Norwegian Church Aid
Renewal Audit - Summary Report - 2026/05/07

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 Non-Government Organisation (church)	
Head Office location	Oslo, Norway	
Total number of organisation staff		Approx. 1000 staff globally

1.2 Audit team

Lead auditor	Camille Guyot-Bender
Second auditor	Nancy Vallejo
Third auditor (Trainee)	Abdullah Ali Alkaf
Observer	-
Expert	-
Witness / other participants	-

1.3 Scope of the audit

CHS:2024 Verification Scheme	Certification
Audit Cycle	Fourth cycle
Type of audit	Renewal Audit
Scope of audit	The audit includes NCA's Head Office and Country Offices, and all humanitarian, development and advocacy programming implemented by NCA and its partners.
Focus of the audit	Programmes implemented by NCA and partners.

1.4 Sampling*

Sampling unit	Country Offices
Total number of sampling units	19
Sample size	5
Total number of onsite visits	2
Total number of sampling units for remote assessment	3
Sampling Unit Selection	
Random Sampling – onsite/remote	**Purposive Sampling – onsite/remote**
DRC - remote	
Nigeria - not selected	Ethiopia - onsite
Tanzania - not selected	Zambia - onsite
Haiti - not selected	Lebanon - remote

Angola - remote	
Any other sampling considerations: The random sample did not cover all humanitarian, development and advocacy programming. It also identified countries that were either actively going through another audit or had previously been selected for an HQAI CHS audit. Therefore, purposive sampling was required to ensure an appropriate spread across mandates, as well as to include both direct programming and work implemented with partners.	
Sampling risks identified: No sampling risks identified. The auditor is confident in the findings and the conclusions of this audit based on the sample.	

**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	2026/01/19	**Number of participants**	15
Location	Remote	**Any substantive issues arising**	None

2.2 Locations Assessed

Locations	Dates	Onsite or remote
Ethiopia	8th - 14th Feb 2026	Onsite
Zambia	21st - 27th Feb 2026	Onsite
Angola	3rd Mar 2026	Remote
DRC	5th Mar 2026	Remote
Lebanon	4th Mar 2026	Remote

2.3 Interviews

Level / Position of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	5	2	Remote
Staff	7	4	Remote
Country Office			
Management	1	1	Onsite & Remote
Staff	5	10	Onsite & Remote
Partner staff	5	9	Onsite
Others (Government representatives)	2	2	Onsite
Total number of interviewees	25	28	Onsite & Remote

2.4 Consultations with communities

Type of group and location	Number of interviewees		Onsite or remote
	Female	Male	
WASH committee + community members, Gemecho locality, Sidama, Ethiopia	29	28	**Onsite**
Peacebuilding rightsholders and committee members, Amhara Region, Ethiopia	24	26	Onsite
Debre Berhan - Bakelo IDP Camp, Ethiopia	14	15	Onsite
Debre Berhan - China IDP Camp, Ethiopia	11	10	Onsite
Restoring Hope - Rufunsa District, Zambia	11	16	Onsite
Promoting Sustainable Development - Lusaka Province - Mumbwa District, Zambia	12	16	Onsite
Total number of participants	**101**	**111**	**Onsite**

2.5 Closing Meeting

Date	2026/03/19	**Number of participants**	26
Location	Remote	**Any substantive issues arising**	None

3. Background information on the organisation

3.1 General information

Norwegian Church Aid (NCA) is an independent faith-based international non-governmental organisation established in 1947 and headquartered in Oslo, Norway. It is legally registered as a diaconal organisation under Norwegian law, with Country Offices (CO) registered as non-profit entities in line with national regulations. NCA's mission is to save lives and seek justice by addressing the root causes of poverty and inequality, grounded in values of human dignity, global justice, and compassion.

