Tearfund UK
Renewal Audit – Summary Report – 2024/02/27

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	INGO, Registered Charity No.265464	
Head Office location	Teddington, United Kingdom	
Total number of organisation staff	1,057	

1.2 Audit team

Lead auditor	Nik Rilkoff
Second auditor	Agnes Konrat
Third auditor	
Observer	
Expert	
Witness / other participants	

1.3 Scope of the audit

CHS Verification Scheme	Certification
Audit cycle	Third cycle
Coverage of the audit	The whole organisation, its humanitarian, development, and advocacy programmes. The independent organisations part of the Tearfund family are not covered by the scope of this audit.

1.4 Sampling*

Total number of Country Programme sites in scope			38
Total number of sites for onsite visit			2
Total number of sites for remote assessment			4
Name of country programme site	**Included in final sample (Y/N)**	**Rationale for sampling and selection / de-selection decision**	**Onsite or Remote**
Random sampling			
Nepal	Y	Development mandate, partner implementation, geographic representation	Onsite
Ethiopia	Y	Development mandate and flagship Church and Community Transformation (CCT) approach implemented by churches	Remote
Nigeria	N	Audited in 2021	
Tanzania	N	Deselected based on confidential but accepted reason	

Haiti	N	Audited in 2020	
South Sudan	N	Audited in 2020	
Rwanda	Y	Development mandate, partner implementation, geographic representation	Onsite
Purposive sampling			
Central African Republic (CAR)	Humanitarian mandate (recovery), direct implementation		Remote
Democratic Republic of Congo (DRC)	Humanitarian mandate, implementation direct and through partner		Remote
Iraq	Development mandate, partner implementation, geographic representation		Remote
Any other sampling performed for this audit: As per HQAI's Third-party Quality Assurance Procedures (PRO114-1), sampling is reduced to 80% of the full amount prescribed (7 countries) where the management system has proved to be effective over the last audits.			
Sampling risks identified: None, the auditors trust the information collected through sampling, and have been able to draw findings on performance against the CHS based on the collected evidence.			

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 Locations Assessed

Locations	Dates	Onsite or remote
Global (Teddington and global roles)	2023/10/4–2023/11/3	Remote
Rwanda	2023/11/13–17	Onsite
Nepal	2023/11/20–25	Onsite
Central African Republic (CAR)	2023/18/12-2027/01/12	Remote
Democratic Republic of Congo (DRC)	2023/18/12-2027/01/12	Remote
Ethiopia	2023/18/12-2027/01/12	Remote
Iraq	2023/18/12-2027/01/12	Remote

2.2 Interviews

Level / Position of interviewees	Number of interviewees		Onsite/ Remote
	Female	Male	
Head Office / Global			
Management	7	8	Remote
Staff	10	9	Remote
Country Programmes			
Management	4	4	Onsite
Staff	4	4	Onsite
Partner staff	4	8	Onsite

Local elected government, Nepal		2	Onsite
Local government technical staff, District Agriculture Units, Rwanda		4	Onsite
Local police, Nepal		1	Onsite
Total number of interviewees	**29**	**40**	**69**

2.3 Consultations with communities

Type of group and location	Number of participants		Onsite or remote
	Female	Male	
Partner 1, farmers group 1 Nyirabidibiri, Rwamagana, Rwanda	9		Onsite
Partner 1, farmers group 2 Nyirabidibiri, Rwamagana, Rwanda		9	Onsite
Partner 1, farmers group 3 Nyirabidibiri, Rwamagana, Rwanda	10		Onsite
Partner 1, farmers group 4 Nyirabidibiri, Rwamagana, Rwanda		7	Onsite
Partner 1, farmers group 5 Nyirabidibiri, Rwamagana, Rwanda	8		Onsite
Partner 1, farmers group 6 Nyirabidibiri, Rwamagana, Rwanda		11	Onsite
Partner 1, Commercial Village Trade Facilitators (CVTFs), Nyirabidibiri, Rwamagana, Rwanda	1	1	Onsite
Partner 1, farmer focal points, Nyirabidibiri, Rwamagana, Rwanda	1	1	Onsite
Partner 1, farmers group 7, Gasabo, Rwanda	10		Onsite
Partner 1, farmers group 8, Gasabo, Rwanda		10	Onsite
Partner 1, farmers group 9 Gasabo, Rwanda	10		Onsite
Partner 1, farmers group 10 Gasabo, Rwanda		11	Onsite
Partner 1, farmers group 11, Gasabo, Rwanda	10		Onsite
Partner 1, farmers group 12, Gasabo, Rwanda		10	Onsite
Partner 1, CVTFs (M/F), Gasabo, Rwanda	1	1	Onsite
Partner 1, farmer focal points (M/F), Gasabo, Rwanda	1	1	Onsite
Partner 2, self-help group 1, Helambu Municipality - 03, Sindhupalchok, Nepal	7	3	Onsite
Partner 2, self-help group 2, Helambu Municipality - 03, Sindhupalchok, Nepal	5	4	Onsite
Partner 2, self-help group 3, Helambu Municipality - 03, Sindhupalchok, Nepal	13	2	Onsite
Partner 3, self-help group 1, Chautara Sangachowkgadhi Municipality - 05, Sindhupalchok, Nepal	8		Onsite
Total number of participants	**94**	**71**	**165**

