samen werkt.

Partos 9001

Sector-specific application
ISO 9001:2015, version 2018 (update 2023)

content

Introduction

One of the core tasks of sector association Partos is to help its member organisations carry out their work as effectively as possible. For Partos, the organisation quality of its member organisations is an important concern, first of all because of the relation with the effectiveness and efficiency of the sector for global development. As an advocate for self-regulation by the sector, the influence (both direct and indirect) that a quality seal of approval has on the sector's image among the public, politicians and donors also plays a role in this respect.

It is against this background that the Annual General Meeting commissioned the Association Bureau in 2011 to develop a practical manual for the implementation of ISO 9001 in the development sector. Writing the manual involved making choices about what we, as a sector organisation, consider to be proper implementation of the various sections of the ISO 9001 standard. This led us to also develop a sector-specific normative application of ISO 9001:2008 (referred to as Partos 9001), which, along with the manual, was adopted in the AGM in April 2012. For the effectiveness of our work, it is important that a quality standard takes into account specific work and sector-related circumstances. External quality review is of great importance in this context, because on the one hand, it contributes to enhancing the quality of the work, while on the other, it helps increase public confidence. Partos 9001 has therefore been drafted in such a way that it can be used by certification institutes for regular external ISO 9001 inspection and testing, if desired by the member organisation. To actively eliminate duplicative regulations and encourage streamlining efforts, other prevailing rules and standards such as he Accreditation Requirements Dutch Charities (Erkenningsregeling Goede Doelen Nederland), the Organisational Risk and Integrity Assessment (ORIA) of the Dutch Ministry of Foreign Affairs, the ANBI regulation, and the SBF Good Governance Code (SBF Code Goed Bestuur) have also been taken into account in this sector-specific application of the ISO 9001.
This current document sets out Partos 9001:2015, that was based on the ISO 9001:2015, and revised in 2018 to include new regulations in the field of integrity (see 7.1.4.)

The Partos 9001:2015 is formally recognised by the Ministry, which means that it exempts organisations carrying a Partos 9001-2015 (version 2018) certificate, from the MFA's Organizational Risk and Integrity Assement (ORIA, 2018).

Partos developed both the application and the manual aided by a dedicated working group formed by quality assurance and integrity staff from various member organisations. In addition, certification institutes were consulted about the application's verifiability, and consultations were held with Goede Doelen Nederland (Dutch Association of Charities), CBF, the Ministry of Foreign Affairs, as main donor. The latest version of the Partos 9001:2015 was approved at the AGM in November 2018.

Partos 9001 is the preferential application of ISO 9001, developed by and for Partos members. The Partos 9001 certificate can therefore only be granted to Partos member organisations. Members having received a Partos 9001 certificate are listed on the Partos website

I Structure of Partos 9001

This document is a direct translation of the ISO 9001:2015 standard for application by the international cooperation sector. Partos 9001 is based on the analysis of a large number of quality frameworks, standards and guidelines that are used in the sector. (See the colophon for details.) This analysis showed that these quality frameworks, standards and guidelines contain many common practices relevant to the sector. The common practices that are strongly related to the ISO 9001 standard have been included in Partos 9001. However, Partos 9001 is an application of the ISO 9001 standard; it has not been supplemented with elements from other standards, thus avoiding duplication. Therefore, compliance with Partos 9001 does not mean full compliance with other standards such as the CBF Seal of Approval (CBF Keurmerk) or Istanbul Principles (for CSO Effectiveness). Where standards overlap in contents or function, we have made sure they are not in conflict with each other.

The guide consists of two columns:

First column: Partos 9001, further explanation of sections of the ISO standard, requirements

The first column contains the sector-specific application (Partos 9001). Where relevant, this is a direct translation of certain ISO standards. Partos 9001 is a detailed description of certain parts of sections of the ISO 9001 standard. When an organisation, in addition to obtaining an ISO certification, wishes to comply with Partos 9001, the descriptions in this column can be seen as certification requirements. In this respect, Partos 9001 can be considered ISO+. This means that when a certain section complies with Partos 9001, it will still need to be determined whether all requirements in the accompanying ISO section are met. For many sections of the ISO 9001 standard, a sector-specific translation does not add anything new. Blank spaces in the Partos 9001 column indicate no further explanation is needed. Organisations can apply their own interpretation of the ISO standard here. The way in which this is done is highly dependent on the preferences of individual organisations and may vary greatly.

Second column: Implementation guideline, recommendations

The second column contains implementation guidelines or recommendations. The texts in this column are not standard-setting. This means that a certification institute will not test whether an organisation complies with these guidelines or recommendations. Organisations are free to decide for themselves how to interpret these particular ISO sections, as long as the requirements that ISO and Partos 9001 specify are met. Where the word ‘shall’ is used in the second column, the rule or action to which the word relates is mandatory (i.e. an ISO 9001 standard/Partos 9001 requirement).

Self-evaluation form to prepare for certification or recertification

Partos has found certifying bodies in our sector willing to include Partos 9001 in tests for certification or recertification if requested by Partos member organisations. The bodies promise to do that without any additional charge, but they do expect organisations to prepare adequately on the basis of a written self-evaluation. A self-evaluation form has been developed to carry out such a written evaluation. This form is part of Partos 9001 and can be found on the Partos website (https://www.partos.nl/publicatie/partos-9001/). A list of the relevant certifying bodies can be found there as well.

What’s new in Partos 9001:2015

This section presents the most important changes in the ISO-9001:2015 standard and their implications for Partos 9001. The way the ISO 9001:2015 standard is structured has been completely overhauled. The new structure, which goes by the name of ‘high level structure’, is to be applied to

all ISO standards. It means that Partos 9001:2015 has been completely reshuffled in comparison to the previous version. Changes in the text, however, have remained few. The new ISO 9001 lays down that the ISO management system should be linked to the overall strategy. The system requirements of ISO 9001 need to be integrated into the day-to-day operations wherever possible. A specific translation of this new element into requirements proved unnecessary in the new Partos 9001. However, the implementation guidelines include recommendations on how to incorporate them into the IC organisation. The new ISO also requires an organisation to identify the wishes and demands coming from the organisation's environment and from its stakeholders. These requirements had been laid down in the previous Partos 9001. An important new requirement in ISO 9001 is the strong focus on risk management. This has resulted in several adjustments to the new Partos 9001. Finally, there is more attention to compliance management in the new ISO. This has not resulted in specific Partos 9001 requirements, but the implementation guideline does contain recommendations for its implementation.

In addition, changes in the COCA of the Ministry of Foreign Affairs, the Accreditation Requirements Dutch Charities (Erkenningsregeling Goede Doelen Nederland) and other arrangements and best practices in the development sector have been taken into account. This has resulted in small changes in various sections of Partos 9001.

2018: main changes in the Partos 9001-2015

In November 2018 the AGM of Partos approved a number of important changes in the Partos Code of Conduct and in the Partos 9001, mostly in relation to integrity issues (see paragraph 7.1.4.).

To provide support to organisations in the development of a well-functioning integrity system The Integrity System Guide was developed which can be found on the Partos website (in Dutch and in English).

2 Terms and definitions

Context analysis: Context analysis is a method to reflect upon the wider context within a country or region to prepare for, implement or adjust a programme or project.

Stakeholders: Agencies, organisations, groups or individuals with a direct or indirect interest in the development project or programme, or its evaluation.

Target group: Specific organisations or individuals for whom the development project or programme is intended.

Efficiency: Benchmark for converting economic resources and input (funds, expertise, time, etc.) into results.

Impact: Positive and negative, primary and secondary long-term effects of an intervention, whether direct or indirect, intentional or unintentional.

Input: All financial, personal and material resources used for the intervention.

Customer: Organisations that are active within the international cooperation sector have various customers. In the IC sector, supplier-customer relationships differ from regular relationships where the customer pays and the supplier receives money. For example, partner organisations play the role of both supplier (by executing projects and receiving money) and customer (by receiving services in the form of capacity development without paying for them). The target group is also a non-paying customer. The various supplier-customer relationships are explained in the table below.

	Supplier	**Product**	**Costumer**
1	IC Organisation	Capacity development, recommendations, financing	Partner organisations
2	Partner organisation	Development projects, interventions, lobbying by partner organisations	Target group (e.g. citizens in the South), IC Organisation, governments (local and other), companies and international knowledge (and other) institutes (in the South)
3	IC Organisation	Own development projects, interventions, lobbying	Target group (e.g. citizens in the South), finan- ciers, governments (local and other), companies and international knowledge (and other) institutes (in the South)
4	IC Organisation	Information, awareness, support base	Donors, financiers, supporters, companies, international knowledge (and other) institutes
5	IC Organisation	Brokerage function, connecting actors, (North-South, South-South)	Donors, financiers, supporters, companies, knowledge (and other) institutes, target group (citizens), governments (local and other

Management and administration costs: As defined in accordance with the Guidelines 640 or 650 on annual report requirements issued by the Raad voor de Jaarverslaggeving (the Dutch Accounting Standard Board).

Outcome: The probable or achieved short and mid-term results of the outputs of an intervention.

Output: The products, capital goods and services that are the result of an intervention. Outputs can also be direct changes as a result of the interventions that are relevant for achieving the outcomes.

Partner organisation / Partner: Organisations and/or individuals with whom partnerships are entered into in order to achieve the mutually agreed objectives.

Programme: A coherent entity of activities or projects. A programme may consist of multiple intervention strategies, countries or themes.

Project: A set of activities relating to international development, with a specific objective, start date and expected end date, carried out within a project team, with or without external funding.

South: The countries where the development projects and interventions are carried out.

