Agricultural Development Association – PARC Initial Audit – Summary Report – 2025/12/16

1. General information

1.1 Organisation

Type	Mandates	Verified
☐ International ☒ National ☐ Membership/Network ☒ Direct Assistance ☐ Federated ☒ With partners	☒ Humanitarian ☒ Development ☒ Advocacy	☒ Humanitarian ☒ Development ☒ Advocacy
Legal registration	2069	
Head Office location	Ramallah, Palestine	
Total number of organisation staff	191	

1.2 Audit team

Lead auditor	Camille Guyot-Bender
Second auditor	-
Third auditor	-
Observer	-
Expert	-
Audit facilitator (onsite)	Nahed Jaber

1.3 Scope of the audit

CHS:2024 Verification Scheme	Certification
Audit Cycle	First cycle
Type of audit	Initial Audit
Scope of audit	The audit includes PARC's Head Office and project sites, and all humanitarian, development and advocacy programming implemented by PARC and its partners.
Focus of the audit	Programmes implemented by PARC and partners.

1.4 Sampling*

Sampling unit	Project Sites
Total number of project sites	15
Sample size	5
Total number of onsite visits	2
Total number of sampling units for remote assessment	3
Sampling Unit Selection	

Random Sampling — onsite/remote	Purposive Sampling — onsite/remote
Kafir Malik – onsite	
Jericho Training Center – Agricultural Engineer Trainees – onsite	
Dair Al-Gasoon Municipality – Protection Committee – onsite	
Mythloon Municipality – onsite	

Misilyah Local Council – onsite	

Any other sampling considerations:
The random sample covered humanitarian, development and advocacy programming across different geographic areas where PARC projects are active and included both direct programming and work implemented with partners. As well, all five project sites selected as part of the sample were either visited by the Auditor Facilitator or assessed remotely.

Sampling risks identified:
Projects located in high-risk areas (ie. Gaza Strip) were considered in the sampling but identified as too high risk to be included and therefore were omitted as options for on-site visits. Given these mitigating factors/the management of the sampling risks identified, the auditor is confident in the findings and conclusions of this audit based on the sample.

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 Opening Meeting

Date	2025/09/15	Number of participants	26
Location	Remote	Any substantive issues arising	No

2.2 Locations Assessed

Locations	Dates	Onsite or remote
Head Office – Ramallah, Palestine	2025/15/09 – 2025/29/09	Remote
Kafir Malik	2025/10/06	Onsite
Jericho Training Center – Agricultural Engineer Trainees	2025/10/07	Onsite
Dair Al-Gasoon Municipality – Protection Committee	2025/10/05	Onsite
Mythloon Municipality	2025/10/07	Onsite
Misilyah Local Council	2025/10/07	Onsite

2.3 Interviews

Level / Position of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	0	7	Remote
Staff	9	7	Remote
Project Sites			
Staff	2	3	Remote

Partner staff	2	2	Onsite and remote
Others (Mayor, Municipality members)	0	4	Onsite
Total number of interviewees	13	23	Total: 36

2.4 Consultations with communities

Type of group and location	Number of interviewees		Onsite or remote
	Female	**Male**	
Kafir Malik	9	0	Onsite
Jericho Training Center – Agricultural Engineer Trainees	6	8	Onsite
Dair Al-Gasoon Municipality – Protection Committee	2	6	Onsite
Mythloon Municipality	5	6	Onsite
Misilyah Local Council	3	5	Onsite
Total number of participants	25	25	Total: 50

2.5 Closing Meeting

Date	2025/11/06	**Number of participants**	23
Location	Remote	**Any substantive issues arising**	No

