Help a Child (Red een Kind)
Maintenance Audit 2 – Report - 2025/12/16

1. General information and audit activities

Role / name of auditor(s)	Lead auditor/Meur Elisabeth	
Audit cycle	First cycle	
	Date / number of participants	**Any substantive issues arising**
Opening Meeting	25.11.2025 / 10 participants	-
Closing Meeting	02.12.2025 / 3 participants	-
Interviews	**Position / level of interviewees**	**Number**
	Management / Head office	3
	Staff / Head office	4
	Other / independent consultant	1

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

Following a period of strategic reflection and development after the Maintenance Audit 1 (MA1) (2025), Help a Child (HAC) has focused its efforts on developing and updating policies, guidelines and tools, and rolling out new Multi-Annual (MAPP) and Annual Project Plans and Reports formats. New documents such as the Disaster Response (DR) Policy, the Policy Brief Climate Interventions and Sharing Information on Integrity and Prevention of Sexual Exploitation, Abuse and Harassment (PSEAH), as well as new communication materials, demonstrate HAC's commitment to improving quality and accountability. The Management Team monitors progress on a quarterly basis based on an updated CHS improvement plan.

HAC is piloting a new organisational structure that aims to ensure central programme coordination, improve efficiency and facilitate effective communication across the organisation, as well as ensuring long-term sustainability. To this end, HAC has established three structured meetings: the Country Strategic Team (CST), the Country Portfolio Team (CPT), and the Thematic Portfolio Team (TPT). While the CST and CPT are country-based, the TPT - starting in December 2025 - will bring together various Country Offices (COs). All staff interviewed emphasised the positive impact of these teams on the quality of work, learning opportunities and empowerment of CO staff. HAC's knowledge management is also progressing through the development of e-courses, the hiring of a Knowledge Management coordinator, and discussions about opening access to the HAC Academy to local partners.

To inform some of its open Corrective Action Requests (CARs), HAC has developed several projects in the areas of the environment and safeguarding. Firstly, in order to understand how communities perceive HAC, its integrity, its commitment to PSEAH, and its approach to feedback and complaints, HAC conducted surveys in four countries where it operates. The report of the Listening Project makes recommendations to enable HAC to improve information sharing with communities and its CommunityBased Feedbck and Complaints Mechanisms (CBFCM). In order to align with the CHS 2024 requirements, HAC is considering expanding this project to other locations on a regular basis. Meanwhile, HAC has enhanced the monitoring of its CBFCM by collecting real-time data and producing biannual reflection reports on complaints and feedback at CO level. Biannual discussions can be done by the CPT or the PMEAL coordinator and CO, and the Listening Project is also being carried out.

In line with its Strategic Plan 2025-2028 and based on the results of the 2024 Climate Quick Scan, HAC has developed a policy brief entitled Climate Interventions within HAC Programming to streamline and embed climate-related activities into its programme approaches. Disaster Risk Reduction (DRR) and climate-smart programming are now included in the annual report templates. Additionally, following the carbon footprint report, the organisation has adopted two measures to reduce and offset its environmental impact at Head Office (HO) level. The

organisation is reflecting on how best to embed its environmental commitment across its COs and programmes. The next audit will analyse how HAC capitalises on these projects to ensure compliance with the CHS:2024 requirements.

Another key improvement concerns the integration of Do No Harm (DNH) and DRR in policies and Annual Plan formats. HO will soon receive and review the CO Annual Plans for 2026, including these dimensions. The Renewal Audit (RA) will look at how these two approaches are effectively embedded in programmes.

This MA2 found that HAC still lacks a comprehensive and effective risk assessment across the organisation, including its COs and partners (this related to the minor CAR on 9.6). HAC has a Global Risk Assessment including operational risks (updated in June 2025). Risks identification and mitigation at COs level are discussed in CPT meetings twice a year and at CST meetings when needed. Risk assessment and mitigation are part of Annual Plan template and actual examples will be available for 2026. In addition, some measures are planned for 2026 with the validation of the Risk Policy and the development of COs risk registers. The RA will investigate how HAC ensures that risks are linked from programmes to global levels.

