



## OFFICE ASSESSMENT REPORT

CAB: **HQAI – Humanitarian Quality Assurance Initiative (Association)**

Address of location/s audited: **7, Ch. De Balesert – CH1219 – Châtelaine – Geneva – Switzerland (from a remote location in Italy)**

Date of audit: **2019-07-17, 18 and 19**

SCOPE OF AUDIT AND REFERENCE STANDARDS FOR ACCREDITATION<sup>1</sup>

	QMS	EMS	Emas	OHSAS	ISMS	PRD	PRS	INSP	FSM	ITSM	EnMS	GHG	ETS	Other	Other	Other
Initial						#										
First surveillance																
Second surveillance																
Third surveillance																
Renewal																
Supplementary																
Extraordinary																
Short notice																
Initial recognition																
Maintenance																
Other :																

Specify if the object of the audit is the transition to another standard: None

Other reference standards: None

<sup>1</sup> Reference standards for accreditation: ISO/IEC 17021 (QMS, EMS, OHSAS, ISMS, EnMS, ITSM), EN 45011 / ISO 17065 (PRD, FSM), ISO 17020 (INSP), ISO 14065 (GHG / ETS). See also the reference standards and documents for the accreditation of CBs (LS-02), IBs (LS-03) and VBs of GHG inventories (LS-12), available on ACCREDIA's website.

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Scope of proposed accreditation (to be completed only in cases of extension, new accreditation or other modifications to the certificate): Not Applicable.

### ACTIVITIES UNDERTAKEN BY THE ACCREDIA AUDIT TEAM

Position	Name of Assessor	Schemes audited	Dates and locations assessed	audit days.	N° of days for writing report
Lead Assessor	Riccardo Bianconi	Core Humanitarian Processes Certification	2019-07-17, 18, 19 (Remote assessment)	3	1
Expert	---	---	---	---	---
Observer	---	---	---	---	---
Internal	---	---	---	---	---

### PRESENT FOR THE BODY

	Name	Position
1.	Pierre Hauselmann	Director
2.	Meriem Elissa Goucem	Quality Assurance <del>Manager</del> <i>Head of</i>
3.	François Fleury	Administration

### LIST OF FILES EXAMINED

Scheme	Sector
CHS	CARITAS Denmark (2017 Certification; 2018 Surveillance; 2019 Mid-Term Audit planned but not yet completed)
CHS	MEDAIR (2018 Certification; 2019 Surveillance to be planned)

### LIST OF FILES EXAMINED (for ETS)

Scheme	Area	Organization	Authorization N°	Year of reference of issues	Items audited

### SYNTHESIS OF WITNESS AUDITS PERFORMED ON THE OCCASION OF THE PRESENT ON-SITE AUDIT

Location of audit	CAB auditor/s	ACCREDIA assessor/s	Type of audit / exam session
			Not Applicable

### DOCUMENTAL EXAMINATION / CLOSURE OF FINDINGS RAISED BY DOCUMENTAL EXAM

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Updating of System Documents
<p>CAB has not changed the documental structure, that remains valid. Anyway, it was acknowledged that PRO 114 was amended in order to adopt the approach stated as correction of the Observation n°1 and in Comment n°3, recorded in the occasion of the previous assessment.</p> <p>POL114 was updated, as required after the initial assessment, to indicate Job descriptions and the required Competences, also for the Decision Maker.</p> <p>A revised Statute was approved in 2019 June 14 and it requires that also PRO 050 "Advisory and Complaint Board" will be aligned. This procedure update will take place at the end of August.</p> <p>This two last documents will be sent to ACCREDIA as soon as they will be officially available.</p>

### CLOSURE OF FINDINGS AND ADDRESSING OF PREVIOUS COMMENTS

*Note for completion: The CAB shall present a file before the audit to the ACCREDIA audit team containing all the findings against it (on-site and witness), fully completed (treatment, cause, CAs/PAs, evidence of closure).*