2.4 Opening meeting

Date	2023/10/02
Location	Remote
Number of participants	18
Any substantive issues arising	None

2.5 Closing meeting

Date	2023/12/14
Location	Remote
Number of participants	13
Any substantive issues arising	None

3. Background information on the organisation

3.1 General information	Tearfund UK (hereafter 'Tearfund') is a faith-based organisation created in 1968 by the Evangelical Alliance as a response to the Biafran civil war in Nigeria. Tearfund undertakes long-term development work to address the causes of poverty; disaster response activities to reduce death and suffering caused by disasters and conflict; and advocacy to address the underlying causes of poverty and influence those who can change policies and actions affecting the poor.

Tearfund´s mission is to follow Jesus where the need is greatest, responding to crises and partnering with local churches to help people lift themselves out of poverty; its vision is to see people freed from poverty, living transformed lives and reaching their God-given potential.

Tearfund is a member of the Tearfund family, a network of independent organisations with a common set of values - Christ-centred, compassionate, courageous, truthful and servant-hearted - working to reduce poverty and injustice in the world. There are independent Tearfund organisations in the UK, US, Canada, Netherlands, Belgium, Germany, France, Switzerland, New Zealand, Ireland and Australia. Tearfund is a member of alliances and networks including the Disasters Emergency Committee (DEC), BOND, Micah Network, the Integral Alliance, the Start Network and Joint Learning Initiative.

In 2023, Tearfund was operational in 50 countries in the Americas, Africa and Asia, with headquarters in the UK and nearly 1,100 staff. An organisational restructure during the year changed the geographic profile (see 3.2).

In 2022/23 Tearfund consolidated its four outcomes (churches mobilised, emergency needs met, communities transformed and society changed) and their three corporate priorities (Church and Community Transformation, Environmental and Economic Sustainability, and Fragile States) into four outcome-focused corporate priorities: Church and Community Transformation (CCT), Environmental and Economic Sustainability (ESS), Reconciled Peace-filled Societies and Crisis to Resilience. Tearfund is updating its systems and reporting processes to monitor impact against the corporate priorities, each of which has a vision statement to provide direction and focus for work at community, national and global levels.

During 2022-23, Tearfund reached more than 2.3 million people through its crisis to resilience programming; 1.4 million people through community development work; and mobilised 27,000 local churches. According to the 2022-23 financial statements (year end 31 March 2023), total income reached 85.4 million GBP, an increase of 7.5% from 2021-22 attributable to funds raised for prominent emergencies, with less unrestricted income than planned. Total expenditure was 90.3 million GBP, up by 17% from 2022, partially attributable to this increase in restricted funding. The senior statutory auditor's opinion is that the financial statements give a true and fair view of the state of the group's, and of the parent charitable company's, affairs. |
| **3.2 Governance and management structure** | The Board of Trustees is Tearfund´s highest authority; appointed by members at the Annual General Meeting, it is responsible for Tearfund's strategic direction and formally meets quarterly. Included in quarterly reporting to the Board are quarterly scorecards documenting the progress of each country programme in meeting Tearfund's eight quality standards, that align with the CHS.

There are seven committees that ensure the quality of Tearfund's work, comprised of Board and executive team members: theology; global fundraising and communications; international impact; audit, risk and finance; safeguarding; diversity and inclusion; and 'The Well' advisory. (The Well is an initiative working in partnership with Black Christians and Black majority churches to help tackle extreme poverty and injustice.) |

During this Renewal Audit, Tearfund has been consolidating an organisational change process resulting from two factors. One change process (the 'international review') was initiated in 2017, with the objective of moving resources and decision-making closer to communities being served, prioritising flexibility and simplicity. A Cluster Team supports and guides teams in each region, and these staff are now located closer to the programmes and partners, each with dedicated leads for human resources, emergency response, communications, design monitoring & evaluation, Church and Community Transformation (CCT) and Advocacy.

