

SOS Children's Villages The Netherlands (SOS CV NL)

Maintenance Audit 1 – Report - 20204/08/08

1. General information and audit activities

Role / name of auditor(s)	Lead Auditor – Joanne O'Flanagan	
Audit cycle	First cycle	
Opening Meeting	Date / number of participants	Any substantive issues arising
	17 th June 2024 / 14	None
Closing Meeting	27 th June 2024 / 12	None
Interviews	Position / level of interviewees	Number
	Head Office – Leadership / Senior Management	6 (2 from SOS CV NL and 4 from SOS CVI)
	Head Office – Programme Management / Advisors	4 (2 from SOS CV NL and 2 from SOS CVI)

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

Since the Initial Audit (IA) 2023, SOS CV NL developed a Management Response to non-conformities raised at the IA in close collaboration with SOS CVI. Oversight of the SOS CV NL Management Response is held by two members of the management team: one more focused on planned actions at a strategic level and the other more focused on planned actions at a programmatic level. According to SOS CV NL the Management Response was fully coordinated and in line with the management response and corrective actions proposed by SOS CVI. This is because all the CARs of SOS CV NL were also identified for SOS CVI and it was understood to be both necessary and appropriate to align the two management responses. For most planned corrective actions SOS CVI is in the lead, however, SOS CV NL monitors and follows up on progress with regard to planned corrective actions underway at SOS CVI and/or Member Associations (MA) levels. A system for coordination and communication on progress between the offices of each organisation is in place since early 2024 with meetings being held on a regular basis. The Management Response to non-conformities at the SOS CVI level is owned, and progress monitored, by the Humanitarian Action Team (HAT). Planned actions are allocated to team members in collaboration with other teams where relevant, or assigned to designated colleagues outside the team with relevant responsibility.

Overall, SOS CV NL is broadly on track to deliver on the commitments set out in the Management Response (led mainly by SOS CVI) and demonstrates ongoing commitment to ensuring that corrective actions are achieved and are effective prior to the Renewal Audit in 2026. Internal communication emphasises the importance of ensuring that the findings of the IA are addressed over time.

Interviews with staff at SOS CV NL staff indicate increasing awareness of MAs implementing humanitarian programmes of the CHS and of commitments to greater accountability to crisis affected communities. Staff believe that the audit process and the associated messaging around this have brought increased focus to this aspect of the federation's way of working. They express appreciation for the ongoing commitment of SOS CVI staff in driving forward the federation's commitment to increased quality and accountability in humanitarian programming and in facilitating greater collaboration among MAs (including PSAs), and specifically between SOS CVI and SOS CV NL.

No significant changes have taken place at the SOS CV NL Head Office level since the IA.

At a federation level, the Global Secretariat (GSC) has been undergoing a period of organisational 'Transformation' which is bringing changes to the GSC structure and associated operational model. This has involved widespread consultation across the membership of the federation with regard to the demand for secretariat services and how members wish to be represented by the GSC and its CEO. The process has been endorsed by the Senate with approval for an accompanying financial framework. Changes have included the need for cost saving and some

retrenchment at the International Office (IO) and Regional Office (RIO) levels; these changes have not impacted the staffing level of the Global Emergency Response (GER) team. In 2023 the federation unanimously adopted a global humanitarian mandate for the federation; the associated statement of commitment to the humanitarian imperative underpins increased investment in, and focus on, the operational capacity of the IO, RIO and Member Associations (MAs) to anticipate, prepare, prevent, adapt and respond to crises.

The GER team has been renamed the Humanitarian Action Team (HAT) to take account of its remit beyond ER to include emergency preparedness, contingency planning and related research and advocacy agendas. Additional capacity has been added for humanitarian MEAL at IO level.

The SOS CVI Safeguarding Action Plan (2021-24) is on track for completion by the end of 2024 and will be replaced by a new Safeguarding Strategy (2024-30) as the guiding framework for the GSC to monitor adherence to the safeguarding policies and regulations that form the binding safeguarding framework and provides guidance for all departments to identify and mitigate safeguarding risks from all operations and programmes. The strategy also articulates risk mitigation for safeguarding risks.

