FINN CHURCH AID
Renewal Audit - Summary Report - 2026/06/25

1. General information

1.1 Organisation

Type	Mandates	Verified
☒ International ☐ National ☐ Membership/Network ☒ Direct Assistance ☐ Federated ☒ With partners	☒ Humanitarian ☒ Development ☒ Advocacy	☒ Humanitarian ☒ Development ☒ Advocacy
Legal registration	International NGO	
Head Office location	Helsinki, Finland	
Total number of organisation staff		1157

1.2 Audit team

Lead auditor	Ivan Kent
Second auditor	Lucy Soar
Third auditor	Niaz Murtaza
Observer	-
Expert	-
Witness / other participants	-

1.3 Scope of the audit

CHS:2024 Verification Scheme	Certification
Audit Cycle	4th cycle
Type of audit	Renewal Audit
Scope of audit	The entire organisation, all offices and programmes (humanitarian, development and advocacy), including those implemented by partner organisations.
Focus of the audit	An assessment of all minimum requirements of the CHS:2024 Standard, taking into account weaknesses identified in previous audits as potential risk areas.

1.4 Sampling*

Sampling unit	Country Programme
Total number of sampling units	12
Sample size	4
Total number of onsite visits	1
Total number of sampling units for remote assessment	3
Sampling Unit Selection	
Random Sampling — onsite/remote	**Purposive Sampling — onsite/remote**
Myanmar – selected: remote	Ukraine: remote
Kenya – not selected	Nepal: onsite
Ethiopia – not selected	
Israel and the Occupied Palestinian Territories (IOPT) – selected: remote	

Any other sampling considerations: The sampling sought to include country programmes with interventions delivered directly by FCA as well as those delivered with national/local partners. The countries chosen also included rapid-onset, rehabilitation, and long-term development interventions. Additional consideration was given to avoid visits to country programmes visited in previous audits, and those currently undergoing significant restructuring.
Sampling risks identified: No specific sampling risks were identified. The audit team is confident in the findings and conclusions of this audit based on the sample as outlined above.

**It is important to note that the audit findings are based on a sample of an organisation's activities, programmes, and documentation, as well as direct 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 Opening Meeting

Date	2026/04/20	**Number of participants**	30
Location	Helsinki (remote)	**Any substantive issues arising**	None

2.2 Locations Assessed

Locations	**Dates**	**Onsite or remote**
Helsinki and Global	2026/04/20 – 2026/04/24	Remote
Ukraine	2026/04/22 – 2026/04/29	Remote
Myanmar	2026/04/27	Remote
IOPT	2026/04/27 – 2026/05/01	Remote
Nepal	2026/05/04 – 2026/05/08	Onsite

2.3 Interviews

Level / Position of interviewees	**Number of interviewees**		**Onsite or remote**
	Female	**Male**	
Service and Accountability Centre (Head Office)			
Management	3	5	Remote
Staff	6	4	Remote
Country Programmes			
Management	4	7	Onsite and Remote
Staff	3	0	Onsite and Remote
Partner staff	4	7	Onsite and Remote
Total number of interviewees	20	23	43

2.4 Consultations with communities

Type of group and location	Number of interviewees		Onsite or Remote
	Female	Male	
Group discussion – women's group (FKWDF – project 12262), Gauriganga 4, Kailali	8		Onsite
Group discussion – cooperative members (NEEDS - project 13355), Bedkot 4, Kanchanpur	5	1	Onsite
Group discussion – women's group (NEEDS - project 13355), Bedkot 4, Kanchanpur	6		Onsite
Group discussion – women's group (FKWDF – project 12262) Suklaphata, Kanchanpur	14		Onsite
Group discussion – women's group (NEEDS – project 13355) , Krishnapur, Kanchanpur	8		Onsite
Group discussion – community group (FKWDF – project 12262), Godawari 3, Kailali	7	1	Onsite
Group discussion – women's group (IDeS - project 12263), Amarghadi 7, Dadeldhura	9		Onsite
Group discussion – women's group (Sarathi – project 13355), Surnaya 6, Baitadi	8		Onsite
Total number of participants	65	2	67

2.5 Closing Meeting

Date	2026/05/18	**Number of participants**	41
Location	Helsinki (Remote)	**Any substantive issues arising**	None

3. Background information on the organisation

3.1 General information

Finn Church Aid (FCA) was established in 1947, originally to coordinate international assistance to Finland from the United States and Sweden following the Second World War. As Finland became a donor country during the 1960s, FCA expanded its activities internationally and evolved into a major humanitarian and development actor. Until 1995, FCA operated as part of the international department of the Evangelical Lutheran Church of Finland, after which it became an independent foundation governed by its own Board of Directors.