NCA operates under its global strategy *Faith in Action* and Programme Framework (2020-2030). The organisation adopts a triple nexus approach, integrating humanitarian assistance, long-term development, and advocacy. Core thematic areas include gender-based violence, climate-resilient WASH, peacebuilding, and economic empowerment, alongside emerging priorities such as climate action and inequality reduction.

NCA works in approximately 21 countries across Africa, the Middle East, Asia, Latin America, and Europe, primarily through partnerships with local civil society actors. Around 68% of programmes are implemented through partners, reflecting a strong localisation approach. The organisation is a founding member of the ACT Alliance and collaborates closely with faith-based and humanitarian networks globally.

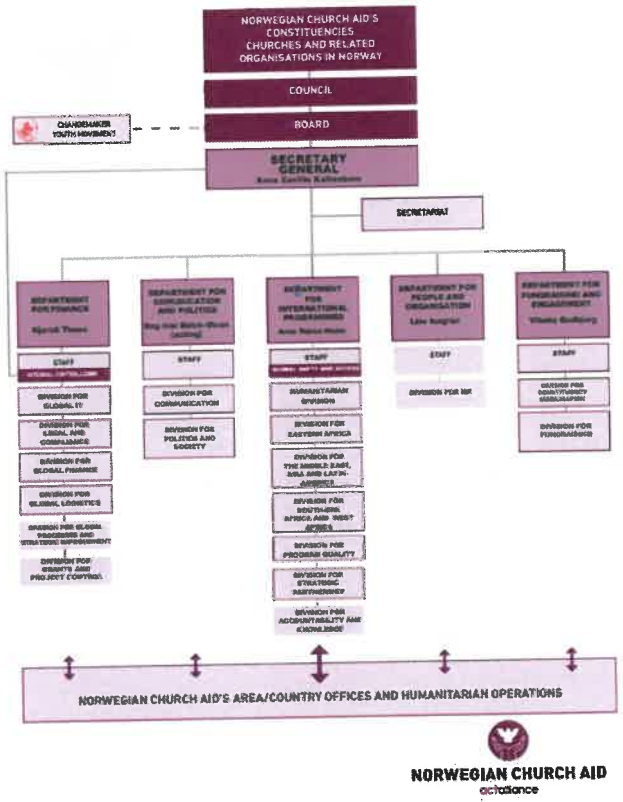
Recent developments show NCA undergoing significant organisational transformation. A major Head Office restructuring (2024-2025) aimed to strengthen risk management, fundraising capacity, and governance alignment between Head Office and Country Offices. New roles such as Risk Manager, Data Protection Officer, and Prevention of Sexual Exploitation, Abuse and Harassment (PSEAH) Advisor have been introduced, alongside a revised CO Manual to clarify procedures and responsibilities. A second restructuring process (2025-2026) is ongoing, focusing on financial sustainability and organisational efficiency.

NCA's annual income is approximately NOK 1.18 billion (over EUR 100 million), with funding spanning both humanitarian and development programming. A new five-year funding agreement was recently made with NORAD (2025-2029) which influences current programming and strategic direction.

3.2 Governance and management structure

NCA is governed by a Board of Directors responsible for strategic oversight, with the General Secretary serving as chief executive and accountable for operational management. The General Secretary reports regularly to the Board through structured mechanisms, including quarterly reporting on performance, risk, and compliance. A new General Secretary was appointed in June 2025, alongside ongoing governance reforms.

NORWEGIAN CHURCH AID'S ORGANISATION CHART AS OF 2025



The organisation operates through a matrix management structure combining geographic and functional lines. COs report through regional divisions under the Department of International Programmes, while also receiving technical support from cross-cutting departments. Key departments include Programme Quality and Accountability (MEAL, CHS alignment, and data systems), Institutional Partnerships and Grants (donor relations), and an expanded Legal and Compliance Division, which now includes roles such as Data Protection Officer and PSEAH Advisor.

Recent restructuring has strengthened governance and risk management functions, including the introduction of new advisory and control roles and enhanced oversight mechanisms between Head Office and COs. Decision-making is guided by formal processes such as Annual Assignment Letters and Global Management Dialogue meetings, ensuring alignment of strategic priorities and accountability across levels.