NCs concerns <input checked="" type="checkbox"/>	std/ point: UNI EN ISO/IEC 17024:2012 § 4.2	Scheme:  PRD Process	on-site:  Genève HQ	Date:  2018-09-25	Acceptance by Accredia yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Date: 2018 - 10 - 16 Notes: None	Name: Riccardo Bianconi	Closure C <input checked="" type="checkbox"/> O <input type="checkbox"/>
Description of finding			Treatment, timeframe, cause	CAs - timeframe	Evidence of closure / effectiveness	If "O", clarification is needed	
PRO 114 § 15.1.2 still maintain the possibility for Audit Team member (not for the Lead Auditor) to continue the audit process if the Organization requires to cross from a Verification program to a Certification one.			<p>Change clause to:</p> <p><i>15.1.2 After the delay of three months, the transfer to the certification scheme entails undertaking an initial certification audit.</i></p> <p><i>i. The auditor for this new audit shall be different from the ones who undertook the initial audit in respectively the benchmarking or independent verification scheme.</i></p> <p>Time to complete action: Immediately</p>	Not applicable	Procedure PRO 114 was amended twice from the audit closure. The first modification performed immediately after the closure, was addressing the change indicated by the cab. Now the PRO 114 completely conforms to accreditation requirements.	//	



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Description of finding				Treatment, timeframe, cause		CAs - timeframe	Evidence of closure / effectiveness	If "O", clarification is needed
It's not available a comprehensive risks analysis for impartiality. The finding has been classified as a "concern" because risk have been identified in different documents, also if not in a coherent framework.				To be added to current risk matrix To be completed before 31.10.2018		Not needed	The CAB produced the amended document as required by accreditation requirements	//
NCs concerns <input checked="" type="checkbox"/>	std/ point: UNI EN ISO/IEC 17024:2012 § 6.1.2.1.e	Scheme: PRD Process	on-site/ Genève HQ	Date: 2018-09-25	Acceptance by Accredia yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Date: 2018 – 10 - 16 Notes: None	Name: Riccardo Bianconi	Closure C <input checked="" type="checkbox"/> O <input type="checkbox"/>	
Description of finding				Treatment, timeframe, cause		CAs - timeframe	Evidence of closure / effectiveness	If "O", clarification is needed
Are not available written criteria for the monitoring of the auditors and the decision maker (eg: monitor each auditor every 4 years, increase the frequency for new auditors, the Board of Directors monitor the Decisions). Under development the forms to be used for quality assurance monitoring. Auditor monitoring process is already active and performed and Director activities are already under control of the Board.				Develop a QA procedure: <ul style="list-style-type: none"> <li>• 80% audits witnessed</li> <li>• At least each auditor monitored in a 4-year cycle (first within 2 years after first audit)</li> <li>• Decision Maker: review 40%v reports by ACB annually (7 for 250)</li> </ul> A new procedure, PRO 2018 to be developed to receive this requirements. To be completed: 31.12.2018		Internal Quality System didn't provide such a rule. A Leak in documentation was found, also if the activity was already performed with different frequency.  The monitoring tool will be updated  Time to complete: 31 12 2018	Seen PRO 170, approved the 2018 12 18 <sup>th</sup>  The document states what the CAB indicated in the Treatment.  Monitoring tool has been improved (seen some example of that).	//

