

ACT Alliance Secretariat CHS Certification Mid-term Audit Report ACT-MTA-2019 Date: 2019-06-04

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1. General information

1.1 Audit information

Organisation	ACT Alliance Secretariat			
Туре	□ National □ International ☑Membership/Network □ Federated □Direct assistance □ Through partners			
Mandate	Humanitarian		elopment	Advocacy
Verified Mandate(s)	Humanitarian		elopment	Advocacy
Size (Total number of programme sites/ members/partners – Number of staff at HO level)	151 members 125 countries 49 National Forums HO staff: 25 + 7 vacancies	Sampling Rate Auditor		13 ongoing appeals = 3 programmes sampled: 1 onsite visit; 2 remote assessments Marie Grasmuck
Lead auditor	Annie Devonport	Oth	ers	N/A
Verified Organisatio	Verified Organisational Responsibilities:			
CHS Commitments 3, 4 & 5				
	Head Office		F	Programme Site(s)
Location	Remote visit		Kerala, India	
Dates	4 th – 6 th March 2019		11 th – 14 th March 2019	

1.2 Indicators verified at the mid-term audit

CHS Commitment	Organisational Responsibilities	Key Actions
1	1.4 1.5	1.1 1.2 1.3
2	2.7	2.1 2.2 2.3 2.4 2.5
3	3.7 3.8	3.1 3.2 3.3 3.4 3.5 3.6

	4.5	4.1
	4.6	4.2
4	4.7	4.3
		4.4
	5.4	5.1
	5.5	5.2
5	5.6	5.3
	5.7	
		6.1
	6.5	6.2
6		6.3
		6.4
		7.1
7		7.2
1		7.3
	8.4	8.1
		8.2
_	8.6	8.3
8	8.7	
	9.6	9.1
		9.2
9		9.3
5		9.4
		9.5

2. Schedule summary

2.1 Verification Schedule

Name of Programme sites/members/par tners verified	Location	Mandate (Humanitarian, Development, Advocacy)	Number of projects visited	Type of projects
CASA	Kerala	ncy response to mor Humanitarian	3	NFI distribution
CARD	Kerala	Humanitarian	1	Cash distribution
LWSIT	Remote	Humanitarian	0	Livelihoods/NFI and WASH
BANGLADESH: app	eal Emergency	assistance to the Re	ohingya comm	unity in Cox's bazar
Diakonia	Remote	Humanitarian	0	FS, Livelihoods,
Christian Aid	Remote	Humanitarian	0	Shelter/NFI,
ICCO	Remote	Humanitarian	0	WASH, DRR
DCA	Remote	Humanitarian	0	
NICARAGUA appeal: Emergency response to socio-political crisis in Nicaragua				
ILCO	Remote	Humanitarian	0	Shaltor/NIE
ILFE	Remote	Humanitarian	0	Shelter/NIF, Protection/PSS
CEPAD	Remote	Humanitarian	0	

2.2 Opening and closing meetings

2.2.1 Remote visit of Head Office:

	Opening meeting	Closing meeting
Date	04.03.2019	26.03.2019
Location	Skype	Skype

Number of participants	14	9
Any substantive issue arising	None	None

2.2.2 On-site visits at Programme Site(s):

	Opening meeting	Closing meeting
Date	11.03.2019	14.03.2019
Location	Kottayam, Kerala, India	Kottayam, Kerala, India & Skype
Number of participants	16	4 + 4 by Skype
Any substantive issue arising	None	None

3. Recommendation

In our opinion, ACT Alliance Secretariat has implemented the necessary actions to close the minor CARs identified in the previous audit and continues to conform with the requirements of the Core Humanitarian Standard. We recommend maintenance of certification.

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

Lead Auditor's Name and Signature

Date and Place: 16th April 2019 UK

Annie Devonport

4. HQAI Quality Control

Follow up		
First Draft	2019-04-29	
Final Draft	2019-06-06	

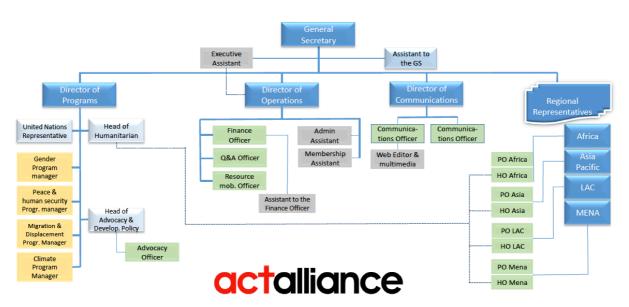
5. Background information on the organisation

5.1 Organisational structure and management system

Since the initial audit report was released in March 2017, the ACT Alliance Secretariat has revised its statutes (October 2018). The new statutes reflect the change to localization that has been rolled out in the Alliance since 2015. The ACT Alliance has two categories of members: voting members and observer members. The General Assembly is composed of voting members, and one of its main roles is to elect the members of the Governing Board, on the basis of a list of nominations presented by a Membership and Nomination Committee and endorsed by each national forum. The Governing Board currently comprises 20 members (previously 19). In addition, there is an Executive Committee, elected from the Governing Board; and Executive officers.

The ACT Alliance's mission has not changed since the initial audit although its decentralisation process has evolved. The decentralised ACT Secretariat now has 36 staff positions, including 4 secondments, based in 7 offices (Geneva, Nairobi, Amman, Bangkok, Toronto, New York and San Salvador), in addition to ACT EU office based in Brussels. The number of advisory groups still total 7.