Cross-departmental working groups and communities of practice support coordination, learning, and CHS implementation.

3.3 Work with partner organisations

NCA operates predominantly through partnerships, with approximately two-thirds of its programme portfolio implemented by local partners rather than directly. Its partnership approach is central to its localisation strategy, with NCA acting primarily as a facilitator, funder, and technical advisor, while partners lead implementation.

A structured due diligence process is in place through tools such as the Partnership Assessment Tool (PAT), which assesses partner governance, financial management, and safeguarding capacities. Additional requirements–such as adherence to Codes of Conduct and safeguarding policies–are embedded in agreements and onboarding processes.

Oversight is ensured through reporting requirements, regular partner engagement, and newly strengthened joint project monitoring routines, which include at least annual monitoring visits and follow-up actions. These processes aim to track performance, risks, and compliance across the delivery chain, with findings discussed between COs and partners. NCA also supports partners through capacity strengthening, guidance, and tools aligned with CHS commitments, including quality, accountability, and safeguarding standards.

Overall, partnership systems are well-developed in design and reflect a strong commitment to equitable collaboration. However, implementation is not yet fully systematic. In particular, gaps remain in consistently assessing partnership quality, integrating safeguarding (including PSEAH) into due diligence and monitoring, and ensuring shared decision-making and accountability across all partnerships.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

NCA's internal quality assurance and control system combines central policy oversight with country-level implementation through a matrix structure. Core elements include the recently revised CO Manual, the Programme Information Management System (PIMS), global indicators, partner due diligence and monitoring tools, and an Internal Controller function reporting to both the Head of Finance and the General Secretary. Quarterly reporting to the Board includes risk management and complaints, ensuring senior leadership oversight of key control areas and the CHS certification process.

Since 2024-2025, NCA has undertaken significant reforms to strengthen these systems. This includes the organisational restructuring, revision of the CO Manual, introduction of joint project monitoring routines, and the establishment of new roles such as Risk Manager, Data Protection Officer, PSEAH/SEAH Advisor, and Business Controller. These changes aim to improve risk management, clarify roles and responsibilities, and strengthen oversight between Head Office and COs.

Quality assurance at programme level is ensured through partner reporting, annual joint monitoring visits, follow-up action plans, and technical guidance aligned with Core Humanitarian Standard (CHS) commitments. Financial and compliance systems include segregation of duties, anti-corruption controls, complaints and whistleblowing mechanisms, and structured partner agreements. Risk management processes are being reinforced through improved project-level risk assessments and stronger links between operational and organisational risk oversight.

Evidence shows that NCA has comprehensive systems in place and demonstrates awareness of key risks, including safeguarding, partner oversight, and accountability. However, audit findings highlight that implementation remains uneven across contexts. Importantly, many of these systems are currently being revised and rolled out as part of ongoing restructuring processes. As such, inconsistencies in operationalisation largely reflect a transitional phase, where strengthened frameworks are in place but not yet fully embedded across all country offices and partnerships.

4.2 Level of application of the CHS

Overall, NCA demonstrates a strong institutional commitment to the CHS, with developed policies, frameworks, and tools that align with CHS principles across its global operations.

Key strengths include a clear strategic emphasis on localisation and equitable partnerships, with most programmes implemented through local partners and supported by structured partnership frameworks. NCA has established comprehensive systems for programme design, participation, and accountability, including updated Participation and Inclusion indicators, joint monitoring tools, and global guidance that promote community engagement and data disaggregation. There is also strong alignment with technical standards and sectoral good practice, and evidence of efforts to integrate community participation and locally led approaches across programmes. Recent investments in safeguarding, complaints handling (e.g. CaseIQ), and risk management demonstrate responsiveness to identified gaps and evolving CHS requirements.

