

REPORT OF THE ASSESSMENT AT BODY'S LOCATION

CAB	HQAI – Humanitarian Quality Assurance Initiative				
Site/full address	7, Ch. De Balexert – CH1219 Châtelaine (Switzerland)	Modalities	On site <input checked="" type="checkbox"/>	Remote <input type="checkbox"/>	Mixed <input type="checkbox"/>
Date of the assessment	2024-09-18, 2024-09-19				

SCOPE OF THE ASSESSMENT AND REFERENCE STANDARDS FOR ACCREDITATION ¹

	SCHEMES	MS	PRD	PRS	INSP	V&V	GHG	NOTES
SCOPE OF THE ASSESSMENT								
Initial								
First surveillance								
Second surveillance			X					CHS – Core Humanitarian Standard on Quality and Accountability
Third surveillance								
Fourth Surveillance (where applicable)								
Renewal								
Supplementary								
Extraordinary								
Cross Frontier								
Recognition								
Maintenance of recognition								
Other								

Specify if the transition to another standard is the object of the assessment (*if affirmative, complete the information in accordance with note 1a) of this part of the report*):

Other normative references:

¹ Reference standards for accreditation: ISO/IEC 17021 (MS) ISO/IEC 17024 (PRS), ISO/IEC 17065 (PRD), ISO/IEC 17020 (INSP), ISO 14065 (GHG/ETS), ISO/IEC 17029 (V&V).
See also the lists of standards and reference documents for the accreditation for CABs (LS-02), IBs (LS-03) and Verification and Validation Bodies (LS-12), available in ACCREDIA's website.

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Proposed scope of accreditation (to be completed only in case of extensions, new accreditations or other proposed variation for the scope of the accreditation certificate):

ACTIVITIES OF THE ACCREDIA ASSESSMENT TEAM

Position	Name	Schemes assessed	Dates and sites assessed	Days	Days for the report
Lead assessor	Loris Nardella	Core Humanitarian Standard Certification	2024-09-18, 2024-09-19 7, Ch. De Balxert - CH1219 Châtelaïne (Switzerland)	2	1
Assessor 1	=====	=====	=====	=====	=====
Expert	=====	=====	=====	=====	=====
Observer	=====	=====	=====	=====	=====
Competent Evaluator	=====	=====	=====	=====	=====
Interpreter	=====	=====	=====	=====	=====

PRESENT FOR THE CAB

	Name	Position
1.	Victoria Lyon Dean	Head Quality Assurance
2.	Désirée Walter	Executive Director & Head of Marketing & Communication
3.	Samanta Morais	Quality Assurance Officer
4.	Mirela le Dortz	Head of Support Services
5.	Sarah Kambarami	Senior Auditor (interviewed remotely)

LIST OF FILES EXAMINED²

Scheme/Sector	Name of organization and activities assessed
CHS	Certificate N- LMI-CHS-24-02 LM International 162 88 Vallingby, Stockolm, Sweden. Initial Audit
CHS	Certificate N-DFS-CHS-23-04 Building Foundation For Development Amman Street, Sana'a Yemen. 1 st Surveillance Audit

² In the event that, to cover a sector/category/technical area, etc., files have not been sampled but only the skills for the critical phases of the process, it is required that the information is in any case reported in the table with the relative specification of the competencies evaluated.

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TABLE WITH SUMMARY OF WITNESS ASSESSMENTS PERFORMED ON THE OCCASION OF THIS OFFICE ASSESSMENT: None

DOCUMENT REVIEW/CLOSURE OF FINDINGS RAISED DURING THE DOCUMENT REVIEW: This is 2nd Surveillance Visit

CLOSURE OF FINDINGS AND CONSIDERATION OF PREVIOUS COMMENTS

Note for completion: the CAB must transmit on file, before the assessment, to the ACCREDIA team all the open findings which regard it (office and witness) filled in each section (treatment, cause, CAs, PAs, evidence of closure).

Note for a correct and uniform management of the closure of the findings:

A Concern that was not closed during the surveillance/renewal assessment must be reclassified as a NC in one of the following cases:

- *when the CAB has not implemented any of the treatments/corrective actions proposed;*
- *when the CAB has implemented the proposed CAs, but they have proved ineffective in removing the root cause.*

In other cases where the proposed CAs have been only partially completed by the CAB (except in cases of waiting necessary to perform the next planned audit at the client organization or the next planned training session for internal staff/auditors), the Concern must be closed for actions already completed and a new Concern issued limited to actions still in progress. Concerns which remain open due to the exceptions described above must in all cases be closed during the subsequent surveillance assessment scheduled at the CAB's head office.

1	Description Comment	Scheme & point of standard: ISO/IEC 17065:2012 § 8.2	Office; 7, Ch. De Balexert – CH1219 Châtelaine CH Remote	Date: 30-31/10/2023
It could be useful to associate the detectability of the risk with the parameters already used (Impact and Probability) in the Risk Analysis to give greater significance in calculating the priority index.				
Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>				
Implemented: yes <input type="checkbox"/> no <input checked="" type="checkbox"/> 18/09/2024: Implementation status: The CAB has not yet implemented a new Risk matrix which contains the detectability in association to Impact and Probability. Activity is still ongoing.				