The decentralisation was reviewed in 2020, with further recommended localisation changes in support and quality support teams ongoing in 2023, seeking to ensure every role's contribution to the corporate priorities. A 2023 review of Tearfund's matrix management arrangement identifies lessons and recommendations to ensure the organisation's impact. Improvements to matrix management are being considered alongside the regionalisation and localisation of staff roles, to ensure effectiveness. Additional changes to departments and teams complete the restructure, including for example changes in team composition and name from "Operations and Assurance" to "Operations and Quality", where the Quality Standards (QS) & CHS Specialist now sits. This move is accompanied by a reduction in QS staff.
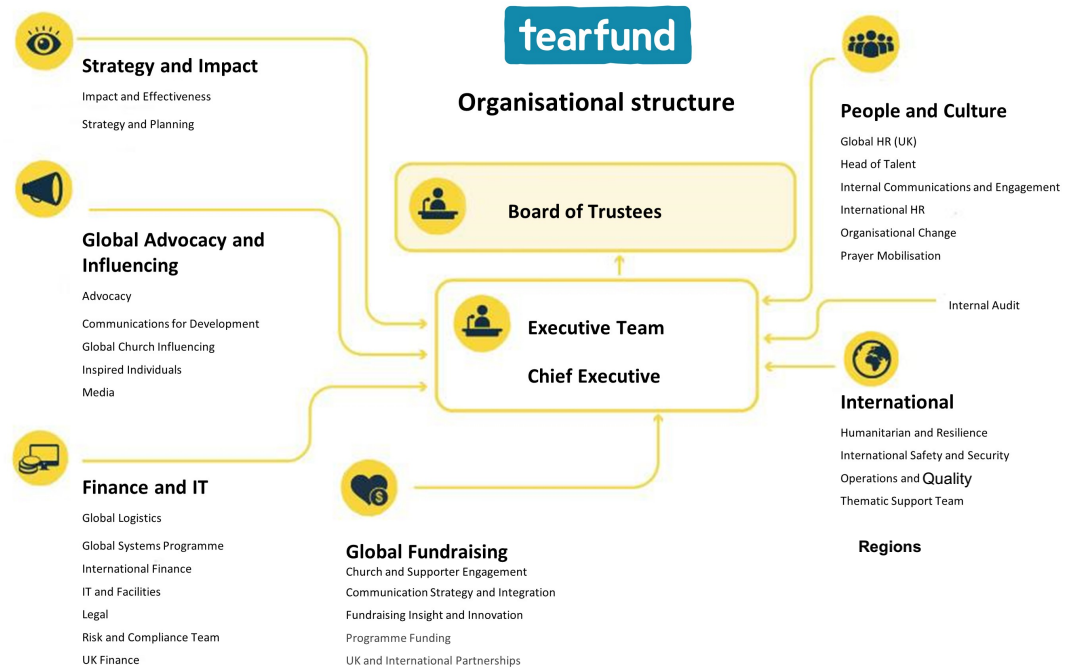
The second change process is driven by fundraising trends in the sector and resulted in spending cuts and a review of activities based on projections and the need to ensure ongoing financial sustainability.

Alongside the 2022/23 review of corporate priorities, Tearfund updated the operating models used to classify country programmes, revising the number from five to three, based on the level of funding and interaction with partners. Subsequently, country teams are rewriting their strategies to allow for a transition year to reflect this new approach.

At the global level, Tearfund's Executive Team (ET) comprises the Chief Executive and six Heads of Departments: 1. International Group (IG), 2. Advocacy & Influencing Group (AIG), 3. Global Fundraising Group (GFG), 4. Finance and Information Technology (FIT), 5. People & Talent Group (P&T), 6. Strategy & Impact Group (S&I).

The IG is organised around the geographical clusters, within which strategy formulation, decision-making, and delegation of authority are decentralised to Country Representatives (with defined financial limits and in line with Tearfund policies and procedures). The IG includes humanitarian support for the pan-African Surge Team, coordination, facilitation and advice for emergency and disaster responses. Support to the IG is also provided by the International Safety & Security, Operations & Quality, and Thematic Support teams:

hqai
HUMANITARIAN QUALITY
ASSURANCE INITIATIVE

Tearfund Organogram

tearfund
Organisational structure

Strategy and Impact
Impact and Effectiveness
Strategy and Planning

People and Culture
Global HR (UK)
Head of Talent
Internal Communications and Engagement
International HR
Organisational Change
Prayer Mobilisation

Board of Trustees

Global Advocacy and Influencing
Advocacy
Communications for Development
Global Church Influencing
Inspired Individuals
Media

