

Concern Worldwide

Maintenance Audit 1– Report - 2025/09/24

1. General information and audit activities

Role / name of auditor(s)	Marie Grasmuck, senior auditor	
Audit cycle (CHS version)	Third cycle (CHS:2014)	
	Date / number of participants	Any substantive issues arising
Opening Meeting	02 September 2025 / 7	No
Closing Meeting	08 September 2025 / 5	No
	Position / level of interviewees	Number
Interviews	Senior management	3
	Management	1

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

There have been some organisational changes since the last audit. In June 2025, Concern's Board appointed a new Chair. The Board also welcomed new members. Some turnover at the senior management team level was reported at the last audit, for natural reasons such as retirement or professional development. Those changes are now completed but were closely followed by the US funding cuts at the beginning of 2025. Funding cuts resulted in 17% of the Head Office staff being made redundant and triggered a reorganisation of some teams (see below). Country Offices have also lost around 500 staff at the time of this audit. Concern is currently adjusting to those changes in terms of prioritising projects and workload at Head Office and Country Office levels. Operationally, the funding cuts have resulted in the closure of the Country Offices in North Korea, Rwanda (in progress, to be closed by June 2026), and Lebanon (which will be managed by the Syria Office). In parallel, and through Alliance 2015 members operational in those areas, Concern has started funding projects in Gaza and Myanmar.

As part of the structural changes in the period, Concern's Protection and Safeguarding Department is now hosting the equality advisor and the conflict advisor positions. With the previously hosted positions of humanitarian protection advisor, safeguarding advisor, protection and safeguarding manager, and director of protection and safeguarding, there are now 6 persons in the department. The Human Resources Directorate has also seen some structural changes, whereby the talent acquisition and recruitment teams are now under the same umbrella of Talent Acquisition and Development. Additionally, the Disaster Risk Reduction (DRR) advisor position has moved from the Emergency Department to the Strategy, Advocacy and Learning (SAL) Department.

Concern's current strategy 2021-2025 is coming to an end and the organisation is in the process of building a new one, due by the end of 2025.

In terms of organisational improvements, Concern has continued the implementation of several initiatives related to Feedback, Complaints and Response Mechanisms (FCRM), protection and safeguarding. Concern has finalised the development of its bespoke SpeakUp platform, which is in service since the beginning of 2025. The official launch, along with the distribution of related IEC material is planned in the coming month. This platform is aimed at sensitive complaints (safeguarding, fraud, whistleblowing etc.) and is mainly destined for Concern's staff, partners, and the communities having a digital access. In parallel, Concern continues the implementation of country-specific FCRMs aimed at ensuring a wide access to all. Further, Concern is working on developing an offline dashboard for the FCRM database, and on finding ways to support the Designated Safeguarding Focal Points (DSFP) in Country Offices by developing country-specific tools and documents. Finally, Concern has updated the Investigation Manual and the Safeguarding Case Management guidelines, which are now both under legal review.

HR-wise, Concern has continued its phased implementation of its Global Banding Framework, with the aim of having it rolled out in all countries by January 2026. At the time of this maintenance audit, Concern is also starting the procurement of a HR Information Management System to be used globally by the Head Office and all Country Offices.

After last audit, the action plans for the two outstanding CARs were discussed with the lead departments. The CHS focal point follows up regularly on the progress towards closing the CARs; and discusses observations through annual country self-assessments, setting up annual priorities and following-up on them on a regular basis.

Concern shows an ongoing commitment to the CHS since several years.

2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution timeframe	Progress made to address the CAR and in response to the findings of the indicator	Evidence (doc no., KII)
2024-5.4: The HO documented complaints handling process for communities is not up to date with Concern's safeguarding policies	Minor / by 2027 (RA)	<p>Concern shows progress to address this CAR:</p> <p>Concern has decided to address the CAR through a staged approach, after considering other ongoing initiatives (see above) and the connection between different initiatives and topics of interests.</p> <p>Concern has been able to ensure that all country offices (CO) have FCRM Standard Operating Procedures (SOP). Concern's annual FCRM report is partly built through a questionnaire on which CO self-report the existence of a FCRM SOP, which SOP has then to be communicated to Concern's HO. Concern HO reviews the SOPs according to a rotating schedule, which is followed up through a tracker. Concern includes possible support to improve the CO's SOP as part of their broader work to support the COs with their FCRM.</p> <p>Next, Concern plans to update the FCRM Guideline, which revision was contingent the development and launch of the SpeakUp platform in September 2025 (see above), to ensure processes stay aligned. After considering the possibility of integrating the Investigation Manual and the Safeguarding Case Management guidelines as part of the Feedback and Complaints Response Mechanism (FCRM) Guideline, Concern decided to keep them as separate guidelines, while ensuring the different documents align with each other, each at their own level. This comes from the fact that case management and investigation are position-specific rather than intended for a wider public, as is the FCRM Guideline.</p> <p>Concern ensures that this action plan and those specific improvements have been through the Protection and Safeguarding Strategic Framework Steering Group for validation, and also gathers the feedback of the FCRM working group, in order to ensure that the improvements planned are fit for purpose.</p>	ORG227, ORG231, interviews with staff
2024-8.5: Not all staff handbooks at CO level are up to date with relevant HO policies and procedures	Minor / by 2027 (RA)	<p>Concern shows progress to address this CAR:</p> <p>Concern already had a tracker for verifying the existence and accuracy of the HR manuals at CO level. Since the last audit, a greater emphasis has been put on maintaining this tracker up to date; and considering that a <i>minima</i> the HR Manual must be updated every 3 years. The HR advisors now proactively reach</p>	ORG228, Interviews with staff, observation

		<p>to countries according to their status in the tracker, and relevant teams are able to follow-up on the last developments.</p> <p>Furthermore, Concern is currently reviewing the CO's HR Manual Template in order to ensure that all manuals are built on a comprehensive structure. Concern plans to finalise the new template by October 2025.</p>
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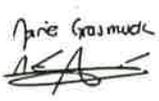
3. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2024-5.4: The HO documented complaints handling process for communities is not up to date with Concern's safeguarding policies	Minor	Open	By 2027 (RA)
2024-8.5: Not all staff handbooks at CO level are up to date with relevant HO policies and procedures	Minor	Open	By 2027 (RA)
Total Number of open CARs		2	

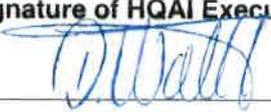
4. Claims Review

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

<p>In our opinion, Concern has demonstrated that it is taking necessary steps to address the CARs identified in the previous audit, and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>We recommend maintenance of certification.</p>	
<p>Name and signature of lead auditor:</p> 	<p>Date and place: 2025/09/24 Metz(FR)</p>

6. HQAI decision

<input checked="" type="checkbox"/> Certificate maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Surveillance audit before: 2026/09/24	
<p>Name and signature of HQAI Executive Director:</p> <p>Désirée Walter </p>	<p>Date and place: Geneva 24 September 2025</p>

7. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: If yes, please give details:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name and signature of the organisation's representative: CAROL Morgan B M Hyr International Programmes Director	Date and place: 24/10/2025 Dublin

Appeal

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

The details of the Appeals Procedure can be found in document PRO049 – Appeals Procedure.

Annex 1: Explanation of the scoring scale*

Scores	Meaning: for all verification scheme options	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"> • Independent verification: major weakness. • 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"> • 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.	<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"> • 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"> • 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

