Plan International
CHS Verification Audit Report

PLANINT-VER-2018-001

2018-01-30

Table of content

1. General information

Organisation	Plan International		
Type	☐ National ☐ Membership/Network ☒ Direct assistance	☒ International ☒ Federated ☒ Through partners	
Mandate	☒ Humanitarian	☒ Development	☐ Advocacy
Verified Mandate(s)	☒ Humanitarian	☐ Development	☐ Advocacy
Size (Total number of programme sites/ members/partners – Number of staff at HO level)	248 staff at HO, 8,843 staff organisation wide, 33 country programmes	Sampling Rate (Country programme sampled)	UK National Office Myanmar and Ethiopia Country Offices
Lead auditor	Claire Goudsmit	Auditor	Mathieu Dufour
		Others	

	Head Office	Programme Sites	
Location	Woking, UK	Myanmar	Ethiopia
Dates	06.12.2017	27.11 – 01.12.2017	11 – 15.12.2017

2. Scope

☒ Initial audit   ☐ Mid-term Audit

☐ Maintenance audit   ☐ Final/Recertification audit

3. Schedule summary

3.1 Verification Schedule

Name of Programme sites/members /partners verified	Location	Mandate	No. of projects visited	Type of projects
Myanmar	Country Office Yangon, Programme Units in Sittwe and Kachin. KBC Partner, Kachin	Humanitarian	2	Emergency Response, food distribution, Education in Emergencies (EiE), Child Protection in Emergencies (CPiE).
Ethiopia	Country Office, Addis Ababa Programme Units in Lalibella and Gambella	Humanitarian	2	Emergency drought response, CPiE, nutrition, food security.

3.2 Opening and closing meetings

3.2.1 At Head Office:

	Opening meeting	Closing meeting
Date	06/12/2017	07/12/2017
Location	Woking, UK	Woking, UK
Number of participants	6	0
Any substantive issue arising		

3.2.2 At Programme Sites:

	Opening meeting	Closing meeting
Date	29/11/2017	
Location	Myanmar Country Office	
Number of participants	17	
Date	11/12/2017	15/12/2017
Location	Ethiopia Country Office	Ethiopia Country Office
Number of participants	20	5
Any substantive issue arising		

4. Recommendation

In our opinion, Plan does conform to the requirements of the Core Humanitarian Standard.

Detailed findings are laid out in the rest of this report.

Lead Auditor's	Claire Goudsmit	Date and Place:	05.02.2018 UK

5. Background information on the organisation

5.1 General

Plan was set up in 1937, with the aim to provide food, accommodation and education to children whose lives had been disrupted by the Spanish Civil War. Its founder conceived the idea of a personal relationship between a child and a sponsor – a model that puts the child at the centre, and remains the core of what Plan does. Plan is a global organisation that is active in approximately 70 countries to advance children's rights and equality for girls. Under Plan's new Strategic plan its ambition is to transform the lives of 100 million girls over the next 5 years with a gender transformative programme approach. Plan is also committed to develop its capacity to respond to global humanitarian crises and disasters.

5.2 Organisational structure and management system

With its Headquarters in Working, UK, the Plan Federation is organised around Plan International Inc, Members' Assembly (MA), International Board of Directors, National Offices, Field Country National Offices, Regional Offices, Country Offices and Programme Units. The Plan Federation includes 20 National Offices (NO) whose weight and importance vary according to the significance of their budget and expertise, with primarily a role of fostering sponsorship and fundraising. NOs provide support and resources to Plan Country Offices throughout the whole project management cycle in terms of technical expertise (either through direct intervention or through training), surge capacity, financial and grant support, advocacy, donor lobbying etc. The relationships between NOs and COs are framed by FADs (Funding Agreement Documents. At the global level, Plan's governance includes the Members' Assembly (MA), where all NOs send representatives in proportion to their weight within the Federation, and that has to approve delegates from all national offices, global strategy and budget. The International Board of Directors is elected for 3 years by the MA and appoints the international CEO, which manages Plan International Inc. Plan is currently going through a transition process in order to best implement its Global Strategic Plan and meet its objectives. A global Change Team support is in place, accompanied by external consultants, to implement the transformation framework. The ongoing rollout (planned in 4 phases: diagnose/design/deliver/learn & sustain) will focus on specific aspects such as organisational performance and workforce readiness. The transition phase aims, among other projects, at transferring decision making powers and accountability for results to Country Offices, or implementing a global organisational