Internal Audit

Executive Team
Chief Executive

International
Humanitarian and Resilience
International Safety and Security
Operations and Quality
Thematic Support Team

Finance and IT
Global Logistics
Global Systems Programme
International Finance
IT and Facilities
Legal
Risk and Compliance Team
UK Finance

Global Fundraising
Church and Supporter Engagement
Communication Strategy and Integration
Fundraising Insight and Innovation
Programme Funding
UK and International Partnerships

Regions

3.3 Internal quality assurance mechanisms and risk management	Tearfund's system of internal control is under the responsibility of the Board of Trustees' Directors with delegation to the rest of the organisation through the Chief Executive. Tearfund has quality assurance and risk management mechanisms in place that govern internal organisational functions, country operations, as well as programmes.

Tearfund has developed an organisation-wide risk management system that includes a Risk Management Policy, a Risk Appetite Statement and a Risk Management Procedure. Major strategic and operational corporate level risks are identified and reported within Tearfund's Risk Registers, and key risks are reviewed quarterly by the ET and by the Audit, Risk and Finance Committee (ARFC). Corporate Risks and Risk Appetite are reviewed annually. At country level, country strategies include risk assessments and programmes should include a section on risks. Some country offices have Country Risk Registers and contingency plans.

The Internal Audit team develops its plans and visits country offices (9-11 per year) based on an assessment of greater risk areas, and reports to the ARFC. A fulltime Investigations and Safeguarding Manager advises and coordinates prevention and response to fraud and other types of wrongdoing.

Tearfund has developed its own Quality Standards (QS) that cover its humanitarian, development and advocacy work and are aligned with the CHS. Tearfund has a dedicated team and several mechanisms in place to monitor how its QS are being implemented. Every year, country offices carry out a mandatory QS self-assessment showing the level of compliance with each QS and the main weaknesses.

The mandatory Country Office Scorecard system reports quarterly on the level of implementation of QS in country office work. Since 2021, Tearfund has been rolling out its Country Office Accreditation (COA) system (with bronze, silver and gold rankings) that assesses capacity against good practice, and is used as a guide to allocate funding for appeals.

Tearfund's online project cycle management system, Track, provides a consistent approach to capturing and assessing data across its programmes. |

The Design, Monitoring & Evaluation (DME) procedure is structured around the project cycle and includes comprehensive tools and guidelines. Assigned 'approvers' ensure that the information entered into the Tearfund Track system is of the required quality to support amalgamation of results and measurement of impact against the four corporate priorities.

Tearfund's new Grant and Partner Management Application, Levi, has been chosen to replace the former tool (Ibis) in 2024. It provides financial and compliance management of projects and will support Tearfund teams in the delivery and governance of projects.

Tearfund performs an Annual Staff Engagement Survey (since 2019) to measure best practices for understanding staff engagement, its features, and broader organisational health indicators.

3.4 Work with partner organisations	Tearfund's partners include local churches, denominations and Christian national and international NGOs that agree with their Statement of Faith and meet their partnership criteria. Tearfund partners with international NGOs, including members of the Tearfund family where possible, or an organisation from one of Tearfund 's networks (see 3.1). Tearfund directly implements programmes in countries affected by protracted crises, where the availability and capacity of partners are limited. Country Directors are primarily responsible for relationships with partner organisations, as well as capacity building within and among partners. Tearfund's processes, policies and tools facilitate due diligence in partner selection and support relationship development as well as accountability. Partner Assessments check mandatory partner requirements including compliance and capacity to meet the Quality Standards and risk profiles. Partner assessments monitor capacities and support risk mitigation, and capacity building plans are jointly developed to support gaps (if any exist). Within the Quality Standards, Tearfund requires partners to meet beneficiary accountability requirements, and this is stipulated in Partnership Agreements. Partners are expected to record project implementation and monitoring information in Track, and Tearfund and partners hold regular partnership reviews and complete quarterly Country Office Scorecards. In 2022/23, Tearfund UK worked with 262 partners, 456 denominations and 292 networks. The Church and Community Transformation (CCT) approach seeks to develop a global church movement to transform the wellbeing of people living in the greatest poverty. CCT is the bedrock of much of Tearfund's work and it interconnects with the other three corporate priorities. The partnership requirements in CCT MOUs are currently different than those detailed in partnership policies and agreements as pertains to the CHS.