FCA currently operates through country offices in 12 countries, and advocacy and fundraising offices in Bangkok and the United States respectively. The organisation is a member of the Action for Churches Together (ACT) Alliance and works closely with both faith-based and secular partners internationally.

As a faith-based and rights-based organisation, FCA defines its mission as 'Action for Human Dignity' and its vision as a world comprised of 'resilient and just societies in which everyone's rights to peace, quality education and sustainable livelihoods are fulfilled'. The organisation's work is guided by international human rights standards and principles, and a faith-based commitment to compassion and social justice. FCA's core organisational values are described as unconditional care for others, hope, courage and respect.

FCA has been impacted by the significant recent downturn in global humanitarian funding, leading to a reduction its budget for annual expenditure from 74m Euro in 2025 to 50m Euro in 2026. This was accompanied by significant staff cuts, changes to the organisational structure, and the initiation of a new organisational partnership with the Lutheran World Federation (see section 3.2 below). At the time of the audit, FCA had a total of 1157 staff members.

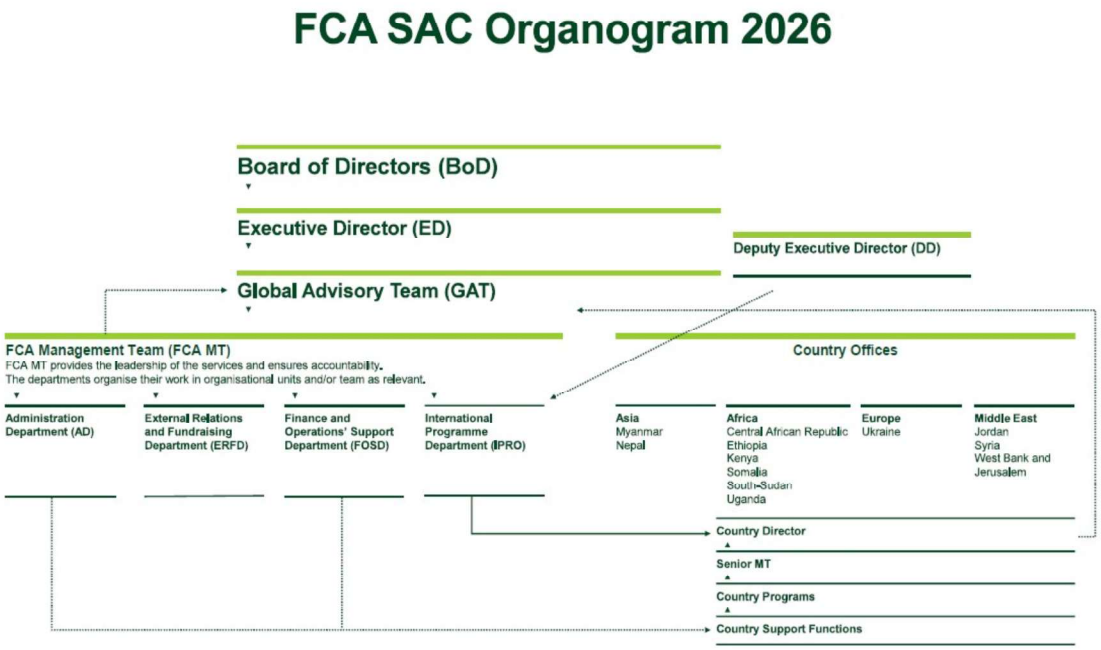
Programme work continues to be organised around three thematic priorities: the Right to Education, the Right to Peace, and the Right to Livelihood. Education remains the largest sector,

followed by livelihoods (which is shifting towards more digital/creative work) and peace-building. Through these areas, FCA seeks to strengthen resilience, improve access to services and livelihoods, and contribute to long-term structural change through advocacy and community-based programming.

