



# Third-party quality assurance policy

POL114-Third party quality assurance  
policy-2021-06-15

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# Third party quality assurance policy

## Introduction

### I. The Humanitarian Quality Assurance Initiative

HQAI's objective is to improve the Quality and Accountability of organisations working with vulnerable and at-risk population through the provision and promotion of meaningful and adapted independent quality assurance. Its services are intended to build capacity in the sector and provide consistent measurable data in the delivery of quality action, thus improving principled, accountable, efficient provision of aid to vulnerable and at-risk populations.

To all its stakeholders, HQAI is an accountable, open and trustworthy partner, which applies the internationally recognised ground rules of auditing that are impartiality, competence, responsibility, openness, confidentiality and responsiveness to complaints. Our policies, procedures and tools for independent quality assurance follow relevant ISO standards requirements. HQAI's CHS certification scheme is accredited against ISO/IEC 17065:2012.

HQAI has developed robust tools to measure efficiently where an organisation stands in relation to the [Core Humanitarian Standard \(CHS\) on Quality and Accountability](#). Tools related to other standards may be developed in the future.

HQAI is committed to the nine fundamental principles of the CHS and implements them as far as they are applicable to its own activities.

These are:

- delivery of services that respond to the needs of users
- timely delivery of these services
- avoidance of negative effects
- transparency and participation in decision-making
- provision of safe complaint mechanisms
- avoidance of duplication
- responsible management of staff, including non discrimination
- responsible use of resources

### II. Scope

This policy describes the framework within which HQAI third-party quality assurance services operate. It provides general information about the benchmarking, independent verification and certification schemes. Operational processes are described in PRO114-Third-party quality assurance procedure.

### III. References

The following referenced documents complement this policy. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/IEC 17065 - Conformity Assessment Requirements for bodies certifying products, processes and services (2012)

POL103 - Claims policy

POL200 - Subsidy Fund policy

PRO048 - Complaint Management procedure

PRO049 - Appeals procedure

PRO200 - Subsidy Fund procedure

PRO105 - Training and registration procedure

## IV. Definitions

For the purposes of this document, the following terms and definitions (based on relevant ISO standards) and the humanitarian principles apply.

<b>Auditor</b>	Person who conducts an audit.
<b>Benchmarking audit</b>	Audit carried out by an auditing body independent of the organisation and the parties that rely on benchmarking, for the purpose of establishing the degree to which the organisation applies the standard at a point in time.
<b>Certification audit</b>	Audit carried out by an auditing body independent of the organisation and the parties that rely on certification, for the purpose of certifying the organisation's management system.
<b>Certification scheme</b>	Conformity assessment system related to management systems to which the same specified requirements, specific rules and procedures apply.
<b>Organisation</b>	Organisation that is being audited for quality assurance purposes.
<b>Confidentiality</b>	Strict non-disclosure of any confidential information.
<b>Impartiality (auditing principle)</b>	Presence of objectivity, making no distinction on the basis of nationality, race, gender, religious belief, class or political opinions.
<b>Independence</b>	Being autonomous from the political, economic, military or other objectives that might put pressure on a decision by the certification or verification body
<b>Non-conformity</b>	Non-fulfilment of a requirement.
<b>Major non-conformity</b>	Non-conformity that affects the capability of the organisation to achieve the intended results.
<b>Minor non-conformity</b>	Non-conformity that does not affect the capability of the management system to achieve the intended results.
<b>Neutrality</b>	Not taking sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.
<b>Openness</b>	Disclosure of appropriate and timely information about the audit, verification and certifications processes and about the verification or certification status (i.e. the granting, maintaining of quality assurance, expanding or reducing the scope of quality assurance, renewing, suspending or reinstating, or withdrawing of quality assurance) of any organisation.
<b>Principle of Humanity</b>	Addressing human suffering wherever it is found, protecting life and health and ensuring respect for human beings.

<b>Responsibility</b>	Assessment of sufficient objective evidence upon which to base a certification or verification decision.  <u>Note:</u> The organisation, not HQAI, has the responsibility for consistently achieving the intended results of application of the referenced standard  <u>Note:</u> Any audit is based on sampling within an organisation's management system and therefore is not a guarantee of 100 % conformity with requirements
<b>Site</b>	Any place where the organisation has activities, including the head office, country programmes and project sites.
<b>Country programme</b>	Country where the organisations has a long-term presence.
<b>Project site</b>	Site within a country programme where an organisation carries out work. A site can include all land on which activities under the control of an organisation are carried out, including any project implemented through partners.
<b>Verification audit</b>	Audit carried out by an auditing body independent of the organisation and the parties that rely on verification, for the purpose of verifying the organisation's continuous improvement in the application of a standard.

