

Medair

Renewal Audit – Summary Report – 2023/03/02

1. General information

1.1 Organisation

Type	Mandates	Verified
<input checked="" type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input checked="" type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input checked="" type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy
Legal registration	INGO	
Head Office location	Ecublens, Vaud, Switzerland	
Total number of organisation staff	1,499 (2021)	

1.2 Audit team

Lead auditor	Johnny O'REGAN
Second auditor	Agnès KONRAT
Third auditor	
Observer	
Expert	
Witness / other participants	

1.3 Scope of the audit

CHS Verification Scheme	Certification
Audit cycle	Second
Coverage of the audit	Whole organisation (5 affiliates described in Section 3.1 are not covered as they do not have programme implementation responsibilities).

1.4 Sampling*

Total number of Country Programme sites in scope			11
Total number of sites for onsite visit			1
Total number of sites for remote assessment			3
Name of country programme	Included in final sample (Y/N)	Rationale for sampling and selection / de-selection decision	Onsite or Remote
Random sampling			
Jordan	Y	Large representative programme, geographically and support for refugees, it works on the humanitarian-development Nexus and communities are accessible.	Onsite
Yemen	Y	Randomly sampled- not selected for site visit due to security reasons but geographically and programmatically representative.	Remote
Lebanon	N	Previously audited	

Afghanistan	Y	Randomly sampled - not selected for site visit due to security reasons but geographically and programmatically representative.	Remote
Madagascar	N	Previously audited	
DR Congo	Y	Randomly sampled- not selected for site visit as communities are not easily accessible but geographically and programmatically representative.	Remote

Any other sampling performed for this audit:

The auditors randomly selected a number of households to visit for each programme and Medair further selected households from that list that were close to each other (confirmed by auditors during visits) to minimise travel times in communities.

Sampling risks identified: Although the Jordan programme works with some community-based organisations and the audit team met with representatives, it did not provide sufficient evidence for a full-fledged analysis of Medair's practices regarding partnership with local NGOs. Despite this, the auditors have confidence in the findings and conclusions of the audit based on the sampling as described above, as the vast majority of programming of the organisation is through direct implementation.

**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 Locations Assessed

Locations	Dates	Onsite or remote
Switzerland (HQ)	2022/11/11-14 and follow up interviews in December	remote
Jordan	2022/11/16-22 and follow up interviews in December	onsite
Afghanistan	2022/12/05	remote
Yemen	2022/12/06	remote
DR Congo	2022/12/13	remote

2.2 Interviews

Level / Position of interviewees	Number of interviewees		Onsite/ Remote
	Female	Male	
GSO			
Management and staff	5	8	remote
Jordan			
Management and staff	7	12	onsite
Partner staff (Community Based Organizations)	2	1	onsite
Others			
Remote countries (Afghanistan, Yemen, DR Congo)			
Management and staff	3	0	remote
Total number of interviewees	16	21	37

2.3 Consultations with communities

Type of group and location	Number of participants		Onsite or remote
	Female	Male	
Focus Group Discussion- Social Protection - male - Amman	0	3	onsite
Focus Group Discussion- Social Protection - CBO volunteers - Amman	7	0	onsite
Focus Group Discussion- Social Protection - female - Amman	12	0	onsite
Household visit - Social Protection - Amman	1	0	onsite
Household visit - Social Protection - Amman	1	1	onsite
Focus Group Discussion- PSS- CBO volunteers - Irbid	6	4	onsite
Focus Group Discussion- PSS- female - Irbid	13	0	onsite
Focus Group Discussion- PSS- male - Irbid	0	10	onsite
Individual session PSS - Irbid	0	1	onsite
Individual session PSS - Irbid	1	0	onsite
Focus Group Discussion- Health- CHVs - Zarqa	9	1	onsite
Focus Group Discussion- Health- Zarqa	1	7	onsite
Focus Group Discussion- Health- female- Zarqa	10	0	onsite
Household visit - Health- Zarqa	2	1	onsite
Household visit - Health- Zarqa	1	1	onsite
Total number of participants	64	29	93

2.4 Opening meeting

Date	2022/11/11
Location	remote
Number of participants	5
Any substantive issues arising	no

2.5 Closing meeting

Date	2023/01/09
Location	remote
Number of participants	10
Any substantive issues arising	no

3. Background information on the organisation

3.1 General information

Medair is a faith-based humanitarian organisation founded in 1989 in Switzerland. The organisation is active in the sectors of health and nutrition, shelter and infrastructure, and water, sanitation and hygiene. In 2022, Medair is operational in 11 countries, and apart from its Global Support Office (GSO) in Ecublens (Switzerland), it has 5 affiliate offices in United Kingdom, Germany, France, the United States of America and the Netherlands. These affiliates are not part of the present audit as they do not have a role in programme implementation.