Finally, the organisation is preparing for its transition from CHS:2014 to CHS:2024, with the support of an external consultant. CHS:2024 training sessions are planned for 2026, involving HO and COs staff.

2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution timeframe	Progress made to address the Corrective Action Request (CAR) and in response to the findings of the requirement	Evidence (document no., Key Informant Interview etc)
2024-3.2: Help a Child does not systematically integrate DRR into its programmes and does not use the results of existing community preparedness plans to guide activities.	Minor by 2027 Renewal Audit	DRR has been substantially strengthened through a variety of policies and tools. At a policy level, HAC has updated its Disaster Response (DR) Policy (October 2025). This includes specific guidance on needs assessments to systematically integrate DRR into programming. The policy also emphasises the importance of identifying existing community preparedness plans to inform project and activity design. Taking a holistic approach where DRR and climate challenges are integrated all together, the Policy Brief Climate intervention gives direction to streamline and embed climate related activities into existing approaches. Applicable to the Child-Centered Community Development (CCCD) and other projects and programs, it includes a specific section on DR management supported by internal resources, explaining how to connect DRR to Early Child Development. Although staff members explain that DRR has not yet been fully integrated into CCCD, some tools contribute to this process. One example is the Community Challenges Discussion, which incorporates DRR discussions before the design phase. A project document illustrates this, showing the integration of climate resilience activities and training on climate-smart irrigation. The MAPP and Annual Project Plans for CCCD require explanations about how DRR will be integrated into projects. The Risk assessment and mitigation rubric of this plan also consider climate related risks. DRR is also budgeted in CCCD annual plans. The review of the coming Annual plans 2026 will enable the organisation to assess how well DRR is integrated in	ORG207, 211, 221, 223-225, 233. Staff interviews

		programmes. Finally, HAC is pro-actively promoting DRR through its updated e-course attended by 92% of all staff.	
2024-3.6: Help a Child does not systematically identify potential unintended negative effects at the community level in all the areas required by this indicator.	Minor by 2027 Renewal Audit	As mentioned in MA1, both the DR policy and the CCCD manual incorporate DNH principles, as does the CCCD annual plan format. Although the Kids at Risk project proposal format details all the possible unintended negative effects covered by this indicator, the section on DNH in the CCCD annual plan format is general and does not specify the full range of areas in which these effects may occur. HAC will begin reviewing the 2026 CCCD annual plans, assessing how well they reflect the scope of this indicator. Some other tools are in place and cover certain aspects of this indicator. The DNH checklist, which should be used at the beginning of each project, is designed to identify potential harm to individuals and covers unintended negative effects in the areas of culture, gender, social relationships, politics, and dignity. In addition, HAC collects real-time data on complaints and feedback, and the community challenge report considers safety and security. The RA will provide an opportunity to assess how well all areas of unintended negative effects are identified and monitored across all programmes and projects.	ORG 159, 197, 207, 225, 231-232. Staff interviews
2024-4.5: Help a Child does not have a policy or guidance for information sharing with communities in place.	Minor by 2027 Renewal Audit	HAC has made important progress concerning this indicator. The organisation has adopted Information Sharing Guidelines on how to share information on integrity & PSEAH with community members. The guidelines are accessible to all staff on the How to Portal. In addition, HAC has also edited new communication materials such as posters and flyers that are shared and displayed in COs. The posters describe the organisation's values and mission and are adapted to different populations. They still need to be translated into local languages. The flyer "Bad Touch" illustrates unacceptable staff behaviour. The Listening Project also has the potential to improve information sharing, as it assesses how communities perceive communication regarding HAC, integrity and PSEAH, as well as feedback and complaints systems. The organisation is considering how to expand and reproduce this survey every two years in order to monitor communities' awareness. Similarly, discussion reports on Community-Based Feedback and Complaint Mechanisms (CBFCMs) carried out by COs and partners show that information sharing remains critical in some places. These reports provide valuable information to help tailor improvements in different locations. The RA will examine how the information-sharing guidelines and new communication materials are used at the project site level, and the effect this has on communities.	ORG198-201, 212, 215-216. Staff interviews
2024-5.1: Help a Child does not ensure that their partners implementing CCCD programmes have effectively consulted	Minor by 2027 Renewal Audit	The CBFCM manual is shared with COs staff who are responsible for training the local partners at the start of new projects. In addition to policy and procedure update and development since the MA1, HAC pursues twice a year CBFCM workshops and reports involving both COs and partners at country level. These discussions provide an overview of the strengths and weaknesses of existing	ORG188, 212, 215-216. Staff interviews

