

World Renew

Initial Audit – Summary Report – 2023/11/15

1. General information

1.1 Organisation

Type	Mandates	Verified
<input checked="" type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input checked="" type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input checked="" type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy
Legal registration	INGO affiliated to the CRCNA (Christian Reformed Church of North America)	
Head Office location	USA HO: Grand Rapids (Michigan) Canadian HO: Burlington (Ontario)	
Total number of organisation staff	218 staff and 1,240 volunteers	

1.2 Audit team

Lead auditor	Jordi Capdevila
Second auditor	Birgit Spiewok
Third auditor	
Observer	
Expert	
Witness / other participants	

1.3 Scope of the audit

CHS Verification Scheme	Certification
Phase of the audit	Initial Certification Audit. Transition audit from the Independent Verification Scheme to the Certification Scheme. First cycle of Certification.
Coverage of the audit	<p>The scope of the audit includes World Renew (WR) activities within the Community Development, Disaster Response Services (DRS – WR's domestic disaster response work), and International Disaster Response mandates only. WR directly implements projects through a number of County Offices (COs). It also implements projects through partners. The audit scope includes the activities undertaken by Home Office (HO) and its COs, and also reviews how WR works with partners to apply the CHS; the results of the audit do not extend to WR's implementing partners.</p> <p>This audit is a Bridge Initial Certification Audit, transitioning from the Verification to the Certification scheme. As a result, the audit takes into consideration the findings of the previous Initial Audit undertaken under the Verification scheme.</p>
Extraordinary or other type of audit	

1.4 Sampling*

Total number of Country Programme sites in scope			29
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			
Malawi	Y	Selected to ensure geographical coverage. Diversity of implementation modalities, with direct and partner implementation. Sample also ensures diversity of programme size and mandates.	Remote
Lebanon	N	Not selected as it has been recently evaluated twice by other organisations.	
Tanzania	Y	Selected to ensure geographical coverage. Diversity of implementation modalities, with direct and partner implementation. Sample also ensures diversity of programme size and mandates.	Remote
Zambia	N	Not selected, to extend geographical coverage.	
Lao	N	Not selected, as already included in the Verification Initial Audit.	
Nicaragua	N	Not selected due to operational constraints.	
Purposive sampling			
Bangladesh		Selected to ensure geographical coverage. Diversity of implementation modalities, with direct and partner implementation. Sample also ensures diversity of programme size and mandates.	Onsite
Haiti		Selected to ensure geographical coverage. Diversity of implementation modalities, with direct and partner implementation. Sample also ensures diversity of programme size and mandates.	Remote
Madagascar		Selected to include a partner-led Country Programme with no WR Country Office in place.	Remote
United States		Selected to ensure geographical coverage. Diversity of implementation modalities, with direct and partner implementation. Sample also ensures diversity of programme size and mandates (domestic programme)	Onsite
Any other sampling performed for this audit:			
None.			
Sampling risks identified:			
<p>Due to the COVID-19 pandemic and associated travel restrictions, the Verification Initial Audit (IA) was conducted remotely. The Verification IA report recommended on-site visits including community discussions at the next audit. The IA further recommended to undertake on-site visits to Home Office (USA & Canada), and include in the sample of county programmes, domestic programme projects, as well as Country Programmes with Community Development (CD) projects and International Disaster Response (IDR) projects.</p> <p>These recommendations have been adopted during this audit. The sample is representative of World Renew's portfolio and the auditors have a high level of confidence that the audit findings are representative of the organisation's work. The number of community consultations in Bangladesh and US reflect the respective programmes and total number of community members benefitting. Also, the domestic programme visited in Texas was the only US operational site at the time of the audit.</p>			

A change from the original selection of Malawi to Bangladesh, for the on-site visit, was agreed due to the risks and consequences created by Tropical Cyclone Freddy, affecting Malawi in March 2023.

**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
Home Office: Burlington (Ontario), Canada	27-31/03/23	Remote
Home Office: Grand Rapids (Michigan), United States of America	27-31/03/23 17-18/04/23	Remote Onsite
Orange County, Texas, United States of America	19-21/04/23	Onsite
Bangladesh	13-18/05/23	Onsite
Madagascar	25/4/23	Remote
Malawi	9/5/23	Remote
Tanzania	5/05/23	Remote

2.2 Interviews

Level / Position of interviewees	Number of interviewees		onsite or remote
	Female	Male	
Head Office			
Management	6	5	Onsite and Remote
Staff	10	6	Onsite and Remote
Country Programme/Project Sites			
Management	3	1	Onsite and Remote
Staff	6	8	Onsite and Remote
Partner staff	5	5	Onsite and Remote
Others			
Total number of interviewees	30	25	

2.3 Consultations with communities

Type of group and location	Number of participants		onsite or remote
	Female	Male	
Home Owners (mixed group), Orange County, Texas, United States of America (domestic programme)	5	1	Onsite