Note on the audit approach:

With a view to achieving greater efficiency and cost effectiveness, the IA for SOS CVI was used, in part, to inform the findings of the IA of SOS CV Netherlands (NL). This MA1 has been conducted with the same aim and a joint audit process was conducted, involving relevant staff and document evidence from both SOS CVI and SOS CV NL. As a member of the SOS CV Federation, SOS CV NL is primarily bound by the policies, procedures and mechanisms for quality assurance and risk management of the federation. SOS CV NL has a high degree of dependency on the application of policies, procedures and systems by SOS CVI for oversight of all SOS CV humanitarian programmes. The findings of the SOS CV NL IA were broadly in line with those of SOS CVI and the resolution of non-conformities is primarily dependent on initiatives at the GSC level, and the HAT in particular, as articulated in SOS CVI's Management Response. For this reason, the Management Response of SOS CV NL is closely aligned to that of SOS CVI and the findings of the MA1 of SOS CVI are relevant to SOS CV NL and inform this MA1 report of SOS CV NL.

Given this dependence, it is important that the SOS CV NL team with responsibility for monitoring progress at the SOS CVI level maintains effective coordination with relevant colleagues to ensure they are kept informed of progress. While there were some early delays to initiating regular coordination between the organisations and ensuring that SOS CV NL was kept updated and informed of progress, the auditor is satisfied, based on evidence from interviews that this coordination is now in place and effective.

2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution timeframe	Progress made to address the CAR and in response to the findings of the indicator	Evidence (doc no., KII)
2023-3.2: SOS CV NL does not ensure the use of the results of existing community hazard and risk assessments, and preparedness plans, to guide activities in its humanitarian projects.	Minor / by Renewal Audit 2026	<p>The Management Response (MR) of SOS CV NL identifies three actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis.</p> <p>None of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Priority countries to conduct community hazard and risk assessment on a regular basis. (December 2024) 2. Member Associations to put in place minimum and advanced preparedness actions. (December 2024) 3. Include preparedness in SOS MA country strategies. (December 2025) <p>Progress at the time of this audit:</p>	<p>SOSIO01 SOSIO21 SOSIO22 SOSIO77 SOSIO87-94</p> <p>Interviews with staff</p>

		<p>Disaster Preparedness and Response Planning has been a key focus for SOS CVI since the IA. Support to MAs is based on a risk/prioritisation basis conducted in 2023, with an initial focus on 9 MAs categorised as Cluster 1 for prioritised support in 2024. Support includes updating and development of relevant tools and templates and working with MAs to develop humanitarian action strategies, and disaster preparedness plans, including tools for community hazard and risk assessment which are being piloted in Ethiopia. Significant training on disaster preparedness and disaster risk reduction has been conducted with targeted MAs and regions, led by an in-house expert and member of the HAT team.</p> <p>A review of humanitarian Human Resources systems was launched by SOS CVI to improve preparedness and rapid response capability to deploy staff at national and international level. An organisational chart and associated job descriptions (templates) were developed which can be adapted and contextualised to the context.</p>	
2023-3.6: SOS CV NL does not have adequate systems and processes in place to identify and act on actual or potential negative effects in a timely and systematic manner.	Minor / by Renewal Audit 2026	<p>The Management Response of SOS CV NL identifies four actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis and to monitoring if the relevant actions are being carried out at a programme level.</p> <p>Only one of the planned actions was scheduled for completion by the time of this audit. There is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Do no harm assessment to be filled out for humanitarian projects, including monitoring. (December 2024) 2. Introduce environmental marker for humanitarian projects. (June 2025) 3. Develop market assessment tool as part of a complete Cash Voucher Assistance (CVA) toolkit for SOS humanitarian programs. (June 2025) 4. Safeguarding Risk Assessment to be completed for all humanitarian projects. (December 2024) <p>Progress at the time of this audit:</p> <p>A new Safeguarding Strategy (2024-30) has been developed providing a framework for the identification and mitigation of safeguarding risks related to all SOS CV operations and programmes. One key outcome of the strategy is to ensure safeguarding risks are mitigated through programme quality and child and youth participation.</p> <p>A new guidance sheet (draft) has been developed on Cash and Voucher Assistance (CVA) including a chapter on Risk Analysis in relation to CVA programming and potential harms to programme participants.</p> <p>SOS CVI became a signatory of the Climate and the Environment Charter for Humanitarian Organisations in 2023, bringing a stronger institutional focus on climate</p>	<p>SOSIO11 SOSIO50 SOSIO83-86</p> <p>Interviews with staff</p>