3 Table of Standards and Guidelines

Partos 9001 (standards to be applied, from selected parts of the section texts of ISO 9001)	***Implementation guideline*** (recommendations)
No specification, see ISO 9001	
4 Context of the organisation	***4 Context of the organisation***
4.1 Insight into the organisation and its context	***4.1 Insight into the organisation and its context***
No specification, see ISO 9001	To identify and communicate the strategic direction of the organisation, it is important to formulate a strategic long-term plan or policy plan. For example, "identifying external and internal major issues" within the IC sector can be done by the use of instruments such as the SWOT analysis, the Force Field Analysis and the context analysis. SWOT stands for Strengths, Weaknesses, Opportunities, and Threats and refers to the strengths and weaknesses of the internal organisation and the external opportunities and threats that may arise. NOTE 2 in the standard text of this section enumerates several examples of things to take into account when creating a SWOT analysis. The context analysis is a method to analyse the countries and regions where the organisation wishes to carry out interventions in the next few years. It considers the following factors: problems and needs of the target groups, social, cultural, economic and political factors that affect the problems of the target groups, stakeholders who play a role in the continuation of the problem or in its solution, and other actors involved in interventions targeted at the same groups. The context analysis should take into account developments taking place on local, national and international levels. Importantly, SWOT and context analyses need to be updated periodically which may in turn cause a need to adjust the strategic long-term plan or policy plan. The annual evaluation of the objectives of the strategic long-term plan or policy plan provides a good moment for these updates.
4.2 Insight into the needs and expectations of stakeholders	***4.2 Insight into the needs and expectations of stakeholders***
Please refer to the 'customer' column of the diagram in Chapter 2, Terms and definitions, for the identification of the various stakeholders.	The organisation should identify the stakeholders relevant to the quality management system. Essentially, these are all persons or organisations that can be classified as 'customer'. These are shown in the diagram of Chapter 2, Terms and definitions, in the 'customer' column. Requirements should be identified for each product and each client. This refers to the various arrangements that are laid down in contracts and project plans, for example. The institutional donors' reporting requirements are another example. Additionally, attention needs to be paid to authorities and organisations issuing laws and regulations as well as to organisations establishing guidelines and policy frameworks with which IC organisations shall comply. The Dutch government, governments in the South, industry associations and CBF are examples of such authorities and organisations. Stakeholders and their requirements should be identified on a one-off basis. Periodically, the organisation should review the stakeholder analysis and its matching requirements. This review could be a part of the annual planning cycle.

4.3 Determining the scope of the quality management system No specification, see ISO 9001	***4.3 Determining the scope of the quality management system*** The scope of the quality management system should be described in terms of the activities covered by this system. The scope of an IC organisation could for example be described as follows: 'Working for an AIDS-free world through research, interventions, awareness raising and (international) organisational development and capacity building'. ISO sections that are not applicable can be excluded. In the case of IC organisations, Section 8.3 on design and development is often not applicable. Section 7.1.5.2 on control of monitoring and measurement equipment is rarely applicable. This shall be sufficiently substantiated and should not affect the capability of the organisation to deliver quality and to meet the customer's requirements.
4.4 Quality management system and the processes within this system No specification, see ISO 9001	***4.4 Quality management system and the processes within this system*** Deze paraaf kan beschouwd worden als een samenvatting van de overige paragrafen met Essentially, this section is a summary of the other sections, with one exception: the organisation shall determine the inputs, the expected outputs and the order of and interactions between the various processes. It is recommended to make a flow chart that shows how processes succeed and influence each other. For further specification of Partos 9001, please refer to the other sections. The component under f) about risks and opportunities has been newly added. ***4.4.2*** It is not mandatory to draw up procedures and/or work instructions that describe how certain processes shall be implemented. It is important, however, that the organisation makes reliable arrangements ensuring that processes will be implemented as planned. This can also be achieved by, for example, good training, highly trained and experienced staff, performance indicators, a workflow system and other good software. If certainty or confidence seems to be lacking, it is recommended to work with appropriate procedures and work instructions.

5 Leadership

5.1 Management commitment

No specification, see ISO 9001

5.1.2 Customer focus

The requirements of the primary customer (citizens in the South) are the organisation's first concern.

In addition to this primary concern, the management sees to the identification of the requirements of the following customer groups (conditional upon services delivered): supporters, donors, major donors/financiers, companies, knowledge (and other) institutes, governments and partner organisations.

As specification of sub a) of this ISO section, the organisation shall meet the following minimum requirements:

I. When the organisation raises substantial funds from the Dutch general public or business community (>30%), the organisation shall be::
   a. In the possession of the Erkenningsregeling Goede Doelen (Recognition Scheme) recognised by the Dutch Inland Revenue as an ANBI (Institution for General Benefit).

5 Leadership

5.1 Management commitment

Commitment of management and top management is a very important factor for the effectiveness of the quality management system. Management shall provide evidence of its commitment to the development and improvement of the quality management system by, for example, being informed about the quality management system, being present at meetings where quality issues are discussed and having minutes of meetings made available.

a) As set out above, the management shall demonstrate that it is taking its responsibility for a proper functioning of the quality management system.
b) The management is responsible for laying down the quality policy and the quality objectives. See Section 5.2 on policy for a further explanation.
c) The management is responsible for the implementation of the quality system on all levels in the organisation. In this context, it is important that all quality functions are integrated into the existing business processes and systems. For example, there will be no separate document laying down quality policy and quality objectives, but quality policy and quality objectives are part of the regular long-term policy plan and its associated objectives.
d) The management shall ensure that the concept of controlling risks is embedded in the organisation's thinking and working processes. See Section 6.1 on actions in response to risks and opportunities for a further explanation. The process approach sees the organisation as a set of processes. A business process consists of an ordered, sequential set of activities with a specific purpose. A distinction can be made between primary, supporting and governing processes.
e) The management shall ensure that work to be carried out in agreement with customers is supported by the availability of sufficient resources, such as staff, funds, materials, IT hard- and software and buildings.
f) The management shall ensure that all staff are fully aware of the fact that agreed quality standards must be met, by implementing agreed working processes.

g to j) are self-evident.

5.1.2 Customer focus

First of all, it is important to know who IC organisations' customers are. This can be found under the 'Customer' entry in the Terms and definitions section of this document. They are also listed in the Partos 9001 column on the left. The requirements of customers are defined by talking to them in person and, if necessary, by conducting research. One way of doing this is by talking directly to representatives of the target group, to partner organisations with direct links to the target group or by means of context analysis. The wishes and requirements of donors can be identified by conducting research, including market research, or by talking to them in person as well. Requirements of other customers are generally identified by means of consultations or by examining the grant conditions. One needs to remain aware that a wide supporters base is required to gain access to a range of public funds and other institutional donors (such as the National Postcode Lottery).

Whether or not customer requirements are met can be established by comparing the actual results of the delivered services or completed projects to what was promised in contracts or communications with the customer. Eventually, project and programme evaluations and customer satisfaction surveys will provide information on whether results have been achieved in a proper manner.

II. In accordance with the SBF Good Governance Code (SBF Code Goed Bestuur), a clear distinction in functions has to be made between daily execution, management and supervision. III. Complying with the Dutch remuneration guidelines (GDN, Goede Doelen Nederland, replacing the former VFI) and with rules on the remuneration of top executives in the IC sector (Regeling bezoldiging topfunctionarissen OS-sector). IV. Corporate social responsibility policy that reflects social developments and the organisation's values. V. Gender policy VI. Guidelines on financial management for charities by Goede Doelen Nederland (laying down rules for responsible management of financial reserves and funds). VII. Annual report, including annual accounts. VIII. In an auditor's report, the auditor informs relevant internal parties in the organisation about the results of their audit. The auditor's report shall at least cover: a. the 'in control statement' and the risk management of the organisation; b. te continuity, financial and other, of the organisation; c. the quality of governance; reliability of assumptions in relation to the underlying assumptions of the long-term policy; d. the topics which required special attention during the audit. V. Organisations shall only use financial derivatives (including foreign exchange hedging etc.) to hedge against financial risks (such as interest and foreign exchange risks). VI. Other codes and standards that are commonly used in the sector and have added value for the organisation (e.g. the Core Humanitarian Standard for emergency aid or the ICRC Code of Conduct for emergency aid).	Subsequently, management shall inform the organisation on the customers' requirements and applicable laws and regulations, ensuring that they are understood by all relevant persons and permanently paid attention to. Laws and regulations that are relevant to the IC sector in all cases are listed in the Partos 9001 column. Under IV) it is stated that the organisation should have an appropriate CSR policy. The ISO 26000 standard provides adequate guidelines to this effect. A document produced by Partos lays down guidelines (see https://www.partos.nl/content/mvo-beleid-en-praktijk-handreiking-voor-partos-lidorganisaties). Section 6.1 explains how to deal with risks and opportunities. It is important to include the risks and opportunities that affect customer satisfaction and the meeting of requirements of products and services.
5.2 Policy	***5.2 Policy***
5.2.1 Quality policy No specification, see ISO 9001	***5.2.1 Quality policy*** The quality policy describes the basic principles for quality or the organisation's vision on quality. A quality policy can, for instance, focus on implementing and maintaining a quality management system, improving the internal organisation, improving products and services, improving customer satisfaction, increasing the outcome and impact, evaluation and learning. Preferably, the quality policy is part of the long-term policy plan and the year plans. This includes the mission and vision of the organisation. The mission explains why the organisation was established and for what purpose. The vision gives a short description of how the mission is to be carried out. Consequently, the scope of the quality management system (i.e. what organisational activities are included in the quality management system?) is, in its turn, derived from or strongly related to the mission of the organisation. Ultimately, the quality policy provides support to the general policy of the organisation. In other words: what needs to be done in terms of quality to help achieve the general objectives of the organisation?