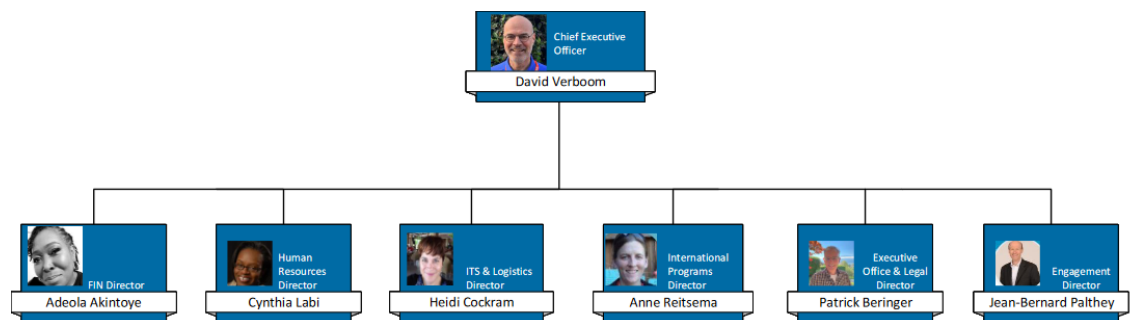
The aim of Medair, as per the organisations’ statutes, is to ‘[pursue] a charitable and humanitarian aim, with a mission to respond to human suffering in emergency and disaster situations by implementing multi-sectoral relief and rehabilitation projects, in a compassionate and serving attitude inspired by its Christian ethos’.

Medair’s 2021 annual report states that they reached 3,362,158 direct beneficiaries. The breakdown of staff is GSO - 134; Internationally recruited - 129; Nationally recruited 1,216; Field volunteers – 8,547. Operating expenses amount to USD83,745,188. Medair continues to work to the 2020–2023 People-to-People (P2P) organisational strategy. The current strategy aims to expand Medair’s reach, with a focus on ‘Consolidating Quality, Growth and Stability’. There are seven goals in the current strategy, including in relation to reaching the most vulnerable people, localisation, innovation, and people and culture.

3.2 Governance and management structure

Medair’s governing bodies are as follows:

- The International Board of Trustees (IBoT) composed of a minimum of 5 members (12 members at end 2022). This IBoT is advised by a governance committee of 3 active members of the IBoT. There is also an Audit/Compliance/Finance committee with 3 members. Board members are appointed for 3 years by the Annual General Meeting. The IBoT meets at least once a year. The IBoT has the ultimate responsibility for the affairs of Medair, for ensuring it is solvent, well managed and delivers the outcomes for which it has been established.
- The Annual General Meeting (AGM) elects IBoT members, approves annual reports and appoints auditors.
- The Chief Executive Officer (CEO) is appointed by and responsible to the board for the management and operation of the organisation. The CEO is responsible for maintaining Medair’s strategic direction as established by the IBoT. They are responsible for keeping the organisation solvent, providing public representation at the highest levels, and overseeing organisational growth.
- The organisational chart of the ELT is presented below. The Executive Leadership Team (ELT) assists the CEO in their duties. In 2022 an Executive Office Special Projects Coordinator was hired to strengthen IBoT relations. The logistics department was moved from under the International Programmes to under the Information Technology department.



As described in its 2020–2023 Strategy, Medair’s ambition is to be as flat as possible in terms of management structure: ‘We are working to create a flatter operating structure, with fewer layers of management and more freedom, while still having clarity in expectations, lines of authority and responsibility.’ On 29.09.2022, the CEO David Verboom announced he will resign, effective 31.03.2023. The hiring process is underway. Anne Reitsema (International Programmes Director) is serving as interim CEO.

3.3 Internal quality assurance mechanisms and risk management

There have been no major changes to Medair's quality assurance mechanisms and risk management systems since the MA.