		mechanisms, and also offer a forum for further discussion on how to improve the CBFCM in their respective contexts. The effectiveness of the CBFCM is also discussed across the new organisational structure, in CPT and, at a higher level, in CST. Additionally, the Listening Project directly questions communities about if they have been asked by HAC/partner staff about their preferred ways of providing feedback and/or complaints. These processes enable HAC to promote and support community consultations on CBFCM and to monitor its effectiveness. Another supportive mechanism, an updated e-course on CBFCM, has been postponed – and its accessibility to local partners is under discussion by the Management Team. These last points will be reviewed at the next audit.	
2024-5.6: Help a Child does not systematically ensure that communities and people affected by crisis are fully aware of the expected behaviour of staff, including organisational commitments on the prevention of sexual exploitation and abuse.	Minor by 2027 Renewal Audit	HAC has adopted the Information sharing on integrity and PSEAH guidelines completed by new visual communication materials. These visual materials are posters that are shared and displayed in HAC's COs and project sites, representing examples of inappropriate behaviour by staff. HAC monitors the display of the posters using contextualised pictures. The Listening project includes questions on PSEAH and integrity, covering explicitly staff behaviour and what is unacceptable. The Listening project, if expanded and reconducted, is potentially a useful tool to monitor knowledge of communities about expected staff behaviour and PSEAH awareness. HAC now has policies, guidelines, tools and processes in place to monitor and promote community awareness of the expected behaviour of staff, including organisational commitments to preventing sexual exploitation and abuse.	ORG200-201 Staff interviews
2024-9.4: Help a Child does not systematically consider the impact of its operations and programme activities on the environment.	Minor by 2027 Renewal Audit	HAC has taken concrete steps to close this CAR at various levels. Firstly, in terms of policy, HAC has adopted the Policy Brief Climate Interventions within HAC Programming 2025–2026. This document provides guidance on how to incorporate climate-related activities into existing approaches across all projects and programmes, from the design phase to PMEAL. According to this policy, a new set of climate-related indicators will be developed within the PMEAL frameworks. At operational level, following a carbon footprint report on the Kenya CO and the Netherlands HO produced by an external audit company, the HO in Zwolle adopted two key performance indicators ESG 2025–2028: reducing the CO2 footprint by 10% between 2025 and 2027, and offsetting 100% of the measured/indicative CO_2 emissions at the global office. These measures only concern the HAC HO in Zwolle, as it should first serve as a model for the COs. However, the HAC management team is considering expanding CO2 emission measurement to the CO level, especially in countries with humanitarian programming. At the programme level, climate-smart programming is incorporated into the Annual plan and reporting templates. While the project risk assessment section of the Annual plan template invites partners to describe how they will	ORG197, 203, 210, 221, 226. Staff interviews

		mitigate climate-related risks, it does not require them to consider the environmental impact of programme activities. A review of the 2026 annual plans will demonstrate the extent to which the environmental impact of programme activities is considered. Concerning CCCD, HAC is also collecting real time data monitoring environmental indicators. The dashboards show, for instance, data from farmers about their actions and engagement to manage and protect natural resources, using agroforestry, hedges, composting, etc.

