

Fundación Halü Bienestar Humano (Halü)

Maintenance Audit 1 – Report – 2026/02/02

1. General information and audit activities

Role / name of auditor	Senior auditor: Aninia Nadig	
Audit cycle	First cycle (CHS:2014)	
Opening Meeting	Date / number of participants	Any substantive issues arising
	15/12/2025 / 11 participants	None
Closing Meeting	13/01/2026 / 6 participants	None
Interviews	Position / level of interviewees	Number
	Senior management	3
	Programme staff	2
Total number of interviewees		5

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

Since the 2025 Initial Audit, there have been no significant structural changes in the organisation that would have impacted on the application of the CHS. It is worth noting, however, that staff count has diminished by roughly 25% in the course of 2025, due to a reduction in projects available.

Halü is making considerable efforts in addressing the nine Minor Corrective Action Requests (CARs) identified in the Initial Audit. Halü has identified three broad strategic areas: strategic planning, directorial tasks and programmes, which are each being assigned to a specific senior staff.

Halü has started to adopt a more systematic and integrated approach to programming, as well as a stronger alignment of programmatic and administrative/financial work streams, with the aim to create a more professional organisation. As part of this aim, and to increase its visibility, Halü is currently updating its website and plans to launch it in 2026.

In terms of documents and processes, Halü updated and finalised its MEAL Handbook which now includes stronger reference to data disaggregation (CAR 1.5), consistent monitoring (CAR 2.7) and organisational learning (CAR 7.2). Other steps to improve its programmatic work include a new exit strategy approach (CAR 3.4), more systematic monitoring of project indicators (CAR 2.7) and stronger communication and learning, both at project and organisational levels (CARs 1.5 and 2.7).

To strengthen its administrative support functions, Halü has commissioned a consultancy to explore the consolidation and strengthening of finance, procurement and human resources processes (CARs 8.5, 8.6, 8.9 and 9.6).

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)
<p>2025-1.5: Halü does not have all the relevant policies and processes in place to take into account the diversity of communities, including disadvantaged or marginalised people, and to collect disaggregated data</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü has made progress towards addressing this CAR by updating its MEAL Handbook and including a MEAL toolbox. Themes such as data disaggregation, continuous collection of feedback and participation have been strengthened.</p> <p>Halü also developed a Protocol for addressing communities and an Accountability Protocol which staff confirmed are being applied and useful for formalising certain activities that Halü already does, including the focus on addressing diversity and marginalisation.</p>	<p>1.3 1.5 1.8 8.5 Interviews</p>
<p>2025–2.6: Halü does not have the organisational capacities to consistently meet programme commitments.</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>The main issue identified in the Initial Audit was that Halü lacked a sufficiently strong administrative structure to effectively support its programmes.</p> <p>Over the past year, Halü developed several tools that allow it to better plan, carry out, and learn from, programmes, and thereby structure its work and staff tasks more realistically. Halü also plans to roll out a fundraising strategy in the first half of 2026 to help identify alternative funds to strengthen its administrative team. Below are a few activities that help address CAR 2.6:</p> <ol style="list-style-type: none"> 1. A flowchart explaining the process for project formulation shows that the organisation has an approach to reflecting as a full team before submitting a proposal has been developed. This can help ensure that Halü does not overstretch its organisational capacities. 2. The new Strategy for opening and closing programmes was mentioned as another tool that was very welcome by staff, as it adds structure to the way programmes are planned and set up. 3. Halü developed a methodology to capture lessons learned and good practice. It allows Halü to combine lessons from technical, administrative and financial teams, ensuring a more integrated approach to programme management. 4. There are monthly project staff meetings where progress and challenges are discussed and addressed, and project indicators reviewed. 5. Halü will work on an advocacy strategy together with the NEAR Network. 6. Halü is setting up annual programme plans (<i>planes operativos anuales</i>) with success indicators. 	<p>1.2 1.4 5.3 5.4 6.1 Interviews</p>