However, key weaknesses relate primarily to the consistent implementation of these systems. Across multiple commitments, there is limited evidence that organisational frameworks are systematically applied across all COs and partners. This is particularly evident in areas such as safeguarding (including PSEAH), complaints handling, data protection, and the use of monitoring, feedback, and learning to inform decision-making. Partnership management is a cross-cutting challenge: while policies promote equitable collaboration, there are gaps in consistently assessing partner capacities, strengthening partner systems, and ensuring shared accountability–especially regarding safeguarding responsibilities. Similarly, risk management and referral systems are not yet fully standardised or consistently operationalised.

A recurring cross-cutting issue is the gap between strong policy commitments and uneven field-level practice. This is compounded by ongoing organisational restructuring, which has introduced improved systems but has not yet achieved full institutionalisation. As a result, NCA's performance can be characterised as strong at the policy and system level, with moderate and variable implementation at operational level. In addition, some variation in findings reflects differences in operational modalities between humanitarian and development programming, where systems and requirements are applied with varying levels of consistency depending on context, urgency, and partner capacity.

4.3 PSEAH

NCA demonstrates a clear organisational commitment to the PSEAH, supported by policies, codes of conduct, and ongoing system strengthening. Recent investments include the appointment of a dedicated SEAH Advisor, the rollout of revised indicators and tools, and the introduction of the CaseIQ platform to improve confidential reporting, case management, and organisational oversight. Safeguarding commitments are integrated into programme frameworks and partnership agreements, and there is evidence of training and awareness-raising efforts across staff and partners.

However, key risks relate to the consistent operationalisation of these systems. Evidence indicates that PSEAH responsibilities, capacities, and expectations are not yet systematically defined, assessed, or strengthened across all partners. Community awareness of expected staff behaviour and reporting mechanisms remains uneven, and monitoring of understanding is not consistently applied. Investigation capacity and survivor-centred approaches also vary across contexts.

Overall, while NCA has strengthened its PSEAH framework and demonstrates strong intent, implementation remains at an early stage and uneven across programmes. This creates risks related to inconsistent safeguarding practices, particularly in partner-led programming.

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.	2.0
NCA demonstrates a strong organisational commitment to participation, inclusion and transparency, supported by comprehensive frameworks such as the Humanitarian Strategic Plan, Programme Framework, Participation and Inclusion guidance and Communication Policy. These are complemented by monitoring tools and participatory approaches that promote community engagement, the use of disaggregated data, and respectful communication. In practice, communities are regularly consulted, information is generally shared in a timely manner, and participation processes are widely embedded across programmes. Communication is perceived by communities as respectful and appropriate, and there is evidence that community input contributes to programme discussions in some contexts. However, implementation remains uneven, particularly in ensuring inclusive communication for all groups and in consistently maintaining information-sharing and awareness—especially regarding PSEAH—throughout the project cycle.	