Finally, some actions are pending the transition to the CHS:2024 in 2026. Progress at programme level will be further investigated at RA, looking, for instance, at how COs and partners take ownership of the Policy brief Climate Intervention. | |
| 2024-9.6: Policies and processes governing the management of resources in an environmentally responsible way, for assessing and managing risk on an ongoing basis, and for accepting funds in a way that does not compromise ethics or independence are not in place. | Minor by 2027 Renewal Audit | HAC has made progress in the areas of the management of resources in an environmentally responsible way and in relation to the acceptance of funds in a way that does not compromise ethics or independence. However, efforts are still needed for assessing and managing risk on an ongoing basis.

Firstly, HAC has adopted an ESG Policy and a Policy Brief Climate interventions. A specific section on the environment will also be included in a revised version of the CCCD Manual in 2026. At HO level, a process is in place to manage resources in an environmentally responsible way, with the adoption of two KPIs for ESG 2025–2028. The RA will assess how the HO's commitment trickles down to the COs, and how the new policies are implemented at programme level.

Secondly, and regarding the assessment and management of risks on an ongoing basis, HAC has a draft Risk Policy that includes a risk Management Process to identify and connect strategic, country strategic and operational/project levels of risks within the organisation. A Global Risk Assessment Register of operational risks is annually updated (June 2025). In addition, risk identification and mitigation are discussed in CPT meetings (twice a year) and in CST Meetings when needed. Work in progress includes a risk matrix to be designed in 2026, as well as a COs risk register to be developed in the same year.

Finally, the MA1 reported robust evidence of compliance regarding the acceptance of funds in a way that does not compromise ethics or independence. | ORG204, 210, 218,221, 240.

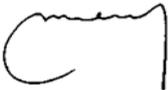Staff and consultant interviews |

3. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2024-3.2: Help a Child does not systematically integrate DRR into its programmes and does not use the results of existing community preparedness plans to guide activities.	Minor	Open	By 2027 Renewal Audit

2024-3.6: Help a Child does not systematically identify potential unintended negative effects at the community level in all the areas required by this indicator.	Minor	Open	By 2027 Renewal Audit
2024-4.5: Help a Child does not have a policy or guidance for information sharing with communities in place.	Minor	Open	By 2027 Renewal Audit
2024-5.1: Help a Child does not ensure that their partners implementing CCCD programmes have effectively consulted with communities on the design, monitoring and implementation of complaints handling processes.	Minor	Open	By 2027 Renewal Audit
2024-5.6: Help a Child does not systematically ensure that communities and people affected by crisis are fully aware of the expected behaviour of staff, including organisational commitments on the prevention of sexual exploitation and abuse.	Minor	Open	By 2027 Renewal Audit
2024-9.4: Help a Child does not systematically consider the impact of its operations and programme activities on the environment.	Minor	Open	By 2027 Renewal Audit
2024-9.6: Policies and processes governing the management of resources in an environmentally responsible way, for assessing and managing risk on an ongoing basis, and for accepting funds in a way that does not compromise ethics or independence are not in place.	Minor	Open	By 2027 Renewal Audit
Total Number of open CARs	7		

4. Claims Review

Claims Review conducted	☒ Yes	☐ No	**Follow-up required**	☐ Yes	☒ No

5. Lead auditor recommendation

In my opinion, HAC has demonstrated that it is taking the necessary steps to address the CARs identified in the previous audit and continues to demonstrate no major non-conformities in its application of the Core Humanitarian Standard on Quality and Accountability.

I recommend maintenance of certification.

Name and signature of lead auditor:	**Date and place:**
Elisabeth Meur	05th December 2025 Malbuisson, France

6. HQAI decision

☒ Certificate maintained ☐ Certificate suspended	☐ Certificate reinstated ☐ Certificate withdrawn
Surveillance audit before: 2026/12/16	

Name and signature of HQAI Executive Director: Désirée Walter	**Date and place:** Geneva, 16 December 2025

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:	☐ 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: Andries Schuttinga	**Date and place:** Zwolle, 5 January 2025

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.	**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