3.2 Governance and management structure

FCA is overseen by a Board of Directors, appointed for a three-year term, with two of the members elected by the Church Council of the Evangelical Lutheran Church of Finland, and the remainder members elected by the Board. The Board sets the strategy, work plans, and budgets. The Board Audit Committee's Terms of Reference has been expanded to include risk management and safeguarding.

FCA has made several changes to its organisational structure in line with the *'FCA 2030'* strategic framework. This emphasises the growing importance of partnerships, localisation, and more equitable ways of working to strengthen FCA's accountability to affected populations.



Structural revisions in 2024 aimed to increase support for localisation, reduce costs and enhance synergies between different operational units. A second, larger organisational restructuring and staff reduction took place between October and December 2025. FCA's strategy, quality, and programme functions are now located in one International Programmes Department and an agreement has been reached with the Lutheran World Federation to develop joint country programming and unified systems in East Africa and in other humanitarian contexts. Specific governance and operational modalities are yet to be defined.

The Executive Director leads the organisation, with the support of an Advisory Team which oversees organisational strategy, and a Management Team which supervises annual planning, budgeting, and reporting and ensures the Service and Accountability Centre (SAC) aligns with strategic objectives. A Global Advisory Team consists of the Executive Director, the Deputy Executive Director and 2-3 Senior Staff Members who represent FCA's country offices, country presences or group entities such as FCA Investments and the Network for Religious and Traditional Peacemakers.

3.3 Work with partner organisations

FCA's strategy prioritises collaboration with a diverse range of partners, and the *Annual Report* details partner engagement across its programmes. In many countries, FCA works alongside partners, and in some countries, programmes are delivered entirely by local organisations. FCA's Partnership Strategy outlines engagement with six groups: Local Civil Society Partners, Global Institutional Partners, Global Faith-Based and Interfaith Actors, Academic and Research Institutions, Private Sector, and Public Authorities. This strategy guides joint efforts between SAC, country offices, and the wider organisation.

Since 2023, the *Localisation Framework* has been increasingly embedded into country strategies, planning, and reporting. An annual *Localisation Progress Report* reviews achievements against the strategy, while a *Localisation Working Group* promotes mutual learning and sharing of experiences and approaches to localisation.

The *Operational Partnership Policy* describes FCA's principles and processes for managing partnerships, supported by assessment tools and guidelines. FCA uses a *Partner Assessment Tool*, which references CHS commitments, and language on partner capacity has recently shifted towards 'Capacity Sharing and Mutual Learning'. The Standard Cooperation Agreement was revised in 2024/25 to ensure clearer alignment with legal and organisational standards.

Localisation and operational partnership are now central to FCA's structure and reflected in the renaming of several roles within the International Programme Department.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

FCA's commitments and systems for quality assurance and accountability are set out within its *Quality and Accountability Framework* and *Quality Management Framework*, both of which align with the CHS, and updated since the previous CHS Renewal Audit. FCA's *Rules of Procedure* (revised in 2026) describe the decision-making authority and accountability mechanisms at each level within the organisation.

FCA's two-person internal audit team reports its findings to the Board Audit Committee. Regular external audits, (such as those commissioned by the Ministry for Foreign Affairs of Finland), the CHS audit, plus independent programme evaluations complement this assurance mechanism.

A *Planning, Monitoring and Evaluation (PME) Policy* and *Project PME Guidelines* provide a set of minimum standards and prescribed steps for PME across FCA's programmes. A standardised annual planning, reporting, and budgeting process takes place at organisational and country levels. The new intranet (October 2024) provides access to FCA's policies and guiding documents for induction and reference. Standardised roll-out procedures were established in 2025.

FCA's *Safeguarding Policy* (2024) and *Complaints Policy* (revised in 2024) set out mandatory requirements and procedures on these topics, and are supported by a *Country Office Guideline on Complaints Handling* and the *Standard Operating Procedures for Handling Sensitive Complaints and Misconduct Incidents in SAC* and by FCA's safeguarding, ethics and accountability managers.