<p>2025–2.7: Halü does not have the policies in place to ensure that systematic, objective and ongoing monitoring and evaluation of activities and their effects, that evidence from monitoring and evaluations is used to adapt and improve programmes; and timely decision-making with resources allocated accordingly</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü is making progress in addressing this CAR.</p> <p>The organisation is starting to use a Programme Follow-up Matrix (<i>matriz de seguimiento programático</i>).</p> <p>The accountability protocol (<i>Protocolo de rendición de cuentas</i>) is closely linked to MEAL activities (e.g. collecting feedback). As noted above, the MEAL manual has been updated and strengthened.</p> <p>Generally, Halü staff report being more aware of the importance of a holistic approach towards programming, including the collection of good practices and lessons learned (also based on feedback and complaints). The approach is not yet fully systematised but already anchored better in Halü’s daily work (see also CAR 7.2)</p>	<p>1.10 8.5 Interviews</p>
<p>2025–3.4: Halü does not plan a transition or exit strategy in the early stages of the humanitarian programme that ensures longer-term positive effects and reduces the risk of dependency</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>For some of its projects, Halü has already developed an exit strategy. But to address this CAR more systematically, Halü has developed an organisational strategy for opening and closing projects, which includes developing and communicating its exit strategy. The strategy gives useful guidance and prompts reflection on when communities are ready for Halü to safely exit.</p> <p>Complementary to relevant donor requirements, Halü plans to roll out the strategy among all programmes as needed.</p> <p>The Accountability Protocol supports this requirement in that it focuses on continuous communication with affected communities and on keeping them informed.</p>	<p>1.2 1.6 8.5 Interviews</p>
<p>2025–7.2: Halü does not ensure that the organisation learns and innovates from feedback and complaints.</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>To address this CAR systematically, Halü has updated its MEAL Handbook, which now includes stronger focus on organisational learning. Halü also started to organise reflection meetings every two weeks for all staff and weekly project staff meetings. These meetings are planned ahead with an agenda and include themes around learning, roll-out of tools and security, as well as discussions on communication with, and learning from, communities.</p> <p>Interviewees understood the importance of learning from project outcomes and stated that progress has been made for certain projects, also in communication with the communities, when possible.</p> <p>More generally, organisational learning is supported by annual learning and planning sessions. According to staff, both are becoming more structured.</p> <p>However, the organisation does not yet have a systematic way of collecting and learning from feedback and complaints.</p>	<p>1.8 1.9 8.5 Interviews</p>
<p>2025–8.5: Halü does not have clear procedures indicating the criteria and requirements that indicate when the</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü has made progress addressing this CAR. It commissioned legal advice on its obligations if it were to pursue more labour contracts, particularly for admin staff at Head Office. This includes an understanding of rights and obligations on both sides and the national legal situation. The planned fundraising strategy (see also CAR2.6) should help strengthen Halü’s administrative</p>	<p>9.1 Interviews</p>

