

# EFICOR

## Mid-Term Audit – Summary Report 2021/11/01

### 1. General information

#### 1.1 Organisation

Type	Mandates	Verified	
<input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	
<b>Head office location</b>	New Delhi		
<b>Total number of programmes</b>	26	<b>Total number of staff</b>	89

#### 1.2 Audit team

<b>Lead auditor</b>	Catherine Blunt
<b>Second auditor</b>	Paul Stacey
<b>Third auditor</b>	
<b>Observer</b>	
<b>Expert</b>	
<b>Witness / other</b>	

#### 1.3 Scope of the audit

<b>CHS Verification Scheme</b>	Certification
<b>Audit cycle</b>	1 <sup>st</sup> audit cycle
<b>Phase of the audit</b>	Mid-Term Audit
<b>Extraordinary or other type of audit</b>	

#### 1.4 Sampling\*

Randomly sampled country project sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
Nyaya Kendra, Delhi (Sustained Freedom)	Yes		The Nyandra Kendra project was included in the audit sample to meet the HQAI random quota requirements. It also provides geographic and project size diversity in the sample as it is small and located in the Eastern Zone of India. Nyandra Kendra has good internet access to field staff.	Remote – some document review and staff interview.
Unnati MCH Project (Bolangir)	No	Sustainable Development Project (Bihar)	The Unnati MCH project was rejected due to poor internet connection with field staff.  The Bihar project was selected to fulfil the project scope (development and	Remote – some document review and

			advocacy). It has good internet access to staff. Community members have smart phones which enabled the auditors to interview them directly.	staff interview.
Sustainable Income Generation and Livelihood Support for People Living with HIV and Aids(PLHA) - Patna, Bihar		Restoring Livelihood and Ensuring Child Safety (Tamil Nadu)	PLHA's project was rejected due to the very small project size which is not reflective of EFICOR's work more broadly.  Restoring Livelihood and Ensuring Child Safety project is of medium size and was selected as the project location has good internet access with communities and staff. It includes geographic diversity in the sample (located in the Southern Zone of India) and fulfils the scope of the audit (it is a development project).	Remote - in depth document review, interviews with communities and staff.
Mawasi Tribal Development Project -Satna and Chitrakoot Districts		Covid Second Wave Response – Rajasthan and Bihar	Mawasi was not selected due to the poor internet connection with field staff and communities.  Covid Second Wave Response is a large, humanitarian project and reflects the majority of work undertaken by EFICOR last year. The sites chosen have good internet access to staff and communities.	Remote - in depth document review, interviews with communities and staff.

**Any other sampling performed for this audit:** A vertical cross-section of EFICOR staff was sampled for interview during the audit. Staff included those in senior management positions at Head Office and those who had responsibility for managing projects. At the field level, staff chosen ranged from those co-ordinating the project to those working directly with communities in the field.

**Sampling risk:** There is high confidence that the sample of project sites selected represents the diversity of EFICOR's work conducted during the pandemic. However, there is a risk that there is a bias in the selection of project sites toward those operating in better resourced areas of India as, due to COVID 19, all interviews were conducted remotely and hence required excellent internet access. Similarly, community members were interviewed individually and had to have a mobile phone, thereby biasing the sample of community members interviewed toward those with greater means and consequently reducing the sample size. This can be overcome in future audits which do not have to be conducted remotely and can be held in person with a broader cohort of communities.

*\*It is important to note that the audit findings are based on a sample of an organisation's country programmes, its documentation and observation. Findings are analysed to determine an organisation's systematic approach and application of all aspects of the CHS across different contexts and ways of working.*

## 2. Activities undertaken by the audit team

### 2.1 Locations Assessed

Locations	Dates	Onsite or remote
Tamil Nadu, Southern India	9 <sup>th</sup> – 10 <sup>th</sup> September 2021	Remote
Bihar, Eastern India	13 <sup>th</sup> – 14 <sup>th</sup> September 2021	Remote
Rajasthan, North Western India	14 <sup>th</sup> – 15 <sup>th</sup> September 2021	Remote