Risk management is governed by FCA's *Risk Management Policy and Risk Management Guideline*. Risks are categorised into contextual, organisational, and programmatic risks which include safeguarding. The Risk and Compliance team is responsible for reviewing key organisational risks. At Country Office level, FCA has developed a set of 'Plan B' papers in response to different risk scenarios, including funding constraints. FCA also applies risk-based management processes throughout programme implementation. An electronic system, *SAMPO*, acts as a centralised risk management and programme management platform.

Project planning processes require contextual analysis, partner assessments, safeguarding, conflict sensitivity analysis, financial and operational risk assessment, and stakeholder analysis before approval. The *Disaster Fund Guidelines* explain special procedures for emergency and humanitarian funding.

Financial management and oversight are embedded within the annual planning, budgeting, and monitoring systems with standardised expenditure procedures supported by donor

compliance procedures, internal and external audits, and regular finance and controlling functions.

4.2 Level of application of the CHS

FCA's *Quality Management System* refers to the CHS as its overall framework on quality and accountability. Certified since 2017, FCA's engagement with the CHS is well developed and policies and processes are closely aligned to the updated CHS:2024. Follow up to the Renewal Audit in 2023 has taken the form of a CHS Improvement Plan, monitored on a bi-annual basis by the Strategy and Quality Unit, and with updates presented to FCA's Management Team.

FCA demonstrates a coherent organisational approach across all CHS commitments, marked by clear policies and procedures and good engagement from staff and partners, facilitated in part at the country level by *Q+A Self-Assessments* and *Quality Improvement Plans*.

Equity and inclusion considerations are integrated into project and programme level activities, supported by clinics on rights-based approaches delivered during annual planning. The rights-based clinics also support partner capacity in relation to diversity, equality and inclusion. Targeting criteria are used effectively and communities interviewed for this audit describe positive efforts to support marginalised groups. The Localisation Framework and associated initiatives have increased the profile of local partners in FCA's work. Those interviewed during this audit describe relationships with FCA as respectful and equitable.

The organisation has established complaints response mechanisms across global, country and project levels, supported by survivor-centred approaches, multiple channels and clear escalation procedures. Staff and partners show a strong understanding of safeguarding responsibilities and confidentiality requirements particularly in relation to sexual exploitation, abuse and harassment (SEAH).

FCA's monitoring, evaluation and learning frameworks promote participation and adaptive programming, and community feedback is being used to inform programming decisions and adjustments. Financial management and organisational risk systems are supported by comprehensive policies, regular audits and structured oversight processes.

Despite these strengths, there are some gaps between organisational guidance and field-level operation, particularly concerning the communication of protection from sexual exploitation, abuse and harassment (PSEAH) commitments and expected staff behaviour to stakeholders, especially communities. There are also weaknesses in disability-inclusive monitoring, systematic sharing of learning back to communities, and practical measures for data protection at project level. FCA also currently lacks a clear and sufficiently supported approach to reducing environmental impacts.

Recent organisational restructuring, accompanied by significant reductions in staffing, cuts to travel budgets and the emergence of new programme and operational arrangements, raise questions about future capacity in areas such as safeguarding, partnership support, environmental impact and humanitarian response which will be tested in the coming months.

4.3 PSEAH

PSEAH is incorporated into FCA's broader 2024 *Safeguarding Policy*. A zero-tolerance approach is maintained through mandatory staff training, safe recruitment and vetting, integrated safeguarding risk assessments, confidential reporting and investigations, partner compliance requirements, and community-based complaints mechanisms to protect affected populations.

During 2024, FCA revised and rolled out new safeguarding and complaints policies, established standard operating procedures for handling sensitive complaints, adopted new *Information Sharing Guidelines* and strengthened its global complaints response mechanism.