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1	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 7.7	on-site: Genève	Date: 2018-09-25	Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
The certification document does not indicate the revision status of the CHS in use. This finding is classified as comment because the CHS is in the Rev.0 of 2016, so no possible interpretation of the same document is possible. Change all docs & certificates by end of January 2019 (In) <b>To be completed as the surveillance audits take place.</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
2	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 7.3	on-site: Genève	Date: 2018-09-25	Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
It's requested to give evidence that a possible applicant for certification process can receive, before paying fees for the application, the reference standard CHS, or a summary of requirements, that allows to understand and evaluate possible obstacles and difficulties to their improvement. Online application doubled with a form to be physically signed <a href="http://hqai.org/application/">http://hqai.org/application/</a> + <a href="http://hqai.org/certification/">http://hqai.org/certification/</a> (add link to VF) <b>Already done.</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
3	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 7.4	on-site: Genève	Date: 2018-09-25	Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
In order to have evidence of the coverage with auditing activity of all the relevant legal requirements, it's required to state that also HR legal requirements of ONG are examined. Immediately change PRO 114 clause 11.5.1 to: <i>The lead auditor shall make sure s/he has the legal information necessary for the team to assess whether the organisation complies with local labour and financial requirements in the sampled sites.</i> <b>Already done</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
4	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 6.1	on-site: Genève	Date: 2018-09-25	Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
It's required to update the document of job and competence description for the Director with the competence required to perform the certification decision process. → Introduce POL114 (ph) 30.11.2018 <b>Already done</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
5	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 7.7	on-site: Genève	Date: 2018-09-25	Analysed: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
It's requested the updating of all certificates already produced, in order to uptodate the reference std from ISO/IEC 17021-1:2015 to ISO/IEC 17065. <b>Already done</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
6	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 5	on-site: Genève	Date: 2018-09-25	Analysed: yes <input type="checkbox"/> no <input type="checkbox"/>
It is requested to the CAB to formally identify the significant interested parties that have to be present in the Advisory board. This finding has been registered as "comment" because the interested party board already exists. → TOR ACB (ph) 31.12.2018 <b>PRO 050 (will be sent in august in order to receive modification to the statute)</b>					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>



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### REMARKS RECEIVED BY ACCREDIA

Remark made by:	Date of remark:	management of output
None		

OTHER Item to be verified: None

GENERAL NOTES: The assessment have been performed in a remote location (Italy), where it was possible to meet the CAB Director throughout the three audit days period.. The Certification files were analysed connecting to the Genève site, with the helpful support of the Head of Quality Assurance. All the document and record required have been produced without any delay, in order to guarantee effectiveness of assessment. The general evaluation of the CAB over the conformity to ISO/IEC 17065:2012 and ACCREDIA Regulations was fully positive.

### PROPOSED BY THE ACCREDIA AUDIT TEAM

Supplementary activities are necessary	Explanation and description of the objectives of the supplementary activities
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  <input type="checkbox"/> on-site <input type="checkbox"/> witness <input type="checkbox"/> documentary <input type="checkbox"/> other	--/--

OTHER OBSERVATIONS/REMARKS (e.g. accidents or other dangerous safety and security situations undergone by the ACCREDIA audit team or observations related to the ACCREDIA Code of Ethics and Conduct

List of the documents of which the ACCREDIA audit team has kept a copy: None

ATTACHMENTS:

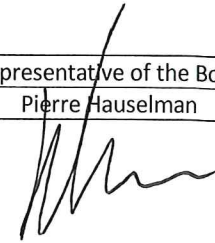
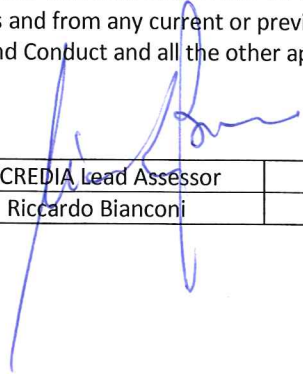
Number of findings: 00 NCs, 00 concerns, 01 comments

SPACE RESERVED FOR THE BODY
CAB reserves regarding the findings / remarks or regarding the behaviour of the ACCREDIA audit team <input type="checkbox"/> yes <input checked="" type="checkbox"/> NO  Reasons:

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The ACCREDIA assessment team shall not disclose to third parties confidential information concerning audits without the written consent of the CAB, except in cases where the law dictates that information can be made known without specific agreement (ISO 17011, 4.4). In addition, the audit team confirms its absence from commercial or other interests and from any current or previous links with the CB under assessment (ISO 17011, 6.1.4). The audit team also confirms its commitment to respect ACCREDIA's Code of Ethics and Conduct and all the other applicable rules, such as the ACCREDIA Statute and the contractual agreement for assessors.