specialist workforce to achieve greater impact. The process includes identification of top 100 leaders who will be in charge of mainstreaming a 3 years change agenda, eventually monitoring evidence through the Strategic Dashboard and Results Framework. Quality assurance will be in charge of changing outcomes against the new strategic plan.

5.3 Work with Partners

Plan's commitment to effective partnerships is stated in different core policies. "Forming effective partnerships and alliances" is a specific goal of Plan's Global strategy. Its specific policy on partnerships, "Building better partnerships" affirms the need to work through teamwork and mutual partnerships. Under section « Collaboration and partnerships », Plan's global DRM strategy outlines a broad approach to partnership at all levels, with a specific objective of contributing to local and sustainable capacity building. Interviews with partners, local authorities and communities demonstrate that Plan is regarded as an organisation committed to partnership and local capacity building. Its core policies, such as the Child protection policy, the Anti-Fraud and Anti Bribery and anti corruption policy apply to its implementing partners, and are part of the partnership agreements. Plan's Guide for Needs assessment includes a section on stakeholders mapping and analysis, including potential partners, which allows the organisation to identify potential local partners, especially when there is long term presence of a national Plan.

"Building better partnerships" recognizes the challenges of working with partners, especially in terms of their capacity, and states that Plan has to "know" its partners, offering a series of general guidance and key actions to ensure efficient partnerships. The commitment to a due diligence on partnerships is built into the Programme Quality Policy and Partnership Standards and tools such as the Partnership Assessment Forms, Child Protection Implementation Assessment and the Standard partnership agreements.

However, these tools, though strong in assessing the commitment of potential partners to core values such as Child protection, do not cover all 9 commitments of the CHS. It is also not clear how the tools contribute to shape the Partnership agreements, specifically in terms of performance monitoring or identification of gaps in capacity. Although the roles and responsibilities of all partners in specific programmes are clearly stated in formal Partnership agreements, these do not specify commitments to key areas of the CHS such as community participation, feedback or complaints mechanisms. The monitoring and evaluation largely depends on donors' requirements, which makes the follow up project specific and may not allow Plan to identify and act upon systemic poor or under performances of partners. This can limit the due diligence on partnerships and the actual delivery of Plan's commitment to the CHS to the communities. But Plan is committed to building partners capacity, in line with its strategic objective to build effective partnerships.

5.4 Certification or verification history

Plan International is a member of the Keeping Children Safe Coalition and is audited against their standards. Plan Germany National Office (GNO) undertook a third party Baseline Assessment against the CHS in 2016.

6. Sampling

6.1 Rationale for sampling

Some Programme Sites (PS) were deselected from Plan International's list of Country Offices based on the following aspects: high insecurity, no humanitarian mandate, limited humanitarian budget, limited number of staff in-country, travel restrictions and/or local approval needed.

The initially selected PS countries were shortlisted based on the following aspects: geographical access, operational diversity, with a level of funding and staff to provide enough potential ground for audit.

Additional information was asked to the Plan PS teams to assess partnerships, ongoing humanitarian operations, budget levels. Among the 5 shortlisted countries (Ethiopia, Myanmar, Bangladesh, Zimbabwe, Columbia), two PS were selected based: the range of geographical and operational perspectives offered by the programme, both direct and indirect through partners implementation, larger-scale budget for each country programme, significant number of staff, adequate security levels and accessible.

The final selection was Myanmar and Ethiopia. Myanmar was selected considering the following: Plan directly implements a large-scale response to the Rakhine conflict. The Kachin programme works through partners.

