Norwegian Refugee Council (NRC) Maintenance Audit 1 – Report - 2025/10/13

1. General information and audit activities

Role / name of auditor(s)	Marie Grasmuck, lead auditor Birgit Spiewok, supervisor auditor (as quality assurance observer)	
Audit cycle (CHS version)	First cycle (CHS:2014)	
	Date / number of participants	**Any substantive issues arising**
Opening Meeting	22 September 2025 / 10	No
Closing Meeting	01 October 2025 / 8	No
	Position / level of interviewees	**Number**
Interviews	Global Director	1
	Global Leads	2
	Global Specialists / Advisors / Experts	5

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

There have been significant changes at the organisational level since last audit. At the end of 2024, NRC was preparing to roll out a reorganisation of its teams, and the funding cuts from the beginning of 2025 accelerated and increased the scale of the restructuring.

Among the consequences of the restructuring:
- Most regional advising positions have been pooled at the global level (rather than reporting to regions)
- The support to Country Offices (COs) has been reorganised according to a 3-tier system based on CO needs.
- The SIP team, previously a stand-alone unit that also included the Gender Project Manager, is now integrated into the Community Engagement and Inclusion (CEI) Unit (previously Community Engagement and Accountability Unit).
- The Community Feedback Mechanisms (CFM) positions, previously within the Community Engagement and Accountability (CEA) Unit, are now part of the Monitoring, Evaluation, Accountability & Learning (MEAL) Unit (previously MEL Unit).
- The Safeguarding Global team, previously planned to increase by several staff, has been maintained to one person.

These changes resulted in a loss of around 30% of the Global Office, Regional Offices, and Representative Offices staff, representing around 190 staff out of 780 staff.

In terms of programmes:
- There are now 5 programmatic regions (previously 6).
- NRC's Core Competencies have been refocused, one of the key decisions being to exit its work in Livelihoods and Food Security.
- Two countries will proceed with their closing as planned, and three new countries have been identified for closing in late 2025 or by the end of 2026.

Finally, NRC's Strategy 2023-2025 has been prolonged for a year, and activities to develop the Strategy 2027-2030 have started.

The restructuring has been completed as of June 2025. The organisation is still adjusting and taking stock of the consequences of the changes. Especially regarding the CEI and MEAL units, discussions are ongoing in order to settle some conceptual and practical implications of the changes.

To account for those developments and their consequences in terms of workload and feasibility, at the beginning of the year, the different units decided on initiatives which could be continued or had to be frozen or had to be stopped. For 2026, the action plan is now being developed and prepared, whereby initiatives will be prioritised according to the new organisational set up and available resources.

Specifically, regarding the CHS, the follow-up of the Corrective Action Requests (CARs) workplan resides with the CEI Unit and is reported on a quarterly basis through NRC's Sharepoint. At the time of the initial audit, NRC had designed its Management Response Plan to be integrated with ongoing initiatives linked to its 2023-2025 Strategy, with different activities attributed to different units and positions. This integration ensures that the activities planned to correct the CARs are not stand-alone but streamlined throughout strategic priorities. Consequently, the CHS workplan has also been affected by the organisational changes of 2025. Notwithstanding, we note NRC's commitment to the CHS and we report that the organisation has made progress on all CARs.

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)
2024-3.3: NRC does not routinely engage with local actors to strengthen their capacity as first responders.	Minor / By renewal audit 2027	NRC shows progress to address this CAR: • NRC has launched a new version of its Policy on Partnerships with Local Actors. The Policy especially highlights how NRC intends to engage not only with local NGOs, but also local Community Based Organisations (CBOs), local authorities, local private sector, local academia and local research institutes, in order to foster long-term local capacities. • NRC has released a guidance for COs on ensuring their structure supports the engagement with partners and localisation. • The flexible mini-grants mechanism has gained traction, and NRC's advocacy has resulted in four major donors committing at different levels to support the initiative. • NRC's senior management has communicated that COs are all encouraged to develop a partnership strategy in order to implement NRC's organisational objective on partnerships in 2026. The toolkit to develop such a strategy and ensure the analysis is contextualised and integrates local power dynamics and NRC's added value is currently being finalised. • NRC has reflected on the possibility to have its partners benefit from NRC's security and access resources in order to fulfil its duty of care and support frontline partners, who are often exposed to greater security risks. Consequently, NRC has decided to include relevant partner staff in HEAT training. • NRC has developed the Partnerships Insight Review for Safeguarding, Safety/inclusion, Data Protection and Community Engagement & Accountability, a tool aimed at approaching safeguarding risks in partnerships, and at planning consecutive support for partners.	MA19, MA21, MA23, MA24, MA44, staff interviews

