

Tesfa Berhan Child and Family Development Organisation

Initial Audit – Summary Report - 2026/02/22

1. General information

1.1 Organisation

Type	Mandates	Verified
<input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy
Legal registration	Non-Profit Organisation	
Head Office location	Debre Berhan, Ethiopia	
Total number of organisation staff	85	

1.2 Audit team

Lead auditor	Gertrude Dendere-Chibwe
Second auditor	
Third auditor	
Observer	
Expert	
Audit Facilitator	Amha Ermias

1.3 Scope of the audit

CHS:2024 Verification Scheme	Independent Verification
Audit Cycle	First cycle
Type of audit	Initial Audit
Scope of audit	The audit covers the whole organisation, the Head Office in Debre Berhan, Ethiopia, and coordination offices. It includes both Humanitarian and Development mandates.
Focus of the audit	All CHS commitments.

1.4 Sampling*

Sampling unit	Project Sites
Total number of sampling units	5
Sample size	3
Total number of onsite visits	3
Total number of sampling units for remote assessment	0
Sampling Unit Selection	
Random Sampling – onsite/remote	Purposive Sampling – onsite/remote
Ethiopia Joint Response Project- onsite	
Enhanced Well-Being of Children and Youth- onsite	
Rebuilding Economies of Women in Conflicted areas- onsite	
Any other sampling considerations:	
Projects sampled covered both Humanitarian and Development mandates and were funded by different donors.	



Sampling risks identified:

No specific 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	2025/12/12	Number of participants	10
Location	Remote	Any substantive issues arising	None

2.2 Locations Assessed

Locations	Dates	Onsite or remote
Ethiopia- Debre Berhan, Woldia	2025/12/22-26	Onsite

2.3 Interviews

Level / Position of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management		6	remote
Staff	2	2	remote and onsite
Project Sites			
Management			
Staff	3	1	onsite
Local Stakeholders		7	Remote and onsite
Total number of interviewees	5	16	Total: 21

2.4 Consultations with communities

Type of group and location	Number of interviewees		Onsite or remote
	Female	Male	
Group discussion #1- Women receiving training and income support (REWCA Project in Amhara Region) Woldia, Ethiopia.	11	0	Onsite
Group discussion #2- Mixed group (EJR Project) Woldia, Ethiopia.	5	4	Onsite
Group discussion with #3- Mixed group (EJR Project) Woldia, Ethiopia.	4	5	Onsite
Group discussion#4 - Women group in (REWCA Project Amhara Region) Woldia, Ethiopia.	8	0	Onsite



Group discussion#5 - Women parents/caregivers (Enhanced Well-Being of Children and Youth Project) Debre Berhan, Ethiopia.	8	0	Onsite
Group discussion#6 - Youth girls (Enhanced Well-Being of Children and Youth Project) Debre Berhan, Ethiopia.	8	0	Onsite
Group discussion#7 - Youth boys (Enhanced Well-Being of Children and Youth Project) Debre Berhan, Ethiopia.	0	8	Onsite
Total number of participants	44	17	Total: 61

2.5 Closing Meeting

Date	2026/01/05	Number of participants	9
Location	Remote	Any substantive issues arising	None

3. Background information on the organisation

3.1 General information

Tesfa Berhan Child & Family Development Organisation (TBCFDO) is a child and youth focused non-governmental and nonprofit organisation founded in September 2009 in North Shewa Zone Justice Department in Ethiopia. TBCFDO was founded by community representatives from ChildFund's (formerly known as Christian Children's Fund Inc.) project operational areas. In 2019, the organisation was re-registered with the authority for Civil Society Organisations. The organisation works in the Amhara and Tigray regions of Ethiopia

TBCFDO works in both Humanitarian and Development mandates to deliver integrated programmes in health, education, food security, and livelihoods, with a focus on service delivery to children and women. The organisation provides interventions in Nutrition, WASH, Education, Livelihoods, Child Protection and Safeguarding, Disaster Risk Reduction and Promotion of good governance in communities.