3. Background information on the organisation

| **3.1 General information**	The Agricultural Development Association (PARC) is a national, non-governmental organisation that was established in 1983 in the occupied Palestinian territory (oPt) to advance sustainable development, food security, and social justice for Palestinian communities. It is legally registered with the Palestinian Authority as a non-profit development organisation. It operates under a governance structure made of a General Assembly, Board of Directors, and Executive Council, which ensures accountability, participatory decision-making, and oversight across its programmes and financial systems.
	PARC is committed to rural and agricultural development, social justice and national liberation. Its mission is "to develop the agricultural sector, strengthen the resilience of farmers, reach out to the poor and marginalised groups and their CBO's (note by the auditor: community-based organisations), mobilise and develop the capabilities of rural people to enable them to control their resources, through the work of a distinguished professional teams and a loyal volunteer". It aims to do this by empowering rural and marginalised communities—particularly small-scale farmers, women, and youth—through rights-based development, humanitarian response, and environmental sustainability. PARC promotes resilience, protection of natural resources, and localisation through community-led models and equitable partnerships with local and international stakeholders.
	PARC operates following its 2022–2026 Strategic Plan, which aligns humanitarian and development objectives across five thematic areas: (1) Sustainable Agriculture and Food Security, (2) Water and Environment, (3) Economic Empowerment, (4) Humanitarian Response and Protection, and (5) Governance and Accountability. Cross-cutting priorities include gender equality, youth engagement, climate adaptation, and digital transformation.
	Geographically, PARC works across all regions of the West Bank and Gaza Strip, with operational offices in Ramallah, Hebron, Nablus, and Gaza, and field coordination through community protection committees. In 2024, PARC's programmes reached over 150,000 beneficiaries, including farmers, displaced families, and vulnerable households.

PARC's annual budget was USD 14 million in 2025, with approximately 60% dedicated to development programming and 40% to humanitarian and emergency response. Funding comes from multiple international donors, including ECHO, AECID, DRC, Oxfam, and UN agencies.

3.2 Governance and management structure

PARC is governed by a General Assembly, which elects a Board of Directors (BoD) consisting of nine members. The members serve renewable three-year terms. The BoD provides strategic oversight, approves policies, budgets, and annual plans, and ensures compliance with PARC's bylaws and statutory regulations. The members meet quarterly, with additional sessions as needed, and operates through subcommittees focused on certain thematic areas, including Finance and Audit, Governance and Compliance, and Strategic Oversight.
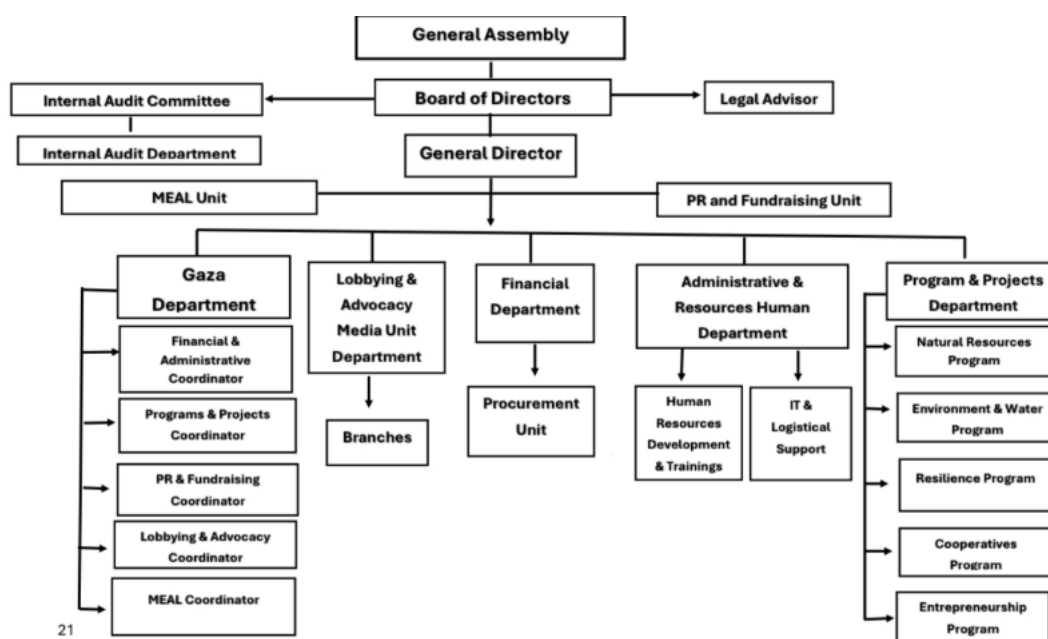
The BoD appoints the Executive Director, who leads the Executive Council, which is the main management responsible for programme implementation, operations, and policy execution. The Executive Council is made up of department directors and unit heads who oversee Programmes, Human Resources, Finance, Procurement and Logistics, Monitoring, Evaluation, Accountability and Learning (MEAL), Communications, and Safeguarding.

PARC has a semi-decentralised structure. There are coordination offices in the West Bank and Gaza operating under shared strategic guidance and unified policies. Cross-departmental working groups, such as on safeguarding, risk management, and emergency response, ensure integrated decision-making.

3.3 Work with partner organisations

Partnerships are a core part of PARC's operational model. It is committed to localisation, community ownership, and equitable collaboration. Approximately 60% of PARC's projects are implemented in partnership with local NGOs, cooperatives, community-based organisations, and technical institutions, while 40% are implemented directly through PARC field offices.

Partnerships are governed by a structured Partner Selection and Due Diligence Framework that assesses organisational capacity, accountability systems, financial management, and alignment with PARC's safeguarding and PSEAH commitments. This process is mandatory prior to engaging and reviewed annually or when risk indicators change.

PARC maintains a centralised partner database and conducts periodic reviews through joint monitoring visits, financial audits, and quarterly coordination meetings. Partner risk

management and learning discussions are integrated into MEAL processes to ensure accountability and adaptive programming.

Through training, technical support, and shared tools, PARC builds partner capacity to meet quality standards, strengthen governance, and to maintain community accountability mechanisms.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

PARC has a multi-layered quality assurance and internal control system. There is Board and Executive Council oversight, financial and safeguarding controls, and routine programme monitoring. There is regular review of budgets, deficits, risk, and audit follow-up. Recently, there has been an establishment of an Internal Audit function which escalates high-risk items to the Board. Financial management is governed by a Financial Policy and Procurement Manual with segregation of duties, competitive procurement, and audit requirements. External audits and spot checks validate compliance. Anti-Fraud and Whistle-blowing policies set zero-tolerance, reporting lines, and sanctions, while Safeguarding and Child Safeguarding policies, as well as the Code of Conduct, define misconduct, mandatory reporting, and investigation parameters.

Risk management is supported by an organisation-wide Risk Matrix and Risk Log used by departments to identify, rate, and track risks. A Risk Management Policy exists but dates to 2016, and there is no documented organisation-wide risk review schedule linking corporate, programme, and partner risks, nor does it identify ownership at each level. MEAL systems include logical frameworks, quarterly and annual narrative reports, external evaluations, and Board/management reviews (e.g., quarterly progress reports, evaluation report, DRC/ECHO reporting) which support adaptive management when needed.

4.2 Level of application of the CHS

PARC has a strong and well-established commitment to the CHS, evidenced through governance oversight, participatory programming, and an organisational culture that prioritises accountability. Across commitments, key strengths include a consistent focus on community engagement, transparency, and responsiveness. Communities and partners overwhelmingly describe PARC as trusted, respectful, and transparent, with consultation practices, feedback mechanisms, and inclusive planning processes embedded across projects. Policies such as the Safeguarding Policy, Child Safeguarding Policy, Whistle-blowing Policy, Financial Policy, and Code of Conduct collectively form a robust ethical and protective framework promoting zero-tolerance for misconduct and upholding the rights and dignity of people and communities.

PARC also applies strong internal controls and programme monitoring systems. Financial and procurement frameworks ensure transparent and responsible resource management, supported by regular external audits and Board-level oversight. The MEAL system provides structured performance monitoring through quarterly reports, evaluations, and learning processes that enable adaptive programming. Partner due diligence and monitoring processes are clearly defined and aligned with CHS and PSEAH expectations.

However, several cross-cutting weaknesses remain. While policy frameworks are comprehensive, operationalisation and documentation are inconsistent across programmes. Risk management practices are active but guided by an outdated policy lacking clear ownership, categories, and a review cycle. Complaints and PSEAH mechanisms, though trusted, are not consistently visible, standardised, or centrally tracked, limiting systematic monitoring of community awareness, case management, and resolution. Learning practices are strong in implementation but not governed by a formal organisational framework, resulting in inconsistent documentation and organisation-wide sharing.

Importantly, although several Corrective Action Requests (CARs) emerge across different commitments, the majority stem from a common root: gaps in the operationalisation, standardisation, and documentation of PSEAH-related procedures.

4.3 PSEAH

PARC has a strong organisational commitment to PSEAH, supported by formal policies, staff training, and defined accountability structures. Core documents—such as the Safeguarding Policy, Child Safeguarding Policy, Whistle-blowing Policy, and Code of Conduct—clearly articulate zero-tolerance, reporting obligations, confidentiality safeguards, and disciplinary measures. Oversight is anchored through the Safeguarding Committee and integrated into HR systems and partner due diligence, ensuring PSEAH standards extend across implementation channels.

Staff awareness, partner compliance, and ethical culture are consistently strong. However, operational consistency remains a gap. Community consultations confirm high trust in PARC staff but variable awareness of formal SEAH reporting procedures. PSEAH communication materials and complaints boxes are not uniformly visible across sites, and centralised tracking of SEAH cases, follow-up actions, and related learning is limited.

Overall, PARC's PSEAH framework is well structured and aligned with good practice, but field-level standardisation of communication, monitoring of reporting mechanisms, and routine refresher training require strengthening to ensure safe and accessible reporting for all community members.

4.4 Organisational performance against each CHS Commitment

Strong points and areas for improvement	Average score*
Commitment 1: People and communities can exercise their rights and participate in actions and decisions that affect them.	2.0

PARC demonstrates a strong and consistent commitment to ensuring that people and communities can exercise their rights and participate meaningfully in decisions that affect them. Across programme sites, PARC fosters transparent information-sharing, culturally appropriate communication, and inclusive participation, using community meetings, protection committees, and digital channels to engage diverse groups. Staff apply respectful, ethical communication practices and adapt engagement methods to local norms. Processes for obtaining *informed consent* for photos, stories, and external communication materials are in place, and community members who have seen themselves represented reported satisfaction with the accuracy and dignity of their portrayal. Policies such as the Safeguarding Policy, Child Safeguarding Policy, and Whistle-blowing Policy reinforce expectations of transparency and accountability. However, communication and documentation related to PSEAH commitments, expected staff behaviour, and available complaint mechanisms remain inconsistently applied across sites, and standardised organisational guidance to ensure uniformity of these practices is still developing.

Feedback from communities: Communities consistently describe PARC as approachable, transparent, and respectful, affirming that staff treat them with dignity and that participation opportunities are genuine and valued. Community committees confirmed their involvement in planning and feedback sessions, though some groups rely more on verbal communication than on written materials to access information about their rights and complaint procedures. Overall, trust in PARC remains high, with people perceiving PARC as accountable, responsive, and committed to protecting their rights.

Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities.	2.5

PARC ensures its support is timely, relevant, and grounded in a strong understanding of local needs and context, using participatory assessments and regular monitoring to adapt programmes as priorities evolve. Targeting is based on needs, though the communication of selection criteria is not yet consistent across all projects. Programmes integrate local capacities and existing structures, apply recognised technical standards, and coordinate with authorities and sector actors to ensure quality and complementarity. Unmet needs are referred to other providers, though referral practices are not uniformly documented. While PARC demonstrates strong contextual awareness and inclusiveness, SEAH risk analysis and vulnerability assessment are not systematically standardised across all programmes.

Feedback from communities: Communities report that PARC's support is fair, appropriate, and delivered at the right time, particularly during crises. They highlight the responsiveness and flexibility of staff in addressing urgent needs and adapting to changing circumstances. Partners confirm that coordination is strong and that programmes reflect real local priorities, contributing to trust and sustained engagement.