ACCREDIA Lead Assessor				Representative of the Body
Riccardo Bianconi				Pierre Hauselman





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### AUDIT RESULTS <sup>2</sup>

1	Description of Comment	Scheme and point of standard: UNI CEI EN ISO IEC 17065:2012 § 5.2	Remote Assessing – Local Top Management premises in Italy	Date: 2019-07-19	Analysed: yes <input type="checkbox"/> no <input type="checkbox"/>
It's recommended that CAB better formalise the mechanism by which it shares specific impartiality issues and gets information and advice by different parties than Humanitarian Organizations, es e.g.: Donors, Government Organizations, the same CHS original parties. This activities are now in force, but a better formalisation is recommended.					Acknowledged: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>

ACCREDIA Lead Assessor			Representative of the Body
Riccardo Bianconi			Pierre Hauselman

<sup>2</sup> Note for completion: the ACCREDIA audit team shall fill in the description of findings and then the acceptance or closure document and the CAB shall fill in all the remaining sections (treatment, cause, CAs, PAs, evidence of closure).

In cases of NCs and concerns the CAB shall send the details of the treatment and the CAs to ACCREDIA for acceptance, after which, before the next on-site visit, the CAB shall complete the evidence of closure and send a file to the ACCREDIA audit team with all the findings (on-site and witness) received during the year in the object schemes of the on-site audit.



13,00	Break
14,00	Follows from the morning
15,30	CAB performance evaluation: Internal Audit – Managemet Review – Improvement – Communication and projects for development
17,00	Time for assessor to finalize report evidences
17,30	Intermediate meeting with CAB Representative
18,00	Assessment day closure

Time	2019 – 07 – 19 - Processes to evaluate – Riccardo Bianconi
09:00 09:15	Initial meeting
09, 15	Operations (auditing rules and files/records of certified Humanitarian Bodies analysis – follows from previous day:
13,00	Rest
14,00	Activity that follow from the morning assessment process
15,30	Early part of the report writing
17,00	Final meeting with CAB Representative
18,00	Assessment full closure

On behalf of ACCREDIA  
The Assessment Responsible – Riccardo Bianconi  
Milano, 2019-06-30 (updated 2019-07-16)



PRO 023

**ATTIVITÀ SVOLTE DAL GRUPPO DI VERIFICA ACCREDIA**

Position	Name	Schemes under evaluation	Where and when the assessment will be held	m/d	Report
Lead Assessor	Riccardo Bianconi	Core Humanitarian Processes Certification	2019-07-17→19	3	1
ESP	---	---	---	---	---
OSS	---	---	---	---	---

**SCHEMI E SOTTOSCHEMI DI CERTIFICAZIONE – SETTORI DA CAMPIONARE**

	Scheme	Sub-scheme (If applicable)	Technical sector
PRD	Core Humanitarian Processes Certification	Not applicable	IAF 35

**CAB Representative that have to be met**

Board Top Management Representative (Director), internal QMS Responsible, Scheme Responsible

**Language**

English

**Assessment approach**

The assessment will be performed with a process approach, sampling operative certification files, checking system documents and records. Some CAB's personnel interview will be performed too.

**Confidentiality**

ACCREDIA Assessment personnel commits in order to maintain covered by confidentiality any information retrieved during the assessment process and to disclose no information unless the CAB Top Management will require or accept that this disclosure will happen (ISO 17011 § 8.1.4). Moreover, ACCREDIA personnel involved in assessment process commits in his own independency from any kind of interest, e.g. commercial interest, and to be free from any liaison with the same CAB (ISO 17011 § 6.2.2). ACCREDIA assessment involved people commits also on the respect of ACCREDIA Ethic Code and Conduct Code and all the inherent other requirement applicable to the assessment (provision from the ACCREDIA Statute, Assessor Contract).