Medair has several systems and processes in place to ensure institutional quality:

- Medair work is guided by key policies, such as its Code of Ethics, Policy on Preventing Harassment, Policy on Preventing Sexual Exploitation, Child Protection Policy, Data Protection Policy, etc.
- Medair's ELT and IBoT review a risk matrix that outlines likelihood and impact of compliance, operational, governance and management, financial and reputational risks as well as mitigating controls and residual risk rankings. Based on this Medair takes risk response decisions, which are categorised as acceptance, avoidance, reduction or transfer. The same processes are undertaken at country level. Medair's work is also guided by operational guidelines and SOPs to frame and support teams in implementing its policies and to ensure the quality of its programmes and projects.
- Medair regularly updates its policies, procedures and guidelines according to the existing law, the need to clarify or to correct practices, or according to lessons learned from implementing those guidelines on the field. For instance, following the IA, Medair revised the Accountability to Affected Population (AAP) Guideline, transformed its Environmental Position Paper into an Environmental Policy, and developed a Data Protection Guideline. Since the MTA a policy on preventing racism; a handbook on learning and development; and a DRR position paper have been developed.
- In order to ensure the understanding and implementation of the policy, guidelines and procedures, Medair provides training through its week-long recruitment course (Relief Orientation Course - ROC), which is used as part of the recruitment process for internationally recruited staff, and serves both goals of staff selection and staff education. Medair also provides training on its ethics annual training cycle, mandatory for all staff, in the online learning gateway, and ad hoc trainings. Focal Points are appointed in each programme or project site in order to ensure that the policy/guideline is understood and implemented.
- Medair has put in place a number of organisational activities (indicator tracking, annual staff and external stakeholders' surveys) in order to track its progress and performance globally, on topics linked to the quality of its projects, the perception of its work by external actors, the actual performance of the activities implemented, and the progress towards its global strategy. Medair recognises the importance of recording what and how their projects are implemented. To this end, Medair is working to strengthen organisational quality assurance through training of monitoring and evaluation (M&E) and senior programme staff on data quality. In parallel, data management systems are being upgraded, starting with a nutrition module.

3.4 Work with partner organisations

Medair dedicated 6% of its expenses to direct partner implementation. Medair works with partner organisations through working with the communities, local and international NGO, and public and private structures. Since the IA, Medair has further developed its approach towards localisation, and how it intends to include national and local partners in this approach, as explained in the draft Position Paper on Localisation and its 2020–2023 Strategy. Medair's interpretation of localisation goes beyond a financial grant making relationship to a broader, more inclusive relationship that focuses on the community and on leaving a lasting legacy.

Medair's Partnership Framework and Operational Partnership Policy describe how it collaborates with partners according to the type of actor and purpose of the partnership. The policy lays out the conditions for operational partnerships, and the mandatory due diligence and contents of the agreement in case Medair establishes a partnership. Since the IA, Medair has

reviewed the Partnership Toolkit to better reflect its policy. The expected due diligence before entering into an agreement includes criteria related to code of conduct, safeguarding, capacity of partner, HR policies, financial policies, etc.

Driven largely by donors, Medair engages with consortia for the purpose of delivering services to a population. Medair requires that consortium partners share the same ethical commitments and has developed a tool kit to guide staff when entering consortium relationships.

At the RA, interviewed staff could explain how partnerships are decided on and dealt with, and the audit team met with representatives of several partners but as per the sampling risk section above, it was not sufficient to provide a detailed analysis of its work with partners.

At the MTA, it was noted that the calculation method had changed since the IA, which focused on implementing partners only. Partnering expenses now include local and national NGO, local and national governmental entities (such as clinics), and local volunteers.

4. Overall performance of the organisation

4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation

Medair refers to the CHS in its policies and monitors some of the indicators through internal monitoring of Key Performance Indicators (KPI). Medair's ELT is committed to the CHS audit process and regularly communicates about it.

Following the IA, and up to the RA, Medair has set up and followed an action plan in order to implement corrective actions for both the outstanding CARs, and the observations. Each CAR or observation was attributed to an identified action owner. Working groups have been created in order to analyse root causes of the CAR, discuss and decide on appropriate actions, and implement those actions.

Medair's corrective actions continue to focus on building systems and processes that work towards implementing the organisation's strategy and at the same time, address findings of the CHS audit. Since the MA, there were few new or revised policies, Medair focused on implementing the most recently developed guidance related to AAP and the environment. Medair's mandatory annual cycle of ethics related training now include CHS and accountability to affected populations (AAP), all staff interviewed during the RA could recall attending these trainings.