Commitment 3: People and communities are better prepared and more resilient to potential crises.	3.0

PARC actively strengthens the resilience of people and communities by supporting both formal and informal local leadership and reinforcing locally led initiatives from the outset of programming. Programmes are designed to contribute to long-term positive effects on livelihoods, local economies, and the environment, integrating sustainability considerations and promoting community ownership throughout planning and implementation. PARC also supports local capacities to anticipate, prepare for, and reduce risks associated with potential crises through disaster risk reduction, preparedness planning, and close collaboration with local authorities and community committees. Across all projects, PARC's approach consistently promotes empowerment, participation, and the long-term resilience of the communities it serves.

Feedback from communities: Communities and partners describe PARC as trusting and empowering and an organisation that builds local capacity to prepare for and respond to crises. Community members note improvements in livelihood stability and confidence in managing risks, while local leaders confirm that PARC strengthens existing community structures rather than replacing them.

Commitment 4: People and communities access support that does not cause harm to people or the environment.	1.6

PARC demonstrates a strong organisational commitment to ensuring its programmes do not cause harm to people or the environment, supported by policies such as the Safeguarding Policy, Child Safeguarding Policy, Whistle-blowing Policy, Environmental Protection Policy, and Risk Management Policy. In practice, programme teams routinely identify and mitigate protection risks, uphold dignity and safety, and apply environmentally responsible approaches—particularly in agriculture, natural resource management, and renewable energy. Safeguarding and PSEAH expectations are clear and consistently communicated internally, and data security measures such as restricted access, secure storage, and confidentiality controls are applied by staff. However, several gaps reduce coherence and consistency across requirements: risk identification and mitigation for people and communities are not guided by a unified organisational framework; environmental mitigation and monitoring are inconsistently documented across projects; and safeguarding responsibilities and PSEAH processes are distributed across multiple documents limiting organisational-wide clarity, standardisation, and oversight.

Feedback from communities: Communities consistently report feeling safe, respected, and supported by PARC staff, expressing confidence that PARC protects their wellbeing. Partners confirm that PARC actively promotes safeguarding and environmental responsibility within joint projects. Communities reported having trust in PARC's ethical and protective approach.

Commitment 5: People and communities can safely report concerns and complaints and get them addressed.	1.5

PARC has established a strong policy foundation to ensure that people and communities can safely report concerns and complaints, including SEAH-related issues. The Safeguarding Policy, Child Safeguarding Policy, Whistle-blowing Policy, Code of Conduct, and Feedback & Complaint Mechanism collectively outline expected behaviours, reporting pathways, confidentiality protections, and investigation procedures. Staff and partners demonstrate solid awareness of these obligations, and communities consistently describe high levels of trust in PARC's staff, noting that concerns raised informally are handled respectfully and discreetly. However, the availability and visibility of formal feedback and complaint channels vary across project sites, with some communities unaware of official mechanisms or relying solely on verbal reporting. PARC lacks a centralised system for recording, tracking, and analysing complaints—including SEAH-related cases—limiting organisational oversight, consistency, and timely follow-up. As a result, while PARC's culture of trust and responsiveness is strong, documentation and systematisation of complaint handling require strengthening to fully meet the commitment.

Feedback from communities: Communities express high levels of trust in PARC staff and confidence that any issue raised would be treated seriously and fairly. Many, however, were not fully aware of formal complaints mechanisms or reporting procedures, relying instead on personal communication with trusted staff. Partners echoed this trust.

Commitment 6: People and communities access coordinated and complementary support.	3.0

PARC has a well-established approach to coordination and collaboration with local actors, ensuring that its support complements community-led and stakeholder initiatives. The organisation actively participates in coordination platforms with government bodies, local NGOs, and international partners, aligning programme design with existing community structures and national priorities. The Partner Selection Policy and Partner Assessment Form outline transparent criteria for partner engagement, capacity assessment, and due diligence processes. Regular meetings, joint monitoring visits, and structured feedback mechanisms ensure continuous collaboration and accountability across partnerships. There is mutual respect in partnerships and evidence of equitable decision-making, with responsibilities and resources clearly defined through formal agreements and MOUs. Quality assurance is supported

by the Board of Directors and senior management, who review performance through regular consultations and governance meetings.

Feedback from communities: Communities appreciate PARC's coordination with local authorities and organisations, noting that its interventions strengthen rather than duplicate local initiatives. Partners describe relationships as equitable, transparent, and responsive, emphasising PARC's role in providing technical support and capacity building.

Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning.	2.2

PARC demonstrates a strong culture of learning, adaptation, and evidence-based decision-making across its programmes. Monitoring data, community feedback, partner inputs, and evaluation findings are regularly reviewed and used to refine programme activities, as reflected in quarterly progress reports, evaluations, and discussions documented in senior management and Board meetings. Staff and partners confirm that PARC routinely adjusts interventions to ensure relevance, timeliness, and responsiveness, and disaggregated data—particularly by sex, age, vulnerability, and location—is used to tailor activities to the needs of diverse groups. Communities also recognise that PARC listens to their feedback and adapts programming accordingly. However, despite these strong practices, PARC lacks a formal organisational framework or policy that systematises learning and its application. The absence of a unified learning strategy or mechanism for tracking how feedback, monitoring data, and lessons learned drive changes results in inconsistent documentation and sharing across programmes, limiting the organisation's ability to consolidate trends and strengthen organisation-wide learning.

Feedback from communities: Communities and partners describe PARC as responsive and adaptive, noting that feedback results in tangible programme adjustments and that their perspectives are valued. They report consistent opportunities to provide input during implementation.

Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed.	2.9

PARC has established a strong and coherent human resources framework that upholds respect, competence, and accountability among leadership, staff and volunteers. It has transparent recruitment, performance management, and disciplinary procedures, reinforcing a zero-tolerance stance toward harassment, abuse, and discrimination. Staff roles and responsibilities are clearly defined, supported by regular supervision, capacity building, and ethical standards aligned with the Code of Conduct. The Safeguarding Committee and HR Department oversee compliance and ensure alignment between organisational and partner practices. Staff wellbeing is actively prioritised through flexible work arrangements, psychosocial support partnerships, and a culture of mutual care—particularly in high-risk areas such as Gaza. PARC's inclusive workplace values equality and fairness, supported by policies that promote a safe and respectful environment for all employees.

Feedback from communities: Communities and partners describe PARC staff as professional, respectful, and empathetic, reflecting a culture of accountability and integrity. They report positive interactions and confidence in staff behaviour.

Commitment 9: People and communities can expect that resources are managed ethically and responsibly.	2.3

PARC ensures systems are robust for ethical, transparent, and accountable resource management. Financial oversight is ensured through Board of Directors and Executive Council meetings, regular budget reviews, and structured reporting mechanisms. Policies such as the Financial Policy, Procurement Manual, Anti-Fraud Policy, and Whistle-blowing Policy establish strong internal controls, clear sanction procedures, and a zero-tolerance stance toward fraud, corruption, and misuse of resources. The organisation also integrates environmental responsibility into its operations through its Environmental Protection Policy, environmental impact assessments, and responsible procurement practices. A Risk Management Policy and supporting Risk Matrix and Risk Log guide identification and mitigation of financial and operational risks, though these tools are outdated and not consistently applied across

departments. Evidence of systematic anti-fraud training, follow-up on investigations, and partner risk alignment remains limited. However, risk awareness and financial accountability are embedded in practice, with partner agreements and audits ensuring transparency throughout the delivery chain.

Feedback from communities: Communities and partners consistently describe PARC as a transparent and trustworthy steward of resources. They affirm that funds are used responsibly and reach intended beneficiaries without waste.

* Note: 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 (CHSA Verification Framework – Scoring Grid, 2024).
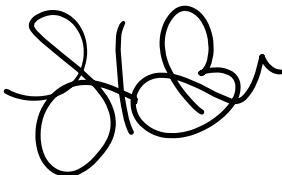
5. Summary of non-conformities