<p>organisation sign a labour contract or a service provider contract with the staff</p>		<p>team, including more staff time dedicated to human resources.</p>	
<p>2025-8.6: Halü does not conduct a formal performance appraisal of its staff</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü is fully aware of the legal obligation to conduct a performance appraisal of its staff. However, performance appraisals and personal growth plans are only mandatory for labour contracts, which the vast majority of Halü staff don't have.</p> <p>The organisation plans to formalise further its HR procedures by developing a manual of procedures for HR and working with partners (Contracting manual for staff, goods and services, etc), while recognising that it currently lacks sufficient professional HR support.</p>	<p>9.2 9.3 Interviews</p>
<p>2025-8.9: Halü does not have policies in place for the field security and the wellbeing of staff.</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü has developed a Protocol on Field Security and organised a series of security workshops. It has developed processes in support of staff security. Staff confirm that increased attention on staff security is important and welcomed the protocol. At the time of the Initial Audit, the protocol had not been signed off, but Halü has been using it actively. Furthermore, Halü's bi-monthly learning and information exchange events mentioned above are much appreciated. They include security issues as relevant.</p> <p>Halü organises occasional support activities, including psychological support, for its staff. However, approaches to systematically ensure staff wellbeing have not been put into a policy or guideline. Staff continued to highlight that more could be done to ensure staff wellbeing, including more clarity around the organisation's obligations under each contract category.</p>	<p>7.1 to 7.8 9.3 Interviews</p>
<p>2025-9.6: Halü does not have all the relevant policies and processes in place governing the use and management of resources.</p>	<p>Minor / by the 2028 Renewal Audit</p>	<p>Halü regularly reports to donors and undergoes external audits, which reflect the good practices Halü applies in its resource management. Internal audits and controls focus on programme activities for donor reporting. No formal organisational internal audit process is in place.</p> <p>Halü commissioned a consultancy to consolidate various processes, including finances, due diligence for procurement and human resources. Halü's planned fundraising strategy will include an approach towards ethical fundraising.</p> <p>The organisation continues to work on the finalisation of the Policy and Protocol for treatment of personal data and is considering developing an organisational approach to identifying, mapping and addressing risks at organisational level (noting that risk mapping at programme level already exists).</p> <p>The Initial Audit mentioned several key documents that had not been signed off by the Board, including the organisational transparency and ethics programme (<i>Programa de transparencia y ética Empresarial.</i>) It is still not. Staff stated that such Board sign-off is not standard practice for Halü, since it is not legally required in</p>	<p>10.3 11.1 11.2 11.5 Interviews</p>

		<p>Colombia, but that the Board is requested to provide inputs to key documents like the one stated above.</p> <p>Regarding the role and setup of Halü’s Board (<i>Junta Directiva</i>), it is worth noting that as from 30 December 2025, the roles of Board director and secretary were covered by two senior management staff. It will be important for Halü to demonstrate how this configuration will support the Board’s role of independent oversight body of the organisation.</p>	
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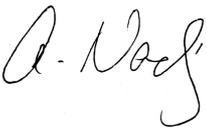
3. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2025-1.5: Halü does not have all the relevant policies and processes in place to take into account the diversity of communities, including disadvantaged or marginalised people, and to collect disaggregated data	Minor CAR	Open	by the 2028 Renewal Audit
2025–2.6: Halü does not have the organisational capacities to consistently meet programme commitments.	Minor CAR	Open	by the 2028 Renewal Audit
2025–2.7: Halü does not have the policies in place to ensure that systematic, objective and ongoing monitoring and evaluation of activities and their effects, that evidence from monitoring and evaluations is used to adapt and improve programmes; and timely decision-making with resources allocated accordingly	Minor CAR	Open	by the 2028 Renewal Audit
2025–3.4: Halü does not plan a transition or exit strategy in the early stages of the humanitarian programme that ensures longer-term positive effects and reduces the risk of dependency	Minor CAR	Open	by the 2028 Renewal Audit
2025–7.2: Halü does not ensure that the organisation learns and innovates from feedback and complaints.	Minor CAR	Open	by the 2028 Renewal Audit
2025–8.5: Halü does not have clear procedures indicating the criteria and requirements that indicate when the organisation sign a labour contract or a service provider contract with the staff	Minor CAR	Open	by the 2028 Renewal Audit
2025-8.6: Halü does not conduct a formal performance appraisal of its staff	Minor CAR	Open	by the 2028 Renewal Audit
2025-8.9: Halü does not have policies in place for the field security and the wellbeing of staff.	Minor CAR	Open	by the 2028 Renewal Audit
2025-9.6: Halü does not have all the relevant policies and processes in place governing the use and management of resources.	Minor CAR	Open	by the 2028 Renewal Audit