4. Overall performance of the organisation

4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation	Tearfund has teams and systems in place to focus on strengthening its approach to quality assurance and risk. Internal audits are conducted in accordance with the organisation's policy. In 2022, Tearfund's internal audit and risk activities revealed examples of where financial monitoring visits to partners were not being carried out and reported, as well as (27) financial wrongdoing cases including some committed by Tearfund and its partners. In responding, Tearfund followed its procedures including sanctions (dismissals) and verifications of the completion of mandatory eLearning (on Fraud Awareness, Anti-Bribery & Corruption, Conflict of Interest, and Whistleblowing). Following a full review of the Corporate Risk Register in 2023, the financial wrongdoing risk was rated the highest (red) of the top 20 risks considered and a financial wrongdoing prevention plan is being developed.

The organisational restructure has changed the resourcing dedicated to quality assurance. The Quality & Accountability Team in charge of the application of the QS across the organisation has been moved from the Programme Quality Team to the Operational Quality Team, which mainstreams compliance and is comprised of 10 people (including assurance, quality standards, digital and systems). The quality standards function has been reduced by half, to a 1.5 full time equivalent role. It now comprises 1 full-time role based in the global team, and a 50% international assurance and system role based in a country office. The team continues to support country offices and partners to perform Q&A assessments and to develop capacity building plans. Country Directors are responsible for quarterly reports of progress on QS implementation through Country Office Scorecards that also track other parameters including impact, organisational health and compliance.

To resolve the previous HQAI CHS audit's CARs/weaknesses, Tearfund:
- Develops, shares and follows up on a corrective action plan;
- Organises an internal learning event after CHS audits where the global office and the audited country teams discuss the audits findings, including the corrective action plan and the observations.

4.2 Level of implementation of the CHS and progress on compliance

Tearfund's Quality Standards bring together all commitments (including to the CHS) made by Tearfund in the way relief and development is to be undertaken at the community level. Quarterly reporting to the Board and ET on the QS includes the levels of awareness and compliance with the CHS requirements, which are embedded in Tearfund's guidance, trainings, templates and tools. Senior management are dedicated to supporting CHS compliance in order to assure continual quality and accountability.

Tearfund complies with the commitments of the CHS, performing well in terms of appropriate, relevant programmes and projects, delivered by competent and well managed staff. Particular innovations identified in this audit include consideration of staff profiles for security management, and support for women working during menopause.

Resources are managed efficiently and effectively and priority is given to using them to strengthen local capacities of faith-based organisations and churches involved in transforming communities. Assistance is coordinated, complementary to local and national development and response plans, and is based on community communication, participation, and feedback.

Tearfund has embedded the HQAI audit CARs as an indicator in the Quarterly Scorecard, its management tool where country, region and global teams provide updates on progress against critical compliance and strategic matters. In this way, each country office is responsible for ensuring that the CARs are monitored systematically and regularly.

Tearfund has made multiple adaptations to address action points from the previous audit. Partner Assessments have been updated to include QS self-assessment scores, including feedback mechanisms and safeguarding considerations. Community feedback is required to be entered into TRACK, the internal project information management system, and Tearfund has also now made collection of disaggregated data by ability possible in TRACK.

PSEAH: Tearfund has a strong global culture related to preventing wrongdoing, including safeguarding and the prevention of sexual exploitation, abuse and harassment (PSEAH). Centralised reporting, incident management and investigations protocols ensure a survivor-centred response to serious complaints. A safeguarding report with a summary of safeguarding investigations is included in Tearfund's annual reporting, and as a member of the sector's Misconduct Disclosure Scheme, Tearfund commits to sharing information about its former employees related to sexual abuse or harassment misconduct.

Systematic reinforcement of the expectations of staff and partner staff and their awareness of mandatory policies contribute to Tearfund's environment of zero tolerance for SEAH and other abuses of power.

The primary area for improvement at this audit is access to safe and responsive complaints mechanisms to handle sensitive and non-sensitive complaints. At this audit, complaint handling processes are not systematically in place, and partners are not supported or monitored to ensure they manage and investigate complaints in a timely, fair and appropriate manner, or to establish non-retaliation and appeal assurances. In communities interviewed, there were low levels of understanding about the right to complain and what can be complained about. Communities are not fully aware of the expected behaviour of Tearfund and partner staff, particularly organisational commitments on PSEAH. This influences the overall performance of Tearfund in relation to elements of the CHS relating to PSEAH, as does inconsistent monitoring to identify potential and actual unintended negative effects in this area.

Localisation: Tearfund performs well in relation to localisation elements of the CHS, developing resilience in communities that are confident they will sustain gains from programmes after they end. As a faith-based organisation, Tearfund commits to both strengthening church capacities to contribute to community development (through CCT), and to building the resilience and seeking the wider recognition of, churches' role as first responders in emergencies.