## 2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
<b>Head Office</b>			
Management	1	6	Remote
Staff	2	1	Remote
<b>Country Programme / Project Office(s)</b>			
Management 4		4	Remote
Staff 10	1	9	Remote
<b>Total number of interviewees</b>	<b>4</b>	<b>20</b>	

## 2.3 Consultations with communities

Type of group and location (all consultations were conducted individually).	Number of participants		Onsite or remote
	Female	Male	
Restoring Livelihood and Ensuring Child Safety Tamil Nadu – child member of Child Protection Committee, member of Citizens Forum, community members.	3	2	Remote
Covid Second Wave Response Bihar – widow, child with disability, member of village leadership committee, community members.	3	1	Remote
Covid Second Wave Response Rajasthan – member of village leadership committee, female with disability, migrant workers, community members.	3	2	Remote
<b>Total number of participants</b>	<b>9</b>	<b>5</b>	

## 2.4 Opening meeting

<b>Date</b>	2021/09/06
<b>Location</b>	New Delhi (Remote)
<b>Number of participants</b>	28
<b>Any substantive issues arising</b>	None

## 2.5 Closing meeting

<b>Date</b>	2021/09/17
<b>Location</b>	New Delhi (Remote)
<b>Number of participants</b>	24
<b>Any substantive issues arising</b>	None

## 2.6 Programme / Project site(s)

**Briefing – none required. Field staff at Opening meeting.**

**De-briefing – none required. Field staff at closing meeting.**

### 3. Background information on the organisation

#### 3.1 General information

The Evangelical Fellowship of India Commission on Relief (EFICOR) is a national Christian organisation engaged in relief, development, advocacy and capacity building. It serves the poor, the socially excluded and the marginalised irrespective of caste, creed or religion, who are victims of poverty, injustice and disaster.

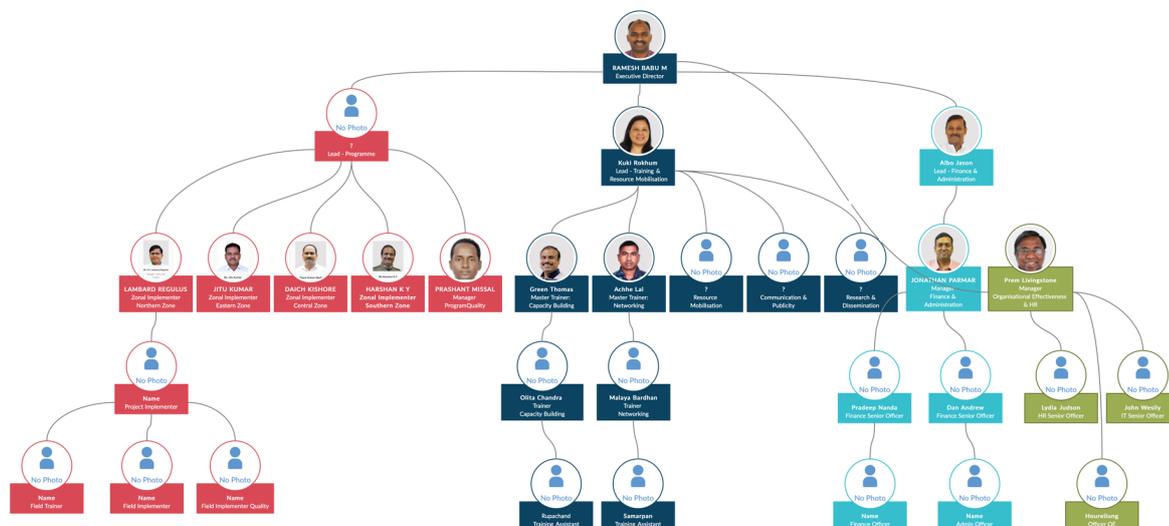
At the Mid-Term Audit (MTA), EFICOR has a new Strategic Plan (2021 - 2026) which outlines the organisation’s three goals and ten strategic objectives. The goals are mapped against the United Nations Sustainability Development Goals (SDGs) and include: 1) Improved community resilience and quality of life of the vulnerable and needy toward sustainable development; 2) Informed, equipped and influenced individuals and organisations/groups engaged with the vulnerable communities toward a better life; and 3) Diversified resource opportunities for the continuity of the EFICOR organisational work among communities.

