



**CHS Alliance**

QUALITY. ACCOUNTABILITY. PEOPLE MANAGEMENT

# The CHS Verification Scheme Overview

Version 2017-07-17

Published by

CHS Alliance

© All rights reserved. The copyright of the material contained herein is held by CHS Alliance.

It may be reproduced for educational purposes, including in training, research and programme activities, provided that the CHS Verification Scheme is acknowledged. To translate or adapt all or any part of the CHS Verification Scheme, prior written permission must be ob-

tained by emailing [info@chsalliance.org](mailto:info@chsalliance.org).

## The CHS Verification Scheme

2017-07-17

### Introduction

This version replaces previous versions of the CHS Verification Scheme and incorporates feedback received during the testing phase. The CHS Alliance encourages members and non-members that will undergo verification using any of the four options to provide feedback on their experience to the CHS Alliance. This current version will be reviewed at the latest in one year to ensure that feedback and lessons learned can be incorporated into the next version.

### Monitoring and verification of the CHS

The Core Humanitarian Standard on Quality and Accountability (CHS) was designed as a measurable and verifiable standard, in line with internationally recognised good practice in standards development. It enables all stakeholders to be clear about what can be expected from organisations delivering assistance, and demonstrate with evidence what has been provided and how.

### What is the CHS Verification Scheme?

Verification is a structured, systematic process to assess the degree to which an organisation is working to achieve the CHS. The Verification Scheme is managed by the CHS Alliance. It sets out the policies and rules of the verification process to ensure it is conducted in a fair and consistent manner for all participating organisations.

The Scheme offers four verification options with different degrees of rigour and confidence in the results. These are self-assessment, peer review, Independent verification and certification. Although each option is stand alone, the indicators used in the self-assessment are common to all four options.

To avoid potential conflicts of interest and following international good practice, the actual independent auditing is undertaken by a certification body specially established for this purpose and is totally independent from the CHS Alliance, the CHS standard setting process and the organisations it audits. Currently the only such organisation is the Humanitarian Quality Assurance Initiative (HQAI).

#### Verification Scheme options

##### Option One: Self-assessment

Self-assessment is an internally driven process where an organisation assesses itself against the Verification Framework's indicators to see how well its current policies, systems and practices are aligned with the CHS commitments.

##### Option Two: Peer review

Peer review is for organisations that want an assurance from one of their peers that they are making demonstrated, measureable progress implementing the CHS.

##### Option Three: Independent verification

Independent verification (sometimes referred to as third party verification) is intended for those organisations that want an independent, objective and impartial public assurance that they are making demonstrated, measureable progress implementing the CHS. It is carried out by the Humanitarian Quality Assurance Initiative. The assessment is based on the same indicators as self-evaluation, but the process looks for more in-depth documentation and information from key stakeholders, including communities and people affected by crisis, in order to build evidence on how the CHS is applied across the organisation.

##### Option Four: Certification

Certification is the assurance that an organisation meets the requirement of the CHS. This is a formal process during which qualified auditors approved and managed by the Humanitarian Quality Assurance Initiative assess whether organisations have applied the standard. It follows the same process as independent verification, but the outcome is a pass/fail test of compliance with the CHS.

## What is the added value of verification for organisations?

Each of the verification options provides valuable information on an organisation's strengths and areas for improvement against the CHS. They are therefore an important means to support organisational learning, continuous improvement and capacity strengthening. The verification process also generates comparable data at the sector level that will allow the CHS Alliance to report on overall trends, successes and challenges in the implementation of the CHS. This will help the organisation to continuously improve the Standard and contribute to building an evidence base on the impact of the CHS on aid quality, accountability and effectiveness.

## What is the CHS Verification Framework?

To ensure the coordination of verification tools and the comparability of the data they produce, they all are derived from the CHS Verification Framework.

The CHS Verification Framework is a key part of the Verification Scheme. It ensures there is a harmonised approach to monitoring, evaluating and reporting the application of the CHS from which it is directly derived. The indicators included in the Verification Framework are taken directly from the requirements of the 9 CHS Commitments i.e. the 36 Key Actions and the 26 Organisational Responsibilities described in the CHS have been turned into 62 indicators. This to allow organisations to objectively determine the extent to which they are applying the standard.

The Verification Framework is the result of the feedback collected from stakeholders and the outcomes of field-testing with various organisations working in different crises contexts. Prior to finalising this version of the Verification Scheme a further consultation was undertaken with fourteen organisations that have been through the field testing and also with a variety of organisations that will undertake a self-assessment as part of the membership requirement of the CHS Alliance.

Changes will be brought to the Framework any time experience shows it can be significantly improved. These changes will automatically be reflected in the other documents and tools derived from the Framework.