Ethiopia was selected because there is a large-scale ongoing emergency linked to the South Sudanese refugee influx and Drought Response, and Plan's response is multi-sector, high budget plus the response is funded by a variety of donors.

Disclaimer:

It is important to note that the audit findings are based on the results of a sample of the organisation's documentation and systems as well as interviews and focus groups with a sample of staff, partners, communities and other relevant stakeholders. Findings are analysed to determine the organisation's systematic approach and application of all aspects of the CHS across its organisation and to its different contexts and ways of working.

6.2 Recommended sample size for the mid-term audit

It is recommended that 1 NO (not UKNO nor GNO), 1 Regional Office and 1 PS be selected for the mid-term audit.

6.2 Interviews:

6.2.1 Semi-structured interviews (individual interviews or with a small group <6

Type of people interviewed	Number of people interviewed
Head Office	
International HQ staff	16
UK National Office staff	11
Programme sites	
Myanmar	
Plan Country Office staff	28
Partner staff	6
Communities:	
Mothers of children under 5	3
Child protection and nutrition committee	2 (f)
Child protection group	3 (f)
Camp and disaster management committee	4 (2 m / 2 f)
WASH committee	3 (2 m / 1 f)
Ethiopia	
Plan Ethiopia Country Office staff	23
Key stakeholders (local government officials)	3
Total number of interviews	95

6.2.2 Focus Group Discussions (interviews with a group >6

Type of Group	Number of participants	
	Female	Male
Myanmar		
Direct beneficiaries	5	10
Parent teacher association	3	3
Food distribution committee		8
Ethiopia		
Direct beneficiaries – nutrition, seed distributions	20	
Direct beneficiaries - livelihoods		11
Direct beneficiaries – livelihoods		17
Mixed groups – Child protection committee, compliant management committee, foster carers, child focal point supporter	10	10
Complaint management committee	5	6
Mixed groups – direct beneficiaries, child protection committee, teacher, compliant management committee, foster carer, child focal point supporter	9	5
Total number of participants	52	70

6.2.2 Focus Group Discussions (interviews with a group >6

7. Report

7.1 Overall organisational performance

Plan international has made a strong organisational commitment to adopt the Core Humanitarian Standard across its Disaster Response Management programme work. Plan has been involved in the development of the CHS and some key achievements have been made which lay the foundations for Plan to develop this area of its work. The organisation is undergoing a significant change process and introducing a number of new key management standards and policies to best meet its new Strategic Plan.

7.2 Summary of non-conformities

Non-compliance	Type	Time for resolution*
3.6. Plan does not have the systems in place across all projects to identify and act upon potential or actual unintended negative effects in a timely and systematic manner	Weakness	1 year
4.1. Plan does not ensure that information is provided to communities on an ongoing basis	Weakness	2 years
5.1. Plan does not ensure that communities are consistently consulted on the design, implementation and monitoring of complaint handling systems	Weakness	2 years
5.2 Information on the scope and how to access Plan's complaints mechanism is not communicated to all stakeholders, especially communities	Weakness	1 year
5.6. Plan does not systematically ensure that communities are made aware of Plan's commitment to the prevention of sexual exploitation and abuse and the expected behviour of Plan staff.	Weakness	1 year
6.6. Plan does not ensure that partnerships are governed by consistent agreements and that respective constraints and commitments are fully recognised within the partnership.	Weakness	1 year
7.1. Plan does not ensure that programmes are designed based on prior lessons and experience	Weakness	1 year
7.5. Plan does not ensure that knowledge and experience are accessible to all staff equally and systematically across the organisation.	Weakness	2 years

8.4 Plan IH does not have the systems in place to ensure that it has the capacity and capability at country level to meet its programme objectives	Weakness	1 year
TOTAL Number	9	

* Time for resolution is given as an indication in the framework of verification.