Feedback from communities: Communities feel respected and engaged, and some report that their input has influenced programme activities. However, awareness of rights, feedback mechanisms and organisational commitments varies, and some community members are unclear about how to provide input or how their feedback is used.	
Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities.	2.2
NCA demonstrates a strong commitment to delivering appropriate and contextually relevant assistance, grounded in local knowledge, participatory approaches and engagement with partners and communities. Organisational frameworks, needs assessments and monitoring systems support programme design and implementation that reflect local priorities, build on existing capacities and apply recognised technical standards. There is clear evidence that programmes are mostly aligned with community needs, and that fair and transparent targeting approaches are in place. Monitoring systems, including joint monitoring processes, provide structured opportunities to review progress, engage with communities and partners, and identify areas for improvement. However, the consistent use of monitoring findings to adapt programmes and the systematic referral and follow-up of unmet needs remain limited across contexts.	
Feedback from communities: Communities find assistance relevant and aligned with their needs, and value the involvement of local partners. However, some report that evolving or unmet needs are not always addressed or followed up, and that adjustments to programmes are not consistently visible across all contexts.	
Commitment 3: People and communities are better prepared and more resilient to potential crises.	2.2
NCA demonstrates a strong strategic commitment to resilience, localisation and long-term impact, supported by updated strategies, policies and tools that promote locally led, participatory and contextually relevant interventions. Programmes are designed to strengthen local ownership, decision-making and sustainability, with evidence of engagement with local partners, community structures and authorities throughout the project cycle. There are positive examples of community participation, capacity strengthening and long-term programme planning, including initiatives that support livelihoods, environmental sustainability and preparedness for future shocks. However, these approaches are recent and not yet consistently implemented, with uneven support to partners in strengthening community preparedness and resilience capacities.	
Feedback from communities: Some communities report improved resilience, preparedness and involvement in decision-making, while others are less clear on how programme activities strengthen their ability to respond to future crises or build long-term capacity.	
Commitment 4: People and communities access support that does not cause harm to people or the environment.	1.6
NCA demonstrates a strong organisational commitment to safeguarding, environmental responsibility and the protection of people's safety, security, rights and dignity. This is reflected in its policies, programme frameworks and tools, as well as in its proactive response to identified risks, including a comprehensive review of its risk management and safeguarding systems. There are examples of risk identification and mitigation in practice, including participatory approaches with communities and integration of environmental considerations into programme design. NCA also shows a clear commitment to environmental stewardship, supported by dedicated policies and tools. However, key systems—including risk management, safeguarding and data protection—are still under development and not yet consistently implemented, with limited integration and capacity across contexts and partners.	
Feedback from communities: Communities perceive programmes as safe and appropriate, though there is limited evidence that risks—particularly related to safeguarding and unintended impacts—are consistently identified, communicated and addressed across all contexts.	

Commitment 5: People and communities can safely report concerns and complaints and get them addressed.	1.2
NCA demonstrates a clear organisational commitment to accountability through the establishment of policies, procedures and systems for handling feedback and complaints, including safeguarding and SEAH. Structured mechanisms are in place at global and country levels, supported by defined roles, multiple reporting channels and strengthened case management systems such as CaseIQ. Recent efforts, including the establishment of a Global Complaints Advisor and ongoing system reviews, reflect a strong commitment to improving coordination, capacity and oversight. There are also examples of complaints being received, categorised and investigated, with governance structures in place to support case management. However, implementation remains inconsistent, with uneven community awareness, variable partner capacity and limited systems to track, monitor and learn from complaints.	
Feedback from communities: Some community members are aware of complaints mechanisms and value their existence, but awareness and understanding remain uneven. In several cases, communities are unclear about how to report concerns—particularly related to SEAH—or what to expect from the process.	
Commitment 6: People and communities access coordinated and complementary support.	2.3
NCA demonstrates a strong commitment to partnership-based programming, with organisational approaches that promote collaboration, localisation and engagement with relevant stakeholders. Tools such as the Partnership Assessment Tool (PAT), partner surveys and structured monitoring processes support ongoing dialogue with partners and provide a basis for assessing partnership quality. In practice, there are clear examples of participatory partnership approaches, including joint needs assessments, co-development of proposals and budgets, and alignment of policies and standards such as safeguarding and codes of conduct. These systems contribute to building partnerships that are generally collaborative and aligned with programme objectives. However, the systematic assessment and strengthening of partnerships remain uneven across contexts. While mechanisms exist to assess partnership quality, there is limited evidence that findings are consistently translated into documented corrective actions or followed up across all partnerships.	
Feedback from communities: Communities benefit from coordinated support and local partnerships, though consistency in partner performance can influence programme quality.	
Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning.	1.6
NCA demonstrates a commitment to learning and accountability, supported by organisational frameworks, monitoring systems and recent initiatives such as the revision of the Programme Framework, and PIMS. Feedback is collected through multiple entry points, including community consultations, monitoring visits and complaints mechanisms, and there are examples where monitoring data and community input have informed programme discussions and adjustments at project level. Disaggregated data collection is also well established, providing a strong basis for understanding diverse needs. However, a coherent, organisation-wide approach to systematically using feedback, monitoring data and learning to inform decision-making is not yet fully established. Approaches to collecting, analysing and responding to feedback vary across programmes, and there is inconsistent evidence that data from monitoring, feedback and complaints is consistently aggregated and used to improve programmes or organisational practices	
Feedback from communities: Communities report that their feedback has led to changes, but awareness and use of feedback mechanisms remain uneven. In many cases, communities are unclear about how their input is used or are not consistently informed of resulting changes.	
Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed.	2.1
NCA demonstrates a strong organisational commitment to staff competence, conduct and wellbeing, supported by comprehensive policies, HR systems and safeguarding frameworks. These include clear codes of conduct, security	