Corrective Action Request (CAR)	Type	Status	Resolution timeframe
2025-1.2: PARC does not consistently share relevant information with people and communities about their rights in relation to the commitments and responsibilities of the organisation.	Minor	New	By the 2028 Renewal Audit
2025-1.3: PARC does not consistently communicate about PSEAH in languages and formats that are easily accessible, understandable, respectful and contextually appropriate for people and communities.	Minor	New	By the 2028 Renewal Audit
2025-1.6: PARC does not have in place a coherent organisational approach to information-sharing and communication especially on PSEAH commitments.	Minor	New	By the 2028 Renewal Audit
2025-2.6: PARC does not have an organisational approach to ensure its work is based on an understanding of SEAH risks and vulnerabilities.	Minor	New	By the 2028 Renewal Audit
2025-4.1: PARC does not consistently identify, prevent, mitigate and address potential and actual negative impacts of programmes on people and communities.	Minor	New	By the 2028 Renewal Audit
2025-4.4: PARC does not have a coherent organisational approach to ensure it works in ways that protect people and communities as well as prevent all forms of exploitation and abuse.	Minor	New	By the 2028 Renewal Audit
2025-4.5: PARC does not have a coherent organisational approach to reduce negative environmental impacts of the organisation.	Minor	New	By the 2028 Renewal Audit
2025-5.1: PARC does not plan and implement safe, accessible, and appropriate ways for all groups in a community to provide feedback and report concerns and complaints.	Minor	New	By the 2028 Renewal Audit
2025-5.2: PARC does not regularly monitor that people and communities understand how staff and volunteers are expected to act to prevent harmful behaviours.	Minor	New	By the 2028 Renewal Audit
2025-5.3: PARC does not regularly monitor that people, communities, and other relevant stakeholders understand how to report concerns and complaints, and how they will be addressed.	Minor	New	By the 2028 Renewal Audit
2025-5.4: PARC does not consistently manage, investigate, address and/or appropriately refer complaints.	Minor	New	By the 2028 Renewal Audit

2025-7.5: PARC does not have a learning framework or documented organisational approach for continuous learning and improvement.	Minor	New	By the 2028 Renewal Audit
2025-9.4: PARC does not consistently manage and use resources to achieve their intended purpose minimising the impact on the environment.	Minor	New	By the 2028 Renewal Audit
Total Number of open CARs	13		

* <u>Note</u>: 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. Lead auditor recommendation

CERTIFICATION

In my opinion, PARC demonstrates no major non-conformities in its application of the Core Humanitarian Standard on Quality and Accountability.

I recommend certification.

Name and signature of lead auditor:	**Date and place:**
Camille Guyot-Bender	24 November, 2025 Grenoble, France

7. HQAI decision

Final decision on certification:	☒ Issued ☐ Refused
Start date of the certification cycle: 2025/12/16 Next audit before 2026/12/16	
Name and signature of HQAI Executive Director: Désirée Walter	**Date and place:** Geneva, 16 December 2025

8. Acknowledgement of the report by the organisation

Space reserved for the organisation	-12-
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: Monjed Abu Jaish *(signature)*	**Date and place:** Ramallah 19-12-2025

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, including self-assessment and third-party audits	Guidance for scoring requirements
0	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. **For third-party auditing schemes:** Independent verification: A major weakness. Certification: A major non-conformity that compromises the integrity of the commitment which leads to a major corrective action request (CAR).	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.
1	Your organisation does not currently meet the requirement. **For third-party auditing schemes:** Independent verification: A minor weakness. Certification: A minor non-conformity that compromises the integrity of the requirement which leads to a minor corrective action request (CAR).	To give a score 1, **not all** of the measurable components of the requirement are verified to be in place.
2	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. **For third-party auditing schemes:** Independent verification: Requirement is met with an observation. Certification: Conformity with an observation.	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.

3	Your organisation meets the requirement,-with organisational systems ensuring it is being met consistently throughout the organisation. **For third-party auditing schemes:** Independent verification: Requirement is met. Certification: Conformity.	To give a score 3, **all measurable components** of a requirement are verified to be in place.
4	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. **For third-party auditing schemes:** Independent verification: Requirement is met in an exemplary way. Certification: Conformity in an exemplary way.	To give a score 4, **all measurable components** of a requirement are verified to be in place. **In addition**, the following must be verified: • An organisational system (or systems) that demonstrate an innovative approach to meeting the requirement at a high standard throughout the organisation are in place. and/or • 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.
	Guidance notes for scoring commitments: • 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