Community members (female group), Maniknagar, Bangladesh (IDR and CD programmes)	8	0	Onsite
Community members (mixed group), Maniknagar, Bangladesh (IDR and CD programmes)	5	3	Onsite
Community members (female group), Kendua, Bangladesh (CD programmes)	8	0	Onsite
Community members (mixed group), Kendua, Bangladesh (CD programmes)	7	1	Onsite
Total number of participants	33	5	

2.4 Opening meeting

Date	2023/03/27
Location	Global/Remote
Number of participants	92
Any substantive issues arising	None

2.5 Closing meeting

Date	2023/06/08
Location	Global/Remote
Number of participants	70
Any substantive issues arising	None

3. Background information on the organisation

3.1 General information

World Renew (WR) is a faith-based organisation, which was established as the relief and development arm of the Christian Reformed Church in North America (CRCNA). WR's work is based on the Christian faith, and its mission is to join communities around the world to renew hope, reconcile lives, and restore creation. WR's policies indicate that as part of its work, WR should not engage in proselytising activities; CRCNA has another organisation, "Resonate", which carries out missionary activities.

WR comprises both World Renew Canada and World Renew United States; while each organisation is registered as an independent charity in each country, all of World Renew's work is jointly managed and coordinated by the two Boards of Directors and the two Co-Directors. The organisation has Home Offices in Canada (Burlington, Ontario) and in the US (Grand Rapids, Michigan).

WR focuses on disaster response (national and international) and community development. Disaster response activities are focused on providing support for displaced families and investing in local economies to help rebuild communities and support long-term stability. Community development programmes embrace a family-centred approach to ending global poverty through food security, peace and justice, economic livelihood, and health programmes.

During 2023, WR has been operational in 50 countries in America, Africa and Asia, with 218 staff members and more than 1,200 volunteers. In 2021, the total income was 17 million USD in World Renew US and 29 million CAD in World Renew Canada.

3.2 Governance and management structure

The governance structure of WR Canada and WR US consists of a Board of Delegates and a Board of Directors in each country. The Board of Delegates in Canada consists of 20 members. It is the highest decision-making body, with the mandate to approve WR's statutes, annual reports, financial reports and action plans. This Board also elects the 8 members of World Renew Canada's Board of Directors. The Board of Delegates in the US consists of 50 members and is the highest decision-making body. Its mandate is to approve World Renew's statutes, annual reports, financial reports and action plans. This Board also elects the 7 members of World Renew US's Board of Directors. Through a joint ministry

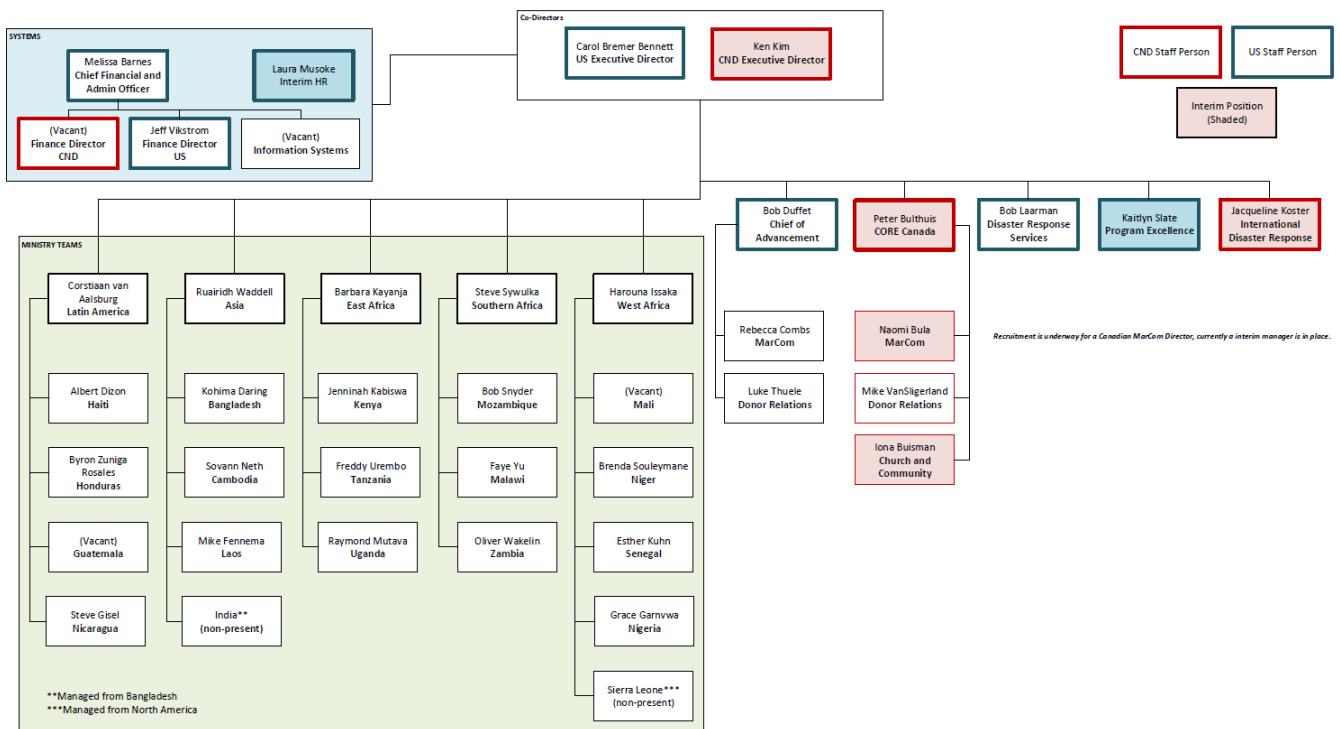
agreement, the Canadian and US Boards of Directors hold combined meetings as a Joint Ministry Council. World Renew uses a policy governance model (also known as the Carver model) to ensure the distinct functions of the Board and staff.