Tearfund also continues to strengthen its commitment to localisation through organisational change processes which seek to respond from as close as possible to affected communities. Within the culture of Tearfund, conversations about decolonisation and shifting the power are changing the way teams and people work, and the relationships they have, reformulating who makes decisions and at what level.

Gender and Diversity: Against the index of elements in the CHS relating to gender and diversity, Tearfund performs well. A diversity and inclusion (D&I) strategy is in place and aims to see measurable change in its organisational culture. At the global level, this is reflected in the composition of its Board (at least a third of its members are women and a third are from ethnic groups who represent the communities Tearfund work with) and the tracking of the gender and the ethnicity pay gap. At the programmes level, Tearfund's guidance documents help teams take into account the diversity of communities in terms of gender and ability, including the new *Gender and Inclusion Mainstreaming Guidelines* (2023). Tearfund has committed to make the collection of disaggregated data by ability mandatory in its *DME* procedure (roll out planned in 2024). Tearfund's main strength is that it makes deliberate efforts to provide to those most at risk, and with the most needs, in particular the marginalised and excluded. There is still room for improvement when it comes to capturing the diversity of those giving feedback and disaggregating data by ability.

4.3 Performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
Commitment 1: Humanitarian assistance is	Tearfund's programmes are appropriate and relevant. It continues to demonstrate good practice in its commitment to be impartial and target communities based on their needs and	Communities are consulted regularly on whether the activities are meeting their needs. They state that	2.8

appropriate and relevant	capacities. Tearfund has strengthened its processes to ensure that its stakeholders and contexts are continuously analysed, and that programmes adapt to changes. Tearfund has new commitments and tools to facilitate the collection of disaggregated data. However, people with disabilities are not systematically recorded in assessments, and assessments do not systematically include the risks of SEA in the context and for all demographic groups within a community.	programme activities have changed according to their needs and capacities, and according to changes in the context. Tearfund and its partners programmes do meet their needs. They have helped them increase their skills and their revenues.	
Commitment 2: Humanitarian response is effective and timely	Tearfund's programmes are effective and timely. A new emergency response register for the Africa region pulls together skilled Tearfund staff from the continent who are trained and will travel to support emergency responses. Through its partnership approach, Tearfund supports partners to ensure programme commitments are fulfilled, by continuously assessing their capacity and developing tailored capacity development plans. Programmes are designed to be safe and realistic for communities, and mechanisms are in place to ensure timeliness. Where unmet needs are identified, they are referred to relevant organisations or are advocated for. Tearfund's monitoring processes continue to evolve through initiatives such as the launch of the *Indikit* website to support the development of organisation-wide SMART indicators. However, relevant monitoring data is not systematically recorded in Track.	Communities state that Tearfund is always clear with them on programme and activities' timeframes, and that these are appropriate and take into consideration their needs and preferences. They feel that their input is listened to and taken into consideration and have many examples of how programmes have adapted on the basis of monitoring visits. They say they learn from Tearfund staff and believe they have appropriate skills. When they have unmet needs, Tearfund advocates for them or refers them to relevant organisations.	2.9
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	Tearfund research recognises the role of local churches in building resilience and seeks wider recognition of their role as first responders. Current organisational changes are rooted in localisation and 'shifting the power' of decision making, accountability and authority. Tearfund's policies and guidance are designed to prevent programmes having any negative effects, although processes to identify these are not systematically applied in programmes and at all stages of the work. Tearfund commits to strengthening local capacities, including through the CCT approach. Tearfund partners with both mature, and less well-established NGOs, engaging in	Communities take part in trainings and experiences that build their leadership and technical skills and income generating capacity, increasing opportunities and contributing to stronger families and communities. All communities spoken with knew when projects would end, and felt confident of sustaining the benefits that have accrued. Infrastructure is handed over and maintained and used by community groups.	2.8

	regular assessments and capacity development initiatives. Disaster risk response and preparedness are embedded in development projects. Partners endorse and promote programmes that foster livelihood recovery, strengthening and economic independence.		
Commitment 4: Humanitarian response is based on communication, participation and feedback	Tearfund has guidance for information-sharing, and promotes a culture of open communication. However, this guidance does not consistently include Tearfund and partner commitments on PSEAH, and they do not systematically tell communities how staff are expected to behave in relation to SEAH. Communication materials present communities with dignity. Tearfund and partners communicate in languages, formats and media that are easily understood, respectful and appropriate, taking extensive measures to ensure accessibility. Staff and partner staff do not regularly use some of the tools and templates provided to ensure communities reflect their priorities and risks in all stages of the work. Verbal feedback and diversity of those giving feedback is not yet systematically recorded to ensure opportunities for learning are captured. Representation is inclusive, involving the participation and engagement of communities at all stages of the work.	Communities and stakeholders recount that partner staff spend time discussing the project with them during assessment and implementation. They confirm that partner organisations include everyone. Communities feel that staff are respectful and appropriate in their interactions and communications, and that everyone receives and understands information. But they do not know how staff are expected to behave when working in their community, particularly in relation to SEAH.	2.6
Commitment 5: Complaints are welcomed and addressed	Tearfund's organisational culture reinforces that serious complaints are an integral part of accountability to stakeholders at all levels of its operations. A Safeguarding Committee of the Board oversees Tearfund's safeguarding culture, including how cases are handled and how learning is embedded. The Financial Wrongdoing Review Team coordinates response to all reports and the Executive Team and Board's Audit, Risk and Finance Committee review all cases before closure. A CAR raised at the second mid-term audit in 2022 found that a complaints-handling process covering programmatic complaints was not in place at all country offices. This audit finds a broader gap in Tearfund's systems related to the guidance and support it provides to partners to ensure that complaints-handling processes	Communities are not systematically involved in the implementation and monitoring of complaints-handling processes. Community members feel comfortable giving programmatic feedback to partner organisations. They also feel that Tearfund and its partners would welcome complaints. They have different levels of awareness of materials relating to reporting safeguarding issues, and are not aware of Tearfund's commitment to PSEAH. Most knew there was	1.6

	that cover programming, SEA and other abuses of power are systematically in place. Therefore, the previous CAR at 5.4 has been extended and amended to reflect the broader scope. Tearfund guidance on feedback mechanisms is inconsistent and incomplete, with no clear guidance for how complaints should be handled. There is no mechanism for non-sensitive complaints at the global or domestic level. Tearfund does not support partners to implement complaint handling processes, or quality check or monitor what is in place for effectiveness: there are different standards across partners and programmes. Tearfund doesn't ensure that communities are aware of the scope of issues the complaint mechanism can address and how complaints will be handled. Standardised posters include safe channels for reporting and depict unacceptable behaviour, although the language of SEAH is not used systematically. Guidance and checklists describe 'information sharing' about expected behaviours as required staff practice, using 'abuse' and 'misbehaviour' as general terms. They do not specifically define types of abuse or state 'sexual exploitation and abuse'.	a number they could call if there was a 'serious issue', but few connected using this number with questions presenting abuses of power. Nothing seemed serious enough to call. Community members generally feel that staff in faith-based organisations would never commit sexual abuse.	
Commitment 6: Humanitarian response is coordinated and complementary	Tearfund's response is coordinated and complementary. It has clear statements and guidelines on how to engage with partners, and clear agreements that respect mandates, constraints and principles. MOUs in Church and Community Transformation programmes do not hold partners to the same standards of accountability and safeguarding. Systematic stakeholder analysis information is integrated into programmes through the entire programme cycle. Continuous coordination enables Tearfund to ensure responses are complementary with national and local development plans, avoid duplication of activities and address gaps and unmet needs.	Communities do not experience duplication or gaps that could be filled by better coordination.	2.8
Commitment 7: Humanitarian actors continuously learn and improve	Tearfund commits to continuously learning and improving. It has continued to develop Track, its system to collect and record knowledge and experience, and Tearfund Learn, the platform that enables Tearfund to share learning with its staff, partners and the sector for free. Mandatory evaluations take place and an annual meta synthesis of evaluations identifies areas of most impact. Tearfund also contributes	Communities state they continuously learn from the programmes through trainings, staff visits and programme visits. Communities that had worked with Tearfund before say that	2.8

	to relevant sector publications and conducts independent studies. Findings are systematically translated and disseminated in accessible formats internally and externally. Tearfund integrates lessons learnt in its programmes, shares learnings with its staff and partner staff, and embeds sharing of learning with communities in programme design. However, Tearfund does not systematically document the learnings and changes it implements on the basis of feedback and complaints.	programmes have improved over time.	
Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably	Tearfund systems monitor its management and staff capacity and capability to deliver on its programmes. Job descriptions and feedback processes ensure that staff understand what is required of them. Staff develop the necessary personal, technical and management competencies to fulfil their role, including through personal development plans supported by Tearfund. A code of conduct establishes the obligation of staff not to exploit, abuse or otherwise discriminate against people. Staff adhere to policies and understand the consequences of not adhering to them, with regular refresher trainings on core policies. Policies are fair, transparent, non-discriminatory and compliant with employment law. One policy that represents leadership in the sector is a *Menopause Policy* that recognises menopausal women's "equal value and the right to flourish and fully participate in the workplace to the best of their ability". Policies are in place for the security and the wellbeing of staff. A 2023 Safety & Security and Equity, Diversity and Inclusion (EDI) Review demonstrates innovation in acknowledging that an individual's vulnerability to internal and external security threats is affected by their identity profile. The EDI team and the International Safety & Security team are developing a proactive approach, working toward inclusive security risk management systems and processes. Partners define their own risk appetites and manage the risks affecting their staff and programmes. Partnership assessments check for context-specific security plans and staff safety and security training. Partnership	Communities feel that Tearfund and partner staff are knowledgeable and treat them with respect, including by listening to their concerns. Community members are aware of how activities should be implemented, although awareness of how staff are expected to behave and how and when to report a grievance is not consistently known.	3.2