The organisation also launched a *Safeguarding Awareness Week* in 2025 to reinforce zero tolerance for abuse, exploitation, and harassment. FCA also joined the *Common Approach to Protection from Sexual Exploitation, Abuse and Harassment (CAPSEAH)* and the *CHS SEAH Harmonised Reporting Scheme* and adopted the *Misconduct Disclosure Scheme* to improve safe recruitment practices. Country offices were provided tailored support, workshops, and training to improve local safeguarding systems and complaints mechanisms. Despite the recent introduction of guidelines, there remains a gap in regularly sharing information about FCA and partners' commitments on PSEAH and expected behaviour of staff regularly and on monitoring communities' understanding of this.

4.4 Organisational performance against each CHS Commitment

Strong points and areas for improvement	**Average score***
Commitment 1: People and communities can exercise their rights and participate in actions and decisions that affect them.	2.5
FCA emphasises diversity, equity and inclusion considerations in documents developed at SAC (HQ), country and project levels, and actions within communities show a strong participatory way of working, and attention to rights. FCA policies require the regular sharing of information with communities on project and PSEAH issues. However, this audit found that some information sharing by partners regarding commitments on PSEAH and staff behaviour is lacking and not followed up regularly. FCA policy documents make a commitment to communicating in ways that are respectful and easily accessible, and this is reflected in practice at project level. FCA and its partners gain informed consent from communities for external communications. Overall, FCA has a coherent organisational approach to ensure transparent information-sharing, communication and meaningful participation of people and communities in its work.	
Feedback from communities: Communities confirmed the participatory approach to project implementation and noted that FCA's partners gave due attention to their preferences. They gave examples of how FCA's partners had worked with them to strengthen traditional activities and to address discrimination against marginalised groups.	
Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities.	2.7
FCA demonstrates context-responsive and timely programming. Country programmes demonstrate participatory assessments, and the use of local expertise, community and government structures. Policies and project documentation emphasise impartial, fair and vulnerability-based selection criteria, with communities reporting strong involvement in these processes. There is good adaption to changing contexts to ensure timeliness and effectiveness although systematic monitoring and adjustment to ensure participation by persons with disabilities remains limited for activities which target vulnerable people in general. Organisational frameworks explicitly reference CHS, Sphere, Inter-Agency Network for Education in Emergencies (INEE), and broader rights-based approaches, and country staff and partners confirm application of these standards in practice. There are good examples of referrals, for gender-based violence, psychosocial support, and technical services.	
Feedback from communities: Communities felt involved in identifying vulnerable households. They stated that support was delivered on time, meetings were organised at convenient times, and activities were located close to communities to support access and use. Communities also described the services, training, and materials as high quality and that project activities were beneficial to their livelihoods, knowledge and confidence.	

Commitment 3: People and communities are better prepared and more resilient to potential crises.	2.6
FCA has a strategic commitment to localisation and resilience, and maintains a long-term focus across much of its work. Organisational frameworks are accompanied by revised partnership tools, annual reporting and a *Localisation Working Group* each intended to promote stronger local ownership and partner leadership. FCA's strategies also explicitly reference sustainability, resilience, and the humanitarian-development-peace nexus while livelihoods programming appears oriented toward long-term outcomes through vocational training, climate resilience, and market-linked approaches. At the country level, emergency preparedness and risk management is well developed with 'Plan B' scenarios currently being updated for country programmes. However, despite guidance on exit strategies at project level, these are not consistently well incorporated in design. Recent staff cuts implemented as a result of financial constraints could mean that FCA's increased emphasis on partnership risks being constrained by its operational capacity.	
Feedback from communities: Communities reported that local leadership was supported, particularly among marginalised groups, who feel 'more empowered to ask for support from local authorities.' They described the activities by FCA and its partners as a 'problem and solution' process which responds to local demands.	
Commitment 4: People and communities access support that does not cause harm to people or the environment.	2.2
FCA's policies make a clear commitment to protecting communities from exploitation and abuse, and integrating risk analysis into programme design and implementation. Staff and partners have a good understanding of safeguarding and PSEAH responsibilities, and project planning systems include multiple mechanisms intended to reduce harm and strengthen accountability. Despite comprehensive policies on data protection which extend to partnership agreements, these are not consistently translated to practical implementation at partner and project level with potential gaps in the secure management of data. FCA employs several measures to identify environmental impacts and opportunities to strengthen resilience, and has made increased investment in developing expertise in nature-based solutions. There are potential risks to FCA's coherence on reducing environmental impact following restructuring.	
Feedback from communities: Communities confirmed that project staff take care to avoid any harm from community work and provided adaptations made to activities to keep people safe. They gave examples of actions taken to reduce environmental impact, such as burying and clearing waste. Communities stated clearly that they trust project staff with their personal information.	
Commitment 5: People and communities can safely report concerns and complaints and get them addressed.	2.5
FCA has established complaints response mechanisms (CRMs) at global, country and project levels, supported by accessible communication and clear SOPs for sensitive complaints. Staff and partners demonstrate strong survivor-centred safeguarding approaches, including protections on confidentiality, referral pathways, escalation systems, whistleblower protections and the use of specialised or external investigators for sensitive SEAH cases. FCA is also undertaking and learning from regular analyses of feedback and complaints across CRM systems at all levels. At project level, staff interviews acknowledged that awareness-raising on CRMs takes place regularly, but a weakness remains in checking communities understanding regarding commitments and expected behaviour of staff and volunteers to prevent harmful behaviours. Overall, FCA demonstrates strong institutional commitment to complaints and feedback, mature safeguarding systems, with regular and review, which show good alignment with recognised good practice. However, the use of CRM systems by communities remains low in some contexts.	
Feedback from communities: Communities listed the different mechanisms available to them including text, complaints boxes, meetings, etc., and consistently referred to FCA's toll-free number and their right to complain. They are unclear about FCA and its partners' specific commitments on staff behaviour.	