and risk management systems, complaints mechanisms and structured performance management processes. Staff receive training and support across key areas such as safeguarding, programme delivery and financial management, and there is evidence that these contribute to strengthening competencies in practice. Systems are also in place to enable staff and volunteers to raise concerns safely, with defined procedures for handling misconduct and applying disciplinary measures. However, the consistent application of these systems across all staff categories—particularly volunteers, day workers and partner personnel—remains uneven, and organisational approaches to staff development, inclusion and HR management are not yet fully standardised.	
Feedback from communities: Communities express confidence in staff professionalism and respectful engagement.	
Commitment 9: People and communities can expect that resources are managed ethically and responsibly.	2.5
NCA demonstrates a strong organisational culture of ethical and responsible resource management, supported by robust financial systems, internal controls and environmental considerations. Clear policies and procedures guide budgeting, financial oversight and risk management, and there is evidence that the organisation monitors resource use and takes corrective action when issues are identified. NCA applies a zero-tolerance approach to corruption, aligned with recognised standards such as the ACT Alliance anti-fraud framework, and provides support to partners to strengthen financial management capacity. Environmental stewardship is also integrated into programme design and operations. However, recent organisational changes and financial constraints have affected capacity in some areas, and the consistent implementation of systems—particularly across country offices and partners—remains uneven, including in ethical fundraising and risk management practices.	
Feedback from communities: Communities perceive that resources are used fairly and value the benefits delivered, while partners highlight the usefulness of NCA's financial systems and capacity-building support, alongside some variability in implementation across contexts.	

** 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: NCA does not consistently share relevant and timely information with people and communities, including about their rights in relation to the commitments and responsibilities of the organisation.	Minor	New	by the 2029 Renewal Audit
2026-1.3: NCA does not consistently communicate in languages and formats that are easily accessible, understandable, respectful and contextually appropriate for people and communities.	Minor	New	by the 2029 Renewal Audit
2026-2.5: NCA does not consistently refer unmet priority needs to relevant stakeholders with the technical expertise and capacity to address them.	Minor	New	by the 2029 Renewal Audit
2026-3.2 NCA does not yet systematically support its partners to help them support local capacities to anticipate and reduce risks of potential crises or disasters.	Minor	New	by the 2029 Renewal Audit