4. Claims Review

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

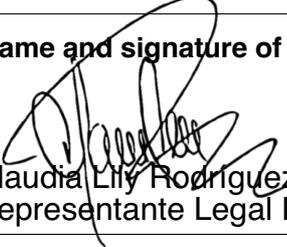
<p>In my opinion, Fundación Halü has demonstrated that it is taking the necessary steps to address the CARs identified in the previous audit and continues to demonstrate no major non-conformities in its application of the Core Humanitarian Standard on Quality and Accountability.</p> <p>I recommend maintenance of certification.</p>	
<p>Name and signature of lead auditor:</p> <p>Aninia Nadig</p> 	<p>Date and place:</p> <p>22 January 2026</p> <p>Geneva</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
<p>Surveillance audit before: 2027/02/02</p>	
<p>Name and signature of HQAI Executive Director:</p> <p>Désirée Walter</p> 	<p>Date and place:</p> <p>Geneva, 02 February 2026</p>

7. Acknowledgement of the report by the organisation

<p>Space reserved for the organisation</p>	
<p>Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team:</p> <p>If yes, please give details:</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>Acknowledgement and Acceptance of Findings:</p> <p>I acknowledge and understand the findings of the audit</p> <p>I accept the findings of the audit</p>	<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:  Claudia Lily Rodríguez Neira Representante Legal Fundación Halü	Date and place: Bogotá D.C. 09 febrero 2026
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Appeal

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

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

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

Annex 1: Explanation of the scoring scale*

Scores	Meaning for all verification scheme options, including self-assessment and third-party audits	Guidance for scoring requirements
<p style="text-align: center; font-size: 2em; font-weight: bold;">0</p>	<p>Your organisation does not currently meet the requirement and indicates a major issue that is so significant that the organisation’s ability to meet the commitment is compromised.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: A major weakness.</p> <p>Certification: A major non-conformity that compromises the integrity of the commitment which leads to a major corrective action request (CAR).</p>	<p>To give a score 0, not all of the measurable components of the requirement are verified to be in place and the issue(s) identified are so significant that the organisation’s ability to meet the commitment is compromised.</p>
<p style="text-align: center; font-size: 2em; font-weight: bold;">1</p>	<p>Your organisation does not currently meet the requirement.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: A minor weakness.</p> <p>Certification: A minor non-conformity that compromises the integrity of the requirement which leads to a minor corrective action request (CAR).</p>	<p>To give a score 1, not all of the measurable components of the requirement are verified to be in place.</p>
<p style="text-align: center; font-size: 2em; font-weight: bold;">2</p>	<p>Your organisation currently meets the requirement, but there is an opportunity for improvement that deserves attention so that the requirement is not compromised in the future.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met with an observation.</p> <p>Certification: Conformity with an observation.</p>	<p>To give a score 2, all measurable components of a requirement are verified to be in place, however, one or more opportunities for improvement are observed which deserve attention so that the requirement is not compromised in the future.</p>

3	<p>Your organisation meets the requirement, with organisational systems ensuring it is being met consistently throughout the organisation.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met.</p> <p>Certification: Conformity.</p>	<p>To give a score 3, all measurable components of a requirement are verified to be in place.</p>
4	<p>Your organisation meets the requirement in an exemplary way, demonstrating innovation and/or special recognition of performance, and organisational systems ensure this high quality throughout the organisation.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met in an exemplary way.</p> <p>Certification: Conformity in an exemplary way.</p>	<p>To give a score 4, all measurable components of a requirement are verified to be in place.</p> <p>In addition, the following must be verified:</p> <ul style="list-style-type: none"> • An organisational system (or systems) that demonstrate an innovative approach to meeting the requirement at a high standard throughout the organisation are in place. <p>and/or</p> <ul style="list-style-type: none"> • The organisation has been awarded special recognition of performance in relation to meeting the requirement at a high standard, and this is built into organisational systems so that the high quality is ensured throughout the organisation.
	<p>Guidance notes for scoring commitments:</p> <ul style="list-style-type: none"> • Commitments are scored by taking the mean average score of the requirements, i.e. the sum of all the requirement scores in a commitment divided by the number of requirements in that commitment. • Except when a major non-conformity/weakness is issued, in this case the overall score for the Commitment is 0. 	

* Scoring Scale from the CHSA Verification Framework 2024