7.3 Strong points and areas for improvement:

Commitment 1: Humanitarian assistance is appropriate and relevant

Score: 2.8

Plan teams carry out detailed and contextualised assessments involving all stakeholders, including through regular interactions with partners and communities. A number of mechanisms ensure appropriate follow up of the context. Disaster response management at Plan integrates flexibility and adaptation, and mechanisms are in place to ensure change is fluid within the federation, though it is not systematically documented. Plan teams adapt assistance depending on target groups' vulnerabilities and according to needs. While sex and age data are captured in a systematic way, policies do not systematically take into account disability. Systems are in place to monitor that the design of programming is appropriate and impartial. Ongoing strategy renews commitment to impartial assistance, inclusion and non-discrimination.

Feedback from people affected by crisis and communities on commitment 1:

Communities generally agree that Plan's deliver appropriate assistance without discriminating and with a good understanding of their situation.

Commitment 2: Humanitarian response is effective and timely

Score: 2.1

Clearly defined delegation processes across the federation ensure clear decision-making for emergency responses. Plan responses include an analysis of the coping capacities of local target groups and risk assessments. Though these processes are mostly driven by donor requirements and therefore included in proposal design, Plan does not systematically ensure that programmes are designed to assure that activities are safe and realistic for communities. Some systems in the areas of procurement and logistical support, and monitoring across its DRM work need improvement to avoid unnecessary delays in implementation. Plan takes an active role in coordinating bodies at the regional, country and project levels to ensure that unmet needs are referred to the most relevant agency. Staff have access to the numerous relevant international standards and protocols to which plan adheres through its DRM activities, though Plan does not ensure they are constantly used to plan and assess projects. A number of mechanisms and global policies allow monitoring of activities, outputs and outcomes, as well as adapting projects accordingly where possible, but Plan does not have a DRM monitoring and evaluation framework in place to ensure a systematic approach to monitoring and evaluation across the organisation. Plan teams have limited capacity to identify and address poor performance.

Feedback from people affected by crisis and communities on commitment 2:

Communities and key stakeholders gave mixed feedback on the timeliness of Plan's actions, noting that some activities were delayed and that contact with Plan staff was limited in remote areas.

Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects

Score: 2.4

Plan teams acquire a good understanding of the roles, responsibilities and capacities of local groups, communities and individuals. Plan uses existing community hazard maps, risk assessments and early warning systems where and when available. Projects involve a range of local actors and community committees at the community level, representing marginalised groups. Using tools to assess and analyse mobilization of communities and strengthening resilience, programmes work towards building the resilience of communities and are designed to have a sustainable impact on communities. Exit strategies are not systematically or comprehensively developed in DRM programming, nor is an early recovery approach and a strong local economy concern. Plan international has an organisational commitment to understand, avoid and address unintended or actual negative affects but there are weaknesses in Plan's assessment and M&E systems to ensure these are assessed, identified and acted upon in a timely and systematically manner throughout the project cycle, that could potential cause harm. A number of policies cover protection of data and images, a secure image bank is in place and staff have a good awareness of their responsibilities to safeguard information.

Feedback from people affected by crisis and communities on commitment 3:

In most cases communities were satisfied with the knowledge and inputs that they had received i.e. training, awareness, knowledge, that they expected would support them to manage better in the future.

Commitment 4: Humanitarian response is based on communication, participation and feedback

Score: 2.1

Communication with communities includes the use of a range of formats and media including, posters, banners, face-to-face conversations and community meetings. All materials follow strict approvals to ensure they represent communities ethically, respectfully, accurately and in a dignified manner at all times. Though communities are encouraged to participate through various mechanisms, there is no proper monitoring of representation, participation and engagement, especially for different marginalised groups. Community accountability is important to plan teams, and participation, transparency and responsiveness are encouraged, however plan teams do not guarantee access to feedback mechanisms. Despite the lack of a global open information policy, a number of policies commit to transparency and sharing information. Information on project activities is not provided to communities on an ongoing basis throughout the project cycle.

Feedback from people affected by crisis and communities on commitment 4:

Communities had varying levels of access and understanding of the feedback mechanisms available to them. Communities also have varying levels of engagement in projects and of direct communication with Plan staff.

Commitment 5: Complaints are welcomed and addressed

Score: 2

Plan international is committed to accept complaints from its stakeholders, though how to access dedicated mechanisms are not always known or understood. A number of documents establish a clear duty to respond, in particular to child protection related issues. Plan consults with communities on varying aspects of complaint handling processes but does not ensure that communities are consistently consulted on the design and implementation. Complaints are recorded, secured and managed in a systematic manner at the project level, and if necessary referred to those most relevant to manage the complaint based on the issue involved.

Feedback from people affected by crisis and communities on commitment 5:

Though communities have a broad understanding of the proper behaviour to be expected, communities are not made aware of Plan's commitment to the prevention of sexual exploitation and abuse and the precise expected behviour of Plan staff, or partners. Communities had varying understanding of the complaint mechanisms available to them.

Commitment 6: Humanitarian response is coordinated and complementary

Score: 2.5

Plan's engagement in global, country and local level coordination structures and good practice networks e.g. UN Clusters, Keeping Children Safe Coalition, working groups, supports Plan to be aligned with good practice, local plans, other humanitarian response actors and government obligations. Plan staff collaborate with other relevant organisations in country to ensure that assistance coverage is maximised, to fill gaps, advocate for unmet needs and lessen demands on communities. The commitment to collaborate at all stages of a DRM response is embedded in a number of supporting documents and reflects a strong Involvement with others to discuss strategies, programmes and project deliverables. Situational and stakeholder analysis processes properly identify the roles, responsibilities, interests and capacities of different stakeholders Policies define plan's vision of effective partnerships; detailing crucial competences staff need and key actions to constantly improve quality of the relationship. Partner Agreements state each party's obligations for project implementation, included mandatory commitment to core policies such as the code of conduct, and the anti fraud and corruption. However, Plan does not ensure that partnerships are governed by consistent agreements and that respective constraints and commitments are recognised fully within the partnership

Feedback from people affected by crisis and communities on commitment 6:

Communities were compementary of how Plan works wtihin community governance structures and with other humanitarian actors.

Commitment 7: Humanitarian actors continuously learn and improve

Score: 1.8

Plan international commits to capture lessons and design responses based on previous experiences. Learning is embedded in the programme cycle management guidelines. Plan teams design programming based on previous achievements but this is not systematically assured for all projects. Though feedback and complaints mechanisms exist in projects, learning from these are not systematically recorded and followed up on at a global elvel While continuous improvement and learning are defined in policies and procedures, a specific DRM M&E framework is not in place and MER HR capacity limits implementation of learning objectives across the organisation. A number of tools and processes allow access to knowledge throughout the organisation, though they are not accessible for all staff and learning is not shared consistently between programmes and country teams. Internal and external stakeholders have access to some learning and innovation and Plan international actively participates to learning within the sector.

Feedback from people affected by crisis and communities on commitment 7:

Some communities gave positive feedback of the changes that had been made during project implementaiton, which had positive impacts.

Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably

Score: 2.3

Staff receives orientation and training to perform under the values of Plan International as a child centred and girls organisation. Job descriptions are in place and staff objectives are made clear. Security of staff is enforced by strong policy and local focal points , although wellbeing is not a strong policy of Plan. Staff work under fair, transparent, non-discriminatory policies, in accordance with local laws. The Code of Conduct is in place and condemns exploitation, abuse, and more generally discrimination against people. Plan offers training opportunities e.g. Plan Academy, although the ability for staff to access training is difficult due to time or language constraints. Plan international works towards matching its new mandate with its technical capabilities and works to improve staff mobility and gender equality throughout the organisation.. Management and staff have capacity to delivery Plan's DRM activities and deployable specialists and surge capacity are in place. Challenges to capacitate all staff in some key strategic areas e.g. on gender transformative programming, and meet Monitoring and Evaluation goals, are experienced at the global and country levels.

Feedback from people affected by crisis and communities on commitment 8:

Communities gave positive feedback on the general behaviour of Plan staff and considered staff to be skilled, knowledgeable and agreeable. Overall communities stated that they had a good experience and contact with Plan staff.

Commitment 9: Resources are managed and used responsibly for their intended purpose

Score: 2.7

Plan ensures that DRM programmes are cost effective and are delivered balancing quality, cost and timeliness at each phase of the response. A number of measures ensure effective management of logistics and procurements in emergencies. While Plan does not specifically focus on environmental sustainability in its procedures, there is a principle of preference for local procurement. Plan international uses resources properly to achieve operational ambition, partly due to its financial management system SAP, allowing for appropriate and constant follow up of expenses under various output views. Plan has a zero tolerance policy and approach to fraud and corruption and misuse of resources is firmly condemned, investigated, acted upon and reported publicly. Plan ethics are strong and supported by a number of policies covering every aspect of staff working life.

Feedback from people affected by crisis and communities on commitment 9:

Communities did not mention any indication of misuse of resources and Plan's allocation of resources was generally appreciated.

8. Organisation's approval

Acknowledgement and Acceptance of Findings

For Organisation representative – please cross where appropriate

I acknowledge and understand the findings of the audit ☒

I accept the findings of the audit ☒

I do not accept some/all of the findings of the audit ☐

Please list the requirements whose findings you do not accept

Gabriela Bucher.

GABRIELA BUCHER

Name and Signature

02/04/2018.
WOKING, UK

Date and Place

Date of the document: 2018-01-30

9. HQAI's decision

Independent Verification Decision
Registration in the verification scheme: ☒ Accepted ☐ Refused

Next audits		
Maintenance audit before 2019-04-02		
Pierre Hauselmann Executive Director Humanitarian Quality Assurance Initiative	Date: 2018-04-03	

Appeal

In case of disagreement with the conclusions of the report and/or decision on certification, the organisation can appeal to HQAI within 30 days after the final report has been transmitted to the organisation.

HQAI will investigate the content of the appeal and propose a solution within 15 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform in writing HQAI within 15 days after being informed of the proposed solution of their intention to maintain the appeal.

HQAI will take action immediately, and identify two Board members to proceed with the appeal. These will have 30 day to address it. . Their decision will be final.

The details of the Appeal Procedure can be found in document PRO049 – Appeal and Complaints Procedure.

Annex 1: Explanation of the scoring scale

In line with the CHS's emphasis on continuous learning and improvement, rather than assessing a pass/fail compliance with the CHS requirements, the CHS Verification Scheme uses a scoring system. It is graduated from 0 to 5 to determine the degree to which organisations apply the CHS and to measure progress in this application.

Be it in the framework of a self-assessment or in a third-party assessment process, it is key to have detailed criteria to evaluate (score) the degree of application of each requirement and commitment of the CHS. A coherent, systematic approach is important to ensure:

•   Transparency and objectivity in the scoring criteria;

•   Consistency and reliability between one verification cycle and another, or between the different verification options;

•   Comparability of data generated by different organisations.

This document outlines a set of criteria to orient the assessment process and help communicate how the respective scores have been attributed and what they mean.

While verification needs to be rigorous, it needs also to be flexible in its interpretation of the CHS requirements to be applicable fairly to a wide range of organisations working in very different contexts. For example, smaller organisations may not have formal management systems in place, but show that an Organisational Responsibility is constantly reflected in practices. In a similar situation, the person undertaking the assessment needs to understand and document why the application is adequate in the apparent absence of supporting process. It is frequent that the procedures actually exist informally, but are "hidden" in other documents. Similarly, it is not the text of a requirement that is important, but whether its intent is delivered and that there are processes that ensure this will continue to be delivered under normal circumstances. The driving principle behind the scoring is that the scores should reflect the normal ("systematic") working practices of the participating organisation.

What do the scores stand for?

Score	Key actions	Organisation responsibilities
0	• Operational activities and actions systematically contradict the intent of a CHS requirement. • Recurrent failure to implement the necessary actions at operational level. • A systemic issue threatens the integrity of a CHS Commitment (i.e. makes it unlikely that the organisation is able to deliver the commitment).	• Policies and procedures directly contradict the intent of the CHS requirement. • Complete absence of formal or informal processes (organisational culture) or policies necessary for ensuring compliance at the level of the requirement and commitment.
	Score 0 means: The organisation does not work currently towards the systematic application of this requirement/commitment, neither formally nor informally. This is a major weakness to be corrected as soon as possible.	
1	Some actions respond to the intent behind the CHS requirement. However: • There are a significant number of cases where the design and management of programmes and activities do not reflect the CHS requirement. • Actions at the operational level are not systematically implemented in accordance with relevant policies and procedures.	Some policies and procedures respond to the intent behind the CHS requirement. However: • Relevant policies exist but are incomplete or do not cover all areas of the CHS. • Existing policies are not accompanied with sufficient guidance to support a systematic and robust implementation by staff. • A significant number of relevant staff at Head Office and/or field levels are not familiar with the policies and procedures. • Absence of mechanisms to ensure the monitoring and systematic delivery of actions, policies and procedures at the level of the commitment.
	Score 1 means: The organisation has made some efforts towards application of this requirement/commitment, but these efforts have not been systematic. This is a weakness to be corrected.	

Score	Key actions	Organisation responsibilities
2	Actions broadly respond to the intent behind the CHS requirement: Actions at operational level are broadly in line with the intent behind a requirement or commitment. However: • Implementation of the requirement varies from programme to programme and is driven by people rather than organisational culture. • There are instances of actions at operational level where the design or management of programmes does not fully reflect relevant policies.	Some policies and procedures respond to the intent behind the CHS requirement. However: • Relevant policies exist but are incomplete or do not cover all areas of the CHS. • Existing policies are not accompanied with sufficient guidance to support a systematic and robust implementation by staff. • A significant number of relevant staff at Head Office and/or field levels are not familiar with the policies and procedures. • Absence of mechanisms to ensure the monitoring and systematic delivery of actions, policies and procedures at the level of the commitment.
	Score 2 means: The organisation is making systematic efforts towards application of this requirement/commitment, but certain key points are still not addressed. This is worth an observation and, if not addressed may turn into a significant weakness.	
3	Actions respond to the intent of the CHS requirement: • The design of projects and programmes and the implementation of activities is based on the relevant policies and reflects the requirement throughout programme sites. • Staff are held accountable for the application of relevant policies and procedures at operational level, including through consistent quality assurance mechanisms.	Policies and procedures respond to the intent of the CHS requirement: • Relevant policies and procedures exist and are accompanied with guidance to support implementation by staff. • Staff are familiar with relevant policies. They can provide several examples of consistent application in different activities, projects and programmes. • The organisation monitors the implementation of its policies and supports the staff in doing so at operational level.
	Score 3 means: The organisation conforms with this requirement, and organisational systems ensure that it is met throughout the organisation and over time.	
4	As 3, but in addition: • Field and programme staff act frequently in a way that goes beyond CHS requirement to which they are clearly committed. • Communities and other external stakeholders are particularly satisfied with the work of the organisation in relation to the requirement.	As 3, but in addition: • Policies and procedures go beyond the intent of the CHS requirement, are innovative and systematically implemented across the organisation. • Relevant staff can explain in which way their activities are in line with the requirement and can provide several examples of implementation in different sites. • They can relate the examples to improved quality of the projects and their deliveries.

Score	Key actions	Organisation responsibilities
	Score 4 means: The organisation demonstrates innovation in the application of this requirement/commitment. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	
5	As 4, but in addition: • Actions at all levels and across the organisation go far beyond the intent of the relevant CHS requirement and could serve as textbook examples of ultimate good practice.	As 4, but in addition: • Policies and procedures go far beyond the intent of the CHS requirement and could serve as textbook examples of relevant policies and procedures. • Policy and practice are perfectly aligned.
	Score 5 means: On top of demonstrating conformity and innovation, the organisation receives outstanding feedback from communities and people. This is an exceptional strength and a score of 5 should only be attributed in exceptional circumstances.	