## What are the assessment tools?

These are used to collect data and feed it into the Verification Framework. The self-assessment tool and its manual are freely available on the CHS Alliance website. Individuals, organisations, coordinating bodies, consortia and other CHS stakeholders interested in assessing their degree of application of the CHS, can use the tools. They help ensure there is evidence that an organisation has the policies, systems and practices in place to support learning and continuous improvement against the aims and commitments of the CHS.

The self-assessment tool can be used to assess CHS implementation in projects and programmes, organisation-wide, or at the cluster or country level. As such the whole system offers a coherent framework to orient:

- Organisational self-evaluations
- Monitoring and reporting
- Evaluation exercises
- Independent verification
- Certification
- Capacity assessment and capacity-strengthening activities
- Continuous learning and improvement

Members of the CHS Alliance will be required to self-assess using the self-assessment tool. However, non-members and organisations not opting for independent verification or certification may choose to adapt the self-assessment tool e.g. they may choose to report against the 9 CHS Commitments only. However, they would be expected to reference the Key Actions and Organisational Responsibilities within their findings and analysis.

### **What is the process for self-assessment?**

This is a two-year cycle and is an internally driven process where an organisation assesses itself against the Verification Framework's indicators to see how well its current policies, systems and practices are aligned with the CHS commitments. It is managed by the CHS Alliance. Based on the results of this assessment, it will draw up an action plan and at the end of the first year, provide a progress report, to the CHS Alliance against the action plan. This forms part of the annual reporting that CHS Alliance members will be required to provide as part of their membership requirement. At the end of the second year, the cycle will begin again and the organisation will carry out a self-assessment. CHS Alliance members can decide whether to continue with this option or choose any of the three other available options.

### **What is the process for peer review?**

This is a two-year cycle and is for organisations that want an assurance from one of their peers that they are making demonstrated, measurable progress implementing the CHS. It is managed by the CHS Alliance. It is important to note that this option has not been field tested. In this case it is envisaged that the peer organisation that will carry out document reviews, interviews with key staff, partners and affected communities and people and other stakeholders (partners, donors, etc.), and direct observation at selected project sites. The first step will be a self-assessment at the level of documented policies and procedures at the headquarters of the organisation. This will form the basis for the discussion with the peer reviewer to identify the number of field sites to be visited (by the peer reviewer). Based on the results, the organisation will discuss with the peer reviewer how to address the issues identified during the peer review and how to report on this to the CHS Alliance (as part of CHS Alliance membership requirement) at the end of the first year. At the end of the second year, the cycle will begin again. CHS Alliance members can decide whether to continue with this option or choose any of the three other available options.

### **What is the process for independent verification?**

Independent verification is a four-year cycle and is open to CHS Alliance members and non-members. The process involves document reviews, interviews with key staff, partners and communities and people affected by crisis, other stakeholders (partners, donors etc.) and direct observation at selected project sites. The aim is to generate a comprehensive analysis of an organisation's degree of application of the CHS, a work-plan (developed by the organisation itself) for improvement and the objective evidence of the organisation's progress against this work-plan. This is carried out by an independent third party that has no affiliation with the CHS Alliance – for more details on the process, please see annex 1(a). CHS Alliance members can fulfill their membership requirement by submitting public summary of their reports to the CHS Alliance.

### **What is the process for certification?**

Certification is a four-year cycle and is open to CHS Alliance members and non-members. It attests that

an organisation or any part of it that has requested the certification, meets the requirements of the CHS. Unlike independent verification, certification assesses the actual compliance with the CHS requirements. Although it entails some flexibility, certification is a pass/fail test of compliance with the CHS. For more details on the process, please see annex 1 (b). CHS Alliance members can fulfill their membership requirement by submitting public summary of their reports to the CHS Alliance.

### **Cost**

The cost of self-assessment will vary according to the internal processes of each organisation. For peer review, this will be a negotiation between the respective organisations and should be agreed in advance to avoid unexpected costs.

The costs of independent verification and certification are determined by the independent organisation carrying out the audit. For more information on this, please contact HQAI. For organisations that wish to undergo Independent verification or certification and require financial support, a fund has been established for this purpose – please contact HQAI for further information.

## Annex 1 (a)

### Independent Verification

The stages of the process are:

- a. **Year 0:** A baseline assessment undertaken by a third party e.g. the Humanitarian Quality Assurance Initiative (HQAI), leading to a confidential report of strength and weakness in the application of the CHS and a public summary of this report.
- b. The development of a work-plan by the organisation to address all the major weaknesses within four years.
- c. The application of the work-plan.
- d. **Year 1:** A self-assessment and reporting after one year of implementation of the work-plan, validated by an independent third party e.g. HQAI.
- e. **Year 2:** A third-party assessment and report after two years of implementation of the work-plan. This can lead to a revision of the work-plan if it is found that, for any reason, it is not delivering the expected results.
- f. **Year 3:** Similar to d., a self-assessment and report after three years of implementation of the work-plan.
- g. A third-party assessment to check the status of 0 score after four years of implementation of the work-plan.
  - i. In exceptional circumstances the organisation may be granted a two-year extension.
- h. The cycle continues, from point b and onwards.