	The quality policy needs to be appropriate to the purpose of the organisation, preferably as part of the long-term policy plan. In this respect, attention has to be paid to the following: a. There shall be commitment from management to the quality policy. Management shall, for instance, ensure that the quality policy is discussed and lived by within the organisation, and monitor its progress. Management shall continuously improve the effectiveness of the quality management system by improving work process or performance measurement systems. b. The quality objectives communicate clearly what the organisation intends to achieve in terms of quality. The quality policy forms the basis for these objectives. So by achieving the quality objectives, the quality policy is also achieved. c. Management shall ensure that the quality policy is reviewed periodically for continuing suitability and make adjustments where necessary. For example, when the long-term policy plan is updated or in the event of major organisational changes.
5.2.2 Communicating the quality policy No specification, see ISO 9001	***5.2.2 Communicating the quality policy*** The quality policy shall be laid down in writing and these documents need to be accessible to all relevant persons. Management shall ensure that the quality policy is communicated and understood within the organisation. All employees need know how they are expected to contribute to achieving this quality policy. This can be done by distributing paper copies of the quality policy and including it on the agenda of work meetings.
5.3 Roles, responsibilities and authorities within the organisation The following is specified with regard to the financial function: I. The responsibilities and authorities, including authorisations with respect to expenditure (including financing and transfers of funds) are explicitly described. II. The responsibilities and authorities with regard to managing the organisation are separated from those with regard to the monitoring function, in line with the intention of the SBF Good Governance Code. III. The financial function is described as a separate task and lies with a designated member of the board or the management. IV. The control function has an independent position within the organisation. The controller will be involved in decision-making on strategy and implementation in a timely manner. V. Organisations using financial derivatives have in place a clear description of the following relevant elements: a. authorities and mandates; b. internal control; c. internal accountability, role and involvement of the external accountant and d. role and involvement of the Supervisory Board	***5.3 Roles, responsibilities and authorities within the organisation*** The organisation shall define the responsibilities and authorities of all employees within the organisation. These responsibilities can relate to the spending of money, management or the hiring or firing of staff. To avoid misunderstandings between employees about who is to handle what tasks, it is recommended that one person should be made responsible for a specific task. Roles, responsibilities and authorities shall also be defined for the quality management. A management representative for quality as requested in the ISO 9001:2008 is no longer required. An important condition for an adequate functioning of the quality management system is to embed responsibility for quality in the line organisation, which means that each manager bears responsibility for the output of their processes or subprocesses. Any quality officer within the organisation is supportive to the line and cannot be responsible for the quality of the output of processes that is intended for the customer. To comply with Partos 9001, I) the organisation shall also establish who is authorised to handle expenditures of funds, in particular for the financing of projects or partners. In other words, who has the authority to decide how to allocate the money among partners and projects, and who has the power to sign these contracts? (II) the organisation shall set out how, in line with the intention of the Wijffels Code, responsibilities and authorities with respect to the managing and monitoring functions in the organisation have been designed. The organisation may describe these responsibilities and authorities in documents such as for instance: 1. The organisation's articles of association 2. Management rules, regulations or bylaws 3. Board rules, regulations or bylaws 4. Supervisory Board rules, regulations or bylaws

The agendas and the minutes of the meetings of the management, board and supervisory board will show if and how the supervising and managing functions have been separated. For the SBF Good Governance Code (SBF Code Goede Doelen), see https://goededoelen.nl/verantwoording-toezicht/codes-richtlijnen. On page 33 of this document describes the various models that can be used to set up the managing and supervising functions within the organisation, depending on its nature and size.

(III) the responsibility for financial policy and financial operations shall be borne by the highest levels of management or by the board.

(IV) the person who fulfils the control function has to be independent or provide feedback on budgets and on the organisation's financial policy and financial management. For instance, this person may freely criticise programme and project expenses.

Responsibilities and authorities are usually laid down in job descriptions, organisation charts, procedures and tables of authorities.

6 Planning

6.1 Responding to risks and opportunities

6.1.1

Risks and opportunities need to be identified at at least two occasions:

1. when drafting the long-term policy plan and the year plan;
2. when formulating or evaluating projects and programmes.

6.1.2

Risk management is described in process and job descriptions and is embedded in all aspects of the management of the organisation.

An organisation working with financial derivatives shall have set up a structure to control the risks associated with its use of financial derivatives.

6.2 Defining quality objectives and planning to achieve them

6.2.1

No specification, see ISO 9001

6.2.2

No specification, see ISO 9001

6.3 Planning changes

No specification, see ISO 9001

6 Planning

6.1 Responding to risks and opportunities

6.1.1

An analysis of the risks and opportunities should be made in preparation of the long-term policy plan and the year plans. Risks and opportunities can be identified for the various functions of the organisation, such as projects and programs, fundraising and communication, finance, IT, HR, facilities and quality management. Risk analysis examines the nature of risks, the likelihood that defined risks will occur and the acceptable level of risk. The risk analysis will result in an action plan to manage and monitor the risks.

The need to conduct risk and opportunities analyses on a regular basis should be laid down in procedures and descriptions of operational processes. Job descriptions should lay down which officials are responsible for the risk management. For instance, the control and monitoring of risks and opportunities can be incorporated into the existing management information system and in the operational management instruments based on it. ISO 31000 provides several guidelines for managing risk.

The risk analysis should be updated periodically, linking it, for instance, to the preparation of the annual plan.

The risks and opportunities of projects and programmes, especially the bigger ones, need to be analysed as well. When the organisation does not conduct an analysis of the risks and opportunities associated with a specific project or programme, it should explain why an analysis will not provide added value. Measures to respond to these opportunities and risks as well as efforts to monitor them (if necessary and relevant) can be incorporated into the regular project cycle. In other words: a risk analysis is conducted when developing the project plan; control and monitoring are incorporated in the regular monitoring and evaluation of projects or programs.

6.2 Defining quality objectives and planning to achieve them

6.2.1

The quality objectives communicate clearly what the organisation intends to achieve in terms of quality. The quality objectives have to be measurable and time-related. They have to be established for, or better still apply to, all processes, departments and positions within the organisation. For example, objectives could be related to increasing customer satisfaction, improving operations, improving specific processes, learning and improving, reducing complaints. The objectives need to be consistent with the quality policy. This means that the quality policy forms the basis for the quality objectives. So by achieving the quality objectives, the quality policy is also achieved.

It is recommended to incorporate the quality objectives into the general objectives of the organisation rather than as a standalone phenomenon. For instance, quality objectives can be part of the long-term policy plan, year plans and departmental plans.

6.2.2

Integrating the quality objectives in the general objectives (such as the long-term policy plan, the year plans and departmental plans) also enables the organisation to incorporate their implementation, monitoring and evaluation into the regular cycle.

6.3 Planning changes

Changes in the quality management system need to be planned carefully and to be carried out in a controlled way, much like a relocation to a new office or switching to new software. The organisation has to reflect on objectives, on the relations between the various parts of the quality management system, on resources required (such as money and training) and on roles, responsibilities and authorities.

7 Support

7.1 Resources

7.1.1 General

No specification, see ISO 9001

7.1.2 Staff

The organisation has an appropriate pre-employment screening of new employees and volunteers. The Roadmap Screening serves as a starting point here.

7.1.3 Infrastructure

No specification, see ISO 9001

7 Support

7.1 Resources

7.1.1 General

Resources needed to run the quality management system include money, manpower, software, knowledge and equipment.

Management shall determine which of the resources above are needed for the quality management system. On the one hand, it needs to be determined which resources can be supplied from within the internal organisation. On the other hand, it needs to be determined which resources are not available from within and need to be bought from third parties, such as training, software or consultancy. Including these resources in the annual budget and staffing plan would be logical.

7.1.2 Staff

For each component (including quality management) of the organization, one must determine how many employees are needed for this purpose. In addition, one must determine what competencies these employees must have in order to properly perform their tasks. This requirement can be met with a formation plan or formation overview and competence profiles and job descriptions. In the event of staff turnover or expansion of the organization, the necessary employees must be recruited.
The organisation must be able to trust that its future employee or volunteer has integrity and is reliable. This includes gathering information necessary to determine whether or not someone can be hired and to prevent “risk profiles” from re-employing with another organization within the sector. In this regard, the screening of a controller is different from the screening of a volunteer collector. The Roadmap Screening, found on the Partos website, serves as a starting point here.

7.1.3 Infrastructure

Existing organisations already have an infrastructure in place. Infrastructural changes and maintenance can be made visible in the annual budget. In addition, tasks and responsibilities with regard to the maintenance or renewal of the infrastructure should be assigned to employees within the organisation, for instance through job descriptions.

7.1.4 The environment of work processes

The organisation charts the risks for all employees sent to the South, and take appropriate measures to reduce these risks as much as possible.

The organisation must be aware of the working conditions, including health and safety conditions, at partner organisations and suppliers as part of its corporate social responsibility policy.

The members of Partos :
have an integrity system, including a Code of Conduct, which devotes attention to the following:

I) have a Code of Conduct which defines the standards and values of the organisation in a clear and concise manner. The code covers all aspects of integrity, as listed under b) below, defines what is considered unacceptable behaviour, and sets out how potential victims are protected and receive good care. The Code of Conduct is readily accessible and published on the website.

Misuse of power or position
a. Corruption.
b. Conflicts of interests and partiality (e.g. nepotism, favouritism).
c. Manipulation or unauthorised divulgence of information
Financial violations
d. Fraud.
e. Misuse or improper use of resources; theft.
f. Tax evasion or asset management/investment policy contrary to the organisational purpose and objectives.
Interpersonal violations
g. Unwanted intimacy, sexual intimidation and sexual violence.
h. Aggression, discrimination and bullying.

II) will translate their Code of Conduct into: guidelines and instructions for any people and parties who act on behalf of the organisation (such as service providers and partner organisations).

III) will assign overall responsibility for the integrity system to a director or management team member,, while assigning relevant supervision to a member of the supervisory body.

IV) have one or more sufficiently equipped staff members who are engaged in policy formulation, advice and practical implementation of integrity matters.

V) for the reporting of violations, have in place:
a. a person or unit to whom reports can be submitted in an easily accessible, safe and confidential way by staff, volunteers and other stakeholders

7.1.4 The environment of work processes

As far as the situation in the Netherlands is concerned, IC organisations can fulfil this requirement by meeting all occupational health and safety requirements (Arbo).

Employees who are sent to the South are more subject to risk than employees who are stationed in the Netherlands. This is why it is important to thoroughly identify the risks involved, from diseases to, in a worst case scenario, abduction and physical violence. The organisation shall take appropriate measures to reduce these risks as much as possible by defining a travel policy, health & safety policy or security policy (see http://www.opensecuritydocs.org/ for examples) or by providing employees who are deployed to foreign countries with suitable training.

In addition, the organisation pays attention to the working conditions of partner organisations and suppliers. To this end, a list of minimum conditions, such as no child labour and fair wages, shall be drafted (compliance with the Dutch Arbo regulations may be too ambitious in some circumstances).

The ISO-9001 standard comments on this paragraph, “A suitable environment may be a combination of human and physical factors, such as: a) socially (e.g. non-discriminatory, peaceful, non-confrontational);” Also given developments in the sector, Partos fleshed this out by asking for a functioning integrity system.

The practical application of the integrity system can be adapted to the nature and size of the organization. For more information about the practical application, see the Integrity System Guide, prepared on behalf of Partos and GDN.

An organisation is integrity-compliant if it consistently acts in accordance with justice, i.e. doing right by all people and organisations with whom it works.