		NRC plans on following up on the effectiveness of those activities as part of the routine monitoring of COs, i.e. through key controls, tailored indicators, and direct support from the global advisors.	
2024-3.8: Procedures for the safeguarding of personal information collected from communities are not systematically applied in all programme sites.	Minor / By renewal audit 2027	NRC shows progress to address this CAR: • NRC has updated its Personal Data and Privacy Policy, which has been finalised in May 2025 • NRC is in the process of finalising Standard Operating Procedures (SOPs) on data breaches and on data protection in contracts (final draft stage). • NRC has organised a series of webinars to improve the awareness and understanding of policy requirements and SOPs, and has continued its work on facilitating a community of data protection champions throughout COs. • NRC has released its CFM Handbook (see 4.4), which include a section on the handling of personal data in the context of CFM. • NRC Collect, a centralised and secured system for management the data of projects' participants is getting more traction, and NRC has developed detailed SOPs and terms and conditions to further ensure the protection of data within the system. • Further, NRC plans on working on collating the different SOPs and document related to data protection and work on a single handbook, with the objective to rationalise the information available and better ensure its accessibility. NRC plans on following up on the effectiveness of those activities as part of the routine monitoring of COs, i.e. through key controls, tailored indicators, and direct support from the global advisors.	MA28, MA29, MA30, MA31, MA32, MA34, staff interviews
2024-4.1: NRC does not systematically provide information to communities and people affected by crisis on NRC's principles, its CoC and PSEAH commitments.	Minor / By renewal audit 2027	NRC shows progress to address this CAR: • NRC has released its Community Engagement and Accountability Policy (June 2024), which clearly commits to the provision of information to communities, especially on entitlements and on the existence of CFM. • NRC has also released its Community Engagement and Accountability Framing Paper (February 2025) which highlights the type of information which should be provided to communities. • NRC has released its Safeguarding Policy and Safeguarding Minimum Requirements. The Policy includes a clear commitment to 'ensure that the communities NRC works with are aware of and understand the required behaviour of NRC representatives and know how to complain if requirements are not met'. The Minimum Requirements include several requirements to plan resources to provide information on safeguarding and the actual provision of this information. • NRC's CFM Handbook (see 4.4) includes a specific section on the provision of information, along with key messages and their scripts.	MA1, MA2, MA7, MA10, MA13, MA14, MA43, staff interviews

		• NRC has developed a CFM Quality Self Check Tool (see 4.4), which includes a section on information provision. • NRC is currently working on developing its Information Provision Guidance, which is due for release in November 2025. NRC is also exploring other possibilities to improve on information provision, such as building a community of practice on the topic, or building a library of unified messaging to be used and adapted by COs. NRC plans on following up on the effectiveness of those activities as part of the routine monitoring of COs, i.e. through key controls, tailored indicators, and direct support from the global advisors. We note that NRC's Code of Conduct dates 2014 (last update from the 2008 document) and is, in some aspects, misaligned with NRC's latest documents on safeguarding. The Code of Conduct is in the process of being revised since the beginning of 2025, but the revision has suffered some delays due to organisational changes.	
2024-4.4: NRC does not systematically encourage and facilitate inclusive and accessible opportunities for communities, particularly those at risk of marginalisation or exclusion, from providing feedback on the quality and effectiveness of assistance received.	Minor / By renewal audit 2027	NRC shows progress to address this CAR: • Last year NRC has decided to change the term 'Complaints and Feedback Mechanisms' into 'Community Feedback Mechanisms' in order to broaden the scope of the type of feedback sought and foster an organisational culture welcoming of feedback. • NRC has conducted a Global CFM Baseline at the beginning of the year, which results are used to identify COs which require attention to develop or improve their Community Feedback Mechanisms, and commence addressing the weaknesses identified in the initial audit. • NRC has launched its Gender and Inclusion Policy in July 2025, in which it commits — among others — to ground its programmes in a solid understanding of the context related to gender and inclusion. • NRC has released its Community Engagement and Accountability Framing Paper (see 4.1), which highlights the need to ensure accessible feedback mechanisms at community levels. • NRC has also released its revised CFM Handbook, which includes a dedicated section on proactively identifying and targeting at-risk groups - assessing their specific needs, risks, capacities, and vulnerabilities, as well as potential barriers to accessing the CFM and strategies to overcome these. As part of the revised CFM Handbook Toolkit, NRC has developed a specific tool to guide CFM consultations with communities - including at-risk and AGD groups - to ensure the CFM is inclusive and accessible for all. • Consecutively, NRC has organised a series of webinars on the different sections of the Handbook, which have started in July 2025 and are due to be completed by the end of this year. As part of its CFM webinar series, NRC has dedicated a webinar to the design of safe, accessible and context-specific CFM.	MA1, MA3, MA5, MA7, MA12, MA15, MA16, MA17, MA21, MA25, MA27, MA35, staff interviews