The Strategic Objectives in the Strategic Plan are Food Security and Livelihood, Public Health, Humanitarian Response and Disaster Risk Management, Sustainable Environment, Anti Human Trafficking, Urban Poverty, Peace Building, Capacity Building, Research and Resource Mobilisation. At the MTA, Government regulatory changes have occurred that determine how foreign funding must be used. This has affected how EFICOR allocates costs for administration and programme implementation. It has resulted in a major restructure within the organisation and eliminated EFICOR’s use of partners to implement some of its programmes.

India was severely affected by a second wave of COVID – 19 and in May 2021 was the epicentre of the global virus. Half of EFICOR staff was affected by the virus and one long time staff member died. While it has been in a humanitarian crisis itself, the organisation has continued to adapt and redesign programmes to meet the newly emerging needs of the communities it works with.

#### 3.2 Governance and management structure

EFICOR has not had a Director of Programmes (now called the ‘Lead Programmes’) since the Maintenance Audit (MA). The former Director of Programmes is now the Executive Director and recruitment is underway for his former position. EFICOR’s governance and management structure is in the process of restructuring to meet the requirements of new foreign funding laws. Formerly the organisation had three programme managers and one manager responsible for Emergency Relief and Disaster Risk Reduction (DRR). All were based in New Delhi. Now all four managers are called ‘Zonal Implementers’, corresponding to Indian Eastern, Central, Northern and Central Zones. All will now be responsible for Emergency Relief and DRR and as a consequence of the new laws, will be located in the regions for which they are responsible. The structure for Finance and Administration and the manager position for Program Quality remains the same. The organogram is below.



#### 3.3 Internal quality

The organisation’s quality assurance mechanisms and processes remain the same as at the Maintenance Audit (MA) with some changes and additions due to the organisation’s use of remote

<b>assurance mechanisms and risk management</b>	technology necessitated by the pandemic. In the absence of the Lead Programmes, the Executive Director has continued his role of overseeing managers who usually have a direct line of sight to the field. Monitoring visits to the field by managers were formerly held quarterly, but during the last year have been conducted remotely. A comprehensive new 'Implementation Learning Tool' has been developed for managers to use for this purpose. It includes monitoring of the programme's Complaints Handling Response Mechanism (CHRM), Protection and Safeguarding risks and overall compliance with the Core Humanitarian Standard. The Program Quality manager continues to take a quality assurance role on project proposals and reports.
<b>3.4 Work with partner organisations</b>	The new financial regulations have barred Non-Government Organisations from utilising funds received from foreign donors for implementation of programmes by local partners. This has resulted either in the closure of programmes EFICOR implemented through partners or the incorporation of the partner and its staff into EFICOR. The new laws do not apply to funds raised locally. In its new Strategic Plan, EFICOR aims to mobilise resources locally to expand the organisation's resource base and re-establish local partnerships. This had not occurred at the time of the MTA.

