

# Summary of Audit Outcomes

### Audit details

Signatory	Dates of Audit	Type of Audit	Scope of Audit
International Paralympic Committee (IPC)	26-28 November 2024	In-person ⊠  Virtual □  Desk □	Full Audit ⊠  Partial Audit □  NOTE: The audit was conducted on the IPC's role as an International Federation

# Background of the audit

The audit was proposed by WADA's internal Compliance Taskforce and endorsed by the Compliance Review Committee (CRC) based on the monitoring process outlined in the International Standard for Code Compliance by Signatories (ISCCS), specifically Articles 7.2.1 and 7.2.2. WADA officially notified IPC of the audit on 25 July 2024.

The Lead Auditor communicated with IPC via email to provide initial details and a draft audit plan, and on 6 November 2024 held a teleconference to discuss the objectives of the audit, the audit plan, logistical details, and to confirm the availability of all IPC staff and documentation during the period of the audit.

# Methodology

To prepare for this audit, the audit team used data held by WADA, including ADAMS, Gracenote, and the legal department's database, as part of its review of IPC's anti-doping program. Furthermore, WADA requested that IPC provide a number of documents in advance of the audit.

From the discussions, interviews, observation of procedures and review of documents provided by IPC during the audit, it was apparent that IPC had prepared for the audit and was open in the discussions. Staff and documents were available to the audit team during the audit.



# Table of findings

Date Updated:	3 September 2025			
Program Area	Critical Findings	High Priority Findings	General Findings	Total
	(completed and signed off)			
Governance	-	2 (2)	-	2 (2)
Testing	3 (3)	4 (4)	-	7 (7)
Intelligence & Investigations	-	1 (1)	-	1 (1)
Results Management	4 (4)	-	-	4 (4)
Therapeutic Use Exemptions	1 (1)	-	-	1 (1)
Education	-	1 (1)	-	1 (1)
Data Privacy	-	-	4 (0)	4 (0)
Total	8 (8)	8 (8)	4 (0)	20 (16)

# Summary of findings<sup>1</sup>

#### **Critical findings**

1. Although IPC had entered Doping Control Forms (DCFs) into ADAMS in line with the Code, a number of errors were identified and some duplicate athlete profiles were discovered requiring attention.

- 2. The testing risk assessment, although very comprehensive, was not fully reflected in the Test Distribution Plan (TDP). Whereas target testing was prioritised, insufficient tests were conducted on a small number of Registered Testing Pool (RTP) athletes.
- 3. When the IPC decides not to move forward with a matter involving an Atypical Finding (ATF), it does not always give notice with reasons to the Anti-Doping Organizations (ADOs) with a right of appeal as required by the Code.
- 4. The IPC does not always promptly report a decision to record a whereabouts failure against an athlete to WADA and all other relevant ADOs via ADAMS. In addition, the notice of a potential filing failure

<sup>1</sup> The following is a summary of the key findings of the audit as opposed to an exhaustive list of all findings. In respect of each finding, WADA required a specific corrective action to be undertaken in order to avoid similar issues in the future.



- does not advise the athlete that in order to avoid a further filing failure they must file the missing whereabouts information by a deadline which must be within 48 hours.
- 5. Although the IPC does ensure that all anti-doping rule violations are vigorously pursued and prosecuted in a timely manner in line with the International Standard for Results Management (ISRM), the IPC creates a "conclusion of case" in ADAMS but did not upload its results management decisions into ADAMS as required by the Code.
- 6. Although all timelines associated with the management of Therapeutic Use Exemptions (TUEs) are respected, the IPC did not publish on its website information relating to when athletes under its jurisdictions are required to apply to it for a TUE as required in the International Standard for Therapeutic Use Exemptions (ISTUE).

#### **High priority findings**

- 1. The IPC did not have the authority under its statutes, rules and regulations, and/or hosting agreements to cancel, without penalty agreements, allocating the hosting of an event to a country where the relevant country has been ruled ineligible to host the event due to a non-compliant situation of the NADO, as required in the Code.
- 2. The IPC did not publish an annual statistical report of their doping control activities as required by Code.
- 3. Evidence of a robust Athlete Biological Passport (ABP) program was identified, however on a number of occasions, Athlete Passport Management Unit (APMU) recommendations had not been followed by IPC.
- 4. Shortfalls were identified in certain instructions regarding sample collection procedures, including, informing sample collection agencies that minor athletes may be present at an event and which items are prohibited in the doping control station.
- 5. Some discrepancies between DCFs and ADAMS were identified regarding the usage or not of temperature data loggers for blood sample shipments.
- 6. Although an athlete-centred education program with values-based education activities and materials was observed, the IPC did not monitor or evaluate its education program as required by the Code and International Standard for Education (ISE).

### **General findings**

1. The IPC has a well-functioning and robust IT infrastructure which ensures the comprehensive protection of the personal information and other sensitive data which is processed by the IPC in the framework of its anti-doping activities, however four data privacy findings were identified.



### Conclusion

The IPC was audited in its role as an International Federation, following the assessment of its function as a Major Event Organization at the Paris Paralympic Games as part of WADA's Independent Observer program. The IPC demonstrated, through its experienced staff, an efficient and robust anti-doping program, with the majority of its findings recorded in testing and results management. In testing a comprehensive testing risk assessment was observed, but some corrections were identified in its TDP and RTP management. Regarding results management, timelines and rigour were observed in upholding the principles of the Code and ISRM, however some improvements to its decisions and notification processes were identified.