		• NRC plans on finalising its Gender and Inclusion Minimum Requirements, to be launched in October 2025. • NRC has hired dedicated consultants to provide gender mentoring to four countries until the end of the year. NRC plans on following up on the effectiveness of those activities as part of the routine monitoring of COs, i.e. through key controls, tailored indicators, and direct support from the global advisors. More specifically, starting 2026, there will be two new mandatory key controls for COs to report on: one on gender and the one for Community Feedback Mechanisms will be explored or integrated into other existing MEAL compliance processes.	
2024-5.1: NRC does not systematically consult communities and people affected by crisis on the design, implementation and monitoring of complaints-handling processes.	Minor / By renewal audit 2027	NRC shows progress to address this CAR: • NRC has released its revised CFM Handbook which includes explicit sections on the need to ensure the participation of communities during the design, implementation and monitoring of the complaints-handling processes, and provide practical advice for doing so. • As part of its CFM webinar series, NRC has also dedicated a webinar to the design of the CFM with communities. • NRC's CFM survey (see 4.4) includes information on consulting the communities during the design process, which results are used to provide tailored support to COs. • NRC's CFM Quality Self Check Tool (see 4.4), includes question on the participation of communities in the design of CFM. NRC plans on following up on the effectiveness of those activities as part of the routine monitoring of COs, i.e. through key controls, tailored indicators, and direct support from the global advisors.	MA5, MA6, MA7, MA10, MA26, staff interviews

2024-5.6: Communities and people affected by crisis are not fully aware of NRC's CoC and PSEAH commitments and of what behaviours they can expect from staff.	Minor / By renewal audit 2027	NRC shows progress to address this CAR:
		
		• NRC has developed several documents and tools to better support the provision of information and follow-up on it at the level of the Country Office :
		  • The Safeguarding Policy, the Safeguarding Minimum Requirements, the Community Engagement and Accountability Policy and Framing Paper (see 4.1);
		  • The CFM handbook, the CFM Quality Self-Check, and the CFM key messages and scripts (see 4.4).
		
		NRC does not yet have a coordinated way to monitor whether those messages effectively reach community members. However, the revised CFM Handbook includes a dedicated section on different methods for monitoring various aspects of the CFM. Some of these monitoring activities are standalone and others can be integrated into CC activities. Staff will be introduced to these methods and tools through the CFM webinar roll-out series.
			MA1, MA2, MA3, MA5, MA7, MA10, staff interviews

3. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2024-3.3: NRC does not routinely engage with local actors to strengthen their capacity as first responders.	Minor	Open	By renewal audit 2027
2024-3.8: Procedures for the safeguarding of personal information collected from communities are not systematically applied in all programme sites.	Minor	Open	By renewal audit 2027
2024-4.1: NRC does not systematically provide information to communities and people affected by crisis on NRC's principles, its CoC and PSEAH commitments.	Minor	Open	By renewal audit 2027
2024-4.4: NRC does not systematically encourage and facilitate inclusive and accessible opportunities for communities, particularly those at risk of marginalisation or exclusion, from providing feedback on the quality and effectiveness of assistance received.	Minor	Open	By renewal audit 2027
2024-5.1: NRC does not systematically consult communities and people affected by crisis on the design, implementation and monitoring of complaints-handling processes.	Minor	Open	By renewal audit 2027
2024-5.6: Communities and people affected by crisis are not fully aware of NRC's CoC and PSEAH commitments and of what behaviours they can expect from staff.	Minor	Open	By renewal audit 2027
Total Number of open CARs	6		

4. Claims Review

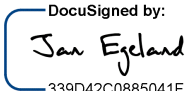| Claims Review conducted	☒ Yes ☐ No	**Follow-up required**	☐ Yes ☒ No

5. Lead auditor recommendation

In our opinion, NRC 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. We recommend maintenance of certification.	
Name and signature of lead auditor: Marie Grasmuck	**Date and place:** Metz (FR), October 10th, 2025

6. HQAI decision

☒ Certificate maintained ☐ Certificate suspended	☐ Certificate reinstated ☐ Certificate withdrawn
Surveillance audit before: 2026/10/13	

Name and signature of HQAI Executive Director:	Date and place:
Désirée Walter	Geneva, 13 October 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: Jan Egeland DocuSigned by: Jan Egeland 339D42C0885041F...	Date and place: 03 December 2025 Oslo

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