## 4. Overall performance of the organisation

<b>4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation</b>	EFICOR has had a difficult two years as the organisation and its staff has struggled to cope with a humanitarian crisis and the effects of COVID 19, while adapting and continuing to provide programmes to the communities in which it works. In addition, the organisation has not had a Program Lead for two years. However there has been very little turnover of management staff in this time which creates resiliency in the organisation. EFICOR has sound internal governance structures which have replaced face to face meeting with remote technologies. The organisation continues to prioritise these internal meetings as a means of quality assurance. However, the regular meetings on the CHS and the requirement to regularly complete the CHS Tracker may not provide staff with the specificity needed to continually improve the implementation of the Standard. The lack of updated key quality assurance tools such as the Program and Relief Manuals to include the CHRM Policies reduces the effectiveness of EFICOR's internal quality assurance system.
<b>4.2 Overall performance of how the organisation applies the CHS across its work</b>	<p>EFICOR continues in its commitment to implement the CHS across humanitarian and development programmes and has committed significant organisational resources to achieve the improvements it has made over the last three years. These include the allocation of a manager who is responsible for CHS implementation and compliance. This is achieved through regular team meetings and trainings on the CHS, the inclusion of a budget line in projects for CHS compliance and the development and use of tools which keep the CHS front of mind for staff. The organisation is now fully compliant with the CHS on providing appropriate and relevant humanitarian and development responses; ensuring they are effective and timely and managing its resources responsibly for their intended purpose. New policy developments include: an updated CHRM policy to include appeals and a timeline for handling complaints; and a new Evaluation and Learning Policy. Developments in programme monitoring include a new complaints tracker and an Implementation Learning Tool (ILT). The organisation has systematised its training on Protection from Sexual Exploitation, Abuse and Harassment (PSEAH) and attention is given to ensuring it occurs regularly. Staff understand how the sensitive complaints process work and communities are aware of the behaviours expected of staff regarding PSEAH. These changes mean that non-conformities relating to key actions of complaints handling, and which cover consultation, communication with communities, and the management of complaints are addressed and closed at the MTA.</p> <p>Issues that require EFICOR's attention relate to the organisational approach to PSEAH, the practice of risk assessments and information provided to communities. The Complaints Policy lacks adequate guidance on consultation and referral and issues remain with accessing the complaints mechanism. The organisation has yet to include reference to the CHS in partnership agreements and staff feedback processes are not consistently available across the organisation. The Well Being and Data Protection Policies are still in draft form. Learning is not shared with communities and does not occur as a result of feedback and complaints.</p>

The main weaknesses in EFICOR relate to complaints, communication and feedback. The organisation has no policy on sharing information with communities and does not systematically collect feedback about programme quality and effectiveness from communities. In addition, EFICOR has not yet fully integrated complaints handling into its organisational culture.

#### 4.3 PSEA

EFICOR is effective in PSEA because the organisation has policies and guidance, and identifies and acts upon, potential and actual unintended effects in a timely and systematic manner. It also manages complaints in a timely, fair and appropriate manner and has a code of conduct in place. Its effectiveness in PSEA is reduced by the lack of an information policy, provision of information about the organisation to communities and its culture of complaints handling.

#### 4.4 Localisation

EFICOR excels in localisation. It is effective in this area because it ensures that programmes build on local capacities and uses risk assessments developed locally to guide activities. It has policies and strategies to prevent negative effects and it ensures its humanitarian and development responses complement local and national authorities.

#### 4.5 Gender and diversity

EFICOR is most effective in gender and diversity because it enables the development of local leadership and organisations in their capacity as first responders, ensuring that women and vulnerable groups are equally represented. It also designs programmes understanding the vulnerabilities of these groups. Its policies on inclusion take into account the diversity of communities and communicates appropriately with them. EFICOR's effectiveness in this area is reduced as it does not systematically obtain feedback from communities nor pay particular attention to the diversity of those giving feedback.

### 4.6 Organisational performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
<b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant	At the MTA, EFICOR's development and humanitarian programmes continue to be appropriate and relevant. The organisation's new Theory of Change translates to projects identifying and selecting vulnerable groups as programme participants. EFICOR has developed an Implementation Learning Tool (ILT) which includes ongoing risk assessment for each project and potential programme changes. In COVID times and faced with lockdown restrictions, EFICOR has developed remote monitoring of communities to gain knowledge of changing contexts from different field level stakeholders. This knowledge feeds into relevant levels of the organisation and affects programme design. EFICOR commissioned research into the effects of COVID on migrant workers and adapted assistance to this and other COVID related challenges.	Community members said that EFICOR provides support with different and relevant resources and that with the assistance of the Village Development Committees, these were distributed fairly and impartially. Resources were supported with relevant and appropriate training, for example in the use of pesticide sprayers, organic farming methods and marketing. Children provided examples of how programmes adapted to changing contexts e.g. following the closure of schools due to COVID, the Children's parliament had adapted to increasing awareness of children's rights and reducing child labour in communities.	3
<b>Commitment 2:</b> Humanitarian	EFICOR programmes continue to be designed according to the priorities identified in its updated Strategic Directions and are based on EFICOR's areas of expertise and experience. It	Community members report that they contribute to EFICOR programmes and who will benefit from them.	3.1

<p>response is effective and timely</p>	<p>has policies for monitoring and evaluation and continues to use evidence from these to adapt and improve its programmes and projects. A newly devised Theory of Change assists EFICOR to integrate its strategic goals with programme outcomes. EFICOR decision-making was timely during the pandemic, utilising its exemplary links with communities, government, non-government organisations and representative bodies to develop and implement realistic and safe programmes. EFICOR's strength in working with communities to better access available government entitlements continues and is enhanced at the MTA through a greater emphasis on the role of Village Development Committees. The organisation devised a comprehensive monitoring and learning tool for use remotely during the pandemic. EFICOR continues to use relevant sectoral technical standards and good practice for its programme management, needs assessment, monitoring and evaluation tools.</p>	<p>EFICOR is quick to change assistance received if it is not working for the individuals or the community. Children said they felt particularly safe as there are child safeguarding posters in the village. As part of the Children's Parliament, the community receives training on issues of importance to them e.g., child marriage. Communities said that EFICOR responded quickly during the pandemic, ensuring that the government held vaccination clinics in their village and providing them with safety equipment and education programmes. Community members said that EFICOR informed them about government programmes they could access.</p>	
<p><b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects</p>	<p>At the MTA, EFICOR continues to have organisational policies, strategies and guidance to build and utilise local capacity and this is evident across development and relief programmes. It has addressed previous policy and some implementation weaknesses in Protection from Sexual Exploitation and Abuse (PSEA). Staff and communities display a systematic understanding of EFICOR's responsibilities in these areas. Safeguarding risk analysis and monitoring are now included in all programme monitoring. However, the organisation does not have a PSEA focal point with a clear responsibility for ensuring PSEAH policies and processes are enacted, monitored and learnt from. Safeguarding risk analysis focusses almost exclusively on children and does not systematically consider the risks of SEAH by staff on communities. EFICOR has a draft policy on the protection of personal information collected from communities which requires board approval. These are issues that deserve attention by EFICOR.</p>	<p>Community members said that EFICOR livelihood programmes had helped them transition from being unemployed migrant workers to small businesspeople that could make an income from their block of land. Women on the Village Development Committees spoke of their increased self-esteem and confidence derived from their responsibilities and the training received from EFICOR. Children understood their rights and that their parliament 'had power' in the village. Communities are divided on whether they knew when EFICOR programmes were finishing but felt confident they could continue functioning effectively as a village committee without EFICOR's involvement.</p>	<p>3</p>
<p><b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback</p>	<p>EFICOR continues to have a high level of participation and engagement with communities and their representative village committees in its programmes. Communication remains mainly oral, using the phone or mega-phones on cars as communication tools during the pandemic. The organisation has addressed the IA minor corrective actions on communities understanding of the behaviour they can expect of staff. This has occurred through staff explanations to villagers and the continued use of translated posters using pictographs showing staff 'dos and don'ts'.</p>	<p>Representative village committees report that half their members are women, including vulnerable groups such as widows and people with a disability. Communities report a consistently high level of understanding of behaviours they can expect from EFICOR staff. They are continually reminded of these by staff and have posters in the village to remind them. They say that staff are always asking their views on the</p>	<p>2.3</p>

	<p>However, communities' knowledge about EFICOR as an organisation is poor and this deserves attention by EFICOR. It was observed at the IA that EFICOR did not have an Information Policy, nor did it collect disaggregated feedback on communities' satisfaction with the assistance received. These have not been addressed at the MTA and are now weaknesses that must be addressed.</p>	<p>EFICOR programmes. However, they are not clear on the type of organisation that EFICOR is.</p>	
<p><b>Commitment 5:</b> Complaints are welcomed and addressed</p>	<p>At the MTA, EFICOR has addressed previous policy and implementation weaknesses with systems and processes to ensure communities are consulted on the design, implementation, and monitoring of complaints, that complaints are welcomed and addressed, and that complaints are managed in a timely, fair, and appropriate manner. Communities are consulted on how they want to make complaints, with most opting to inform their field manager or the Village Development Committee. EFICOR has developed and implemented a complaints tracker which registers programmatic complaints, actions taken, timeframes and referrals. The organisation communicates well at field level both visually and verbally to communities about the scope of complaints, providing contact details with posters in local languages. Translated posters also explain the expected character of staff and PSEAH commitments are well understood by the community. Issues that require attention by EFICOR include inclusion of referrals in its Complaints Policy, greater incorporation of complaints into EFICOR's culture and ensuring the Complaints Hotline caters for India's linguistic diversity.</p>	<p>Communities report that EFICOR explains how complaints can be made and what they can complain about. They understand that EFICOR staff must not ask for money, favours or be alone with children and what to do if that occurs. They mostly prefer to make complaints to their field office manager or through their Village Development Committee.</p>	<p>2.3</p>
<p><b>Commitment 6:</b> Humanitarian response is coordinated and complementary</p>	<p>At the MTA, EFICOR continues to have systematic commitment to collaboration and coordination with government and humanitarian networks. This is expressed in core values and the new Strategic Direction, and Theory of Change, which align with national priorities and the Sustainable Development Goals. EFICOR continues to demonstrate exemplary coordination with local government institutions and access to government services by communities. Joint initiatives with expert groups and consortiums for COVID programmes have been developed. EFICOR continues to facilitate the distribution of resources to communities through local groups and in COVID times has developed relations with banks to ensure coordination for cash transfer programmes. Although EFICOR has temporarily discontinued working with partners, future agreements must include reference to the CHS.</p>	<p>Communities report that EFICOR is the sole NGO operating in their village area, that EFICOR work was not duplicated, and that the organisation provides access to and compliments the work of local government institutions. Village Development Committee members say that EFICOR supports them to undertake their roles and responsibilities, and supports them by strengthening their capacity.</p>	<p>3</p>

<b>Commitment 7:</b> Humanitarian actors continuously learn and improve	At the MTA, EFICOR has developed a new Monitoring, Evaluation and Learning Policy which specifically addresses learning from evaluations. Its Implementation Learning Tool includes suggested programme changes. The organisation has conducted a meta evaluation of evaluations and compiled the learning accordingly. However, feedback and complaints do not contribute to innovation and programme changes and learning is not shared with communities. These issues deserve attention by EFICOR.	Communities report that programmes have improved over the time they have been involved in them. EFICOR staff do not share learning with them.	2.7
<b>Commitment 8:</b> Staff are supported to do their job effectively, and are treated fairly and equitably	EFICOR continues to have appropriate human resource policies and practices and there is no change to these, apart from devising a policy enabling working from home necessitated by the pandemic. EFICOR has addressed weaknesses identified at the IA regarding the lack of staff training in PSEAH which has been conducted remotely in the last six months. Staff now have a thorough understanding of the EFICOR Code of Conduct, Child Safeguarding and Sexual Harassment policies. However, EFICOR's staff Mental Health and Well-Being Policy is in draft form awaiting staff consultation and board approval. Field staff do not all receive annual individual performance appraisals as specified in its Human Resource Manual. These are issues requiring EFICOR's attention.	Community members say that EFICOR staff are well trained, know their jobs and treat them with respect. They say that although EFICOR staff are responsible for a large number of villages, they are accessible and available by phone if needed.	2.8
<b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose	At the MTA, EFICOR continues to have strong financial management systems in place to ensure resources are managed and used responsibly for their intended purpose, including regular and transparent internal audits, the use of external auditors, systems to assess and report risk and monitors expenditure against budgets, and programme budgets now include an allocation to cover the cost of monitoring CHS compliance. EFICOR's new Strategic Direction, and Theory of Change, include principles of judicious care of the environment. The introduction of the Indian Foreign Contribution Regulation Act (FCRA) has meant significant changes to how EFICOR manages its resources and has resulted in a reduction of partners and an organisational restructure.	Communities say that EFICOR and Village Development Committees monitor the use of any distributed resources and checks if and how they are being used. They say that EFICOR uses its resources well with no waste, and that training by EFICOR has improved the local use of resources with, for example, increasing yield with effective farming techniques.	3

\* *Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each Commitment, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0*