COMPLAINTS/FEEDBACK RECEIVED BY ACCREDIA

Party presenting the complaint or feedback (ref. code ACCREDIA)	Date of the complaint or feedback	Handling	Outcome (indicate if the complaint/feedback is open or closed)
=====	=====	=====	=====

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1a) State of progress of the transition to the requirements of the accreditation and/or certification standards and/or inspection and/or validation/verification:

The completion of the activities relating to compliance with the requirements of the standard was verified by evaluating the applicable documents:

1. Documents that define the minimum competences of the persons involved in the certification/inspection/validation/verification process (.....)
2. Record of the training session held on (date)
3. etc..

Conclusion:

On the basis of the assessment performed on the above documentation, a positive opinion is expressed on the transition of the CAB's accreditation against the requirements of the standard

1b) OTHER CHECKS (also applicable to Certification and Inspection Bodies for the purpose of notification with the request to specify the status of conformity with the requirements of Document EA-2/17 M: 2020):

2) GENERAL NOTES:

3) OTHER COMMENTS (e.g. accidents or other situations of safety and security danger that occurred to the detriment of the ACCREDIA team during the assessment, reports relating to the ACCREDIA Code of Ethics and Conduct):

4) LIST OF DOCUMENTS OF WHICH THE ACCREDIA ASSESSMENT TEAM KEPT A COPY: None

4a) ATTACHMENTS: Annex 2 MD-08-05-DC

Number of findings: 0 **NCs** **1 Concerns** **1 Comments**

PROPOSAL OF THE ACCREDIA ASSESSMENT TEAM

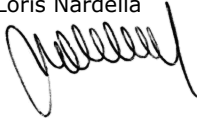
Supplementary activities are recommended	Explanation and description of the objectives of the supplementary assessment
<p style="text-align: center;"><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</p> <p><input type="checkbox"/> office <input type="checkbox"/> witness <input type="checkbox"/> documental <input type="checkbox"/> other</p>	

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SPACE RESERVED FOR THE CAB
Reservations regarding the findings/feedback concerning the behavior of the ACCREDIA team <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Motivations:

The ACCREDIA assessment team shall not disclose to third parties any confidential information concerning the assessment without the written authorization of the CAB except in cases where the law provides for such information to be made known without consent (ISO 17011, 8.1). The assessment team also confirms its independence from commercial or other interests and from any ties, past or present, with assessed CABs (ISO 17011, 6.2.2). The assessment team also confirms its compliance with the ACCREDIA Code of Ethics and Conduct and of the applicable regulations (such as the ACCREDIA Statute and the contractual agreement for assessors and experts).

ACCREDIA
Lead assessor
Loris Nardella



ACCREDIA
Assessor/expert
=====

ACCREDIA
Assessor/expert
=====

ACCREDIA
Assessor/expert
=====

Representative of the CAB
Executive Director
Désirée Walter



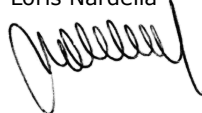
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RESULTS OF THE ASSESSMENT³

1	NC <input type="checkbox"/>	Cn. <input checked="" type="checkbox"/>	Standard/point: ISO/IEC 17065:2012 p. 7.3	Scheme: CHS (Core Humanitarian Standard)	Office ⁴ / 7, Ch. De Balaxert – CH1219 Châtelaine CH	Date: 18-19/09/2024	Acceptance by ACCREDIA yes <input type="checkbox"/> no <input type="checkbox"/> Name: Date: Notes:
Description of finding			1. Treatment and timeline; 2. Root Cause Analysis, 3. Analysis of the extent of the failure			CAs - timeline	
The Certification Body does not provide adequate evidence of having defined how the information related to the application review is recorded.							
Evidence of closure / effectiveness						Closure C <input type="checkbox"/> O <input type="checkbox"/> If O - clarify	

1	Description / Comment	Scheme & point of standard: CHS; ISO/IEC 17065:2012 § 8.3	Office: ⁵ 7, Ch. De Balaxert – CH1219 Châtelaine CH	Date: 18-19/09/2024
The CAB is recommended to take greater care in indicating changes in the documentation in use, e.g. the document ADM131-General contract conditions for audit agreement – 2024-01-29 reports elements in the Nature of change field that do not correspond to the changes actually made.				
Analysed: yes <input type="checkbox"/> no <input type="checkbox"/>				
Implemented: yes <input type="checkbox"/> no <input type="checkbox"/> Implementation status:				

ACCREDIA
Lead assessor
Loris Nardella



Representative of the CAB
Executive Director
Désirée Walter



³ *Note for completion: the ACCREDIA team shall complete the description of the finding and the acceptance and closure and the CAB shall complete the rest (treatment, cause, CAs/PAs, evidence of closure). In the case of NC and Concern, the CAB must send the treatment and the ACs to ACCREDIA for acceptance. After acceptance and before the next office assessment the CAB shall complete the evidence of closure and send a file to the ACCREDIA team with all the findings (office and witness) received over the year, in the schemes regarding the office assessment.*

⁴ If it is a multisite CAB, specify if the finding raised regards a specific accredited site or if it belongs to the head office.

⁵ See the above note