		<p>change adaptation and disaster risk reduction, with plans to develop associated tools and targets including the introduction of an environmental marker (currently in draft form) covering consideration of risks of direct and indirect negative consequences to the local environment.</p> <p>Furthermore, SOS CV NL is currently coordinating with SOS CVI on the preparation of Child Protection in Emergencies training to be delivered to MAs later in 2024.</p>	
2023-3.8: SOS CV NL does not have an adequate policy or procedures in place to ensure the safeguarding of personal information collected from communities in humanitarian programmes.	Minor / by Renewal Audit 2026	<p>The Management Response (MR) of SOS CV NL identifies three actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis.</p> <p>None of the planned actions were scheduled for completion by the time of this audit.</p> <ol style="list-style-type: none"> 1. Support MAs to adopt national data protection policies. (December 2025) 2. Provide training for humanitarian project managers and network on data protection. (December 2025) 3. Provide GDPR training across the federation. (December 2025) <p>Progress at the time of this audit:</p> <p>No progress at the current time. Completion of all three planned actions is scheduled for December 2025.</p>	
2023-4.1: SOS CV NL does not systematically ensure that information about its principles, Code of Conduct and expected behaviours of staff is provided to communities.	Minor / by Renewal Audit 2026	<p>The Management Response (MR) of SOS CV NL identifies three actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis and to monitoring if the relevant actions are being carried out at a programme level.</p> <p>None of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Information Sharing on mandate, Code of Conduct (CoC) and zero tolerance on misconduct to be included in operational plans for project implementation. (July 2024) 2. Develop and disseminate IEC material on SOS principles and new CoC to be used by MAs. (July 2024) 3. Develop and roll-out standardized guidance for communication with communities across SOS programs. (December 2024) <p>Progress at the time of this audit:</p> <p>Since the IA, SOS CVI has updated its Code of Conduct (CoC); this has been widely disseminated and trainings rolled out across the federation. The development of accompanying IEC materials for the CoC is currently underway. Evidence provided for this audit does not include examples of operational plans for project implementation in which information sharing is included.</p>	<p>SOSIO51-64 SOSIO78 SOSIO87</p> <p>Interviews with staff</p>

<p>2023-4.4: SOS CV NL does not ensure that mechanisms are systematically in place to enable communities, particularly children and young people, to provide feedback on their level of satisfaction with the quality and effectiveness of the assistance received, and that pay attention to the gender, age and diversity of those giving feedback.</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies four actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis, monitoring if the relevant actions are being carried out at a programme level and applying new guidelines in its own programmes.</p> <p>None of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Adopt Feedback and Complaints Guideline for SOS CVI use for SOS CV NL funded programs (July 2024) 2. Develop Toolkit for humanitarian programmes to roll out feedback and complaints, with special emphasis on child-friendly mechanisms. (December 2024) 3. Introduce Gender Marker to be used for humanitarian project planning and implementation. (December 2025) 4. Provide training (webinar) for project staff on feedback and complaints process and tools. (December 2024) <p>Progress at the time of this audit:</p> <p>A Feedback and Complaints Guideline for SOS CVI has not yet been developed or adopted. However, there is evidence from the documents provided for this audit, and from interviews with staff, that SOS CVI has increased its focus on working directly to support MAs currently implementing humanitarian programmes to develop and implement Feedback and Complaints Mechanisms (FCMs). However, these do not always take into consideration the specific needs of children and young people. In the absence of overarching guidance for the federation, the accompanying toolkit for the Companion for Child Protection in Humanitarian Action (Companion) currently provides an example of a complaint and feedback Standard Operation Procedure (SOP) that can be adapted and used by MAs. Interviews with SOS CV NL staff indicate that currently they share guidelines for FCMs specifically adapted for children that are developed by other organisations, with MAs.</p> <p>Interviews indicate that the development of a federation-level Guideline (regulation) for Feedback and Complaints is underway and is a priority for 2025. Rather than develop a standalone guideline for humanitarian programmes the organisation is prioritising the development of guidance that will apply to the whole federation and across all programmes.</p>	
<p>2023-5.1: SOS CV NL does not ensure that communities and people affected by crisis are consulted on the design, implementation and</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies two actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis, monitoring if the relevant actions are being carried out at a programme level and applying new guidelines in its own programmes.</p>	<p>SOSIO25-39</p> <p>Interviews with staff</p>

<p>monitoring of complaints-handling processes.</p>		<p>Neither of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Adopt Feedback and Complaints Guideline for SOS CVI and use for SOS CV NL funded programs. (July 2024) 2. Develop and use SOS Guidance and tools for consultation with children and young people for humanitarian programmes (as part of the Companion and PRAG - Institutional Funding Practical Guide). (December 2025) <p>Progress at the time of this audit:</p> <p>As noted above, (ref. 4.4), SOS CVI has not yet developed or adopted a Feedback and Complaints Guideline (planned for 2025). Documents describing available FCMs at the MA level and provided as evidence for this audit do not indicate how communities and people affected by crisis, including children and young people, are consulted on the design, implementation and monitoring of complains-handling processes.</p> <p>Interviews with SOS CV NL staff indicate that staff sometimes use and share guidelines for FCMs developed by other organisations with MAs.</p>	
<p>2023-5.6: SOS CV NL does not ensure that communities and people affected by crisis are fully aware of the SOS CV Federation's CoC and PSHEA commitments and of what behaviours they can expect from staff.</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies three actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis and to monitoring if the relevant actions are being carried out at a programme level.</p> <p>Neither of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Disseminate locally contextualized IEC material on PSHEA (Protection from Sexual Harassment, Exploitation and Abuse). (December 2024) 2. Safeguarding Risk Assessment to be completed for all humanitarian projects. (December 2024) 3. Ensure that project staff is trained on CoC and PSHEA and spreads the information. (December 2024) <p>Progress at the time of this audit:</p> <p>In 2024, SOS CVI launched two new staff training videos on PSHEA and a PSHEA Essentials Handbook. A large scale, federation-wide, PSHEA e-learning programme is underway. As of April 2024, 2,913 staff had completed the module. Further, in line with the new Child and Youth Safeguarding Policy (regulation) a mandatory e-learning programme has also been rolled out at 2 levels: 1. specialised, targeting specific roles (line managers, youth</p>	<p>SOSIO65-76 SOSIO78 SOSNL18</p> <p>Interviews with staff</p>

		<p>care practitioners and board members) and 2. generic for all other staff.</p> <p>Evidence of current IEC materials on PSEAH, available at MA level, indicate that these are generally contextualised for communities.</p>	
<p>2023-7.3: SOS CV NL does not have adequate resources or effective systems and procedures in place to share learning internally and with communities and people affected by crisis.</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies four actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis and to monitoring if the relevant actions are being carried out at a programme level. Further, SOS CV NL committed to sharing its own lesson-learned logs internally.</p> <p>None of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Systematically collect lesson-learned logs from closing humanitarian projects and share with project controllers, fundraising and program managers within SOS CV NL. (July 2024) 2. Integrate sharing of learnings with the community as part of operational plans of humanitarian projects and collect documentation of activity at project end. (July 2024) 3. Ensure cross-departmental participation in humanitarian project closure meetings. (July 2024) 4. Organize peer-to-peer exchange webinars on focus topics, highlighting good practices and ensure that related information is stored in a central workspace. (December 2025) <p>Progress at the time of this audit:</p> <p>Interviews with HAT staff (SOS CVI) and document evidence indicate a more consistent approach to gathering lessons learned at project closure and capturing these to inform future programme planning. Evidence provided for this audit does not include examples of operational plans for project implementation that demonstrate the integration of sharing of learnings with the community, however, examples of programme reviews and closure workshops indicate the engagement and participation of programme participants as well as other key internal and external stakeholders to contribute to learning.</p> <p>The HAT team indicates that efforts for closer collaboration with other MAs is proving effective in supporting the delivery of learning initiatives for operational MAs, including, for example, on Disaster Preparedness (with SOS CV France) and on Child Protection in Emergencies (with SOS CV Netherlands).</p> <p>Interviews with SOS CV NL staff confirm more effective sharing of learning and collaboration with humanitarian colleagues at the GSC level. Evidence from SOS CV NL does not include the sharing of lesson-learned logs internally with project controllers, fundraising and program managers.</p>	<p>SOSIO12 SOSIO15-17 SOSIO19-20</p> <p>Interviews with staff</p>

<p>2023-7.4: SOS CV NL does not have clear evaluation or learning policies in place that set out requirements to ensure the organisation systematically learns from experiences and improves practices in humanitarian programming.</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies two actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis.</p> <p>Neither of the planned actions were scheduled for completion by the time of this audit, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Ensure external evaluations for all humanitarian project above 1Mio Eur total budget. (December 2024) 2. Align the project cycle management and toolkit for all projects implemented by SOS to systematically ensure that standards are met and key tools are completed. (December 2024) <p>Progress at the time of this audit:</p> <p>Interviews with HAT staff and document evidence indicate an increased focus on learning from, and evaluation of humanitarian programmes (internal and external), including peer learning among humanitarian staff and more broadly across IO teams and federation members. SOS CVI HAT team members recently attended a federation Evidence for Change workshop (E4C) alongside key staff from IO and a number of other MAs with a focus on articulating a future approach to scale evidence-based and innovation projects. Topics covered included consideration of how to implement mandatory programme indicators across the federation and monitoring and evaluation in humanitarian action.</p> <p>The HAT team is collaborating with IO colleagues in PD and RBM teams to integrate humanitarian indicators, standards and guidance into existing project cycle management guidance, including monitoring, evaluation and learning. Some tools and templates in the Institutional Funding Practical Guide (PRAG) Toolkit have already been adapted.</p>	<p>SOSIO12 SOSIO13 SOSIO14 SOSIO18 SOSIO21-2</p> <p>Interviews with staff</p>
<p>2023-9.4: When using local and natural resources, SOS CV NL does not consider their impact on the environment.</p>	<p>Minor / by Renewal Audit 2026</p>	<p>The Management Response (MR) of SOS CV NL identifies four actions to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis.</p> <p>While there has been some delays in progressing some of the planned actions within agreed timeframes, nonetheless, there is evidence of progress by SOS CVI in addressing the Minor CAR.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. Adjust humanitarian project templates (planning, monitoring, final report) to reflect impact of project on the environment. (July 2024) 2. Introduce environmental marker for humanitarian projects. (June 2025) 3. External expert to provide technical assistance to SOS CVI humanitarian programs to improve environmentally friendly program design. (December 2023) 4. Collect approaches to reduce environmental impact of SOS humanitarian projects, based on a 	<p>SOSIO45 SOSIO48-50 SOSIO83-5</p> <p>Interviews with staff</p>

		<p>mapping of impact of projects, poor and good practices. (July 2024)</p> <p>Progress at the time of this audit:</p> <p>SOS CVI is now a signatory of the Climate and the Environment Charter for Humanitarian Organisations (see also 3.6) and this commitment has been endorsed by senior management. Obligations for organisations adopting the charter require the establishment of specific targets that demonstrate how changes are being implemented and that lead to reductions in environmental impacts. Work is underway to develop and/or adapt tools and templates to support more environmentally sustainable approaches in humanitarian programming, including the development of an environmental marker (draft). One humanitarian programme has developed an environmental impact assessment checklist. Work to ensure a more environmentally sustainable approach to programming is underpinned by a federation-wide Environmental Sustainability Group.</p>	
2023-9.6: SOS CV NL does not have a policy framework in place that ensure resources are used in an environmentally responsible way.	Minor / by Renewal Audit 2026	<p>The Management Response (MR) of SOS CV NL identifies one action to address this non-conformity, all of which are led by SOS CVI. SOS CV NL is committed, as per the MR, to following up progress with SOS CVI on a regular basis.</p> <p>This action, led by SOS CVI is in progress at the time of this audit.</p> <p>Planned actions (timeframe):</p> <ol style="list-style-type: none"> 1. SOS to sign Climate and Environment Charter for Humanitarian Organisations and adopt Action Plan following signature. (December 2024) <p>Progress at the time of this audit:</p> <p>SOS CVI has signed the Climate and the Environment Charter for Humanitarian Organisations (see also 3.6 and 9.4). The Action Plan (indicators and targets) is under development and expected to be finalised by the end of 2024.</p>	<p>SOSIO46-48 SOSIO85</p> <p>Interviews with staff</p>

3. Summary of non-conformities


Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2023-3.2: SOS CV NL does not ensure the use of the results of existing community hazard and risk assessments, and preparedness plans, to guide activities in its humanitarian projects.	Minor	Open	By Renewal Audit 2026
2023-3.6: SOS CV NL does not have adequate systems and processes in place to identify and act on actual or potential negative effects in a timely and systematic manner.	Minor	Open	By Renewal Audit 2026
2023-3.8: SOS CV NL does not have an adequate policy or procedures in place to ensure the safeguarding of personal information collected from communities in humanitarian programmes.	Minor	Open	By Renewal Audit 2026

2023-4.1: SOS CV NL does not systematically ensure that information about its principles, Code of Conduct and expected behaviours of staff is provided to communities.	Minor	Open	By Renewal Audit 2026
2023-4.4: SOS CV NL does not ensure that mechanisms are systematically in place to enable communities, particularly children and young people, to provide feedback on their level of satisfaction with the quality and effectiveness of the assistance received, and that pay attention to the gender, age and diversity of those giving feedback.	Minor	Open	By Renewal Audit 2026
2023-5.1: SOS CV NL does not ensure that communities and people affected by crisis are consulted on the design, implementation and monitoring of complaints-handling processes.	Minor	Open	By Renewal Audit 2026
2023-5.6: SOS CV NL does not ensure that communities and people affected by crisis are fully aware of the SOS CV Federation's CoC and PSHEA commitments and of what behaviours they can expect from staff.	Minor	Open	By Renewal Audit 2026
2023-7.3: SOS CV NL does not have adequate resources or effective systems and procedures in place to share learning internally and with communities and people affected by crisis.	Minor	Open	By Renewal Audit 2026
2023-7.4: SOS CV NL does not have clear evaluation or learning policies in place that set out requirements to ensure the organisation systematically learns from experiences and improves practices in humanitarian programming.	Minor	Open	By Renewal Audit 2026
2023-9.4: When using local and natural resources, SOS CV NL does not consider their impact on the environment.	Minor	Open	By Renewal Audit 2026
2023-9.6: SOS CV NL does not have a policy framework in place that ensure resources are used in an environmentally responsible way.	Minor	Open	By Renewal Audit 2026
Total Number of open CARs		11	

4. Claims Review

Claims Review conducted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up required <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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5. Lead auditor recommendation

In my opinion, SOS CV NL has demonstrated that it is taking necessary steps to address the CARs identified in the previous audit and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.	
I recommend maintenance of certification.	
Name and signature of lead auditor:  Joanne O'Flahagan	Date and place: 2024/07/05, Belfast

6. HQAI decision

<input checked="" type="checkbox"/> Certificate maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Surveillance audit before: 2025-08-08	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 08 August 2024

7. 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:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acknowledgement and Acceptance of Findings: 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
Name and signature of the organisation's representative:  Adrianne Catharine Buurman	Date and place: 19-8-2024, Amsterdam

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>Score 0: 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"> <input type="checkbox"/> Independent verification: major weakness. <input type="checkbox"/> Certification: major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issued or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p>Score 1: 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"> <input type="checkbox"/> Independent verification: minor weakness. <input type="checkbox"/> Certification: minor non-conformity, leading to a minor corrective action request (CAR).
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p>Score 2: 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"> <input type="checkbox"/> Independent verification and certification: observation.
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>Score 3: indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Independent verification and certification: conformity.
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>Score 4: indicates an exemplary performance in the application of the requirement.</p>

* Scoring Scale from the CHSA Verification Scheme 2020