## Part 1 : Generalities

### 1 Schemes

#### 1.1 HQAI offers three schemes:

- i. **Benchmarking** is a one-time independent and objective diagnosis of the situation of one or a group of organisations with regard to a given standard, good practices or commitments. It is a first step towards aligning and integrating working approaches with those outlined in the specified standard, good practices or commitments.
- ii. **Independent verification** is an independent and objective assurance that one or a group of organisations are making demonstrated, continuous and measurable progress applying a given standard, good practices or commitments. The requirement is that the most serious weaknesses in the application of the standard are eliminated within a four-year cycle. Unlike certification, this option assesses continuous improvement, according to an agreed action plan and is not a pass/fail test of compliance with the standard.
- iii. **Certification** is the independent and objective assurance that an organisation meets the requirements specified in a given standard, good practices or commitments. A certificate is valid four years, providing periodic checks confirm the continuing conformity with the requirements of the standard.

#### 1.2 HQAI does not provide consultancy related to the implementation of a standard.

### 2 Value and objectives

#### 2.1 The dual overall objective of third-party quality assurance services, is to provide:

- i. an objective and independent assessment of where an organisation stands in the application of a reference standard so as to allow learning and improvement;

- ii. confidence to all parties that an organisation fulfils or is continuously improving in the fulfilment of specified requirements.
- 2.2 The value of the processes lays in their professionalism, independence, impartiality and in the robustness of the third-party quality assurance mechanisms. The impartial and competent assessment of performances in the application of a reference standard builds stakeholders' confidence and strengthens the position of an organisation towards partners and in the sector.
- 2.3 HQAI third-party quality assurance services follow the principles of independence, impartiality, competence, responsibility, openness, confidentiality, responsiveness to complaints and a risk-based approach. Those principles are generally agreed to create trust and public confidence in HQAI services.

### **3 HQAI registered auditors**

- 3.1 Audits shall be undertaken by specially trained HQAI registered auditors.
- 3.2 To be registered, auditors shall have followed a training, both theoretical and practical that ensures their competence in terms of generic rules of auditing, the standard against which the assessment is carried out, and HQAI's specific mechanisms. Refer to PRO105-Training and registration procedure.
- 3.3 Auditors who have acquired and demonstrated a sufficient practice of HQAI auditing to be able to lead audits become senior auditors.
- 3.4 Only senior auditors can lead audits, in which case they are referred to as lead auditors.
- 3.5 Lead auditors have authority and responsibility for the management, control and performance of audit activities including planning the process with support from HQAI's Secretariat, the management of other members of the audit team and the quality and timely delivery of the audit report.
- 3.6 HQAI registered auditors shall regularly perform audits at satisfaction to maintain their registration. They shall also participate regularly in continuous training provided by HQAI.
- 3.7 The list of registered auditors shall be published and kept up-to-date on HQAI's website.

## Part 2 : HQAI third-party quality assurance schemes

Benchmarking, certification and independent verification schemes involve document reviews, interviews with staff, partners, the direct input of vulnerable and at-risk communities receiving assistance from the organisation, people not receiving assistance from the organisation, other stakeholders (donors, local authorities, etc.), and direct observation at selected country programme(s) and project site(s). Special emphasis is given to the validation of internal quality control mechanisms, and when relevant the output of self-assessments and other control mechanisms (e.g. peer review) the organisation may undergo so as to:

- i. avoid duplicating or replacing what exists and works well;
- ii. minimise the number of assessments the staff and other stakeholders are submitted to;
- iii. avoid the creation of “audit fatigue”.

All HQAI third-party quality assurance schemes follow the requirements for bodies providing audit and certification set by the ISO 17065 standard.

### 1 Benchmarking

The main steps of the benchmarking process are:

- 1.1 The benchmarking process comprises the following steps.
  - i. The organisation undertakes an Initial HQAI self-assessment using HQAI’s tool (STD014);
  - ii. A team<sup>1</sup> led by a lead auditor undertakes the audit;
  - iii. The audit team produces an audit report, identifying strengths and weaknesses in the implementation of the standard’s requirements;
  - iv. Upon consent of the organisation, HQAI publishes a public summary of the report on its website.