Commitment 6: People and communities access coordinated and complementary support.	3.0

FCA has a coherent organisational approach to collaboration and equitable partnerships, grounded in its *Partnerships Strategy*, *Operational Partnership Policy*, the *Localisation Framework* and in standardised partnership agreement templates. Interviews and documentary evidence confirm active participation in coordination mechanisms and clusters, and work with local NGOs. All partners are required to complete a mandatory due diligence process before engaging with FCA, covering safeguarding, PSEAH obligations, and CHS commitments.

Partners are supported to apply quality and accountability commitments throughout all stages of work, for example in the implementation of complaints and feedback mechanisms, and safeguarding policies. Interviews and documentary evidence confirmed that FCA regularly assesses the quality and effectiveness of its partner relationships and takes corrective action when needed. Monitoring visits, evaluations, and joint programme review meetings provide ongoing quality oversight. Partners confirm that they regard collaborations with FCA as equitable and respectful of their respective capacities and experience.

Feedback from communities:
Communities described how they appreciate that partners coordinate their work well with their schedules. They also appreciate that FCA's partners build on the work they are doing themselves.

Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning.	2.2

FCA's Global Strategy states the organisation's commitment to continuous learning and to sharing learning with other actors. The *Project Monitoring and Evaluation (PME) Policy* sets out key principles such as participation, local ownership, adaptive management, and continual learning. It requires each project to have a MEAL plan and an evaluation. The *FCA Project Monitoring Checklist* includes the promotion of participation and ensuring that rightsholders know how to give feedback. Both the standard *Project Document* and *FCA Final Report Template* for projects include sections on lessons learned.

FCA staff encourage rightsholders to share their feedback and their level of satisfaction through a variety of mechanisms. The data is required to be disaggregated by gender, age, and disability. However, project MEAL plans do not consistently include the disaggregation of data, and the data reported by partners is not disaggregated by disability in all instances. FCA uses evidence from monitoring and feedback to make decisions and improvements and demonstrates responsiveness to feedback.

FCA shares learning internally via communities of practice, knowledge sharing sessions, and country office intranet sites. The organisation convenes annual partner meetings and cross-partner sessions to facilitate the exchange of learning among partners. However, FCA and its partners currently do not systematically share learning with communities. In addition, there is currently no systematic way for partners to share learning across FCA.

Feedback from communities:
Communities gave several examples of how their feedback was incorporated into projects. These include responding to requests for the provision of bicycles, fences for keeping chickens, and the construction of meeting huts. People also appreciated that meeting times were convenient for them and their work schedules.

Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed.	3.0

FCA maintains a strong policy environment for its management of staff and volunteers, with high engagement from both employees and leadership evident throughout the organisation. FCA's *Human Resource Policy*, *Recruitment Guidelines*, and *Remuneration Policy* promote transparent and non-discriminatory practices for human resource recruitment and management. The *Anti-Fraud and Corruption Policy and Procedures* and *Safeguarding Policy* prohibit all forms of exploitation, abuse and discrimination. FCA staff sign a *Code of Conduct*.

FCA has a clear policy on reporting and responding to staff grievances, whilst the *Disciplinary Procedure* ensures that appropriate actions are taken to address misconduct. Evidence confirms that allegations and cases of misconduct are addressed promptly and appropriately.

Comprehensive safety, security, and wellbeing measures protect staff and FCA also makes occupational health support available. Staff development is promoted through annual appraisals and personal performance plans. *Country Programme Annual Reports* (CPARs) cover staff development needs, with mandatory training including code of conduct, security, anti-corruption, data protection and safeguarding.

Feedback from communities:
Communities described how technical knowledge provided by staff had helped improve the productivity and commercial value of their products. They remarked upon the coherent attention to quality and accountability across FCA and partners.

Commitment 9: People and communities can expect that resources are managed ethically and responsibly.	2.5

FCA has centralised finance and organisational risk management systems and a comprehensive suite of policies and procedures designed to ensure resources are utilised efficiently, effectively, and ethically, including in emergency situations. Key documents include the *Financial Management Guidelines*, *Budget Policy*, *Procurement Guidelines*, and *Emergency Procurement Protocols*. Evidence indicates that FCA has regular dashboard meetings, which include finance and reports against the budget. At the country office level, there are regular consultations between finance, programme staff and partners to discuss financial results. The organisation has introduced an *Anti-Money Laundering & Combating the Financing of Terrorism Policy*, an *Anti-Fraud and Corruption Policy and Procedures*, and carries out due diligence to support ethical resource mobilisation and fund allocations.

FCA has an internal audit team which audits three to four FCA country offices a year, and the organisation is subject to an annual external financial audit. Risk management is determined by the *Risk Management Policy*, and all FCA country offices and projects are mandated to maintain risk registers. However, country office risk registers do not routinely consider the risk or fraud and other financial crimes.

FCA's *Global Strategy* includes a statement about its commitments to the environment and on the ethical use of resources. Environmental concerns are incorporated into the *Procurement Guidelines* and FCA *Partner Assessment* tools and the organisation has a *Green Office Checklist and Climate Tool* for assessing the environmental impact of projects. However, the audit found that FCA Country Offices do not systematically consider the environmental impact of activities or use Green Office checklist systematically.

Although FCA currently has adequate capacity to deliver programmes, staff interviewed expressed concern about the impact of recent organisational restructuring on FCA's future capacity in the areas of safeguarding, complaints handling, partner support and humanitarian response. Country office risk registers do not routinely consider the impact of staff reductions. There is therefore a risk to FCA's organisational capacity to meet its commitments.

Feedback from communities:
Communities noted several environmental initiatives in place. Examples given included the use of leaf plates instead of plastic and observed that FCA properly disposes of waste and effluent. They described how they are informed about project budgets and that village committees are trained on financial matters.

** Note: Commitments are scored by taking the mean average score of the requirements, i.e. the sum of all the requirement scores in a commitment divided by the number of requirements in that commitment. Except when a major non-conformity/weakness is issued, in this case the overall score for the Commitment is 0 (CHSA Verification Framework – Scoring Grid, 2024).*

5. Summary of open non-conformities

Corrective Action Request (CAR)	Type	Status	Resolution timeframe
2026-1.2: FCA does not ensure that information regarding commitments to PSEAH and expected staff behaviour is shared regularly with communities.	Minor	New	By the 2029 Renewal Audit
2026-2.3: FCA does not regularly monitor and adjust programmes to ensure actions are accessible for persons with disabilities.	Minor	New	By the 2029 Renewal Audit
2026-4.3: FCA does not ensure that practical rules are established and followed for safe and ethical management of personal data at project level.	Minor	New	By the 2029 Renewal Audit
2026-5.2: FCA does not ensure checks take place to ensure awareness and understanding by communities regarding expected staff behaviour including SEAH.	Minor	New	By the 2029 Renewal Audit
2026-7.4: FCA does not systematically share the learning from monitoring and evaluation with people and communities supported by the organisation.	Minor	New	By the 2029 Renewal Audit
Total Number of open CARs	5		