2026-4.1 NCA does not systematically identify and address actual negative impacts of programmes on people and communities.	Minor	New	by the 2029 Renewal Audit
2026-4.3 NCA does not ensure safe, ethical and effective management of data and information to minimise risks for people and communities in line with recognised good practice for data protection.	Minor	New	by the 2029 Renewal Audit
2026-4.4 NCA has not yet established a coherent organisational approach to ensure the organisation works in ways that protect the safety, security, rights and dignity of people and communities and prevent all forms of exploitation and abuse, including sexual exploitation, abuse and harassment, by staff and volunteers in line with recognised good practice.	Minor	New	by the 2029 Renewal Audit
2026-5.1: NCA does not systematically plan and implement safe, accessible and appropriate ways for all groups in a community to provide feedback and report concerns and complaints.	Minor	New	by the 2029 Renewal Audit
2026-5.2: NCA does not regularly monitor that people and communities understand how staff and volunteers are expected to act to prevent harmful behaviours, including sexual exploitation and abuse, and harassment.	Minor	New	by the 2029 Renewal Audit
2026-5.3: NCA does not consistently monitor that people, communities and other relevant stakeholders understand how to report concerns and complaints, and how they will be addressed.	Minor	New	by the 2029 Renewal Audit
2026-5.4: NCA does not consistently manage, investigate, address and/or appropriately refer complaints in line with recognised good practice.	Minor	New	by the 2029 Renewal Audit
2026-5.5: NCA does not consistently apply an appropriate victim/survivor-centred approach to investigate and address complaints and reports of any misconduct, including sexual exploitation, abuse and harassment.	Minor	New	by the 2029 Renewal Audit
2026-6.4: NCA does not consistently establish a coherent organisational approach to ensure collaboration and partnerships are based on a commitment to equitable decision making and resource sharing and respect the characteristics, roles and responsibilities of each partner.	Minor	New	by the 2029 Renewal Audit
2026-7.3 NCA does not use data from monitoring, feedback, complaints and learning to guide decision making, and to improve programmes and the organisation's ways of working.	Minor	New	by the 2029 Renewal Audit
2026-7.4 NCA does not share the analysis and learning from feedback and monitoring and any related changes with people and communities supported by the organisation and with relevant stakeholders.	Minor	New	by the 2029 Renewal Audit
2026-7.5 NCA has not established yet a coherent organisational approach for continuous learning and improvement of actions and ways of working to better meet commitments to quality and accountability.	Minor	New	by the 2029 Renewal Audit
Total Number of open CARs	16		

6. Claims Review

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

7. Lead auditor recommendation

In my opinion, NCA 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: Camille Guyot-Bender	**Date and place:** 8 April 2026 Grenoble, France

8. HQAI decision

Certificate renewed:	☒ Issued ☐ Preconditioned (Major CARs)
Start date of the current certification cycle: 2026/05/12 Next audit before 2027/05/12	
Name and signature of HQAI Executive Director: Désirée Walter	**Date and place:** Geneva, 07 May 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	☒ Yes ☐ No
I accept the findings of the audit	☒ Yes ☐ No
Name and signature of the organisation's representative: Anne Cecilie Kaltenborn Anne Cecilie Kaltenborn (May 22, 2026 12:14:41 GMT+2) Anne Cecilie Kaltenborn	**Date and place:** May 22, 2026 May 22, 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

1_NCA_RA_Summary_2026-05-07

Final Audit Report 2026-05-22

Created:	2026-05-18
By:	Johanne Rygh (johanne.rygh@nca.no)
Status:	Signed
Transaction ID:	CBJCHBCAABAAGtw9nXg5rQK6X-ggP1Vz8VW0fi9gHpJk

"1_NCA_RA_Summary_2026-05-07" History

Document created by Johanne Rygh (johanne.rygh@nca.no)
2026-05-18 - 10:27:01 AM GMT- IP address: 77.40.231.163

Document emailed to anne.cecilie.kaltenborn@nca.no for signature
2026-05-18 - 10:28:13 AM GMT

Email viewed by anne.cecilie.kaltenborn@nca.no
2026-05-22 - 10:13:39 AM GMT- IP address: 104.47.51.190

Signer anne.cecilie.kaltenborn@nca.no entered name at signing as Anne Cecilie Kaltenborn
2026-05-22 - 10:14:39 AM GMT- IP address: 84.247.63.159

Document e-signed by Anne Cecilie Kaltenborn (anne.cecilie.kaltenborn@nca.no)
Signature Date: 2026-05-22 - 10:14:41 AM GMT - Time Source: server- IP address: 84.247.63.159 - Signature Appearance Selected: TYPE

Agreement completed.
2026-05-22 - 10:14:41 AM GMT