment.	No assessment.	Re-certification – same as initial assessment.
Silver	Surveillance assessment focused on implementation of corrective actions.  No grade change.	(Optional) Surveillance assessment focused on corrective actions and sample of Standard requirements.  Grade may be changed.	Re-certification – same as initial assessment.
Bronze	Surveillance assessment focused on implementation of corrective actions.  No grade change.	(Optional) Surveillance assessment focused on corrective actions and sample of Standard requirements.  Grade may be changed.	Re-certification – same as initial assessment.

Surveillance assessments should focus on actions taken by the Site, and progress made, towards addressing non-conformances.

The year 2 surveillance assessment may result in a grade change and should as well sample SSI Standard requirements randomly selected by the Lead Assessor. The randomly selected requirements should aim to verify that no regression in performance has taken place over the course of the year. The scope of the Year 2 surveillance assessments is determined using a risk-based approach that takes into account the following factors:

- Level of performance at the initial assessment.
- Type and complexity of operations.
- Conditions within the sector (e.g. if issues have arisen at other Sites in the same region).
- Regional context (e.g. if regulations change).
- Whether any concerns have been raised by interested parties or affected stakeholders in the period since the last assessment.

- Any material changes in the Site's structure or operations.

A re-certification assessment is required at the end of the three-year cycle, irrespective of grade. The re-certification assessment should follow the same procedures as the initial assessment.

## **2. Reporting changes**

Certified members must inform the SSI Secretariat if and when there are changes to the Site's business, such as:

- Organisational restructuring.
- Divestments, acquisitions, or changes to the equity shares of the business.
- Changes to the Site's activities, products and processes.
- Changes to the locations and distribution of the Site's facilities.
- External influences such as changes in the statutory environment, regulations and/or other stakeholder expectations and commitments that affect the Site.

The SSI Secretariat will make a decision as to any necessary action(s).

## **3. Suspension and withdrawal**

A Site's certification will be suspended if:

- There is inadequate progress towards closing identified non-conformances within the deadlines specified.
- The Member does not agree to a surveillance assessment or does not provide requested information to allow verification.

The suspension period will usually be for a maximum period of six (6) months during which the Member cannot promote nor claim to be certified. The SSI Secretariat may publicize the suspension to interested parties.

A Site's certification will be withdrawn if:

- It is concluded through an investigation that an SSI certified Member has breached the SSI Principles.
- Further to a suspension period no progress has been made to address the specific issue.

## **4. Complaints and appeals mechanism**

The SSI has an independent Complaints & Appeals Mechanism to process concerns that may arise from SSI Members, SSI Assessors, stakeholders and the public regarding the initiative, the SSI Assurance Process, ABs and Assessors, or SSI claims and logo use. The mechanism aims to be aligned with the criteria laid out in the UN Guiding Principles on Business and Human Rights for effectiveness of non-judicial grievance mechanisms. The SSI aims to investigate Complaints & Appeals in a fair, balanced, and transparent manner and to resolve the issues efficiently and effectively. For more information, see the Solar Stewardship Initiative Complaints & Appeals mechanism.

## **5. Annexes**

1. Glossary
2. Summary Report Template