6. Claims Review

Claims Review conducted	☒ Yes ☐ No	**Follow-up required**	☐ Yes ☒ No

7. Lead auditor recommendation

In my opinion, ORG has demonstrated that it is taking the necessary steps to address the CAR(s) identified in the previous audit(s) and continues to demonstrate no major non-conformities in its application of the Core Humanitarian Standard on Quality and Accountability.

I recommend renewal of certification.

Name and signature of lead auditor:	**Date and place:**
Ivan Kent 	29 May 2026 Canterbury, UK

8. HQAI decision

Certificate renewed:	☒ Issued ☐ Preconditioned (Major CARs)
Start date of the current certification cycle: 2026/06/27 Next audit before 2027/06/27	
Name and signature of HQAI Executive Director: Désirée Walter	**Date and place:** Geneva, 25 June 2026

9. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: *If yes, please give details:*	☐ Yes ☒ No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	☒ Yes ☐ No ☒ Yes ☐ No
Name and signature of the organisation's representative: Digitally signed by Katri Suomi Date: 2026.06.25 16:07:00 +03'00' Katri Suomi	**Date and place:** In Helsinki 25.6.2026

Appeal

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

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

Annex 1: Explanation of the scoring scale*

Scores	Meaning for all verification scheme options, including self-assessment and third-party audits	Guidance for scoring requirements
0	Your organisation does not currently meet the requirement and indicates a major issue that is so significant that the organisation's ability to meet the commitment is compromised. **For third-party auditing schemes:** Independent verification: A major weakness. Certification: A major non-conformity that compromises the integrity of the commitment which leads to a major corrective action request (CAR).	To give a score 0, **not all** of the measurable components of the requirement are verified to be in place **and** the issue(s) identified are so significant that the organisation's ability to meet the **commitment** is compromised.
1	Your organisation does not currently meet the requirement. **For third-party auditing schemes:** Independent verification: A minor weakness. Certification: A minor non-conformity that compromises the integrity of the requirement which leads to a minor corrective action request (CAR).	To give a score 1, **not all** of the measurable components of the requirement are verified to be in place.
2	Your organisation currently meets the requirement, but there is an opportunity for improvement that deserves attention so that the requirement is not compromised in the future. **For third-party auditing schemes:** Independent verification: Requirement is met with an observation. Certification: Conformity with an observation.	To give a score 2, **all measurable components** of a requirement are verified to be in place, however, one or more opportunities for improvement are observed which deserve attention so that the requirement is not compromised in the future.

3	Your organisation meets the requirement,-with organisational systems ensuring it is being met consistently throughout the organisation. **For third-party auditing schemes:** Independent verification: Requirement is met. Certification: Conformity.	To give a score 3, **all measurable components** of a requirement are verified to be in place.
4	Your organisation meets the requirement in an exemplary way, demonstrating innovation and/or special recognition of performance, and organisational systems ensure this high quality throughout the organisation. **For third-party auditing schemes:** Independent verification: Requirement is met in an exemplary way. Certification: Conformity in an exemplary way.	To give a score 4, **all measurable components** of a requirement are verified to be in place. **In addition**, the following must be verified: • An organisational system (or systems) that demonstrate an innovative approach to meeting the requirement at a high standard throughout the organisation are in place. and/or • The organisation has been awarded special recognition of performance in relation to meeting the requirement at a high standard, and this is built into organisational systems so that the high quality is ensured throughout the organisation.
	Guidance notes for scoring commitments: • Commitments are scored by taking the mean average score of the requirements, i.e. the sum of all the requirement scores in a commitment divided by the number of requirements in that commitment. • Except when a major non-conformity/weakness is issued, in this case the overall score for the Commitment is 0.	

* Scoring Scale from the CHSA Verification Framework 2024