	agreements expect partners to uphold their duty of care towards their staff.		
Commitment 9: Resources are managed and used responsibly for their intended purpose	Tearfund's resources are managed and used responsibly and for their intended purpose. It has a robust risk management system implemented at global and country levels, including fraud prevention and detection. Tearfund verifies that partners have systems to manage risks of corruption and fraud and supports them in developing and implementing them if they have not. Tearfund's zero tolerance of fraud, bribery and corruption is well known by staff and partner staff. Tearfund programmes balance quality, cost and timeliness and it manages its resources to minimise waste. An environmental policy is in place to ensure that Tearfund complies with all relevant regulatory requirements and incorporates environmental considerations at global and programmatic levels. However, Tearfund does not yet systematically consider the environmental impact throughout the programme cycle.	Communities have access to budget information and participate in some budgetary decisions. Based on their observation and knowledge, they trust that Tearfund's budget is well spent. They are aware of Tearfund's zero tolerance policy when it comes to fraud and corruption.	2.8

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

5. Summary of open non-conformities

Corrective Action Request (CAR)	Type	Resolution due date / timeframe	Status & date	New resolution timeframe (if applicable)
2022-1.5: Tearfund does not have a policy commitment to the collection of disaggregated data by ability.	Minor	2024/04/08	Closed 2024/01/30	
2024-3.6: Tearfund's processes to identify potential and actual unintended negative effects are not applied systematically across all programmes and at all stages of the work	Minor	By the 2027 Renewal Audit	New	
2020-5.1 Communities and people affected by crisis are not systematically consulted on the design of complaints handling processes.	Minor	2024/04/08	Closed 2024/01/30	
2024-5.2: Tearfund does not ensure that communities are aware of the scope of issues the complaint mechanism can address and how complaints will be handled.	Minor	By the 2027 Renewal Audit	New	

2022-5.4: Tearfund does not systematically ensure that complaints handling processes for communities and people affected by crisis are in place and that they systematically cover programming, sexual exploitation and abuse, and other abuses of power.	Minor	By the 2027 Renewal Audit	Extended and amended	
2024-5.6: Communities are not fully aware of the expected behaviour of Tearfund and partner staff, including organisational commitments on PSEAH.	Minor	By the 2027 Renewal Audit	New	
2022-7.2: Tearfund does not learn, innovate and implement changes on the basis of feedback and complaints.	Minor	2024/04/08	Closed 2024/01/30	
Total Number of open CARs	**4**			

6. Recommendations for next audit cycle

Specific recommendation for sampling or selection of sites or any other specificities to be considered	It is recommended that an advocacy project, or a project with a specific advocacy component, is included in the next sample as these have not been deliberately selected in audits to date.

7. Lead auditor recommendation

In our opinion, Tearfund UK has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability. We recommend renewal of certification.	
Name and signature of lead auditor: Nik Rilkoff	**Date and place:** 31 January, 2024 Radium Hot Springs, BC, Canada

8. HQAI decision

Certificate renewed:	☒ Issued ☐ Preconditioned (Major CARs)
Next audit: before 2025/02/27	
Name and signature of HQAI Executive Director/Head of quality assurance: Désirée Walter	**Date and place:** Geneva, 27 February 2024

9. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: *If yes, please give details:*	☐ Yes ☒ No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	 ☒ Yes ☐ No ☒ Yes ☐ No
Name and signature of the organisation's representative: Amal Shakeel	**Date and place:** 13/03/2024

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.	**Score 0:** indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to: • **Independent verification:** major weakness. • **Certification:** major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	**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: • **Independent verification**: minor weakness • **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.	**Score 2:** indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to: • **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.	**Score 3:** indicates full conformity with the requirement. This leads to: • **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.	**Score 4:** indicates an exemplary performance in the application of the requirement.

* Scoring Scale from the CHSA Verification Scheme 2020