Medair continues to understand (and apply) documentation of practice both for internal and external quality assurance purposes. As per section 3.3, Medair has a well established risk management system and risks are reviewed on an ongoing basis. If there is a significant change in risk level, this is communicated to the Risk Manager to review controls and to escalate to the ELT and IBoT as relevant. The Risk Manager ensures that risks are evaluated formally annually by the ELT and IBoT.

Covid-19 continues to have a significant impact on Medair and its work. The organisation has adapted and applies appropriate Covid restrictions that vary from one country and context to the next and has rolled out policies demonstrating their commitment to caring for the health, safety, and well-being of its employees, such as *Guidance note on Staff Wellbeing during covid19*, addition of well-being days, and the update of *Teleworking Guidelines* to include recommendations on general ergonomics for home office setup.

4.2 Level of implementation of the CHS and progress on compliance

Medair continues to take its commitment to the CHS seriously and staff across the organisation are aware of their responsibilities under it and demonstrated a commitment to improving in line with the standard. It has systems in place to address observations and corrective actions. Its accountability and commitment to communities remains strong and is evident through its dialogue with communities, openness to input and development of new platforms to allow communities to complain. However, this is weakened by its lack of responsiveness to complaints made through some of its less used (but still active) systems for complaints as well as some lack of awareness of community members of those systems.

Medair has also been developing its approach to tackling discrimination in its workforce through asking questions related to discrimination and inclusion in employee value surveys

and establishing a Diversity and Inclusion Committee to combat discrimination and racism and promote inclusion. However, this is at an early stage and at the time of the audit some staff expressed concerns about the integrity of the complaints systems as well as feelings of discrimination in the organisation. Medair is aware of these issues and has been devoting resources to resolve them but, in some environments at least, they are not yet showing sufficient results.

Medair has policies referring to PSEAH such as *Code of Ethics*, *Policy on Preventing Harassment*, *PSEAH*, which lay out the obligation of staff not to exploit, abuse or otherwise discriminate against people. The content of these policies continue to be shared to all staff through Medair's compulsory annual training cycle and during induction briefings. Medair has adequate systems and procedures in place to ensure that negative effects of programming are identified and addressed. Staff can generally explain how they are expected to behave, including commitments related to PSEAH. Communities are aware of how staff should behave but are not consistently aware of Medair's organisational commitments on PSEA.

Medair has included the development of partners as a specific strategic goal of its *P2P Strategy 2020-2023*, its current level of expenditure through local partners is 19% which is close to its objective of 25% by 2023. Medair and its partners coordinate their activities and collaborate with local actors and authorities. Communities generally find Medair well coordinated and partners are generally satisfied with their relation with the organisation. Medair performs well on other aspects of localisation, ensuring that programmes are built on local capacities and benefit local economies.

Medair has continued its efforts to roll out its AAP, providing staff with detailed guidance on communicating with affected populations and ensuring that countries develop their contextualised communication material. Training packages were translated in different languages and focal points were appointed to train all staff and volunteers. Communities stated that the communication from Medair and its partners was very respectful and generally easy to understand and culturally appropriate.

Medair pays attention to gender, age and diversity of communities giving their feedback. It also works to prevent unintended negative effects of programmes related to gender and diversity. However, this audit found that Medair does not ensure that all community members are able to access existing feedback channels.

4.3 Performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	Medair has strong processes for analysing context and focuses its programming on countries and project areas with the greatest vulnerabilities. It continues to undertake impartial analysis of needs and builds programmes based on this analysis to meet those needs. Its systems and procedures and attention to context ensures that it changes programmes in line with changing needs and circumstances, and invests in training staff in adaptive management to continue to progress in this area.	Communities stated that Medair's programmes meet needs and (within external constraints) focus on the most vulnerable and find it impartial in its delivery of assistance. They were satisfied that Medair changes programmes when circumstances change.	3
Commitment 2: Humanitarian response is effective and timely	Medair designs programmes that take constraints into account and to ensure the safety of communities when participating in those programmes. Its structures and systems and	Communities agree that Medair delivers assistance in a timely manner and makes amendments to	

	<p>decision-making processes promote timeliness. It uses relevant technical standards to plan and evaluate programmes and staff are familiar with standards that govern their work. Strong working relationships with other stakeholders and an investment in referral systems and resources ensures that it refers unmet needs to organisations with the capacity to address them. Medair continues to invest resources in developing its systems and tools to undertake monitoring. However, its programme commitments risk overstressing the capacity of its staff.</p>	<p>programmes based on their feedback during monitoring exercises.</p>	<p>2.9</p>
<p>Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects</p>	<p>Medair’s range of policies and systems are designed to prevent programmes from having negative effects although some gaps in complaints mechanisms mean that it may not become aware of actual unintended negative effects. It successfully focuses on strengthening resilience within the remit of its humanitarian mandate. It has improved its systems to safeguard personal information. It does not systematically complete hazard and risk assessments but works towards development of local leadership, plans exits systematically and helps develop local economies.</p>	<p>Communities report feeling safe and had experienced no negative effects as a result of engaging with Medair programmes. They reported that Medair’s programmes contribute to their resilience.</p>	<p>2.9</p>
<p>Commitment 4: Humanitarian response is based on communication, participation and feedback</p>	<p>Medair’s guidelines for accountability to affected populations (AAP) are strong and contextualised, and staff are trained to understand them. However, country specific documents are not systematically available. Communications with communities are easy to understand and culturally appropriate.</p> <p>Medair involves communities in its work, hires community members when appropriate, and takes steps to involve all groups within a community in their programmes.</p> <p>Medair encourages communities to share feedback, communicates feedback mechanisms, keeps feedback logs and regularly analyses the findings. However, Medair does not ensure that all community members are able to access existing feedback channels External communications including social media are respectful and known by staff and communities.</p>	<p>Communities reported that they felt respected and listened to by Medair staff. They generally found Medair’s information clear and had a global understanding of the organisations mandate and values.</p> <p>Most communities could recall being informed of Medair’s feedback channels, but some members found the feedback channel too complicated, preferred face to face or noted that the hotline was always busy.</p>	<p>2.9</p>
<p>Commitment 5: Complaints are welcomed and addressed</p>	<p>Communities are clear about expected staff behaviour and, those that are aware of them, have confidence in the integrity of the feedback and complaints system. However, some community members were not clear on how to access the system and some of the auditors’ test</p>	<p>Communities reported understanding expected behaviours of Medair staff, and were confident that Medair would handle complaints appropriately.</p>	<p>2</p>

	<p>communications with complaints mechanisms went unanswered. There was evidence of consultation with communities regarding the implementation and monitoring of complaints mechanisms but not on their design. The majority of staff expressed confidence in the integrity of the internal complaints mechanism but some staff expressed a lack of confidence and a sense of bias and fear of reprisal if complaints were made. The complaints mechanism does not have strong analytical capabilities and Medair is not always timely in resolving (particularly sensitive) complaints that require significant resources to investigate. Medair consistently refers complaints that are outside of its remit to relevant organisations.</p>	<p>However, some expressed frustration at not being able to complain in person to members of staff.</p>	
<p>Commitment 6: Humanitarian response is coordinated and complementary</p>	<p>Medair systematically analyses stakeholders' roles, responsibilities, capacities and interests and fully participates in relevant coordination bodies. Whenever possible, Medair avoids conducting additional data gathering activities by using the information provided by coordination mechanisms and partners, or by participating in joint multi-sectoral needs assessments.</p> <p>Medair's selection process for contracted partners is structured and includes adherence to Medair's safeguarding policies. No selection process or adherence to Medair's policies is required for partnerships covered by a MoU.</p>	<p>Communities stated that Medair had a good network and referral system and that they did not witness duplication of assistance.</p> <p>Partners stated that their relationship with Medair was governed by clear agreements and that they felt their constraints were taken into account.</p>	3
<p>Commitment 7: Humanitarian actors continuously learn and improve</p>	<p>Medair's approach to learning has been strengthened by dedicated learning and development personnel and resources.</p> <p>Policies set out Medair's M&E expectations and it encourages evaluations but there are still no mechanisms in place for funding evaluations outside of budget provisions made in project proposals.</p> <p>Medair's Strategic Plan 2020–2023 includes the development of innovations as a strategic goal and has been followed by initiatives that have increased the culture, practice, and impact of innovation in Medair and within the sector. Medair learns, innovates and implements changes on the basis of M&E, feedback and complaints.</p>	<p>Some community members could recall examples of Medair sharing innovation.</p>	2.8
<p>Commitment 8: Staff are supported to do their job effectively, and are</p>	<p>Medair has continued to invest in its HR initiatives such as the Diversity and Inclusion Working Group, strengthening its HR department at GSO and launching a new software to manage HR KPIs. However, the software does not enable</p>	<p>Communities reported that they felt respected by Medair staff and said that Medair staff are well trained.</p>	

treated fairly and equitably	<p>position gap analysis, and Medair does not systematically measure whether it has the management and staff capacity to deliver its programmes. Staff express workload as a significant challenge.</p> <p>Country level focal points ensure systematic staff training on AAP and Medair’s strategic objective to “develop staff, managers and (potential) leaders”, has demonstrated significant progress.</p> <p>However, this audit found that the <i>Staff Handbook</i> was not systematically signed by all staff. Staff do not systematically find Medair policies and procedures fair, transparent and non-discriminatory. Medair has put in place initiatives to address these issues, but they are not yet yielding the desired results.</p>		2.6
Commitment 9: Resources are managed and used responsibly for their intended purpose	Medair has a strong resource use policy base and its financial reserves have been increasing to an appropriate level. Medair’s programmes balance quality, cost and timeliness and it manages its resources to minimise waste. It has robust systems to prevent and detect fraud and it undertakes its responsibilities to investigate and resolve reports of financial malfeasance. Medair’s commitment to evaluating its impact on the use of natural resources and the environment has improved and it is rolling out tools and procedures to measure its impact.	Communities had not experienced or had any awareness of staff behaving inappropriately, with respect to the finances of the organisation, or asking for payments.	2.8

* *Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each Commitment, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0.*

5. Summary of open non-conformities


Corrective Action Request (CAR)	Type	Resolution due date	Status	Date closed out
2018 - 5.6: Communities and people affected by crisis, including particularly vulnerable groups are not aware of the expected behaviour of staff, and of the policies that govern their behaviour.	Minor	2023/03/12	Closed	2023-01-20
2018 - 9.4 Medair does not systematically consider the impacts of the use of local and natural resources on the environment.	Minor	2023/03/12	Closed	2023-01-20
2023-5.2: Medair does not systematically welcome and accept complaints or communicate effectively how the mechanism can be accessed.	Minor	2026-01-20	New	

2023-5.3: Complaints are not systematically managed in a timely and appropriate manner.	Minor	2026-01-20	New	
2023-5.5 Medair has not established a culture in which all staff perceive that complaints are taken seriously	Minor	2026-01-20	New	
2023- 8.5 A significant number of staff do not consider policies, procedures and practice fair, transparent and non-discriminatory	Minor	2026-01-20	New	
Total Number of open CARs	4			


6. Recommendations for next audit cycle

Specific recommendation for sampling or selection of sites or any other specificities to be considered	We recommend selecting a site with a strong partnership focus
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7. Lead auditor recommendation

<p>In our opinion, Medair has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>We recommend maintenance of certification.</p>	
Name and signature of lead auditor:  <hr/>	Date and place: Dublin, 2023-01-20

8. HQAI decision

Certificate renewed:	<input checked="" type="checkbox"/> Issued <input type="checkbox"/> Preconditioned (Major CARs)
Next audit: before 2024/03/02	
Name and signature of HQAI Executive Director/Head of quality assurance:  Joost Mönks	Date and place: Genève, 2023-03-02

9. 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: <i>If yes, please give details:</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acknowledgement and Acceptance of Findings:	
I acknowledge and understand the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name and signature of the organisation's representative: Anne Reitsema 	Date and place: 6 March 2023 Ecublens, CH

Appeal

In case of disagreement with the decision on certification, the organisation can appeal to HQAI within 14 days after being informed of the decision. HQAI will investigate the content of the appeal and propose a solution within 10 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform HQAI in writing within 30 days after being informed of the proposed solution, of their intention to maintain the appeal.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will constitute a panel made of at least two experts who have no conflict of interest in the case in question. These will strive to come to a decision within 30 days.

The details of the Appeals Procedure can be found in document PRO049 – Appeal 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.	<p>Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>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:</p> <ul style="list-style-type: none"> • 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.	<p>Score 2: indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>Score 3: indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>Score 4: indicates an exemplary performance in the application of the requirement.</p>

* Scoring Scale from the CHSA Verification Scheme 2020