## Annex 1 (b)

### Certification

The main steps of the certification process are:

	Year 0	Year 1	Year 2	Year 3	Year 4
Certification	Self Assessment Initial Audit	Maintenance Audit	Mid-term Audit	Maintenance Audit	Recertification Audit
	Certificate issued	Certificate maintained	Certificate maintained	Certificate maintained	Certificate renewed

### 3.1 Initial audit

- i. The organisation undertakes a self-assessment using HQAI's tool;

- ii. A team<sup>[1]</sup> led by a lead auditor undertakes an initial audit; The initial audit includes site visits at the head office and at a sample of national programme site(s). Each programme site visit also includes a visit to several project sites where the team gets the feedback of affected people.
- iii. The audit team produces an initial audit report, including scores of compliance with the standard (see section 4 for audit scores).
- iv. A major Corrective Action Request (CAR) issued at an initial audit prohibits an organisation to be certified. However, if the major CAR is demonstratively addressed and either closed or transformed into a minor CAR within six months of the audit, a certificate can be issued without further audit. 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.
- v. After receiving the feedback of the organisation, 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.
- vi. A public summary is published on HQAI website, upon consent of the organisation.
- vii. As relevant, a certificate of conformity is granted, with the right to use the certification mark (logo) in organisational communications and public relations (e.g. web-site, letterheads).

*Note: A certificate has a 4 year validity from the certificate issue date.*

### 3.2 Maintenance audit

- i. Within one year of issuing the certificate, a team<sup>5</sup> led by a lead auditor undertakes a maintenance audit that consists, at a minimum, of a visit to the head office. This audit focuses on the non-conformities identified in the previous audit and the organisation's progress towards their resolution;
- ii. The audit team produces a maintenance audit report, including scores of compliance with the standard requirements (see section 4 for audit scores).
- iii. A major CAR issued following a maintenance audit leads to the suspension of the certificate. If the major CAR is closed or transformed into a minor CAR within 3 months of the audit, the certificate is restored. This timeframe can be extended by the lead auditor up to six months maximum for justified reasons. Passed this timeframe, the certificate is withdrawn or the scope of certification is reduced to exclude parts not meeting the requirements.
- iv. After receiving the feedback of the organisation, 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. A public summary is published on HQAI website, upon consent of the organisation

### 3.3 Mid-term audit.

- i. Within two years of the issuing of the certificate, a team<sup>[2]</sup> led by a lead auditor undertakes a mid-term audit. The mid-term audit consists at least of a programme site(s) visits at a sample of site(s). The mid-term audit includes but is not limited to a review of the identified non-conformities and the measures taken to resolve them;

---

[1] Depending on circumstances (risk, complexity of the organisations, etc.) the team can be composed of only the Lead Auditor.

[2] 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.

ii. The audit team produces a mid-term audit report, including scores of compliance with the standard requirements (see section 4 for audit scores).

iii. A major CAR issued at a mid-term audit leads to the suspension of the certificate. If the major CAR is closed or transformed into a minor CAR within 3 months of the audit, the certificate is restored. This timeframe can be extended by the lead auditor up to six months maximum for justified reasons. Passed this timeframe, the certificate is withdrawn or the scope of certification is reduced to exclude parts not meeting the requirements.

v. After receiving the feedback of the organisation, HQAI under the responsibility of its Executive Director evaluates the report, its finding and recommendations, and decides whether to maintain the certificate. This decision cannot be outsourced.

vi. A public summary is published on HQAI website, upon consent of the organisation;

#### 3.4 Maintenance audit.

i. Within three years of the issuing of the certificate, the organisation undertakes a new maintenance audit, as per 3.2.

#### 3.5 Recertification audit.

i. Within 4 years of the emission of the certificate and upon request from the organisation, a new cycle of certification starts with a re-certification audit. The rest of the cycle follows the steps described above. To maintain continuous certification, the re-certification audit needs to take place before the end of validity of the certificate of conformity<sup>6</sup>.

iii. A major CAR issued at a re-certification audit leads to the suspension of the certificate. If the major CAR is closed or transformed into a minor CAR within 3 months of the audit, the certificate is restored. This timeframe can be extended by the lead auditor up to six months maximum for justified reasons. Passed this timeframe, the certificate is withdrawn or the scope of certification is reduced to exclude parts not meeting the requirements.

*Note:* At any time during the certification process, the organisation can voluntarily request a suspension of its certificate. The suspension shall not exceed 6 months.