**PIANO<sup>7</sup> DI VERIFICA DEL (2019-07-17→19)**

Time	2019 – 07 – 17 – Processes to evaluate – Riccardo Bianconi
09:00 09:30	Initial meeting – Explanation of the Plan and answer to specific CAB question or solving specific CAB needs for the assessment process.
09, 30	Scheme documentation: review and amendments, on the basis of the document analysis Previous finding amendment

<sup>7</sup> Inserire e modificare il blocco di attività in funzione dello schema e delle specificità della verifica

## OFFICE ASSESSMENT PLAN

<b>CAB</b>	HQAI – Humanitarian Quality Assurance Initiative	<b>Legal address</b>	International Environment House II / Chemin de Balexert 7-9 / 1219 Châtelaîne (Geneve) / Switzerland	
<b>Address</b>	<b>Remote audit – temporary Italian site – Salivoli – Piombino (LI) -</b>	<b>Assessment type</b>	On Site <input type="checkbox"/>	<input checked="" type="checkbox"/> <b>Remote</b>
<b>Assessment Date</b>	2019 – 07 – 17 → 19	<b>Durata</b>	3 man-day	

### Assessment scope and assessment Standards

Type of Accreditation	1										2	3	4	5			6
Schemes (general)	SGQ	SGA	SCR	SGE	FSM	SSI	ITX	altro	altro	PRD	PRS	ISP	GHG	altro	altro	altro	NOTE
First Assessment																	
1° surveillance										#							Service
2° surveillance																	
3° surveillance																	
Renewal																	
Supplementary																	
Extraordinary																	
Cross-frontier																	
Recognizing																	
Other																	

Transition to be evaluated	No transition
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<sup>1</sup> Certificazione di Sistemi di Gestione: ISO/IEC 17021-1:2015

<sup>2</sup> Certificazione di Prodotto: ISO/IEC 17065:2012

<sup>3</sup> Certificazione di Persone: ISO/IEC 17024:2012

<sup>4</sup> Ispezione: ISO/IEC 17020:2012

<sup>5</sup> Ispezione: ISO 14065:2013

<sup>6</sup> Si vedano anche gli Elenchi norme e documenti di riferimento per l'accreditamento (LS-02), OdI (LS-03) e Organismi di Verifica e Convalida delle emissioni di gas ad effetto serra (LS-12), disponibili sul sito ACCREDIA.

10,00	Organizational structure Legal and contractual matters <ul style="list-style-type: none"> <li>- Management of impartiality / mechanism for safeguarding impartiality</li> <li>- Non-discriminatory conditions</li> <li>- Confidentiality</li> <li>- Public available information</li> <li>- Liability and Financing</li> </ul>
13,00	Break
14,00	Internal Quality Management System <ul style="list-style-type: none"> <li>- Support, with specific focus on eligibility of CAS Auditors and their qualification files.</li> <li>- Context and Risks; Leadership; Planning (with particular focus on risk and opportunity identification and action plans to reduce risks, set and pursuing objectives)</li> </ul>
15,30	Operations (auditing rules and files/records of certified Humanitarian Bodies analysis): <ul style="list-style-type: none"> <li>- certification request</li> <li>- eligibility of Humanitarian Bodies for certification</li> <li>- kind of office and field operations</li> <li>- reporting</li> <li>- Humanitarian Bodies performance improvement</li> </ul>
17,00	Time for assessor to finalize report evidences
17,30	Intermediate meeting with CAB Representative
18,00	Assessment day closure

Time	2019 – 07 – 18 - Evalu Processes to evaluate – Riccardo Bianconi
09:00 09:15	Initial meeting (all the daily activities by Skype connection) during the whole day.
09, 15	Internal Quality Management System: <ul style="list-style-type: none"> <li>- Criteria for certification decision – qualification of decision makers</li> <li>- certification documentation</li> <li>- surveillance</li> <li>- recertification</li> <li>- changes affecting certification</li> <li>- termination, reduction, suspension and withdrawal of certification</li> <li>- record management</li> <li>- compliant and appeals</li> </ul>
11,00	Meeting will be held remotely, by Skype, from this moment to 15,30 with internal Resources of the CAB.
11,00	Operations (auditing rules and files/records of certified Humanitarian Bodies analysis – follows from previous day: