

Tearfund NL

Renewal Audit – Summary Report – 2026/06/18

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	Stichting (foundation) - 41177385	
Head Office location	Utrecht, Netherlands	
Total number of organisation staff	49	

1.2 Audit team

Lead auditor	Joanne O'Flannagan
Second auditor	Aninia Nadig
Third auditor	N/A
Observer	N/A
Expert	N/A
Witness / other participants	N/A

1.3 Scope of the audit

CHS:2024 Verification Scheme	Certification
Audit Cycle	Second cycle
Type of audit	Renewal Audit
Scope of audit	The audit covers all CHS requirements for Tearfund Netherlands (TFNL) international programmes and projects (humanitarian and development). TFNL implements all its work through partners, including Tearfund UK and Integral Alliance members and through local partners. Programmes and projects implemented through these partners are included in the scope of the audit.
Focus of the audit	As an organisation which works exclusively through partners the audit focused on how TFNL assures the CHS when working with partners through remote management from staff based at its Head Office. As this is TFNL's first audit under CHS 2024, previous CARs from CHS 2014 were not formally closed, but informed a risk-based audit approach and were mapped to corresponding requirements in the updated standard.

1.4 Sampling*

Sampling unit	Country Programme
Total number of sampling units	20
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
Uganda – not selected		
South Africa – remote		
Indonesia – remote		
DRC – not selected		
Myanmar - remote		
South Sudan – onsite		
Any other sampling considerations: This audit was aligned with the Renewal Audit for Tearfund UK (TFUK) to achieve greater efficiency and cost effectiveness in the audit process. While the two audits are separate processes with independent findings and certification decisions, they are being coordinated. TFNL and TFUK are both members of the Tearfund Family, a broader group of agencies that hold a common set of values and ways of working, and while each organisation is a fully independent and separate entity, they intentionally work in close collaboration, sharing a common portfolio of partners at around 70-80% indicating a high degree of overlap in their programmatic work. Both organisations are also members of the Integral Alliance, a global alliance of 22 Christian relief and development agencies that come together to respond in times of disaster. TFUK is a major partner of TFNL, and the organisations share a common strategy in a number of countries where they operate. The organisations coordinate closely across a range of strategic areas including in relation to assurance of the CHS. For this reason, the auditors decided to sample one Country Programme for onsite assessment to inform the findings of both audits. The auditors selected South Sudan for this purpose (part of the random sampling for TFNL) as it includes a large project funded by TFNL and overseen by Tearfund UK's Country Office. As TFNL's management system has proved effective over the previous audit cycle, the sample size was reduced from the standard 5 Country Programmes (CP) to 4, in line with the applicable sampling procedure.		
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 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	2026/03/12	Number of participants	8
Location	Remote	Any substantive issues arising	None

2.2 Locations Assessed

Locations	Dates	Onsite or remote
Netherlands	2026/03/12 - 2026/04/03	Remote
South Sudan	2026/03/23 - 2026/03/27	Onsite
South Africa	2026/04/13 - 2026/04/16	Remote
Myanmar	2026/04/14 - 2026/04/15	Remote
Indonesia	2026/04/16 - 2026/04/17	Remote

2.3 Interviews

Level / Position of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	3	4	Remote
Staff	6	3	Remote
Supervisory Board		1	Remote
Country Programme			
Partner staff	15	11	Onsite and Remote
Total number of interviewees	24	19	43

2.4 Consultations with communities

Type of group and location	Number of interviewees		Onsite or remote
	Female	Male	
Group discussion 1 – Project participants – cash assistance (mixed) - South Sudan Joint Response (DRA), South Sudan	7	6	Onsite
Group discussion 2 - Water Management Committee (female) – South Sudan Joint Response (DRA), South Sudan	10	0	Onsite
Group discussion 3 – Project participants – hygiene kits (female) - South Sudan Joint Response (DRA), South Sudan	15	0	Onsite
Group discussion 4 – Project participants – FSL (mixed) - South Sudan Joint Response (DRA), South Sudan	3	3	Onsite
Group discussion 5 – Project participants - Protection (female) South Sudan Joint Response (DRA), South Sudan	12	0	Onsite
Group discussion 6 – Village Savings and Loans group (female) - South Sudan Joint Response (DRA), South Sudan	8	0	Onsite
Group discussion 7 – CCT and Self-Help Group (mixed) - Phase 4 Integrated Community Resilience, economic sustainability and Recovery for Peaceful Coexistence, South Sudan	13	1	Onsite
Group discussion 8 – CCT and Self-Help Group (female) Phase 4 Integrated Community Resilience, economic sustainability and Recovery for Peaceful Coexistence, South Sudan	11	0	Onsite
Group discussion 9 – Peace Group (mixed) - Phase 4 Integrated Community Resilience, economic sustainability and Recovery for Peaceful Coexistence, South Sudan	9	2	Onsite
Group discussion 10 – Project participants (mixed), Integrated Livelihoods Program, South Africa	4	3	Remote
Group discussion 11 - Project participants (mixed), Integrated Livelihoods Program, South Africa	4	1	Remote
Group discussion 12 - Project participants (mixed), Integrated Livelihoods Program, South Africa	5	1	Remote

Group discussion 13 - Project participants (mixed), Integrated Livelihoods Program, South Africa	4	2	Remote
Total number of participants	105	19	124

2.5 Closing Meeting

Date	2026/04/23	Number of participants	4
Location	Remote	Any substantive issues arising	None

3. Background information on the organisation

3.1 General information

Tearfund Netherlands' (TFNL) is an independent, not-for-profit organisation, officially registered in the Dutch Chamber of Commerce and holding ANBI registration. The organisation was founded in 1973, and its aim is to help the people in the world who are in the greatest need. TFNL does this by identifying the places of greatest poverty and working through church-based and Christian partners to seek out and support the most marginalised and vulnerable groups in those places. TFNL's vision is to see people freed from poverty, living transformed lives and reaching their God-given potential. Based in Utrecht, TFNL supports programming in humanitarian aid and community development. TFNL also advocates for justice and tackling the root causes of poverty and injustice.

TFNL is a member of the wider Tearfund Family, a group of separate organisations that are tied together by their faith-driven mission, belief that the local church is a key driver for sustainable change and commitment to holistic transformation to tackle both the root causes of poverty and the impact of disasters. TFNL is also a member of the Integral Alliance (IA), the Dutch Relief Alliance (DRA) and Christelijk Noodhulpcluster.

In 2026, TFNL supports programmes in 20 countries across Africa, Asia and the Middle East as well as support to programming in Ukraine and Haiti.

The current TFNL strategy is focused on four corporate priorities for the period 2024-26:

- Church & Community Transformation (CCT)
- Environmental & Economic Sustainability
- Reconciled and Peace-filled Societies
- Crisis to Resilience

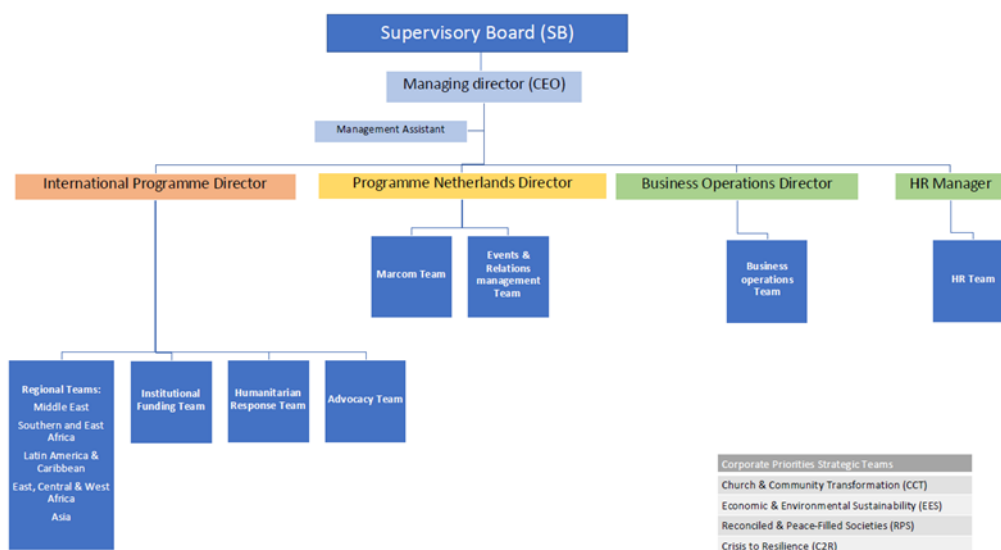
In 2024, TFNL supported more than 700,000 people across 25 countries in partnership with more than 2,400 churches. According to the 2024 financial statements, total income was more than €22 million, with programmatic expenditure of just over €18 million.

3.2 Governance and management structure

TFNL operates legally under the oversight of a Board of Directors (constituted by the CEO) and an independent Supervisory Board (SB), which serves as the highest governing authority. The CEO and Supervisory Board meet at least five times per year. The SB has eight members who serve a maximum of two three-year terms. Additional governance responsibilities are undertaken by three board committees: Audit; Remuneration; and Safeguarding and Wrongdoing. Governance is managed through official statutes, management regulations and multi-year and annual business plans, as well as a mandatory Code of Conduct.

The CEO is responsible for day-to-day management and is supported by an Executive Team comprising three Directors (International Programmes; Programme Netherlands; and Business Operations) as well as the Human Resources Manager. There are four teams within the International Programmes department, headed by a Team Leader: Asia; East and Central Africa; Southern and Eastern Africa; and Institutional Funding. The Business Operations and HR provide support for the effective functioning of TFNL's work by providing financial administration, ICT services, facilities, policy management, quality and risk management systems, and recruitment, performance and talent management processes.

The following organogram represents TFNL's governance and management structure:



Management of the International Programme is organised into five geographical clusters: Asia; Middle East; Southern and East Africa; East, Central and West Africa; and Latin America & Caribbean. TF NL has divided its work into two country operating models:

- Focus countries. TFNL is committed to long-term support to nine priority countries to add value to communities and strengthen local partners.
- Flex countries. TF NL is present for a limited period of time because of specific needs (humanitarian crisis or disaster), opportunities and access to funding.

3.3 Work with partner organisations

TFNL has adopted a partner-led implementation approach, partnering with local churches and faith-based organisations to implement its programming and all TFNL staff are based at its Head Office in the Netherlands with staff visiting partners and projects on a regular basis for monitoring and strategic engagement. Through Church and Community Transformation (CCT), strategic alliances such as the Integral Alliance, and its commitment to Integral Mission, TFNL emphasises strengthening local capacity and addressing the root causes of poverty. TFNL is committed to localisation and to the principles of equitable partnership.

TFNL follows standardised partner assessment processes, aligned with TFUK, to assess four key areas: governance; financial control; ability to deliver; and operations. Embedded within these assessment areas are compliance requirements related to TFNL Quality Standards (QS), safeguarding and accountability to communities among other areas. Partners are oriented on TFNL's commitment to the CHS which is embedded within the organisation's core QS. TFNL applies a standardised approach to partner agreement and reporting processes with a suite of templates designed to ensure all projects meet TFNL's standards for quality and accountability. A partner survey is undertaken every three years to inform strategic planning and assess satisfaction with the partnership with TFNL.

TF NL works in close collaboration with TFUK, sharing a common portfolio of partners at around 70-80%. TF UK is a major partner of TF NL, and the organisations share a common strategy in a number of countries where they operate. The organisations coordinate closely across a range of strategic areas including in relation to assurance of the CHS. When TF NL does not partner with TF UK or members of other networks, primarily IA, it prioritises partnerships with local faith-based agencies or churches.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

TFNL has a well-developed internal control environment rooted in its Code of Conduct and a suite of core policies covering safeguarding, conflict of interest, fraud, loss and bribery, and data security. Standards are established for all staff, volunteers, consultants and Supervisory Board members, and induction processes and mandatory training requirements ensure consistent staff awareness and engagement with these frameworks.

Risk management is structured around a risk appetite statement, and the risk register captures a broad range of risks including safeguarding, programme quality, financial wrongdoing, recruitment, data security and business continuity; risk is subject to close oversight at Audit Committee level. A three-year Board-approved business plan drives annual planning, monitored through a structured planning and control cycle with half-year and annual reporting to the Board. Dashboard reporting provides comprehensive financial oversight.

The Quality Officer functions as an internal auditor across all functions including safeguarding, with the ability to report independently and directly to the Supervisory Board, providing a line of assurance beyond the Executive Team. A dedicated Safeguarding and Wrongdoing Committee meets regularly. At programme level, a Design, Monitoring and Evaluation framework is established and consistently applied, with close partner support embedded in organisational routines. Full partner assessments are undertaken every three years, with an annual review that includes updates to the action plan.

TFNL continues to focus on strengthening its approach to quality assurance, ensuring that QS are considered in all projects and programmes, including the introduction of compulsory feedback and complaint logs as a standard annex to all partner agreements and submitted to TFNL twice per year since the Initial Audit (IA).

As a member of the Tearfund Family and due to ongoing and close collaboration with TFUK, TFNL also has access to key tools and procedures used by TFUK to ensure the quality of projects and programmes. In line with this TFNL staff also have access to relevant training and guidelines that supports them to implement the technical standards in all projects.

4.2 Level of application of the CHS

TFNL demonstrates a strong and embedded commitment to quality and accountability across its programmes and operations. The CHS commitments are integrated into organisational policies, partner assessment and agreement processes, project design and approval, and staff training and induction. A dedicated CHS Project Team, supported by a Steering Group comprising senior management, oversees implementation of the CHS Improvement Plan with a dedicated budget, and progress is reported annually to the Supervisory Board. The Quality Officer functions as an internal auditor with a direct line to the Supervisory Board, providing an important independent line of assurance.

Particular strengths identified at this audit include a strong organisational culture of quality and accountability, promoted and demonstrated by leadership and staff at all levels. Staff wellbeing, safety and inclusion are actively supported, and staff express high levels of confidence in management and in reporting mechanisms. The organisation has a well-developed approach to environmental sustainability and strong financial controls. Diversity, equity and inclusion are systematically integrated into programme design and implementation, with consistent attention to the most marginalised. TFNL's commitment to localisation and equitable partnership is evident, and partners across all sampled country programmes describe the organisation as respectful, supportive and genuinely collaborative.

Since the previous audit, TFNL has made progress in strengthening community accountability, including updating its Community Accountability Policy, introducing mandatory feedback and complaint logs for all partners, and investing in contextually appropriate PSEAH information sharing materials developed in collaboration with partners.

The main areas of weakness identified at this audit relate to how TFNL's commitments to quality and accountability are experienced at community level. TFNL does not consistently ensure that partners share information with communities on expected staff behaviour and PSEAH commitments and does not systematically monitor whether communities understand how to report concerns and complaints, including those related to SEAH. These gaps are reflected in two minor corrective action requests (also see 4.3 PSEAH). Observations are also noted on data protection for SEAH-related information, partner-level investigation capacity, and the risk that staff carrying responsibilities across multiple functions may face capacity constraints over time.

4.3 PSEAH

TFNL demonstrates a strong commitment to preventing sexual exploitation, abuse and harassment, scoring 89% on the PSEAH index. The organisation has established a coherent

approach to PSEAH across its policies, partner agreements, project design and approval processes, and staff training and induction systems. A culture that takes SEAH issues seriously is promoted and demonstrated by leadership, staff and partners. PSEAH obligations are well understood at all levels and are embedded in partner assessment and contractual requirements. Code of Conduct commitments, including the prohibition of SEAH, are signed by all staff, volunteers, contractors and board members. Complaint handling and whistleblowing mechanisms are in place and trusted by staff.

The main areas of weakness relate to community-level PSEAH commitments. TFNL does not ensure that partners consistently share information with communities on expected staff behaviour and PSEAH commitments and does not effectively monitor whether communities understand how to report SEAH concerns and how these will be addressed. These gaps are reflected in CARs on requirements 1.2, 5.2 and 5.3 and an observation on 1.3.

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
TFNL has a coherent and well-embedded approach to information sharing, participation and inclusion, with clear attention to the most marginalised across the sampled projects. Diversity, equity and inclusion considerations are integrated into programme design, partner assessment and accountability processes. Communications with communities are accessible, respectful and contextually appropriate. However, a minor non-conformity is identified as not all partners consistently share information with communities on expected staff behaviour and PSEAH commitments. An observation notes that intra-community power dynamics may, in some contexts, limit meaningful participation of more marginalised groups.	
Feedback from communities: Communities expressed high satisfaction with how TFNL partners engage with them, describing inclusive, respectful and responsive consultation processes. However, some community members were not aware of expected staff conduct or PSEAH commitments and did not recall being informed about rules of behaviour for staff, and others understood such rules to apply to their own conduct rather than to that of TFNL and partner staff.	
Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities.	3
TFNL has established a coherent organisational approach to ensuring support is based on an understanding of the context and culture and the diverse capacities, vulnerabilities, needs and risks faced by people and communities, with attention to the most marginalised. TFNL's programmes are planned and implemented with respect of local knowledge, capacities and existing actions and selection criteria are fair and impartial. TFNL applies relevant technical standards when planning and implementing programmes and refers unmet needs to relevant stakeholders. Evidence from TFNL's sampled programmes demonstrates a comprehensive understanding of local context, culture and risks in relation to humanitarian programming. TFNL has a solid approach to monitoring and adjusting programmes.	
Feedback from communities: Communities considered that TFNL partners understand their context, and they perceived TFNL's targeting criteria to be fair and transparent and including vulnerable and marginalised groups. They stated that provision of goods and services was relevant and timely. Communities confirmed that TFNL partners engaged with them during needs assessments and consulted them about priorities before implementation. They considered that staff demonstrated technical competence and responded to feedback. Partners were said to adapt projects as possible, when issues arose.	

Commitment 3: People and communities are better prepared and more resilient to potential crises.	3
TFNL demonstrates a strong commitment to supporting community resilience and locally led humanitarian action. Country strategies prioritise building community resilience through locally identified and community-led initiatives, supporting formal and informal community and church leadership structures and partnering with local authorities, churches and communities. TFNL and partners develop and continuously assess risk assessment frameworks, both globally and for all projects. Programming focuses on building local capacities through trainings to anticipate and reduce risks, with strong emphasis on anticipating and addressing protection risks. Programmes are designed to have long-term positive effects on lives, livelihoods, local economies and the environment, with focus on skills enhancement for communities and capacity building of local organisations.	
Feedback from communities: Communities confirmed TFNL's partners' consistent engagement with formal and informal leadership and with local authorities. They particularly appreciated TFNL partners' focus on sustainability and resilience and on recognising their existing skills and knowledge to then offer support in building on and strengthening them. Communities emphasised the quality of training and technical inputs and their importance for addressing impacts of climate change. Communities also confirmed TFNL partners' focus the environmental impact on projects.	
Commitment 4: People and communities access support that does not cause harm to people or the environment.	2.4
TFNL demonstrates a sincere commitment to Do No Harm, with safeguarding as an important corporate risk and CHS commitments embedded throughout policies, partner management and project design processes. Environmental sustainability is well-embedded, with a dedicated focal point and strong evidence of good practice across sampled programmes. However, observations are noted: monitoring of potential negative effects, particularly related to SEAH, is not systematically embedded in programme monitoring or partner reporting, and guidance on the protection of sensitive personal data related to SEAH incidents lacks sufficient specificity.	
Feedback from communities: Communities reported no negative effects from TFNL programmes and testified to significant positive impacts on livelihoods, wellbeing and environmental sustainability. They described TFNL partners as responsive to concerns raised during project implementation.	
Commitment 5: People and communities can safely report concerns and complaints and get them addressed.	1.8
TFNL has a coherent approach to complaint handling, with meaningful progress since the previous audit including mandatory feedback and complaint logs and structured partner reporting on feedback and complaints. Staff and partners are clear on PSEAH obligations and reporting mechanisms. However, two minor corrective action requests are identified: TFNL cannot demonstrate systematic monitoring of whether communities understand how staff are expected to behave, or how to report concerns including SEAH complaints. Observations note gaps in partner-level investigation capacity and survivor-centred practice, and risks to confidentiality where written mechanisms are the primary option for low-literacy communities.	
Feedback from communities: Communities expressed broad confidence in complaint mechanisms and trust in TFNL partners' responsiveness. However, not all community members were aware of reporting channels or understood how SEAH concerns would be addressed.	
Commitment 6: People and communities access coordinated and complementary support.	2.8
TFNL has a coherent organisational approach to equitable collaboration and partnerships, with a focus on coordination and complementarity of actions. TFNL respects the characteristics, roles and responsibilities of each partner and ensures that partnerships are regularly assessed and adjusted as needed. While TFNL supports partners to apply commitments to quality and accountability to the communities they work with, there is a risk that	

partner support across all TFNL's country programmes may not always be timely or consistent due to TFNL's operational distance.	
Feedback from communities: Communities confirmed that TFNL and partners are committed to engagement with relevant ministries and authorities and that their work is complementary to that of other stakeholders.	
Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning.	2.6
TFNL listens and responds to community feedback about its work and collects relevant community data for decision-making in a respectful way and reflective of community diversity. TFNL uses collected data for programmatic and organisational learning. Where possible, it feeds this learning back to communities and other stakeholders. TFNL has a coherent organisational approach to drive programmatic and organisational improvements. However, demands on partners for producing the required data are high and there is a risk that certain important project information may not reach TFNL in a timely manner and that over time, TFNL's approach to continuous learning and improvement may not be fully implemented.	
Feedback from communities: Communities appreciated opportunities to provide feedback throughout project implementation and confirmed that TFNL partners responded to feedback received. They confirmed that TFNL takes account of the diversity in their communities during data collection.	
Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed.	3
TFNL demonstrates a strong culture of quality and accountability across all levels of the organisation. Leadership is widely credited with strengthening systems, standards and staff confidence in recent years. The Code of Conduct, PSEAH obligations and reporting mechanisms are well understood by all staff, and partners describe TFNL staff as respectful, skilled and supportive. Staff safety, wellbeing and inclusion are actively supported. An observation notes that some staff carry responsibilities across multiple functions, presenting a risk that the breadth of responsibilities may over time constrain the quality and accountability of delivery across all areas of work.	
Feedback from communities: Communities described partner staff as knowledgeable, professional, respectful and ethical, confirming that staff treat them with dignity and in line with organisational values.	
Commitment 9: People and communities can expect that resources are managed ethically and responsibly.	2.8
TFNL has a coherent organisational approach to ensure that resources are managed efficiently, effectively and ethically. This includes a strong policy base for raising and allocating funds, and financial resource management. TFNL's risk management system allows it to respond appropriately to concerns regarding fraud and corruption and has mainstreamed environmental focus into its resource management processes, including in supply chain and logistics. However, potential future funding constraints may put a strain on the organisation's current capacity to ensure adequate resources to meet its organisational commitments and to support partners in implementing programmes effectively.	
Feedback from communities: Communities expressed confidence in TFNL partner's resource management and effective impact and reach. Communities understood that TFNL and partners do not tolerate fraud, corruption or bribery.	

** 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: TFNL does not ensure that partners share relevant and timely information with people and communities on standards of behaviour for staff, including PSEAH commitments.	Minor	New	by the 2029 Renewal Audit
2026-5.2: TFNL does not ensure regular monitoring of community level understanding of how staff and volunteers are expected to act to prevent harmful behaviours, including SEAH.	Minor	New	by the 2029 Renewal Audit
2026-5.3: TFNL does not ensure regular monitoring of community level understanding of how to report concerns and complaints, including SEAH related complaints, and how they will be addressed.	Minor	New	by the 2029 Renewal Audit
Total Number of open CARs		3	

6. Claims Review

Claims Review conducted	☒ Yes ☐ No	Follow-up required	☐ Yes ☒ No
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7. Lead auditor recommendation

CERTIFICATION In my opinion, TFNL 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:  Joanne O'Flanagan	Date and place: 18 th May 2026 Belfast

8. HQAI decision

Certificate renewed:	☒ Issued ☐ Preconditioned (Major CARs)
Start date of the current certification cycle: 2026/08/07 based on previous cycle.	

Next audit before 2027/08/07	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 18 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: <i>If yes, please give details:</i>	☐ 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: Guido de Vries, CEO  	Date and place: 26-06-2026

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