### 2 Independent verification

The main steps of the independent verification process are:

- 2.1 Initial audit and development of the work plan.
  - i. The organisation undertakes an Initial HQAI self-assessment;
  - ii. A team<sup>2</sup> led by a lead auditor undertakes an initial audit;
  - iii. The audit team produces an initial audit report identifying strengths and weaknesses in the implementation of the standard’s requirements;
  - iv. Upon control by the audited organisation that no confidential information is displayed, HQAI publishes a public summary of the report on its website;
  - v. The organisation develops a 4-years work plan for continuous improvement in the application of the standard;

<sup>1</sup> Depending on circumstances (risk, complexity of the organisations, etc.) the team can be composed of only the lead auditor.

<sup>2</sup> Depending on circumstances (risk, complexity of the organisations, etc.) the team can be composed of only the lead auditor.

- vi. With the organisation's prior consent, a public summary of the work plan can be made available to stakeholders requesting it.
- 2.2 Mid-term audit
- i. Within two years after the initial audit report is finalised, a team<sup>3</sup> led by a lead auditor undertakes a third-party mid-term audit;
  - ii. The audit team produces a mid-term audit report;
  - iv. Upon control by the audited organisation that no confidential information is displayed, HQAI publishes a public summary of the report on its website.
- 2.3 Within four years after the initial audit report is finalised, the organisation can renew the process or switch to another quality assurance scheme. The process, as relevant, follows the steps described from 2.1 on.
- 2.4 Except under justified exceptional circumstances, an organisation can be withdrawn from the programme if it significantly fails to implement the work plan, fails to follow the verification process in due time or if major weaknesses have not been addressed within 4 years after their identification by an audit. Exceptionally the process of closing the major weaknesses can be extended by two years, but not more.

### 3 The certification process

The main steps of the certification process are:

- 3.1 Initial audit
- i. The organisation undertakes an Initial HQAI self-assessment;
  - ii. A team<sup>4</sup> led by a lead auditor undertakes an initial audit;
  - iii. The audit team produces an initial audit report, including levels of conformity with the standard:
    - a. Non-conformities are expressed in major or minor corrective action requests (CARs) and observations;
    - b. A major CAR issued at an initial audit prohibits an organisation to be certified;
    - c. If the major CAR is demonstratively addressed and closed within six months of the audit, a certificate can be issued without further onsite audit;
    - d. If more than six months pass between the audit and the correction of a major CAR, a full initial audit is required to issue a certificate.
  - iv. HQAI under the responsibility of its Executive Director evaluates the report, its finding, the recommendation on certification and decides whether to follow the recommendation. This decision cannot be outsourced.
  - v. Upon control by the audited organisation that no confidential information is displayed, HQAI publishes a public summary of the report on its website;

<sup>3</sup> Depending on circumstances (risk, complexity of the organisations, etc.) the team can be composed of only the lead auditor.

<sup>4</sup> Depending on circumstances (risk, complexity of the organisations, etc.) the team can be composed of only the lead auditor.

vi. As relevant, a certificate of conformity is granted.

**Note:** A certificate is valid four years provided the steps for its maintenance are followed.

### 3.2 Maintenance audit

- i. Within one year of the issuing of the certificate, a team led by a lead auditor undertakes a maintenance audit<sup>5</sup>;
- ii. The audit team produces a maintenance audit report, including levels of conformity with the standard:
  - a. A minor CAR that has not been corrected in time leads to a major CAR;
  - b. A major CAR issued at a maintenance audit leads to the suspension of the certificate;
  - c. If the major CAR is demonstratively addressed and closed within 3 months of the audit, the certificate is reinstated;
  - d. This timeframe can be extended by the lead auditor up to six months for justified reasons;
  - e. Passed this timeframe, the certificate is withdrawn or the scope of certification is reduced, as relevant.
- iii. HQAI under the responsibility of its Executive Director evaluates the report, its finding, the recommendation on the maintenance of the certificate and decides whether to follow the recommendation. This decision cannot be outsourced.
- iv. Upon control by the audited organisation that no confidential information is displayed, HQAI publishes a public summary of the report on its website.

### 3.3 Mid-term audit

- i. Within one year of the maintenance audit (signed report), a team led by a lead auditor undertakes a mid-term audit<sup>5</sup>;
- ii. The process for the mid-term audit follows point 3.2 ii. to 3.2 iv. for the maintenance audit.

### 3.4 Maintenance audit.

- i. Within one year of the mid-term audit (signed report), the organisation undertakes a new maintenance audit, as per 3.2.
- ii. However, if the certified organisation decides at this stage to renew its certificate, the maintenance audit is replaced by the first stage of the re-certification audit.

### 3.5 Recertification audit.

- i. Within 4 years of the issuing of the certificate and upon request from the audited organisation, a new cycle of certification starts with a re-certification audit and follows the steps described above.
- ii. The re-certification audit needs to be finalised before the end of validity of the certificate of conformity to ensure the continuous validity of the certificate.

<sup>5</sup> If the audit is not conducted within the set timeframe, HQAI suspends the certificate for a maximum duration of 6 months. If after 6 months, the audit is not conducted, the certificate is withdrawn.

## 4 Public summaries

- 4.1 The principle of transparency being core to its work, HQAI publishes on its website a summary of audit reports. For the benchmarking scheme this public summary is optional.
- 4.2 The public summary reports contain at a minimum:
- i. The levels of application of the standard at the level of commitments and an explanation of their meaning;
  - ii. The major and minor corrective action requests (CARs) or weaknesses, and their times for resolution in case of certification;
  - iii. Generic information on the organisation and the audit, including sites and communities visited.
- 4.3 Exceptions may be allowed for justified security reasons through an official request to the Secretariat.

## 5 Transfers between HQAI third-party quality assurance schemes

- 5.1 As far as relevant for each scheme, all HQAI quality assurance schemes are built on the same principles, processes, methodology and tools are in line with the requirements of ISO 17065.
- 5.2 As such, an organisation engaged in a benchmarking, independent verification or certification can transfer to another scheme at no cost or additional audit within three months after the approval of the initial audit report.
- i. The transfer to the certification scheme is only possible if the organisation meets the requirements of the standard;
  - ii. The validity of a certificate or of an independent verification process shall be four years from the approval of the initial audit report by HQAI, not the time of the approval of the transfer to another scheme;
  - iii. The transfer from the certification scheme to the verification scheme corresponds to a withdrawal of the certificate if it is the result of the issuance of a major CAR, or a cancellation if it is for any other reason.

## 6 Quality controls

- 6.1 HQAI counts with several internal quality control mechanisms to ensure that it operates to the highest standards and consistently in conformity with its policies and procedures. These mechanisms address:
- i. Finances: fees and expenses paid to auditors and invoices sent to audited organisations through a system of double signature and periodic reporting to the Board of Directors.
  - ii. Performance of the process: through satisfaction questionnaires to be filled in by audited organisations after each audit.
  - iii. Quality and consistency of audit reports: review by the secretariat of each report before sending it to the audited organisation.
  - iv. Performance of the auditors: addressed by ii. and iii. Additionally, through the witnessing on behalf of the secretariat by registered senior auditors of 80% of the square root of audits planned for a year.

- v. Performance of the decision-making on certificate: through a review of 60% of the square roots of decisions by the Advisory and Complaint Board;
- vi. Conformity with the accreditation requirements: through an annual internal audit by a HQAI registered auditor reporting to the Board of Directors.
- vii. External accreditation audit: through the regular audit by the Accreditation authority responsible for HQAI accreditation.

## **7 Staff qualification for quality control or decision-making**

7.1 Internal quality control of audits is the responsibility of the Head of Quality Assurance.

7.2 The minimum qualifications for the Head of Quality assurance to fulfil this task are:

- i. University level in a relevant subject;
- ii. Experience in the humanitarian and/or development sector;
- iii. Be registered as a Senior auditor by HQAI;
- iv. Excellent analytical and problem solving skills with attention to details;
- v. Experience in dealing with different cultures;
- vi. Good writing skills; fluent in written and spoken English and ideally other UN languages.

7.3 Decisions on verification and certification are the responsibility of the Executive Director.

7.4 The minimum qualifications for the Executive Director to fulfil this task are:

- i. Master degree in Business administration or other relevant degree;
- ii. Experience in managing a conformity assessment scheme at senior level;
- iii. Experience in ISO standards relevant to conformity assessment activities;
- iv. Good knowledge of the humanitarian and development sector;
- v. Good knowledge of NGO organisational models;
- vi. Business management experience, at senior management level;
- vii. Demonstrated track record in the field of organisational performance audits, or monitoring and evaluation;
- viii. Good writing skills; fluent in written and spoken English and ideally other UN languages.

7.5 The minimum qualifications described in 7.2 and 7.4 shall be part of the job descriptions of the Head of Quality Assurance and the Executive Director respectively.