## 5. Summary of non-conformities

Corrective Action Requests (CAR)*	Type	Resolution due date	Date closed out
2021-4.4: EFICOR does not facilitate communities and people affected by crisis to provide feedback on their level of satisfaction with the quality and effectiveness of the assistance received, paying particular attention to the gender, age and diversity of those giving feedback.	Minor	2023/10/11	
2021-4.5: EFICOR does not have a policy for information sharing with communities	Minor	2022/10/11	
2019 - 5.1: Communities and people affected by crisis have not been consulted on the design, implementation and monitoring of complaints-handling processes.	Minor	2021/03/22	2021/10/11
2019 - 5.2: EFICOR does not communicate how complaints mechanisms can be accessed in development programmes and does not communicate the scope of issues the mechanism can address.	Minor	2021/03/22	2021/10/11
2019 - 5.3: EFICOR does not systematically manage complaints in a timely, fair or appropriate manner or prioritise the safety of the complainant and those affected at all stages.	Minor	2021/03/22	2021/10/11
2021-5.5 : EFICOR complaints handling is not integrated fully into EFICOR's culture	Minor	2023/10/11	
<b>Total Number of Open CARs</b>	<b>3</b>		

## 6. Sampling recommendation for next audit

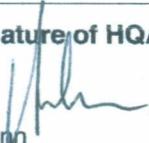
<b>Sampling rate</b>	As per HQAI policy on the number of projects operative throughout the audit stage.
<b>Specific recommendation for selection of sites</b>	None

## 7. Lead auditor recommendation

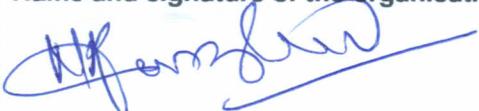
<p>In our opinion, EFICOR has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>Based on the evidence obtained, we confirm that we have received reasonable assurance that the organisation continues to meet the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>We recommend certification.</p>
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<b>Name and signature of lead auditor:</b> Catherine Blunt 	<b>Date and place:</b> Canberra, Australia 11 <sup>th</sup> October 2021
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## 8. HQAI decision

<b>Certificate:</b>	
<input checked="" type="checkbox"/> Certification maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
<b>Next audit:</b> Surveillance audit before 2022/11/01	
<b>Name and signature of HQAI Executive Director:</b>  Pierre Hauselmann	<b>Date and place:</b> November 1 <sup>st</sup> 2021, Geneva

## 9. Acknowledgement of the report by the organisation

<b>Space reserved for the organisation</b>	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team:  <i>If yes, please give details:</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Acknowledgement and Acceptance of Findings:</b> I acknowledge and understand the findings of the audit  I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name and signature of the organisation's representative:</b> 	<b>Date and place:</b> 3/12/21

## Appeal

In case of disagreement with the decision on certification, the organisation can appeal to HQAI within 14 days after being informed of the decision. HQAI will investigate the content of the appeal and propose a solution within 10 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform HQAI in writing within 30 days after being informed of the proposed solution, of their intention to maintain the appeal.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will constitute a panel made of at least two experts who have no conflict of interest in the case in question. These will strive to come to a decision within 30 days.

*The details of the Appeals Procedure can be found in document PRO049 – Appeal Procedure.*

## Annex 1: Explanation of the scoring scale\*

Scores	Meaning: for all verification scheme options	Technical meaning for all independent verification and certification audits
0	Your organisation does not work towards applying the CHS commitment.	<p><b>Score 0:</b> indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> major weakness;</li> <li>• <b>Certification:</b> major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.</li> </ul>
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p><b>Score 1:</b> indicates a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against it. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> minor weakness</li> <li>• <b>Certification:</b> minor non-conformity, leading to a minor corrective action request (CAR).</li> </ul>
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p><b>Score 2:</b> indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> observation.</li> </ul>
3	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled.	<p><b>Score 3:</b> indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> conformity.</li> </ul>
4	Your organisation's work goes beyond the intent of this requirement and demonstrates innovation. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	<p><b>Score 4:</b> indicates an exemplary performance in the application of the requirement.</p>

\* Scoring Scale from the CHSA Verification Scheme 2020