I) The Code of Conduct forms the basis of the integrity system. The Code defines the actions and behaviours which will not be tolerated by the organisation and which may therefore result in disciplinary action/punishment.

III) and **IV)** Primary responsibility for the integrity of an organisation rests with its highest level of management. Next in line is the supervisory body (the board), followed by each and every member of the organisation’s staff. Management may opt to partially delegate responsibility to specific officers or bodies (or one or more integrity officers) within the organisation, and will give them the mandate to carry out whatever practical activities are required to ensure that all requirements are met.

V-b) The reporting system has an initial point of contact who acts as a portal to the integrity system: the person(s) of trust. The task of the person of trust is to provide first-line support to the victims or witnesses of integrity violations. All conversations with a person of trust are treated in the utmost confidence. The initial meeting with the person of trust serves several purposes. It is an opportunity for the employee concerned to tell his or her story, whereupon it becomes possible to determine whether it is about a potential integrity violation, if so, what the best possible course of action might be. The interests of victim and witness are paramount. Under no circumstances can the person of trust also be the person who receives formal reports within the integrity system, since this denies the employee the opportunity of deciding not to report the incident, whilst also making it more difficult to make referrals to other sources of assistance.

b. one or more persons of trust
c. formal arrangements with an external whistleblowers authority.

VI) have available capacity and expertise (either in-house or externally) to:
a. investigate reports
b. advise on proportional disciplinary action/punishment, including possible legal action
c. advise on appropriate victim support or compensation
d. take decisions on measures to be taken and implement them
e. advise on appropriate communication about any integrity violations.

VII) ensure that all target group, members of staff, volunteers and those acting on behalf of the organisation are aware of the Code of Conduct, guidelines and reporting procedures, and are alert to their proper application.

VIII) identify, at appropriately regular intervals, all relevant integrity risks.

IX) introduce a moral learning process, to include a system of regular moral deliberations about issues and dilemmas put forward by staff.

X) devote a part of the organisation's Annual Report to integrity, and include information about:
a. the manner in which the organisation complies with all above requirements
b. the number and nature reports about integrity violations and the action taken in response to those reports
c.reflection on the organisation's own integrity policy.

* The practical implementation of the integrity system can be adapted according to the nature and size of the organisation. A principle of 'apply or explain why not' must be observed.

V-a and c) The reporting system must have three separate channels through which a report can be submitted by any person who is the victim of, or witness to, an integrity violation. The first channel is the organisation's management. Where a report is made to the management, it is not possible to protect the identity of the person making that report. The second channel is through the Integrity Officer or Integrity body. It is then possible to protect the identity of the person making the report. The third channel must be external. Arrangements must be made with a whistleblower authority. It is then possible for an employee to report a suspected violation if he has no confidence in the organisation's management or integrity body. Clients, programme participants, volunteers, employees of partner organisations and other stakeholders within the chain must also be able to report suspected integrity violations. They will do so either through the Integrity Officer or Integrity body, or to the external whistleblowers authority.

VI) When the Integrity Officer receives a report (through any of the three channels) she will initiate a preliminary investigation, the purpose of which is to determine whether a full disciplinary investigation is warranted or whether some alternative form of action is necessary. If the Integrity Officer concludes that further investigation (by internal or external specialists) is warranted, she will make a recommendation to the director or to the member of the executive board responsible for integrity. The director makes the final decision about any disciplinary action/punishment.

VII) The production of the Code of Conduct, its dissemination among stakeholders and open discussion will have a preventive effect. This establishes the standards. Discussion will serve to resolve much of the ignorance of the rules that can lead to integrity violations. It is a question of clarifying precisely what is forbidden and the underlying reasons for it.

VIII) The organisation must be aware of the specific vulnerabilities of processes and functions that are particularly susceptible to certain types of violation. On the basis of this, the organisation should then conduct regular risk analyses. The risk analyses should be based on interviews, observation and scrutiny of relevant documentation, in order to gain an accurate picture of the situation on the workfloor, the immediate integrity risks and the factors within the broader context that are likely to exacerbate these risks. The analyses will give rise to recommendations for improvement of processes and process structure, controls and training for both management and staff.

IX) The embedding of a moral learning process within the organisation will support staff and managers who are required to take important, difficult and doubtful decisions. The organisation should provide training in moral judgement for all staff and managers. This will enable them to assess whether their own actions and decisions are in accordance with justice. The key here is the ability to carefully weigh the rights and interests of all stakeholders. It is this careful weighing that will ensure that a decision and subsequent action are in accordance with justice.

X) Organisations must develop a long-term communication strategy with regard to integrity. It is important to report on the slow-but-steady progress made in developing a fully functional and effective integrity system. Organisations should make clear that a better integrity system will in time lead to fewer integrity violations, although the number of reported incidents is likely to increase at first. If there is indeed an increase in reported violations, the organisation should present this as a sign of success. It is essential that truth and justice should be leading principles in all communications around integrity. The organisation must not exaggerate the progress it has made. It must report any setbacks and problems with the same candour as it reports its successes. It must also seek to avoid any unfair or disproportionate reputational damage to individuals.

7.1.5 Resources for monitoring and measuring	***7.1.5 Resources for monitoring and measuring***
7.1.5.1 General The organisation has an appropriate measuring system for carrying out baseline measurements, measuring and monitoring outputs and outcomes of projects and programmes and carrying out evaluations.	***7.1.5.1 General*** In this context, measuring refers to carrying out baseline measurements, measuring and monitoring outputs and outcomes of projects and programmes and carrying out evaluations. This requires the organisation to have an adequate M&E system in place, often alongside objectives in the form of adequate financial and operational indicators. It is important that quality criteria have been laid down to which measuring and monitoring activities refer. This includes criteria relating to timeliness, reliability, completeness, etc. Furthermore, it is important that the employees of the organisation itself as well as the partners in the South carrying out these measurements are sufficiently trained. The results of the measurements, monitoring activities and evaluations are usually laid down in reports.
7.1.5.2 Traceability of measurements No specification, see ISO 9001	***7.1.5.2 Traceability of measurements*** We recommend that this section should be excluded. This section is primarily intended for organisations that use measuring devices to measure the dimensions and condition of physical products. The purpose of this section is to ensure the measuring equipment is maintained and continues to give valid results. To exclude this section from the ISO certification, this can be indicated in the section on the scope of the quality management system in the quality manual. The exclusion of this section shall be accounted for in writing.
7.1.6 Knowledge within the organisation The organisation shall systematically share the lessons learned from project and programme evaluations and apply them in the development of new policies, programmes and projects.	***7.1.6 Knowledge within the organisation*** In IC organisations, the most important knowledge originates from courses, training, meetings, conferences and 'training on the job'. External knowledge that is obtained by the IC organisation and that needs to be shared mostly refers to new intervention strategies for projects and programmes, monitoring and evaluation techniques, project management and fundraising. This ISO section has added value especially in the context of sharing knowledge from lessons learned from project and programme evaluations. This learning may have taken place within the own organisation, between the own organisation and partners in the South and between the own organisation and fellow organisations (e.g. organisations belonging to the same consortium). Successful knowledge sharing in these areas can result in much more efficient and effective programmes and projects. It is recommended to include in the long-term policy plan and/or year plan how knowledge management is used to contribute to the realisation of the objectives of the organisation.

7.2 Competence	***7.2 Competence***
In addition to the requirements laid down in the ISO section, the following requirements shall be fulfilled: I) The requirements set out in the ISO section regarding competence, training and awareness of staff also apply to volunteers. II) An organisation using financial derivatives shall have a sufficient number of staff who are competent in this area, or purchase this professionalism (see Section 8.4)	Staff performing work affecting the quality of the end product needs to be competent to carry out the tasks required. In practice, this requirement applies to almost all employees in the organisation. These requirements include: a) The organisation shall determine the necessary education, training, skills and experience for each position within the organisation to ensure the work is carried out properly. These requirements are usually laid down in the job descriptions. b) When an employee does not (yet) meet the requirements specified, the organisation shall provide education or take other actions (e.g. on-the-job training or supervision by an experienced employee) to satisfy these needs. It is recommended to draw up an annual training plan. This can be a sheet of paper listing which employee will be taking what course, but it would be better to make a proper assessment of what training is needed to achieve the organisation's long-term strategic objectives. This information can serve as the basis for the training plan. c) The organisation shall evaluate the effectiveness of the actions taken. This means that the organisation shall determine whether the training provided has resulted in the employee acquiring the skills and knowledge necessary to perform the work properly. It would be logical to include this evaluation in the performance or appraisal review by the manager. d) The organisation shall maintain appropriate records of education, training, skills and experience by requesting CVs from employees and keeping a list of which employees took what training, courses, etc. Some organisations also ask for diplomas and certificates of courses and trainings. However, in practice this often proves to be difficult and time-consuming. Work performed by volunteers in IC organisations also often affects the quality of the end product. For this reason, the requirements above also apply to unpaid employees. The requirements for volunteers in terms of competency, training and awareness should, however, be proportionate to the tasks performed and roles played by the volunteers and will therefore differ from the requirements for staff on the payroll.
7.3 Awareness	***7.3 Awareness***
No specification, see ISO 9001	Employees must be aware that the performance of their duties contributes to the quality of the final product and the achievement of quality objectives and quality policy. This can be done by regularly putting the subject of "quality" on the agenda at work meetings, for example. Employees should also be aware of the consequences of not meeting the requirements of the quality management system. This can lead to dissatisfied customers, but also to the loss of the ISO certificate and thus no longer meeting donor/contributor requirements.
7.4 Communication	***7.4 Communication***
No specification, see ISO 9001	To ensure effective internal communication, appropriate communication processes should be established within the organisation at different levels. Examples of communication processes include MT meetings, meetings within and between departments, bilateral meetings, etc. Quality and quality management should be frequent agenda items, either as separate items, or, better still, as topics integrated into regular agenda items.
7.5 Documented information	***7.5 Documented information***

7.5.1 General No specification, see ISO 9001	***7.5.1 General*** In contrast to the previous ISO 9001 standard, the organisation is no longer under the obligation to lay down procedures in writing (see under b)) and preserve such documents. However, procedures laid down in writing may be necessary to ensure effective work processes. For instance, they may help to ensure that each staff member performs important tasks in the same way, that quality checks are carried out correctly or that tasks are passed on adequately. Nevertheless, it is up to the organisation to decide on methods and techniques to guarantee adequate work processes, such as an automated workflow system, other types of software designed to support work processes, videos or thorough training. As employees become better educated and trained, there is usually less need to lay down specific procedures. There is, however, an obligation to lay down certain other aspects of the activities of the organisation, such as the quality policy and quality objectives, the scope of the quality system and the results of measurements, the required competences and the records on performance and appraisal reviews (see under a)).
7.5.2. Creating and updating documents No specification, see ISO 9001	***7.5.2. Creating and updating documents*** In order to manage documents effectively, it is recommended to establish rules, which may then be laid down in a procedure. In this section, 'documented information' refers to all documents that form part of the quality management system, such as procedures, task instructions, formats and forms. The following is required: a. Ensure that the nature and current revision status of the quality document are identified or described (minimal requirements: title, version number and/or time stamp). This prevents staff from using outdated versions of documents. a. The organisation shall ensure that documents are formatted adequately. For instance, electronic and paper documents need to have a similar design so information can easily be recognised and retrieved (title, version, usage). b. Approve quality documents for adequacy prior to issue. (This shall be done by an authorised person.) A table of contents listing all documents that form part of the quality management system may help to maintain an overview. The table of contents should at least contain the names and version numbers of the quality documents.
7.5.3 Managing documented information No specification, see ISO 9001	***7.5.3 Managing documented information*** To ensure effective internal communication, appropriate communication processes should be established within the organisation at different levels. Examples of communication processes include MT meetings, meetings within and between departments, bilateral meetings, etc. Quality and quality management should be frequent agenda items, either as separate items, or, better still, as topics integrated into regular agenda items.

8 Implementation

8.1 Operational planning and control

The following additional specifications apply to paragraph a) of this ISO section:

a1) Assessable quality objectives should be determined at output and outcome levels for projects and programmes. Where possible, quality objectives must also be determined at impact level;

a2) Projects and programmes should be based on a change strategy that specifies how the intended outcomes and impact are to be attained;

a3) Policy regarding the capacity development of partner organisations should be focused on independence;

a4) A baseline measurement should be conducted if the costs of a baseline measurement are proportionate to the costs of the project or programme, the progress of the project or programme should be periodically monitored and the project or programme should be evaluated upon completion.

8.2 Requirements for products and services

8 Implementation

8.1 Operational planning and control

This requirement applies to the planning, implementation and control of processes associated with projects and activities that are carried out on behalf of the customer. First of all, the organisation shall plan and develop the processes (such as fundraising, subsidy applications and project realisation) when it concerns existing organisations. In executing these processes, the organisation shall determine or plan the following:

a) Customer requirements (time, output, outcome, impact, quality, costs) and general quality requirements that the projects and programmes need to meet. These requirements are laid down in project plans and contracts and determined with subsidy providers and partners.

a1) In addition to this, Partos 9001 requires that project plans specify the objectives at output and outcome levels. Where possible, the objectives must also be determined at impact level.

a2) In order to significantly increase the attainability of the planned outcomes, it is very important that a change strategy is developed that specifies how – and based on which assumptions – input, activities, outputs and outcomes are interconnected. The Theory of Change methodology may be used for this (http://www.theoryofchange.org).

a3) This Partos 9001 requirement is self-evident.

b1) The organisation shall determine when processes function well. This is especially important when the result of projects or programmes (output/outcome) is not directly evident.

b2) The organisation shall plan processes or activities that demonstrate that the project or activity meets the quality (and other) requirements. In other words, monitoring and evaluation activities need to be planned, for example in the project plan (see Partos 9001 on the left). In addition, Partos 9001 requires a baseline measurement if the costs of a baseline measurement are proportionate to the costs of the project or programme.

c) A budget (including required staff) should be drawn up for the execution of projects and programmes.

d) The organisation shall implement those processes or activities (monitoring and evaluation activities) that can provide evidence that the project or activity meets the quality (and other) requirements.

e) The results of the monitoring and evaluation activities shall be recorded in the form of digital (or other) reports that specify the results and conclusions.

The output (result) of the above steps often consists of a project plan or activity plan and corresponding budget and, if applicable, a contract with the financier. In addition, a monitoring and evaluation plan may be created when this is missing or insufficiently discussed in the project plan.

In the event that timelines cannot be met, it is of course possible to revise the approach or planning in consultation with financiers and partners. All new agreements must be confirmed in writing or adjusted in the contract.

Any activities in the project or programme that are executed by partners should be monitored and adjusted where necessary.

8.2 Requirements for products and services

8.2.1 Customer communication

The organisation shall minimally inform all customer groups and stakeholders about the following subjects (when relevant):

I. Management and administration costs.
II. The projects' and programmes' financial and substantive progress and results.
III. Lessons learned from past mistakes and failures.
IV. Disbursement of funds to the goals for which these funds were raised.
V. An 'in control statement' by the board, laid down in the annual report, with regard to setup, existence and implementation of risk management and control systems, as well as risk insight and evaluation (see Section 6.1.2 on risk management);

When requested by stakeholders or in the event that the organisation has received €250,000 or more in grants by the Netherlands Ministry of Foreign Affairs, the organisation will use the IATI open data standard, following the rules laid down in the document "How to use the IATI Standard, Publication Guidelines for Partners, Contractors and Suppliers of the Ministry of Foreign Affairs".

8.2.1 Customer communication

The organisation shall determine and implement effective arrangements for communicating with customers regarding its activities, projects and programmes. For financiers, clients and partners, effective arrangements can take the form of periodic consultations and progress reports and communications. Communication with the target group generally takes place through partner organisations in the South. When the projects or programmes in the South are executed by the organisation itself, communication with the target group can be detailed further in the project plan. Communication with supporters and donors can take place by e-mail, newsletters, websites and surveys or by enquiries.

To comply with Partos 9001, the following requirements with regard to customer communication must be met. It is common practice to include information on this subject in the annual accounts and the annual report. This also applies to II) through V). Information about the financial and substantive progress of projects and programmes, as well as lessons learned from past mistakes and failure, is also often communicated to financiers in reports and through consultations. Donors and supporters are usually informed by newsletters.

IATI is the international standard in the IC sector when it comes to making project information publically available. It is an international initiative in which donor organisations, governing bodies and NGOs collaborate to improve IC transparency. Substantial donors, such as the Ministry of Foreign Affairs, require the use of IATI when subsidies exceed €250,000.

8.2.2 Determining requirements for products and services

In addition to what is specified under a2), the following requirements are crucial to the quality of the end product:
I. Context analyses and change strategies form the basis for defining programmes and projects;
II. The approach with regard to projects and programmes must be tailored to the target groups and meet their needs and wishes;
III. Projects and programmes must be coordinated with other organisations that focus on the same target groups with similar or complementary programmes or projects;
IV. Where relevant, cooperation must be sought with other stakeholders;
V. Projects and programmes are developed in consultation with partners and other stakeholders;
VI. Projects and programmes must be aimed at achieving a lasting improvement or can be continued by partners and/or target groups without external guidance (i.e. a durable solution);
VII. Capacity development must be aimed at achieving durable capacity development solutions for partners.

8.2.2 Determining requirements for products and services

The organisation shall identify and meet all requirements that are important for the effective execution of projects and programmes. These requirements apply to the following three categories:
a) Requirements specified by the customer. These requirements are usually laid down in contracts and project plans. Purchase requirements as specified by large (or other) donors, such as requirements with regard to reporting, quality management and the organisation, should not be forgotten.
b) The execution of projects and programmes by the organisation shall meet any statutory requirements that may apply, including regulatory policies of sector organisations and local legislation in the country where the project or programme is carried out.
c) Requirements not specified by the customer but necessary or customary for quality assurance or intended use of the end product within the IC sector. A large number of these requirements have been included in Partos 9001 in the left column. Any additional requirements that are important to a specific project or programme that have not been included in Partos 9001 shall also be determined. 'Organisations' under III) is to be understood as Dutch, as well as international and local organisations. Any additional requirements determined by the organisation may also apply.

The organisation shall live up to any promises made in its communications to and contracts with donors and supporters.

8.2.3 Review of requirements for products and services

No specification, see ISO 9001

8.2.3 Review of requirements for products and services

8.2.3.1 The organisation must be certain that it is able to meet all requirements defined by the customer prior to entering into a contract for the execution of a project or programme. This means that all product requirements stated in the contract, project plan or subsidy request must be reviewed for feasibility. It is important that the person responsible for the project or programme consults with all parties involved in the execution of the project or programme (employees, other departments, partners in the Netherlands and in the South) to assess whether the planning, results and budget are feasible. Other projects and programmes to be executed should also be taken into account in this feasibility check.

	The organisation shall: a. Review all product or programme requirements (results, approach, planning, costs, etc.) imposed by the customer or organisation. b. Review all product or programme requirements not specifically imposed by the customer but necessary to attain the intended objectives and usual in the IC sector. Many of these objectives are laid down in the Partos 9001 requirements in 8.2.2. c. Review all product or programme requirements (results, approach, planning, costs, etc.) defined by the organisation itself. d. Review all requirements corresponding with any applicable statutory or regulatory requirements. e. Review any requirements related to the contract, project plan, subsidy request etc. that differ from those previously expressed by the customer. The organisation should consult with the customer to resolve any requirements related to contract, project plan, subsidy request etc. that differ from those previously expressed by the customer. Verbally communicated requirements should also be recorded, reviewed and included in contracts etc. ***8.2.3.2*** The conclusions of the review or check must be recorded, for example by signing contracts and subsequently by having the parties involved in the work approve the planning or project plan in a project meeting (of which the minutes must be kept) or by e-mail. Interim changes agreed upon with the customer must also be recorded, for example in addenda in contracts and in adapted project plans agreed with the customer, for instance when changes in context necessitate a different approach.
8.2.4 Changes in requirements for products and services No specification, see ISO 9001	***8.2.4 Changes in requirements for products and services*** When a project or programme is adapted during its execution, all documentation associated with the project or programme should be changed accordingly. This includes contracts, project plans, other planning, M&E information and training documentation. All parties involved should be notified, such as the customer, project employees within the organisation and partner organisations in the North and South. Changes may occur when better approaches for interventions become available, but also when changes in context or statutory or regulatory requirements necessitates this. One can remain up-to-date with the latter kind of change by subscribing to a newsletter from the relevant ministry or from organisations providing this service on a commercial basis.
8.3 Design and development of products and services	***8.3 Design and development of products and services***
8.3.1 General No specification, see ISO 9001	***8.3.1 General*** This section with subsections can easily be excluded. Originally, this section was intended for organisations with a research & development department. In other words for organisations that develop entirely new products. IC organisations carry out projects and programmes that are different every time. Nevertheless, these projects and programmes resemble each other in approach and the type of intervention provided. For IC organisations that regularly design and carry out new interventions with new processes, it may be useful to complete this ISO section and establish a procedure. This section may also be relevant when cooperating with new parties (e.g. companies) who have requirements that contrast greatly with what is usual for the organisation.

	To exclude this section from the ISO certifications, this must be indicated in the section on the scope of the quality management system in the quality manual. However, this exclusion should now be well-founded. ***8.3.2 Planning of design and development*** If Section 8.3 on design and development applies, the IC organisation shall determine the steps and preventive and corrective actions that are required to develop interventions, projects or programmes that are entirely new to the organisation.
8.3.3 Design and development input No specification, see ISO 9001	***8.3.3 Design and development input*** This is where the organisation determines the input for the development of the new interventions or new types of products or programmes. The input shall include: a. Functional and performance requirements (e.g. output, outcome and impact; b. Evaluations and other information gained in the development of new interventions; c. Applicable statutory and regulatory requirements; d. Standards and code of conduct of Partos and other organisations, such as Goede Doelen Nederland. e. If applicable: information gained from prior similar interventions, projects or programmes; and f. A reflection by the organisation on how to deal with the consequences for the target group when a project or programme fails to meet the intended outcome and impact. All of the above must be sufficiently documented and contradictions must be resolved. Digital or written records of this information shall be maintained.
8.3.4 Preventive and corrective actions for design and development No specification, see ISO 9001	***8.3.4 Preventive and corrective actions for design and development*** At suitable stages during the design and development process, systematic reviews of design and development shall be performed in accordance with planned arrangements to evaluate whether the to-be-developed intervention, project or programme fulfils requirements (i.e. can they help to achieve the desired output, outcome or impact?). In addition, the organisation shall identify any problems and propose necessary actions to resolve them. Participants in such reviews shall include representatives of functions concerned with the design and development stage(s) being reviewed. Digital records of the results of these reviews shall be maintained. Paragraph c) lays down that verification activities should be executed. This verification is performed to ensure that the output, in other words the developed intervention, project or programme, meets the input requirements of the design. In short: is the result in accordance with the design? For example, during an IC intervention, the organisation may test whether the pilot project has reached 1,000 people within 4 weeks as stated in the project design plan. Digital or written records of the results of the verification shall be maintained. Paragraph d) lays down that activities must be performed to validate the design and development of the intervention, project or programme. This validation is performed to ensure that the developed intervention, project or programme is suitable for practical use. For example, during an IC intervention, the organisation may test whether the pilot project manages to produce the intended output (e.g. knowledge gained by the target group) or outcome (e.g. change in behaviour).
8.3.5 Design and development output No specification, see ISO 9001	***8.3.5 Design and development output*** The organisation shall determine and record the output, i.e. the design of the newly developed intervention, project or programme. The design and development shall be provided in a form that enables verification against the design and development input. The output shall be demonstrably reviewed for adequacy by an authorised official. Digital or written records of the results of these reviews and approval shall be maintained.

8.3.6 Changes related to design and development	***8.3.6 Changes related to design and development***
No specification, see ISO 9001	Design and development changes, if any, shall be identified and records maintained, either digitally or in writing. All changes shall be reviewed. The review of design and development changes shall also include evaluation of the negative effect of the changes on constituent parts of the intervention, project or programme. For example, what is the effect of changes in course material on the training of the teachers? Digital or written records of the results of changes and any necessary actions shall be maintained.
8.4 Control of processes, products and services supplied externally	***8.4 Control of processes, products and services supplied externally***
8.4.1 General	***8.4.1 General***
In addition to the requirements in this ISO section, the organisation establishes: I. A selection procedure for partner organisations; II. Criteria for selection and evaluation of partner organisations; III. Periodic reviews of partner organisations.	The organisation shall ensure that all products and services conform to specified requirements. The products or services that are purchased or are executed by third parties for – indirect – customers of the organisation often have a – significant – effect on the execution and/or the result of the activities, projects or programmes. It is therefore important to set requirements for this. The type and extent of requirements shall be dependent upon the effect of the purchased products or services on the execution and/or result of the activities, projects or programmes. In the case of partners, contractors and evaluators, for instance, it is of great importance to set good requirements and make a careful selection in accordance with procedures. However, for products such as office supplies, purchasing procedures are less important because they are not included in the organisation's own products and services. When third parties take part in the execution of projects or programmes or supply services or goods for these projects or programmes, the organisation shall: a) Determine if suppliers, based in the Netherlands or in the South, to whom the execution of projects is contracted out, will be able to supply products or services in accordance with the organisation's requirements. Criteria for selection in advance for each type of supplier, either digitally or in writing, need to be laid down. Examples of criteria include: good references, product quality, price, industry experience and delivery time. Digital or written records of the results of evaluations shall be maintained. Considering the huge influence of partner organisations, Partos 9001 requires that a partner selection procedure needs to be created and implemented specifically for partners. This is an elaboration of A) and B), but tailored specifically to partners. It is advisable to include the selection criteria and assessment criteria for partner organisations in this procedure.
	b) To prevent the same suppliers being constantly re-evaluated, the organisation can create a list of 'approved suppliers'. Approved suppliers are suppliers that have been evaluated and approved in the past, or with whom the organisation had a positive experience before the quality system was implemented. When such a list is used, it is important that suppliers on the list are evaluated annually for compliance with requirements. If suppliers do not comply, they need to be removed from the list or agreements for improvement must be reached.

8.4.2 Type and extent of control	***8.4.2 Type and extent of control***
The organisation establishes a financial monitoring system for organisations to which money or resources are allocated. When the organisation intends to visit projects or carry out financial or substantive audits at partner sites, the organisation should lay down the intended arrangements in the contract.	Prior to accepting or using a supplied product, the organisation should ensure the purchased product meets specified purchase requirements. If this is not the case, action shall be taken. In the case of services (projects and programmes), this is done during execution (by means of monitoring, for instance by visits, Skype conferences and reports) and afterwards (by means of evaluation). It is a Partos 9001 requirement that a financial monitoring system is established for organisations to which money or resources are allocated. For partner organisations this means, among other things, that the financial monitoring must be proportionate to the risk and allocated amount. In the case of minor risks and small amounts, a written account after the fact may suffice. In the case of large risks and large amounts, financial monitoring can include regular financial progress reports, checking of receipts, financial audits at partner sites and audits by an accountant. When the organisation intends to visit projects or carry out formal inspections, financial audits or substantive audits at partner sites, the organisation should lay down the intended verification arrangements in the contracts to allow the partner to make preparations.
8.4.3 Information for third party suppliers	***8.4.3 Information for third party suppliers***
Contracts with partner organisations contain clearly formulated objectives, tasks, responsibilities, authorities, competences and qualifications of staff used, methods of monitoring and evaluation, and terms and conditions.	The organisation shall establish the requirements for the products or services (purchased from partners) to be purchased, either digitally or in writing. This is done by means of quotations, purchase requisitions, order confirmations or contracts. These documents shall include: a. Requirements for approval of the product or service in terms of execution, form, quality, procedure, etc. b. The method by which products and services are approved. In the case of projects and programmes, for example, this may include the approval of progress and final reports, visits, project audits and evaluations reports. c.Requirements for qualifications and experience of staff used for the services to be provided by the supplier. d. The method by which contact is maintained with, for example, partners during the execution of projects and programmes. This may include contact by telephone, Skype conferences, visits, and meetings. Contact is maintained in order to facilitate support, capacity building, monitoring and evaluation. e. Requirements for monitoring and evaluation must be made clear. f. Visits to projects and audits of activities by partners that the organisation wishes to carry out . The organisation shall first check the adequacy of specified purchase requirements in relation to the activity, project or programme before it communicates them to the supplier. Please take into account that the donor may also enforce requirements that need to be carried over to the organisation's own purchase requirements.
8.5 Production and the supply of services	***8.5 Production and the supply of services***

8.5.1 Control of production and the supply of services

The organisation should minimally have:

I. An adequate financial and administrative organisation;
II. A balanced long-term budget (at least T+3) including underlying assumptions based on the long-term policy plan;
III. A planning and control cycle, including appropriate budget management;
IV. A financial supervision system for organisations to whom funds or resources are allocated;
V. A review cycle, including substantive and financial reports;
VI. An anticorruption and fraud policy;
VII. A sanction policy with regard to parties to whom funds or resources are allocated;
VIII. A code of conduct establishing internal rules and good manners and including integrity policy and diversity policy;
IX. Professional procedures and methods for performing context analyses, change strategies and monitoring & evaluation;
X. A system to ensure that projects and programmes meet the purchasing requirements specified by the donors;
XI. Information published in accordance with IATI standards shall be tested for quality, reliability, security and privacy risks prior to publication. This scope of this test is laid down in and/or guaranteed by the quality system.

8.5.1 Control of production and the supply of services

The organisation shall carry out activities, projects and programmes under 'controlled conditions'. Controlled conditions refer to:

a. The availability of information that describes the characteristics of the product as well as its intended result. For example, project proposals, project applications or project plans specifying the project's objectives, output, outcome and, if applicable, the project's impact. Partos 9001 requires a review cycle, including update and financial reports (V). For example, update and financial reports of projects and programmes, as well as annual reports.
b. The availability and use of suitable methods for monitoring and evaluation. Partos 9001 requires a balanced long-term budget for the current year and three subsequent years (II). The budget shall include the assumptions (and associated uncertainties) on which certain items are based, such as expected subsidies or projected growth of the organisation. Any deficits may be prepared for by including a financial buffer in the budget.
c. (III) A planning and control cycle, including appropriate budget management and (IV) a financial supervision system for organisations to which money or resources are allocated (see Section 8.4.2). Monitoring and evaluation tools and system can also be considered.
d. The execution of monitoring and measurement at suitable times. The baseline measurement, monitoring and evaluation of projects and programmes should take place at a suitable time.
e. The use of a suitable infrastructure and environment. Partos 9001 requires an adequate financial and administrative organisation (I). IT is also important, as well as appropriate transport vehicles and medical equipment when employees are posted abroad on aid missions,
f. The projects and programmes must be carried out by qualified staff.
g. Extra validation activities shall be carried out for projects or programmes of which at the time of completion it can not be established whether the intended result (e.g. outcome and impact) has been reached. If this cannot be determined at the time of completion, measures shall be taken to show that the activity, project or programme advance in such a way that the intended result will most likely be reached. This can be done by:
    i. Creating, reviewing and approving interim update and financial reports, as well as final reports. These must show that the activity, project or programme was carried out according to plan and all interim objectives were reached.
    ii. Ensuring that the equipment (IT, transport, medical equipment, etc.) and staff qualifications and experience is such that the intended goals can be reached. This should be included in the project plan.
    iii. Using specific methods and procedures as laid down in procedures and work instructions.

h) Measures shall be included to prevent human error (and fraud). Partos 9001 requires (VI) an anticorruption and fraud policy, (VII) a sanction policy, (VIII) a code of conduct establishing internal rules and good manners and including integrity policy and diversity policy, and (IX) professional procedures and methods for performing context analyses. Partos 9001 also requires (X) a system to ensure projects and programmes meet the purchasing requirements specified by the donors. This requirement can be met by including an additional check in the project execution procedures. Lastly, it is recommended to use procedures and work instructions for the execution of projects and programmes.

	i) The introduction of release, delivery and post-delivery activities. For example, the official transfer of the project to partners in the South who will continue the activities independently, or the formal completion of a project, with final reports to financiers and partners.
See ISO 9001:2015, Section 8.5.1 under e,f No specification, see ISO 9001	***See ISO 9001:2015, Section 8.5.1 under e,f***
8.5.2 Identification and traceability No specification, see ISO 9001	***8.5.2 Identification and traceability*** Where identification is a requirement, the organisation shall ensure all documents and materials related to the project are coded with a unique project code. Another option is to assign a project code to all digital (or other) folders and to store all corresponding documents in these digital (or other) folders. In this case, it is not necessary to code each individual document.
8.5.3 Property of customers or third party suppliers No specification, see ISO 9001	***8.5.3 Property of customers or third party suppliers*** This section applies to property made available by the customer (financier, sponsor or partner organisation) for the execution of an activity, project or programme that remains the physical or intellectual property of the customer, for example transport vehicles, buildings or address databases. The organisation shall exercise care with customer property and take measures to this end to ensure physical property is returned to the customer undamaged after use. As far as intellectual property is concerned, the organisation shall respect privacy (in the case of address databases) and copyrights. If any customer property is lost or damaged, the organisation shall report this to the customer and maintain records of this. If this ISO section applies, it will mostly concern resources purchased with donor money for a project or programme (e.g. a vehicle used for the project). If this has not been determined in the contract in advance, then the organisation and donor must discuss at the end of the project what to do with the resources (e.g. the car).
8.5.4 Preservation No specification, see ISO 9001	***8.5.4 Preservation*** This section has especially been developed for the preservation of physical products during temporary storage in a warehouse or factory. For IC organisations in the Netherlands, products mostly involve the exchange of knowledge, information and digital (and other) documents. The organisation shall take measures to preserve digital information by back-ups, virus protection and access control. Archiving procedures see to it that paper documents are protected, for example by setting requirements for storage (i.e. not in a damp basement, etc.). In the case of emergency aid, a good example would be the logistics surrounding relief supplies.
8.5.5 Post-delivery activities No specification, see ISO 9001	***8.5.5 Post-delivery activities*** Post-delivery activities for projects and programmes of IC organisations will consist mainly of answering questions and providing occasional extra services once a project or programme is operated independently by partner organisations.
8.5.6 Controlling changes	***8.5.6 Controlling changes***

No specification, see ISO 9001	Changes may occur in a project or programme when a donor changes his requirements, when the context of the project or programme changes or when interventions do not have the intended effect. These changes, which lead to a revised project plan, must be evaluated. Digital or written records of the results of these evaluations and of measures taken must be maintained. If any changes occur during the execution of a project or programme, these changes shall also be communicated to the donor/financier, often by changing the contract or adding an addendum. After the changes have been evaluated and approved, they need to be implemented with care. This also means that any changes must be carried over towards partners correctly, including by new agreements and contracts. Partner contracts often include a clause that provides that changes in a donor contract, changes in context or statutory or regulatory changes may be carried over to the partner contract.
8.6 Release of products and services The organisation shall monitor its projects and programmes and evaluate them in a suitable manner.	***8.6 Release of products and services*** The organisation shall demonstrate the ability of the process output (e.g. the execution of a project or programme) to achieve planned results. Partos 9001 requires the organisation to apply suitable methods for monitoring and evaluating all projects and programmes. One example of a suitable evaluation method is that for a project of several millions of euros an evaluation study is conducted by independent evaluators to determine the current status in relation to the starting situation (based on a baseline measurement). Such a study may cost several tens of thousands of euros. Generally, up to 5% of the total budget is spent on monitoring and evaluation. For larger projects and programmes, the average is approximately 2%. For a 5,000 euro project it may suffice to conduct a meeting – of which minutes are kept – in which the results and learning experienced are discussed with key stakeholders. A project is not concluded until the customer has received and approved the evaluation report.
8.7 Control of nonconforming products No specification, see ISO 9001	***8.7 Control of nonconforming products*** This section has been developed mainly to ensure that physical products that do not conform to product requirements are identified and controlled to prevent their unintended use or delivery. For example, to ensure that a new bicycle with damaged paintwork is not delivered to a bicycle shop. In the case of IC organisations that carry out projects and programmes, nonconformities and problems are resolved during the course of the project. When practical application or reports indicate that project targets will not be met should the approach remain unchanged, the organisation shall take action to make adjustments. When this is not possible, the plan should be adjusted in consultation with the customer (financier).

9 Performance evaluation

9.1 Monitoring, measuring, analysing and evaluating

9.1.1 General

The organisation applies suitable methods for the planning, monitoring and evaluation (PM&E) of its projects and programmes. The PM&E system fulfills the following criteria:

1. Generates usable and valid data;
2. Provides insight into the input, output, outcome and, when possible, the impact of projects and programmes;
3. Includes a baseline measurement if the costs of such a study are proportionate to the costs of the project or programme;
4. Makes adjustments to projects and programmes when necessary;
5. Evaluates projects and programmes in a suitable manner;
6. Defines project and programme objectives that can be evaluated;
7. Is able to comply with donor requirements.

The organisation:

I. Is committed to effectiveness both in its own internal organisation and in projects and programmes;
II. Employs standards for management and administration costs to ensure these costs remain proportionate to the expenditure on objective-related projects and programmes geared towards achieving the objective;
III. Employs standards for fundraising costs to ensure these costs remain proportionate to the expenditure on projects and programmes geared towards achieving the objective.

9.1.2 Customer satisfaction

No specification, see ISO 9001 and the definition of 'Customer' in Terms and definitions

9 Performance evaluation

9.1 Monitoring, measuring, analysing and evaluating

9.1.1 General

This section sets out that the organisation will plan and implement the required monitoring, measurement, analysis and improvement processes. This includes the monitoring and evaluation of projects, keeping figures on fundraising performance, the effects of donor communication, customer satisfaction and the result of any training provided. In this context, monitoring can also mean that the execution of processes is monitored on a regular basis or that, through bilateral consultations with employees, insight is obtained into whether or not the processes run smoothly. Measurement applies to the gathering of figures.

Partos 9001 has a number of additional specific requirements for measurement, monitoring, analysis and improvement. Firstly, Partos 9001 has specific requirements regarding the PM&E system, i.e. the way in which measurements are performed and changes are implemented (see criterions 1 through 7 in the left column).

Additionally, Partos 9001 has a number of extra requirements related to what measurements should be performed.

I. The organisation shall demonstrate a commitment to effectiveness, i.e. efficiency, both in its internal organisation and in projects and programmes (e.g. in terms of overhead costs, management and administration costs, travel costs and communication costs).
II. The organisation has defined what percentage of the total costs is made up of management and administration costs (see Guideline 650 for the preparation of financial statements). In practice, this is usually between 6 and 9 per cent. However, this may not be feasible for smaller organisations, resulting in higher percentages. Note: higher percentages must be explained. The organisation shall make regular calculations of management and administration costs (e.g. in the annual financial statements). When these costs exceed the set standard, action must be taken to reduce costs.
III. The organisation shall determine what percentage of fundraising revenues goes towards the fundraising costs. Until the end 0f 2015, the norm of the Central Bureau on Fundraising (CBF) was set at 25%. Partos stipulates that the fundraising costs be reasonably proportionate to the expenditure on projects and programmes geared towards achieving the objective. When this exceeds 25%, the organisation must be able to explain why this is reasonable. The organisation shall make regular calculations of fundraising costs (e.g. in the annual financial statements). When these costs exceed the set standard, action must be taken to reduce costs.

9.1.2 Customer satisfaction

The organisation shall monitor information relating to customer perception as to whether the organisation has met customer requirements for the services provided and the manner in which these services have been made available (see Terms and definitions and Section 5.1.2). This can be done in the following ways:

a. Donors and supporters: large-scale quantitative research with the aid of questionnaires, either written, online or from telephone interviews; qualitative panel research (e.g. group discussions). Collected data shall be reported.
b. Companies and institutes, large donors: by personal consultations, if so desired as part of a multi-subject discussion. Asking open questions on how the results, cooperation and relationship are perceived often yields better results than using questionnaires. A report (brief if possible) should be made to present the results. When more than one discussion has taken place, a general outline will suffice.

	c. Partner organisations: personal consultations are to be preferred. In the case of multiple partners, this can be done with the aid of questionnaires, either written, online or from telephone interviews. d. The target group, provided the organisation has direct contact with the target group: large-scale quantitative research, storytelling (target group members' personal experiences) or qualitative panel research. It goes without saying that the research method must be adapted to the needs and abilities of the target group (level of education, comprehension of the questions, socially desirable answers, etc.). When the organisation does not have direct contact with the target group, it is recommended that the organisation's partners should be asked to perform customer satisfaction surveys.
9.1.3 Analysis and evaluation No specification, see ISO 9001	***9.1.3 Analysis and evaluation*** The organisation shall determine, collect and analyse appropriate data in order to, on the one hand, demonstrate the suitability and effectiveness of the quality management system and all related work processes and, on the other hand, to identify where improvement of the effectiveness of the quality management system (and the work processes) can be made. The analysis of data shall minimally provide information relating to: a. Compliance with product requirements. It is important to determine whether the monitoring and evaluation reports demonstrate compliance with the requirements laid down in the subsidy application, contract or project plan. b. Customer satisfaction (see Section 9.1.2). The organisation must determine what aspects of the organisation and its projects and programmes the customer is satisfied with, and where improvements are needed. c. Performance and effectiveness of quality management system. It is important that the quality management system fulfils its intended purpose. In other words, is the quality policy being implemented and are the quality objectives being achieved? Do audits demonstrate that work is performed according to approved procedures and work instructions? Are projects and programmes correctly monitored, evaluated and adapted? Do projects and programmes achieve intended results? d. Effectiveness of plans. For example, the implementation of policy plans, plans for projects and programmes and plans for improving the organisation. Monitoring systems will provide suitable information. e. Risks and opportunities. With regard to risks, analysis refers to the preventive and corrective actions to prevent or mitigate risks. With regard to opportunities, analysis refers to plans and measures to seize any opportunity that may occur. Monitoring systems will provide suitable information (see Section 6.1). f. Performance of suppliers and partners. Periodic analysis (see Section 8.4) shall be performed to ensure that third party organisations, for example suppliers and partners (those with whom cooperation often takes place) supply products of adequate quality, on time, with the required service, etc. If suppliers or partners perform inadequately, action must be taken to improve matters. See also Purchasing procedures. g. Improvements. If the quality management system does not perform up to its intended standard, plans should be made for improvement. A quality management system can be evaluated through management review, audit results, customer satisfaction reports and monitoring and evaluating projects and programmes.
9.2 Internal audit No specification, see ISO 9001	***9.2 Internal audit*** An internal audit is a check performed by an employee to determine whether or not the quality management system has the intended effect and the relevant procedures are followed.

	An audit consists of an interview, conducted by the auditor (an employee trained for this purpose), in which another employee is asked to produce evidence to verify compliance with certain requirements. This evidence is checked by the auditor through digital (and other) documents or by consultations with other employees. The auditor determines whether the quality management system as implemented by the organisation conforms to planned arrangements and ISO requirements. The organisation shall plan an audit programme that specifies the exact subject of the audit, usually for a period of one year. Important processes (e.g. project implementation) are to be audited more frequently than low-risk processes (e.g. documentation management). If processes or departments deviate considerably from what is required by the quality management system, they shall be included in the audit planning more often than processes or departments that conform to the quality management system. The audit criteria, scope, frequency and methods shall be defined by the quality officer. **PLEASE NOTE**: It is important that the organisation's compliance with the Wijffels Code (in the context of management processes) be checked annually and included in the audit planning. Auditors shall not audit their own work. Auditors should preferably not audit their own department. It is recommended to have a procedure for conducting audits. This procedure shall define requirements for planning and conducting audits and for reporting results and deviations from the standards of the quality management system. The managers for the area being audited shall ensure action is taken to eliminate detected nonconformities. Follow-up activities shall include the verification of the effectiveness of the actions taken.
9.3 Management review	***9.3 Management review***
9.3.1 General No specification, see ISO 9001	***9.3.1 General*** Management shall review the organisation's quality management system at planned intervals (once or twice a year is customary) to ensure its continuing suitability, adequacy and effectiveness. Additionally, management should determine whether the quality management system still adequately supports the realisation of the long-term policy plan. The quality assurance administrator or quality manager is generally in charge of preparing this review. Preparations can involve creating analyses of data over the past period, such as tables, graphs and surveys (see Section 9.6.2). The management review is often conducted in a meeting with the responsible managers, quality staff and, preferably, other management board or management team members. It would be even better if all agenda items of the management review were included in other meetings (e.g. annual report meetings, long-term policy meetings, planning & control or monitoring & evaluation) in order to make quality assurance an integral part of the organisation as opposed to a disconnected function.

9.3.2 Management review input	***9.3.2 Management review input***
No specification, see ISO 9001	The input for the management review is listed below: a. Follow-up actions from previous management reviews. b. Input arising from major organisational changes (e.g. relocations, reorganisation, implementation or termination of organisational activities, implementation of new software or major hardware changes. c. Effectiveness of the quality management system:: 1. Customer satisfaction surveys, project evaluation with customers, reports related to the satisfaction of various customer groups, reports of customer interviews, complaints, ideas and other customer or stakeholder feedback. 2. Have the quality standards been met? 3. Do projects and programmes meet substantive, financial and planning results? 4. Dealing with complaints, implementing general measures based on complaints and plans for improvement. 5. Monitoring and measuring results. 6. Results of internal and external audits. 7. Performance of suppliers and partners (in the South).. d. Does management allocate sufficient resources to the quality management system? (e.g. hours spent on quality assurance and audits, training, money, third party employment, IT, etc.) e. The status and effectivity of preventive and corrective activities based on risk assessment and opportunity identification. f. Opportunities for improvement.
9.3.3 Management review output	***9.3.3 Management review output***
No specification, see ISO 9001	The organisation should keep minutes of all management reviews (or any meetings that include management review items) as well as any conclusions and measures regarding the inputs listed in Section 9.3.2. Subsections a) and b) must be made anonymous. As far as c) is concerned, it is important to determine what budget is to be allocated to quality in the coming period, and whether there is a need for additional manpower (e.g. quality staff or internal auditors). This can include training for quality management activities or external consultancy. It is important that conclusions are drawn as to the functioning of and general satisfaction with the quality management system. Action shall be taken if improvement is possible.

10 Improvement

10.1 General

The organisation has in place systems and methods for learning at project, programme and organisational levels. Learning takes place within the organisation as well as through the exchange of expertise with partner organisations and other IC organisations.

New projects and programmes are based on lessons learned in the past.

10.2 Nonconformities and corrective actions

The organisation has a complaints procedure. Part of this procedure is an independent commission. The complainant can turn to this commission to verify whether the complaints procedure was carried out correctly.

10.3 Continuous improvement

No specification, see ISO 9001

10 Improvement

10.1 General

The organisation shall continuously improve the effectiveness of the quality management system and all related work processes.

In this context, Partos 9001 requires organisations to continuously improve and learn at project, programme and organisational levels. A vital part of this effort is the exchange of information and expertise with partner and fellow organisations in the field of international cooperation, for example by workshops and written or digital contact regarding evaluations and lessons learned.

New projects and programmes should clearly incorporate lessons learned from earlier activities. This means the organisation is aware which lessons from the past it has learned. It is important to move beyond learning at individual or department level by exchanging knowledge throughout the organisation. In addition, organisations must be able to demonstrate that new projects and programmes have been structured in a different way in these areas.

10.2 Nonconformities and corrective actions

The organisation shall have a system or procedure in place to record, review and analyse nonconformities and shall take action to eliminate the cause of nonconformities in order to prevent recurrence.

This also applies to customer complaints. It is recommended to use a complaints procedure (Klachtenprocedure.xls).

Nonconformities, errors or problems can also be detected by employees. These nonconformities, errors or problems can be dealt with through a procedure for preventive and corrective action. Steps a) through f) are covered in this procedure.

In addition to corrective action, the organisation shall also have a system or procedure to prevent the future occurrence of nonconformities, errors and problems. This requirement can be met in various ways. One good way is to conduct or update risk assessments periodically.

10.3 Continuous improvement

See Sections 10.1, 9.1 and 9.3

Colophon

Partos 9001 has been developed by Partos with the support of consultancy bureau Change-up. For substantive aspects of the process, the Association Bureau was aided by a dedicated work group formed by quality assurance managers from various member organisations. The work group consisted of the following organisations:

2012: Partos, MCNV, Oxfam Novib, Hivos, ICCO Cooperation, ZOA, Cordaid, Woord en Daad
2015: Partos, MCNV, Oxfam Novib, Hivos, ICCO Cooperation, Woord en Daad
2018: Partos, Oxfam Novib, Hivos, ICCO Cooperation, KIT, Dokters van de Wereld and Wo=Men,

The following sources were consulted when preparing Partos 9001:

2018

1. *Integrity System Guide (2018, Governance & Integrity, GDN and Partos)*
2. *Accreditation Requirements Dutch Charities (Erkenningsregeling Goede Doelen Nederland), 2018*
3. *SBF Good Governance Code (SBF Code Goed Bestuur), 2015*
4. *Organizational Risk and Integrity Assessment (ORIA, 2018), Dutch Ministry of Foreign Affairs.*

2015

1. *Accreditation Requirements Dutch Charities (Erkenningsregeling Goede Doelen), 2015*
2. *Qualification system – the successor to the CBF Seal of Approval*
3. *Checklist on Organisational Capacity Assessment, April 2016 version – Ministry of Foreign Affairs (Organisatietoets op basis van Checklist on Organisational Capacity Assessment/COCA)*
4. *Subsidy frameworks including Strategic partnerships and SRHR*
5. *Regulations regarding the salary of senior executives in the IC sector (Regeling bezoldiging topfunctionarissen OS-sector)*
6. *Guidelines on financial management for charities (Richtlijn Financieel Beheer Goede Doelen, Goede Doelen Nederland. Currently GDN, formerly VFI)*

2012

1. *VFI Guidelines on Remuneration Policies (VFI beloningsregeling directeuren goede doelen)*
2. *Bond's effectiveness tool 'Improve it Framework' (UK platform of NGOs in Development)*
3. *CBF Seal of Approval (CBF Keurmerk)*
4. *The Wijffels Code (The Wijffels Code voor Goed Bestuur)*
5. *The Istanbul Principles (for CSO Effectiveness)*
6. *NIDOS effectiveness tool (Scottish Platform of NGOs in Development)*
7. *O tests of the Ministry of Foreign Affairs (Organisatietoets van het Ministerie van Buitenlandse Zaken)*
8. *Partos' 'Future in Development' (Partos visie op de rol van maatschappelijke organisaties in ontwikkeling 'Toekomst in Ontwikkeling')*
9. *Partos' Code of Conduct (Partos Gedragscode)*
10. *Partos' Target Values (Partos Streefwaarden)*
11. *Standard Subsidy Framework Development Cooperation (Standaard Subsidiekader Ontwikkelingssamenwerking)*