WR Canada and US each have their own director called Co-Directors. They each report to their Board of Directors. The Co-Directors are responsible for achieving WR’s organisational objectives effectively. WR Canada oversees the international disaster response (IDR) programme, while WR US is in charge of the domestic programme and international community development programme (CD). The senior management team of both entities have regular meetings and support each other in all areas of work. There have been no changes to the governance system since the Verification Initial Audit (2021).

The organisation has developed a new Strategic Plan for 2022-2027, making accountability one of its impact priorities.

In line with the new strategy, WR has made some changes to its management system by setting up two key structures: the Strategic Alignment Circle (SAC), which is responsible for the organisational alignment to the strategy, and the Strategic Management Circle (SMC), which is responsible for ensuring that SAC decisions can be implemented throughout the organisation. The SAC is also responsible for approving policies on the recommendation of the SMC. This used to be the responsibility of the Policy Committee, which has now been dissolved.

World Renew Organisational Chart Senior Management Level



3.3 Key internal quality assurance, internal control and risk management mechanisms

WR’s Quality and Accountability Framework outlines the key policy commitments and standards that all staff of WR have to follow. To ensure that safeguarding is a key component in all of WR’s operations, the organisation has named Safeguarding Focal Points in all country offices. These staff members are in charge of ensuring the implementation of policies and guidance for safeguarding and complaints handling. The CHS Charter Group is mandated to hold regular meetings and supports the organisation’s efforts toward CHS verification by:

- Monitoring and reviewing progress towards goals identified in the audit plan;
- Setting-up specific initiatives as needed;

- Maintaining visibility of the standards and certification requirements within the organisation;
- Collecting and sharing best practices and tools that facilitate the integration of standards into programming.

All WR policies are accessible to all staff through its intranet. Any new policy is announced through the organisation's newsletter, and the main policies are also available on the World Renew website; the Onboarding Plan includes briefings on programmatic policies.

WR follows donor guidelines or, for unrestricted funds, its own guidelines. Project proposals consist of both a narrative and financial section. They are reviewed, at a minimum, by in-country and HO staff. In addition, WR requires that all programmes and projects have a Monitoring and Evaluation plan before they start. The monitoring results must be reported in the CommCare database system.

WR's Audit Policy determines that financial resources are managed ethically, transparently, effectively, and in conformity to applicable national and local laws. WR is required to conduct an annual financial audit for both Canada and the US. The organisation also conducts internal audits for the Country Offices approximately every three years, based on the level of risk defined by standard criteria. In the countries where World Renew has legal status, it is mandatory to be financially audited every year.

3.4 Work with partner organisations

Partnership is the key driver of WR's work both at international and domestic levels (Canada & US). WR identifies potential international partner organisations through a number of assessments tools:

- For International Disaster Response, partners are assessed through the Partner Assessment Form for disaster response programmes. After the assessment, WR can provide a fund of 4,000 US\$ to initiate some work with a potential partner. The fund can be used in different ways, including capacity building of potential partners, research, or a pilot project. WR decides whether or not to approve the partner based on the assessment results and how the potential partner implemented the fund. The decision is taken by the Joint Ministry Council, based on the recommendations of the Co-Directors, Team Ministry Leader and Country Team.
- Community Development partners' capacities and risks are assessed annually through the WR Assessment of Partners (WRAP) tool and the Partner Evaluation tool, every three years. Assessment areas include community transformation capacity, financial management, project management and adherence to the CHS. Based on the results, annual capacity building plans are implemented to increase the partners' capacities and mitigate their main risks.
- Domestic programme partners in the US and Canada (termed as domestic partners) are usually Long-Term Recovery Groups (LTRG), or other community groups, churches, or local NGOs. The partnerships within domestic programme projects differ from those of CD and IDR; LTRG do not receive funding from WR in order to implement activities. Their role is to implement reconstruction activities for disaster survivors, working with volunteer organisations such as WR. In this partnership, LTRGs provide logistical support, technical construction support and all construction materials and WR sends qualified volunteers and provides technical advice including needs assessments if not available. WR signs Partner Agreements with LTRGs detailing the work responsibilities on both sides. The agreements include the requirement to commit to the CHS and to key WR policies.