The following are TBCFDO's key strategic objectives:

- **Healthy Beginnings:** Ensuring children have access to quality and equitable healthcare.
- **Empowered Minds:** Providing quality education that equips young people with the knowledge and skills they need.
- **Thriving Families:** Working with families to create sustainable livelihoods through economic development initiatives.
- **Safeguarding Children:** Creating a secure environment where children can learn and grow to their full potential.
- **Strong Communities:** Promoting good governance and empowering communities to participate in decision-making.
- **Better Preparedness:** Working alongside communities to manage disaster risks.

In 2024, TBCFDO received a total revenue of Ethiopian Birr 97.36 million (approx. USD 625.6 thousand), 2023 revenues were Ethiopian Birr 151.83 million (approx. USD 976.4 thousand).

3.2 Governance and management structure

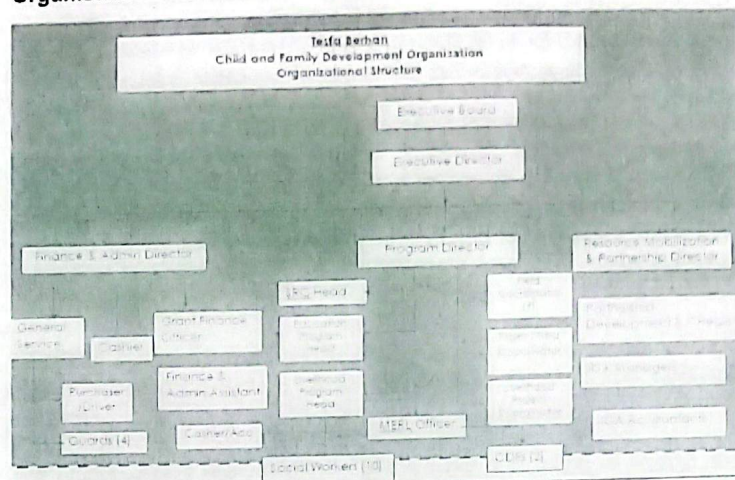
TBCFDO is governed by an 11 member Board of Directors, the day to day operations are managed by the Executive Director who reports to the board and is supported by the management team comprised of the Programme, Finance and Admin, and Partnership and Resource Mobilisation Directors (post currently vacant).

TBCFDO 's head office is in Debre Berhan City, in Amhara Region (130 KM Northeast of Addis Ababa). There are four project offices in Dessie, Debre Berhan, Woldia and Adigrat towns and two area project coordination offices in Woldia and Adigrat that are led by



individual Area Managers who both report to the Programme Director and have limited autonomy.

Organisational Structure



3.3 Work with partner organisations

TBCFDO does not work with partner organisations to implement projects in Ethiopia. The organisation is an implementing partner for ChildFund Ethiopia, SOS-Children Village Ethiopia and Jerusalem Children and Community Development Organisation, among others, with which it has signed agreements detailing the responsibilities and commitments of each party. TBCFDO also works in a consortium with other local partners to jointly implement a donor funded project in Ethiopia.

TBCFDO does not currently have a Partnership Policy that outlines the principles and procedures governing its relationship and collaboration with other organisations. Partnership relationships are negotiated individually with donors and other stakeholders.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

TBCFDO maintains a functional framework for internal quality assurance and risk management mechanisms relevant to the organisation's operations and size. As a growing national organisation, TBCFDO has been progressively working on improving its internal quality assurance. The organisation has long standing relationships with its funding partners that have been instrumental in building its internal quality assurance systems and ensuring minimum standards to be met as part of project partnership agreements.

TBCFDO integrates risk assessment in its strategy and annual planning processes. The risk sharing framework includes assessment of organisational risks such as security, financial and operational risks. Risk assessments are also conducted at the project level and include project and context specific risks. However, TBCFDO does not systematically include environmental matters in its risk assessments. The responsibility for risk management lies with the organisational leadership team.

The organisation has a monitoring and evaluation strategy that details its approach and processes, and periodic monitoring activities are conducted for all its projects. TBCFDO is committed to learning, as evidenced by its strategic plan reviews, project evaluations and project designs. However, the organisation is still working on strengthening its systems for continuous learning and improvement.



TBCFDO employs sound financial management practices and the financial policies and procedures manual addresses internal control processes such as segregation of duties, authorisation and access controls and guides how resources are allocated. External audits are conducted annually by independent auditors to ensure responsible resource stewardship. The organisation is required to submit periodic financial reports to its funding partners. A culture of zero tolerance to fraud and corruption is upheld and the Code of Business Conduct and Ethics details how the organisation handles fraud and corruption, including reporting mechanisms, and staff are trained and understand these commitments.

The organisation is still in the process of improving its internal quality assurance processes to ensure transparent information sharing including sharing information on PSEAH, and protection of the safety and security of staff and volunteers and developing a more robust complaints handling mechanism that has more accessible methods for raising SEAH related complaints.

4.2 Level of application of the CHS

TBCFDO is committed to implementing the CHS at all levels of the organisation. Key organisational documents such as the Code of Conduct and Strategy incorporate CHS elements.

The organisation's implementation of the CHS is stronger at project level and this is also supported by funding partners through inclusion of CHS commitments in partnership agreements in areas related to safeguarding and resource management.

TBCFDO collaborates extensively with local stakeholders and structures to build robust systems that ground interventions in a thorough understanding of community contexts, capacities, vulnerabilities, needs, and risks, with particular attention given to the most marginalised groups. This methodology also strengthens locally led actions and decision-making within its initiatives. TBCFDO ensures community participation is active and meaningful and provides different methods and regular opportunities for communities to participate in their interventions.

TBCFDO demonstrates strong organisational approaches to ensure that its resources, both financial and human, are managed effectively in line with established organisational policies.

While the organisation is committed to providing support that does not cause harm to people and the environment, it lacks systematic approaches to ensure that it works in ways that protect the safety and security of people and communities. In addition, the organisation's Environmental Protection Policy has not yet been operationalised. The organisation has a functional complaint handling mechanism, however there is limited communication with communities regarding multiple methods of reporting sensitive complaints and the handling of PSEAH related complaints.

4.3 PSEAH

TBCFDO demonstrates strong commitment to Protection against Sexual Exploitation Abuse and Harassment (PSEAH), this is highlighted in the organisation's key policy documents, project documents and implementation activities.

The staff are trained on the Code of Conduct and PSEAH policy documents and required to sign these upon recruitment, they can articulate the organisation's commitment regarding PSEAH and its zero tolerance towards exploitation, abuse and harassment including SEAH. The organisation has PSEAH focal points at head office and project offices responsible for receiving SEAH concerns and complaints.

The organisation also participates in local safeguarding coordinating structures as part of PSEAH risk management and works closely with relevant government structures.



Areas for improvement pertain to the lack of systematic transparent information sharing with communities on PSEAH related commitments. This includes information sharing on organisational commitments and expected staff behaviour on PSEAH and safe, confidential and alternative methods of reporting sensitive complaints, including how sensitive complaints would be addressed by the organisation.



4.4 Organisational performance against each CHS Commitment

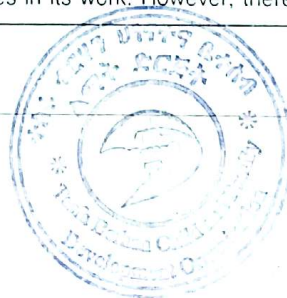
Strong points and areas for improvement	Average score*
Commitment 1: People and communities can exercise their rights and participate in actions and decisions that affect them.	2.0
<p>TBCFDO has strong systems to ensure Diversity, Equity and Inclusion considerations are integrated into its projects. The organisation works very closely with communities in hard to reach areas and this has enabled it to include the most marginalised in its projects. Its strategy and project designs include meaningful participation of communities and communications are adapted to local languages. The organisation regularly shares general information about itself and projects but lacks mechanisms to ensure staff regularly share information with communities including its PSEAH commitments and expected staff behaviour regarding PSEAH.</p>	
<p>Feedback from communities: Communities confirm that Diversity, Equity and Inclusion are integrated into the organisation's projects and that marginalised members can participate in the projects with ease. They were able to indicate how they participate in the organisation's projects and that it was their preferred way to participate. Communities also confirmed that their consent is requested before their pictures or videos are taken for communications and they are informed how the materials will be used. Communities could understand information shared by the organisation verbally however they did not recall being informed about their rights or expected staff behaviours regarding PSEAH, including receiving PSEAH related information or receiving information in different formats such as posters or visual aids that may be more easily understandable.</p>	
Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities.	2.7
<p>TBCFDO's strategic approach, project design together with working closely with local stakeholders and community structures ensures that its interventions are based on an understanding of the context, culture, capacities, vulnerabilities, needs and risks faced by communities, with attention to the most marginalised. Project designs ensure that interventions build upon local knowledge, capacities and existing actions and include fair, transparent and impartial project criteria which is communicated to communities through local structures.</p> <p>The organisation conducts regular monitoring and, based on this, adjusts projects in a timely way. It ensures actions are accessible to communities to address their priority needs. The organisation applies relevant technical standards and recognised good practice in its work with communities.</p> <p>TBCFDO refers unmet priority needs through its established relationships with local stakeholders, coordinating mechanisms and NGO partners. However, it does not have formal processes to ensure this is consistently applied throughout the organisation and there is no system to document and track referred priority needs.</p>	
<p>Feedback from communities: Communities confirm that they were informed of the project's selection criteria and thought it was fair and transparent. They also confirmed that TBCFDO's projects build on local knowledge and capacities. Communities, however, did not know about possible referral pathways or other organisations to approach for some of their priority unmet needs.</p>	
Commitment 3: People and communities are better prepared and more resilient to potential crises.	2.4
<p>TBCFDO integrates sustainability in its strategy and project designs. Staff and stakeholders can articulate how the projects will result in long-term impacts. Regular engagement of local stakeholders during all project stages ensures local ownership of resources and decision making is supported from the outset of work with communities. Project designs and activities include informal community leadership and locally led efforts to reinforce the resilience of people and communities.</p>	



<p>TBCFDO does not have disaster risk reduction and anticipation guidelines and project designs do not always include supporting local capacities to anticipate risks of potential crises or disasters.</p>	
<p>Feedback from communities: Communities confirm that local ownership of resources is supported through engagement of local government and community structures in project design and project handover plans. Some community members can indicate how projects will have long-term effects in their lives, however other communities did not know what support or linkages would remain once the project stopped. Communities did not recall receiving training or discussions on anticipation of risks from potential disasters.</p>	
<p>Commitment 4: People and communities access support that does not cause harm to people or the environment.</p>	<p>2.2</p>
<p>TBCFDO demonstrates a strong commitment to do no harm to people through its established PSEAH policies, practices and ways of working. Staff are trained, understand and sign the Code of Conduct and PSEAH policies upon recruitment. The organisation participates in local Child Protection and Gender-based violence (GBV) coordination structures as part of PSEAH risk management.</p> <p>TBCFDO employs practical data protection measures such as access controls to ensure its IT systems are secure, and sensitive data is restricted to designated staff. However, TBCFDO does not have other systematic data protection measures in place.</p> <p>TBCFDO manages the safety and security of communities at project level and security protocols are contextualised for the relevant locations. As part of its commitment to do no harm to the environment, TBCFDO recently developed an Environmental Protection Policy, however this has not filtered into systematic practice as training has not been provided to staff. In addition, the organisational risk sharing framework does not identify the environment as a key organisational risk.</p>	
<p>Feedback from communities: Community members report no negative impacts from TBCFDO's projects, they also trust that their sensitive data will be kept safe even though they are not aware of how their sensitive data is protected. Communities however do not recall discussions about potential risks, including SEAH, or know of any safety measures in place.</p>	
<p>Commitment 5: People and communities can safely report concerns and complaints and get them addressed.</p>	<p>1.7</p>
<p>TBCFDO has a functional feedback and complaint handling mechanism in place, and this is contextualised for the different projects and locations it works. Where relevant, joint mechanisms with local partners and stakeholders are employed. The mechanism includes different reporting methods such as through local community committees, field staff, community meetings, suggestion boxes in some projects, and a hotline number. TBCFDO monitors communities' understanding of how staff are expected to act to prevent harmful behaviours, however not all sampled projects' monitoring events included monitoring of communities' understanding of staff behaviour regarding PSEAH or communities' understanding of how their complaints were addressed.</p> <p>TBCFDO's complaints mechanism includes a commitment to appropriate victim/survivor-centred approaches to investigate and address complaints and report any misconduct, including sexual exploitation, abuse and harassment. The organisation indicates a commitment to welcoming and resolving complaints in an appropriate manner. However, there is no guidance on acceptable timeframes for resolving complaints nor systematic oversight and monitoring of the complaints' mechanism. Communities are not always aware of alternative methods to safely and confidentially report SEAH related complaints.</p>	
<p>Feedback from communities: Communities confirm that they are aware of the methods for reporting complaints and giving feedback and feel that the organisation takes their complaints seriously. However, community members were not aware of multiple methods</p>	



<p>of reporting complaints especially safe and confidential pathways to report sensitive complaints, where complaints may relate to the organisation's staff. Communities did not know how staff and volunteers are expected to act in ways to prevent and protect them from SEAH or how their complaints were addressed.</p>	
<p>Commitment 6: People and communities access coordinated and complementary support.</p>	2.5
<p>TBCFDO is committed to the coordination and complementarity of its activities to locally-led and community-based actions, and those of relevant stakeholders. This is evidenced through its project designs and ways of working that include close and regular interaction with local stakeholders and other actors. This also ensures that the organisation's work creates no duplication and is coordinated with national and local authorities and other organisations. The organisation works with other local partners in a consortium.</p> <p>The organisation's regular joint monitoring activities and project reports include assessing the quality and effectiveness of the relationships between partners, and corrective action is taken when needed. TBCFDO does not currently have an organisational wide approach to partnering that includes commitment to equitable decision making and managing partner roles and responsibilities. Rather, this is reflected instead in individual partnership agreements.</p>	
<p>Feedback from communities: Communities confirm that the organisation's work compliments and is coordinated with locally led and community based actions and that they do not experience any duplication with other stakeholders</p>	
<p>Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning.</p>	2.2
<p>TBCFDO employs different methods of collecting feedback regularly from communities such as community meetings, monitoring events, during project activities, and using activity feedback questionnaires. However, TBCFDO does not consistently record, and track feedback received.</p> <p>The organisation's monitoring system includes collection of disaggregated data for decision making that reflects the diversity of people and communities and in ways that minimise demands on them. TBCFDO uses data from monitoring events, feedback forms, meetings and complaints logs to guide decision-making and to improve projects. Staff and partners can provide examples of how this is achieved. However, data from complaints is not consistently aggregated and analysed to inform decision making and the organisation's ways of working.</p> <p>TBCFDO shares learnings and feedback with its local government stakeholders and consortium partners during regular coordinating meetings and review forums. However, there is need to strengthen the system for capturing organisation-wide lessons from all the learning activities and ensure they are improving the organisation's commitment to quality and accountability.</p>	
<p>Feedback from communities: Communities report active participation in providing feedback, have access to established feedback mechanisms, and confirm that TBCFDO listens to and responds appropriately to their feedback. Some community members can recall being informed of changes made from feedback and monitoring, however, experience of this is varied.</p>	
<p>Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed.</p>	2.6
<p>TBCFDO has a coherent organisational approach to ensure that human resources are managed effectively in a fair, non-discriminatory and transparent manner, this is highlighted in its human resources policies and practices. The policies include ensuring all staff have the necessary support, skills and competencies to fulfil their roles and responsibilities effectively and staff feel they are supported in their work. Staff sign, understand and adhere to a code of conduct, which, prohibits any form of exploitation, abuse, harassment, or discrimination against people or any misuse of resources.</p> <p>TBCFDO demonstrates commitment to quality and accountability, management and staff can articulate how this is achieved, including integration of PSEAH related issues in its work. However, there is limited communication with</p>	



<p>communities regarding the organisation's commitment to quality and accountability, such as the code of conduct and matters relating to PSEAH. TBCFDO's Security Management Plan is not systematically implemented throughout the organisation and staff do not understand how their safety and security is managed by the organisation. Staff know how to raise concerns and are confident in how the organisation addresses them, including sensitive complaints.</p>	
<p>Feedback from communities: Communities feel that staff behaviour is respectful and staff are knowledgeable regarding their work. They however have limited and varied knowledge of the organisation's code of conduct and its commitment to quality and accountability.</p>	
<p>Commitment 9: People and communities can expect that resources are managed ethically and responsibly.</p>	2.5
<p>TBCFDO has strong systems in place to ensure that resources are managed ethically and responsibly. The organisation's strategic processes include planning for the organisation's capacity and resources for its commitments. However, some of the core functions in TBCFDO's organisational structure, in partnerships, resource mobilisation, and communications, are vacant and currently being taken on by other staff.</p> <p>The organisation manages financial resources responsibly and has relevant policies and procedures in place. Resource mobilisation, and fund allocations are ethical and do not compromise the organisation's commitments and values. The organisation's financial policies and procedures ensure procurement processes include waste reduction. TBCFDO's Environmental Protection Policy has not filtered into systematic practice as training has not been provided to staff and procurement procedures do not systematically include environmental considerations.</p>	
<p>Feedback from communities: Communities think that the organisation has adequate resources to carry out their work, and that they manage their financial resources responsibly. Communities viewed some of the organisation's projects as contributing towards minimising environmental impact.</p>	

* 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 weaknesses

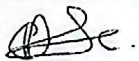
Weaknesses	Type	Status	Resolution timeframe
2026-1.2: TBCFDO does not ensure that staff share relevant information regarding communities' rights and organisational responsibilities, including staff expected behaviour in relation to PSEAH.	Minor	New	2029 Renewal Audit
2026-1.3: TBCFDO does not communicate PSEAH related information with people and communities in formats that are easily understandable.	Minor	New	2029 Renewal Audit
2026-1.6: TBCFDO does not have a coherent organisational approach to transparent information sharing including on PSEAH related information.	Minor	New	2029 Renewal Audit
2026-2.5: TBCFDO does not have a system to ensure priority community needs are consistently referred to relevant stakeholders.	Minor	New	2029 Renewal Audit



2026-3.2: TBCFDO does not support local capacities to anticipate risks of potential crises or disasters.	Minor	New	2029 Renewal Audit
2026-4.5: TBCFDO does not have a coherent organisational approach to reduce the negative environmental impacts of the organisation and its work.	Minor	New	2029 Renewal Audit
2026-5.1: TBCFDO does not ensure safe, accessible and appropriate ways for communities to report concerns and complaints related to SEAH are in place.	Minor	New	2029 Renewal Audit
2026-5.2 TBCFDO does not systematically monitor communities understanding of how staff are expected to act to prevent and protect people from SEAH.	Minor	New	2029 Renewal Audit
2026-5.3: TBCFDO does not regularly monitor communities' understanding of how to report concerns and complaints related to SEAH and how these will be addressed.	Minor	New	2029 Renewal Audit
2026-5.6 TBCFDO does not have a systematic approach to welcome and act upon SEAH related concerns in a timely and appropriate manner.	Minor	New	2029 Renewal Audit
2026-6.4 TBCFDO does not have coherent organisational approaches to ensure partnerships are based on a commitment to equitable decision making and resource sharing and respect the characteristics, roles and responsibilities of each partner is established.	Minor	New	2029 Renewal Audit
2026-8.2: TBCFDO does not have adequate measures to protect the safety and security of all staff.	Minor	New	2029 Renewal Audit
2026-9.4: TBCFDO does not manage and use its resources to achieve their intended purpose while minimising environmental impact.	Minor	New	2029 Renewal Audit
Total Number of open Weaknesses	13		

* *Note: 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

In my opinion, TBCFDO demonstrates a high level of commitment to the Core Humanitarian Standard on Quality and Accountability and its inclusion in the Independent Verification scheme is justified.	
Name and signature of lead auditor:  Gertrude Dendere-Chibwe	Date and place: 18 February 2026 Johannesburg, South Africa

7. HQAI decision

Name and signature of HQAI Head of Quality Assurance:	Date and place: 22.02.2026, Geneva 
Registration in the Independent Verification Scheme:	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Refused
Next audit before: 2029/02/22	

8. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: If yes, please give details:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name and signature of the organisation's representative:  Toroto Sisay Executive Director	Date and place: 09/03/2026

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	<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>
1	<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>
2	<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