WR volunteer project managers, together with DRS staff, are responsible for evaluating possible partnerships and agreeing on the work to be done together.

WR is a member of National Voluntary Organisations Active in Disaster (NVOAD), an association of organisations that mitigate and alleviate the impact of disasters. NVOAD states on its webpage that it "provides a forum promoting cooperation, communication, coordination and collaboration and fosters more effective delivery of services to communities affected by disaster." As a member of this organisation, WR agrees to adhere to NVOAD guiding principles – communication, coordination, collaboration and cooperation – and to work according to the protocols and guidelines set by NVOAD.

WR requests all its international and domestic partners to work according to the CHS commitments, to adhere to the WR key policies and to have a Code of Conduct and a Feedback and Complaints Mechanism in place.

4. Overall performance of the organisation

4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation

World Renew demonstrates progress in ensuring a systematic approach to its management systems, internal quality assurance, and governance systems. This progress is exemplified through various procedures and practices, such as the Monitoring, Evaluation, Accountability, and Learning (MEAL) framework, internal audit procedures, partner due diligence processes, contractual and management procedures for partnerships, safeguarding policy and procedures, as well as accountability and reporting procedures.

World Renew operates under the governance of two national boards (US/Canada) that form a Joint Ministry Council (JMC) serving as the executive board. Clear segregation of duties is defined between the Board of Delegates, the Board of Directors, and the two Co-Directors, ensuring effective governance. Similar segregation of duties exists between the two head offices and different departments. The Carver Policy Governance Model is followed to ensure the appropriate segregation of responsibilities.

World Renew implements policies and procedures that define management systems and internal quality assurance. Different processes are applied depending on the project type (IDR, domestic programme, or community development) and the origin of funds. Efforts are being made to harmonise accountability and safeguarding standards across programmes and countries.

World Renew has taken actions to address weaknesses identified in the Verification IA. A Root Cause Analysis workshop was conducted in 2021, resulting in the development of a detailed 4-year CHS action plan. This plan focuses on programming, domestic programme, Safeguarding, learning, and Human Resources (HR). It is used to address findings from the initial audit and track progress against specific action items. Since the Verification IA, WR has made progress on different elements of the workplan, although not all actions have been fully implemented yet. The programming guidelines and templates for IDR and CD projects have been reviewed and updated, addressing some of the weaknesses and observations raised in the IA report. The organisation has also reviewed the programming documentation for the domestic programme, introducing several revisions to address the findings identified in the Verification IA.

The CHS Charter Group, utilising the CHS workplan, oversees the organisation's efforts towards quality and accountability. Progress against the action plan is analysed quarterly, and a progress report is produced and discussed at CHS Charter Group meetings. The High Capacity Country Office Checklist (HCCO) is employed by COs and Regional Directors to ensure consistent policy application across regions and identify any gaps.

Since the last audit, World Renew has developed a new Strategic Plan for 2022-2027, emphasising the intention to "Continue to deepen WR's capacity and culture for accountability" as the first impact priority. Measures have been taken to strengthen accountability mechanisms, including the recruitment of a Safeguarding Advisor and Coordinator, as well as Regional Safeguarding Coordinators and focal points in each country office. The strategic plan also prioritises investment in Information, Technology, and Knowledge Management Systems. This was another key area identified for improvement during the Verification IA. A new Learning Policy has been developed, although is not yet fully rolled out, with some gaps prevailing, including the absence of a knowledge management system to document knowledge and experience more systematically and make it available across the organisation.

Internal changes to the management structure have been implemented, with the establishment of the Strategic Alignment Circle (SAC) responsible for organisational alignment and the Strategic Management Circle (SMC) supporting implementation of SAC decisions. The Policy Committee has been dissolved, and the SAC approves policies based on SMC recommendations.

World Renew is in the process of transitioning key organisational systems, especially IT platforms for accounting and information management, from Google to Microsoft 360. This transition will impact document storage, as well as meeting and communication facilities for staff.

Partners are selected and managed within a quality assurance system, incorporating the partnership policy, WR Assessment of Partners (WRAP) procedure, and annual Organisational and Community Capacity Assessments (OCA and CCA). Capacity-building goals are monitored, and assessments are uploaded to the CommCare platform for follow-up.

Internal audits cover relevant internal controls at HO and in programme countries, following the organisation's policy. The organisation is also undertaking CHS audits, and CHS audit recommendations are routinely acted upon, including through root cause analysis workshops. Efforts are made to disseminate policies and procedures throughout the organisation via induction and refresher training, global town hall meetings, annual regional ministry teams meetings, and online tools. However, not all staff are aware of policies and procedures relevant to their respective roles and responsibilities.

World Renew maintains a corporate risk matrix that captures various risks; however, it does not currently include safeguarding risks. Additionally, there is no established risk management policy in place. Project-related risks are assessed during project proposal development, but not systematically for the domestic programme. Additionally, project risk assessments are not always updated during the project lifecycle.

A robust financial control environment with efficiency measures is consistently applied across the organisation and programmes. Detective controls such as financial monitoring, spot checks, and external audits are utilised, along with corrective controls and disciplinary procedures. Preventive measures such as segregation of duties are implemented to reduce the risk of misuse of funds.

4.2 Level of implementation of the CHS

WR remains committed to the application of the CHS across the organisation, including in projects implemented with partners. The organisation continues to demonstrate good performance in areas such as ensuring that programme and project design responds to the needs of communities in an appropriate and relevant manner; adapting programmes to changing needs; building assistance based on local capacity; strengthening the resilience of communities; and developing local capacities. WR is prioritising localisation, with a clear objective to identify and strengthen local partners and community based organisations. It works closely with communities and local authorities and is an active participant in networks and coordination fora. Other strengths of the organisation with regard to the CHS are: strong levels of compliance with financial management requirements; coordination; participation and learning and feedback.

WR continues to provide capacity building opportunities to staff and partners on the CHS and related requirements, including safeguarding, complaints management, Protection from Sexual Exploitation, Abuse and Harassment (PSEAH), and prevention of fraud and corruption.

During the previous audit (Verification IA), the audit team identified 17 weaknesses as well as 1 major weakness at Commitment 5 level, and noted several observations. Since the Verification IA, the organisation has implemented improvements to address several of the weaknesses identified. More specifically this includes ensuring that the design and implementation of programmes are based on an impartial assessment of needs and risks and an understanding of the vulnerabilities and capacities of different groups; ensuring that WR and its partners systematically provide information on how they expect ~~they~~ their staff to behave and its commitment to PSEAH; ensuring that communities can provide confidential feedback; ensuring that Complaints and Feedback Mechanisms (CFMs) are in place; ensuring that complaints are taken seriously and acted upon according to defined policies and processes; improving the awareness of communities on how the CFM can be accessed and the scope of issues it can address; ensuring that complaints are managed in a timely and fair manner; ensuring that the roles, responsibilities, capacities and interests of different stakeholders are identified systematically; taking into account the lessons learned and previous experience when designing programmes; adopting a new policy for organisational level learning; ensuring that staff and partners are aware of the main policies and understand the consequences of not adhering to them; improving the adoption of security plans; and managing the risk of corruption.

Four previously identified weaknesses (now CARs in this certification audit) have not yet been fully addressed, specifically regarding the lack of data management procedures to ensure the safeguarding of personal information; the ability to identify and act on unintended risks and negative effects, particularly in domestic programme projects, is not systematically ensured; the systematic referral of complaints that do not fall within the scope of the organisation is not ensured; and that communities are not systematically consulted on the monitoring of complaints-handling processes. Further, 2 new CARs have been raised, regarding the fact that WR policies and procedures do not provide specific guidance to ensure that external communications are accurate, ethical and respectful; and that the organisation does not ensure that staff and volunteers have a clear understanding on what WR's commitment to not proselytise means with regard to their own behaviour and when engaging with communities.

The organisation continues to demonstrate an organisational culture where the commitment to safeguarding and PSEAH is taken seriously, in accordance with the Code of Conduct (CoC), the PSEAH, Child Safeguarding and Complaints policies, and the Guidelines for Complaints Handling and Investigations. WR's Code of Conduct spells out the obligation for all World Renew staff members (including contractors, board members and volunteers), to not exploit, abuse or otherwise discriminate against people. The commitment to PSEAH is also clearly reflected in partner agreements. WR has recruited a Safeguarding Advisor and a Safeguarding Coordinator at the HO level, and 5 Regional Safeguarding Coordinators who report directly to the Regional Directors in each region. In addition, a safeguarding focal point has been identified in each country office.

The Safeguarding Policies and CoC define WR's values and the expected behaviours of staff and partners, including prohibition of exploitation, abuse and other forms of discrimination. The CoC makes clear reference to PSEAH principles, including the duty to report allegations or suspicions of SEAH. WR's CFM is in place, covering PSEAH amongst other issues. WR's partner due diligence assessment process checks if they have a CFM. Staff and partners are aware of the CoC, CFM and Safeguarding commitments.

WR is committed to a 'do no harm' approach and to prevent negative effects in its programming, as well as ensuring that projects take account of the needs of communities. However, its ability to identify and act on unintended risks and negative effects, in particular in domestic programme projects, is limited. The organisation works with partners to implement strategies and guidance to prevent SEAH. However, WR's corporate risk matrix does not include SEAH-related risks.

WR systematically shares information with communities, including on expected staff behaviour, PSEAH and the CFM, but it does not have guidance or procedures which describe the minimum requirements for information sharing with communities and other stakeholders. Information is shared with communities in appropriate languages and formats, with the CoC and other key policies translated into the local language. WR is committed to the participation of communities and uses different channels to engage them at all stages of the work, including consultation on CFM design, although such consultation is not done in relation to the monitoring of complaint handling processes. Staff show a good understanding of WR's policies, including those related to PSEAH. Staff understand the consequences of not adhering to WR's policies and the organisation endeavours to ensure staff understand its commitment to safeguarding through staff induction training, as well as refresher training provided to staff and partners.

Communities are aware of WR's commitment to PSEAH and understand what kind of staff behaviour they should expect. Communities are also aware of their right to complain about sensitive issues, including SEAH, and consider that they can complain to WR and its partners. WR has a Programme Data Policy, but it does not have data management procedures in place to ensure the systematic safeguarding of personal information.

WR continues to demonstrate a strong commitment to localisation. WR's policies and procedures ensure a good understanding of the context and the different active stakeholders, with project design responding to the needs of the communities, strengthening their resilience, and developing local capacities. WR's work with communities is based on context and stakeholder analysis to ensure a thorough understanding of the operational context, although the domestic programme does not have a policy or procedure in place to ensure context analysis is systematically undertaken. WR's localisation approach is based on working closely with and promoting local partners, including grass root community groups, building on local capacities and leadership through local partners. This is done

through participatory methods, including Community Capacity Assessments, which are evaluated once a year together with communities. The organisation works predominantly with national staff and through local partners, and coordinates with national and local governance structures, thereby supporting and strengthening local disaster response capacity.

The communities consulted confirm their satisfaction with WR's approach and activities. They generally describe WR as an organisation that is non-discriminatory, providing services and assistance customised to the needs of participants, with proposed actions adapted to local realities and to improving their resilience.

WR's commitment to gender equality and diversity is outlined in its Gender Policy and Gender Justice and Social Inclusion Manual, which commit the organisation to understanding and responding to diversity and to advancing equality. WR recognises that it is important to take account of, and adequately represent, vulnerable, disadvantaged and marginalised populations, and to consider gender, age, disability, and minorities or ethnic groups, amongst others. WR targets the most vulnerable people and households through community consultations, with a strong focus on gender equity and inclusion. The revised project and reporting templates require the collection, analysis and reporting of gender, age and disability disaggregated data. WR's CoC and HR Policies ensure fair, transparent and non-discriminatory HR management procedures that are compliant with national employment law. A Gender Working Group is in place, whose members are made up of staff from different countries or ministries as well as representatives from the IDR programme, but not from the domestic programme.

4.3 Performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	<p>WR demonstrates its commitment to impartial and non-discriminatory assistance in key policy, strategy, and operational documents. WR prioritises working with the most vulnerable members of communities based on their needs and capacities, without discrimination. WR is dedicated to fostering partnerships based on shared values.</p> <p>Context analysis plays an important role in WR's programme planning and reporting. Guidance and procedures are in place to ensure the systematic inclusion of context analysis in project proposals, although this is not in place for the domestic programme. Staff and partners collect disaggregated data to ensure the inclusion of vulnerable, disadvantaged and marginalised populations.</p> <p>WR conducts needs assessments and risk assessments to understand communities' vulnerabilities and capacities. Regular assessments, reporting, feedback and monitoring mechanisms are utilised to identify and address evolving needs at both the community and individual levels, informing project design and adaptation. WR also maintains feedback mechanisms to address community concerns and make necessary adjustments.</p>	<p>Communities perceive WR to be an impartial and non-discriminatory organisation. Communities indicate that WR and its partners consult with them to develop project plans and identify capacities, vulnerabilities and priorities. Communities indicate that they are regularly consulted on the appropriateness of activities, and that WR and partners adapt interventions as required.</p>	2.7
Commitment 2: Humanitarian	<p>World Renew has established a comprehensive system to ensure that its programme</p>	<p>Communities indicate that they have safe access to</p>	2.6

<p>response is effective and timely</p>	<p>commitments align with organisational capacities. This involves regularly assessing the capacity of partners, communities and staff, setting goals for capacity building, and conducting partner evaluations every three years. The organisation selects partners based on specific criteria such as governance structures, financial management skills, human resources, and technical expertise. These assessments help identify areas for improvement and required support. However, there is no specific procedure in place to guide the assessment of capacities of domestic programme partners.</p> <p>Programme implementation and impact are monitored through regular visits and evaluations, with feedback used to make necessary adjustments. WR is committed to ongoing learning and improvement, and has developed guidelines and frameworks for monitoring and evaluation. They utilise evidence from these processes to adapt and improve programmes. WR prioritises timely decision-making and resource allocation, with provisions for emergency situations, and access to a pool of trained staff and volunteers. They work with peer organisations and participate in coordination forums to address unmet needs and advocate for necessary support. However, programme planning procedures do not address the referral of unmet needs. The organisation follows relevant technical standards.</p> <p>Risk assessments are incorporated into project proposals and practices to ensure the safety of communities. Risk mitigation procedures and practices are evident for protection, safeguarding, work safety, and other risk categories. However, project risk assessments are not always monitored and updated throughout the project's lifetime.</p>	<p>assistance and services, that WR delivers its response in a timely manner, and that they consider staff to be competent. Communities feel that their needs are addressed appropriately, and that WR and partners encourage their participation in monitoring processes, and welcome their input.</p>	
<p>Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects</p>	<p>WR is committed to the prevention of negative effects (Do No Harm), including safeguarding and Prevention of Sexual Exploitation, Abuse, and Harassment (PSEAH). Actual and unintended negative effects pertaining to safety, dignity, SEAH, gender, livelihoods, and the environment are identified and addressed. However, these actions are not always carried out in a systematic manner, particularly in domestic programme projects.</p> <p>While WR takes the protection of sensitive personal information seriously, it is noted that not all countries have established data management procedures to ensure the safeguarding of personal information.</p> <p>WR is committed to strengthening local capacities and works with partners and communities to adapt its work. The organisation conducts participatory risk and capacity assessments, and collaborates with local organisations to support community development and disaster response efforts. WR</p>	<p>Communities indicate that WR projects address their needs and capacities and that they feel more empowered and have become more resilient. Communities consider that disadvantaged or marginalised groups are well represented, and that WR projects support early recovery and benefit the local economy.</p>	<p>2.4</p>

	<p>emphasises community-based disaster risk reduction, engages with local governance structures, and promotes the establishment of community resilience mechanisms, especially in its international programmes and to a lesser extent, in its domestic programme.</p> <p>WR actively engages in discussions with partners and communities regarding project exit strategies, emphasising early recovery, local economic development, and the transition from relief to development.</p>		
<p>Commitment 4: Humanitarian response is based on communication, participation and feedback</p>	<p>World Renew is committed to ensuring that communities have access to information about the organisation, its programmes, budgets and feedback mechanisms. WR and its partners use various channels to share information with communities. Efforts are made to contextualise information and translate it into local languages. However, not all staff and partners possess a clear understanding of the minimum requirements regarding information sharing, and there is a lack of specific guidance on this.</p> <p>WR is committed to communicate in an accurate, ethical and respectful manner, in line with its strategy and key policies, but these do not provide specific guidance to ensure that external communications are accurate, ethical and respectful, or how fundraising and communications materials depict communities with dignity.</p> <p>WR's commitment to community engagement is reflected in its policies, protocols and monitoring frameworks, although domestic programme projects do not systematically monitor communities' participation. WR's participatory approach ensures equal and meaningful participation of community members, including marginalised groups, in decision-making processes. However, challenges exist in ensuring community participation in short-term emergency response projects.</p> <p>WR actively seeks feedback from community members. Feedback mechanisms and complaint systems are in place, and efforts are made to ensure confidentiality and accessibility of these systems. WR also encourages partners to have their own feedback mechanisms. Community feedback is valued, and changes are implemented based on their suggestions. WR's partner assessment process includes evaluating the availability of a complaints and feedback mechanism.</p>	<p>Communities feel well informed including in relation to organisational commitments on PSEAH, staff behaviour, CFMs and project details. They perceive WR's approach to communication as appropriate and clear. Communities confirm that they contribute to project design and have opportunities to provide feedback and to raise concerns. Community members attest that they have received feedback from the organisation on suggestions they had submitted.</p>	2.1
<p>Commitment 5: Complaints are welcomed and addressed</p>	<p>WR and its partners have Complaints and Feedback Mechanisms (CFM) in place. CFMs have been designed and implemented in consultation with communities; however, communities are not systematically involved in monitoring the CFMs.</p> <p>The organisation has significantly increased the number of staff dedicated to safeguarding and</p>	<p>Communities report being well informed about the CFM of WR and partners, including the scope, the expected behaviour of staff including in relation to SEA, and how to access the CFMs. They confirm having been consulted on CFM</p>	2.1

	<p>complaints, both at Home Office and Country Office levels, demonstrating its commitment to ensuring an organisational culture that welcomes complaints and feedback. Complaints are reported and acted upon according to WR policies and procedures.</p> <p>WR ensures that partner and communities are fully aware of the expected behaviour of staff, and its Code of Conduct is distributed in several versions and language. Staff are provided with tools and guidance on how to inform partners and communities on staff behaviour including SEA.</p> <p>WR's Complaints Policy includes referrals to third parties, however, not all COs and partners have developed referral pathways or document and follow these up systematically.</p> <p>While some of the procedures and tools that WR has put in place to ensure that communities can systematically give feedback or complain have not been fully communicated to all partners at all sites, the organisation complies with this core commitment.</p>	<p>design and implementation, but not on the monitoring.</p>	
<p>Commitment 6: Humanitarian response is coordinated and complementary</p>	<p>WR is committed to coordinating and collaborating its humanitarian and development work with other stakeholders, and this is outlined in policy and strategy documents. WR signs agreements with its partners; partner capacities are assessed and partner capacity development is part of WRs long-term commitment. The organisation undertakes stakeholder analysis prior to starting programmes to ensure that the response complements that of other stakeholders. In all COs sampled, staff demonstrated how the organisation actively participates in coordination structures and openly shares information about its work with all stakeholders, including national and local governments.</p> <p>WR is involved in mostly faith-based regional, national and international networks.</p>	<p>Communities confirm that they perceive WR to be well integrated into local structures and networks and that they do not see any duplications of activities provided by WR and its partners.</p>	<p>3</p>
<p>Commitment 7: Humanitarian actors continuously learn and improve</p>	<p>The organisation conducts monitoring, evaluation and learning activities in its programmes and this is based on policies and procedures. WR has developed a learning policy, however, this has not yet been rolled-out. The organisation is in the process of setting-up a new MEAL framework for its international work to unify existing processes, including defining indicators for both Community Development and International Disaster Relief.</p> <p>The organisation shares learnings internally through its intranet, databases, meetings, publications and workshops, and partners confirm that WR shares learning with them and involves them in knowledge management. However, inter-organisational exchange of knowledge between the different programme departments and COs is limited.</p>	<p>Communities and partners state that WR actively seeks to learn and apply learnings in its programming, that they are consulted in the process, and that learnings are shared with them.</p>	<p>2.7</p>

	WR has different systems in place within its Community Development, International Disaster Response and domestic programmes, all of which enable WR to apply learnings for new programmes, draw on lessons learnt during programmes, and share its learnings with the wider community.		
Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably	WR applies fair, transparent and non-discriminatory HR policies, which are compliant with local employment law. Staff have job descriptions, although these are not always up-to-date, receive regular performance appraisals, and are supported with personal development plans. WR staff, volunteers and partner staff are aware of the Code of Conduct and the organisation's commitment to safeguarding. WR is committed to not proselytise in its work, and a statement on Work and Witness, giving guidance to staff and volunteers on their behaviour in this regard, and when dealing with partners and communities, has been written and approved but not yet rolled-out.	Communities consider WR staff and volunteers and partner staff to be competent and skilled in their work. They are also satisfied with their behaviour and the way they are treated.	2.6
Commitment 9: Resources are managed and used responsibly for their intended purpose	WR has a range of policies in place to ensure appropriate use and management of resources and to strike an appropriate balance between quality, cost and timeliness. The organisation ensures that resources are managed and used responsibly, and for their intended purpose. WR systematically undertakes budget monitoring and conducts financial audits of partners. Although WR has several tools and procedures in place to record risks at organisational and programmatic levels, there is no risk policy or guidance in place to ensure that risks are assessed and acted upon in a systematic manner. WR is committed to protecting the environment and this is stated in policies and strategies, and is put into action in its programmes. WR has a Zero Tolerance policy on fraud and corruption, has procedures in place for taking action, and trains staff and partners accordingly.	Communities are aware of environmental protection issues and state that they considered WR and partner staff to be knowledgeable about environmental practises. Communities confirm being informed about what they will receive and about the planned activities, and they feel that WRs and partners spent their resources wisely, efficiently and in a timely way.	2.7

* *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 non-conformities


Corrective Action Request (CAR)*	Type	Resolution timeframe
2023-3.6: WR's capacity to identify and act on unintended risks and negative effects, in particular in domestic programme projects, is not systematically ensured.	Minor	2026 RA
2023-3.8: WR does not have data management procedures in place to ensure the safeguarding of personal information.	Minor	2026 RA
2023-4.7: WR policies and procedures do not provide specific guidance to ensure that external communications are accurate, ethical and respectful, including how fundraising and communication materials portray communities with dignity.	Minor	2026 RA
2023-5.7: WR does not ensure the systematic referral of complaints that do not fall within the scope of the organisation.	Minor	2026 RA
2023-8.6: WR does not ensure that staff and volunteers have a clear understanding on what the organisation's commitment to not proselytise means with regard to their own behaviour, and when engaging with communities.	Minor	2026 RA
Total Number of CARs	5	

* *Note:* The CARs are completed by the audit team based on the findings. The audited partner is required to respond with a Management Response for each CAR to HQAI before a certificate is issued (reference: HQAI Procedure 114).



6. Recommendation for next audit

Sampling	No variation from the standard sampling rate is recommended. Sampling should be based on the number of Country Programmes active at the time of the next surveillance audit.
Any other specificities to be considered in the next audit	It is recommended that the renewal audit samples domestic programme projects for onsite assessment, including consultations with domestic programme participants.

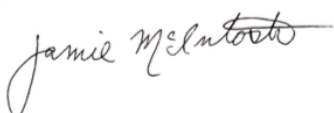
7. Lead auditor recommendation

<p>In our opinion, World Renew conforms with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>We recommend certification.</p>	
<p>Name and signature of lead auditor:</p>  <p>Jordi Capdevila</p>	<p>Date and place:</p> <p>Barcelona, 31 July 2023</p>

8. HQAI decision

HQAI decision:	<input checked="" type="checkbox"/> Certification preconditioned to the provision of a management response <input type="checkbox"/> Certification preconditioned to the closure of Major CAR
Management response expected by: 2023/11/03	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 04 October 2023
Final decision on certification:	<input checked="" type="checkbox"/> Issued <input type="checkbox"/> Refused
Start date of the certification cycle: 2023/11/15 Next audit before 2024/11/15	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 15 November 2023

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>	<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: 	Date and place: Burlington, 19 October 2023

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