Since the initial audit a new focus has been put on forums, with a new National, Sub-Regional and Regional Forums Policy. A key role of forums is to develop an Emergency Preparedness Response Plan (EPRP), which is now a prerequisite for an appeal. The forums are expected to be active entities, contribute to strategic directions and foster collaboration, coordination and joint programming. There are 49 national forums, 7 Subregional and 3 Regional forums at the time of the audit. One of the roles of the ACT Alliance Secretariat is to actively support and strengthen the forums by supporting leadership, initiatives, sharing practical tools, and promoting communication.



ACT Alliance Secretariat Core Organigram

5.2 Organisational quality assurance

Since the initial audit, the ACT Alliance Secretariat introduced new features to its organisational quality assurance. The Quality and Accountability advisory Group (QAG) merged with the Complaints Handling Advisory Group (CHAG) in 2018 in order to strengthen matters relating to Q&A for the Alliance.

The ACT Alliance Secretariat has placed a strong emphasis on its humanitarian mandate, resulting in an increase in capacity and recruitment of new staff; the implementation of the revised humanitarian mechanism; and the launch of the EPRP platform. A dedicated position has also been recruited recently to oversee the quality and accountability objectives of the ACT Alliance Secretariat, and its Quality and Accountability Framework.

The main drivers of organisational quality assurance for the ACT Alliance Secretariat are:

- The recruitment of additional humanitarian positions with appropriate competencies
- The localisation of its regional offices and its humanitarian personnel
- The organisation training of trainers at regional levels to launch the main new features
- The engagement of forums, at local, national and regional levels, acting as dissemination platforms, but also as active drivers for main qualitative activities (such as the development of EPRP or as coordinator for in country peer-to-peer training or mentoring)
- The seven advisory groups, including the Humanitarian Policy and Practice Advisory Group, and the Quality and Accountability Advisory Group.
- Online training (or refresher training) courses on gender, complaint mechanism and code of conduct.
- Updated policies, and guidelines, for instance regarding finance, procurement, and the environment.

It is important to note that the scope of the ACT Alliance Secretariat work does not include compliance of the members, nor responsibility over the quality of the implementation of the programmes. Should the quality of a members' work fall below an acceptable standard, the onus is on peers to raise the issue with the relevant forum or to lodge a complaint with the ACT Alliance Secretariat.

5.3 Work with Members

As with the initial audit, the mid-term audit considers members of the ACT Alliance as partners, as described in the Core Humanitarian Standard. Whilst this has been agreed between the ACT Alliance Secretariat and HQAI, this premise does present some challenges in that the ACT Alliance Secretariat does not have control over the members of the ACT Alliance which are autonomous organisations, although it does have influence.

As an ACT Alliance Secretariat the role includes supporting the Alliance to manage appeals and support members to adhere to ACT Alliance policies and to meet agreed standards. As noted above, this is done through communication of new and revised policies; development of e-learning and TOT modules; monitoring programme activity through review of regular reports and some field visits.

The ACT Alliance Secretariat continues to undertake an annual member survey through which it can monitor compliance with some core standards and membership requirements. Not all members complete the survey however, and the ACT Alliance Secretariat has limited resources nor the mandate to enforce them.

Members must be engaged in an ACT Alliance forum, if one exists, to benefit from an appeal. Under certain circumstances membership may be suspended.

5.4 Certification or verification history

Initial Audit	6th March 2017
Maintenance Audit	16 th May 2018

6. Sampling

6.1 Rationale for sampling

Sampling rate was based on the number of open appeals. At the start of the planning process there were 13 across the world. In line with HQAI procedures and guidance, this gave a sampling rate of 3; one for a site visit and 2 for remote assessment.

Through random sampling the Kerala Floods Appeal, India; Emergency Assistance to the Rohingya Community in Cox's Bazar, Bangladesh; and Nicaragua socio-political crisis were selected. India was chosen for the site visit on the grounds that security in Nicaragua could have been difficult due to sensitivities concerning the socio-political crisis; the Rohingya response in Bangladesh is coordinated by an ACT member which is already certified by HQAI against CHS.

Disclaimer:

It is important to note that the audit findings are based on the results of a sample of the organisation's documentation and systems as well as interviews and focus groups with a sample of staff, partners, communities and other relevant stakeholders. Findings are

analysed to determine the organisation's systematic approach and application of all aspects of the CHS across its organisation and to its different contexts and ways of working.

6.2 Interviews:

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

Position of interviewees	Number of interviewees
Head Office	
Remote/Skype	12
Face to Face	1
Programme sites	
India	9
Remote/Skype India	1
Remote/Skype Bangladesh	5
Remote/Skype Nicaragua	3
Total number of interviews	31

6.2.2 Focus Group Discussions (interviews with a group >6)

T (0	Number of participants		
Type of Group	Female	Male	
Focus group 1		11	
Focus group 2	8	16	
Focus group 3	3	4	
Focus group 4		26	
Focus group 5		11	
Focus group 6		8	
Focus group 7	2	15	
Total number of participants	13	91	

7. Report

7.1 Overall organisational performance

The initial audit in 2017 found the ACT Alliance Secretariat performed well against the requirements of the Core Humanitarian Standard. The main areas of weakness related largely to those areas for which the organisation, as the ACT Alliance Secretariat, has limited control. The specific areas identified in the initial report as requiring attention related

to the need to support members to develop contextualised complaints mechanisms and plans for sharing information.

Since the initial audit the ACT Alliance Secretariat has put in place a revised Humanitarian Mechanism, including new formats and systems, designed to address some of the core weaknesses. Whilst these are already demonstrating improvement, leading to the closure of 7 CARs, the roll out is still in progress. Strengthening of the humanitarian arm of the ACT Alliance Secretariat is designed to provide stronger support to members who are responding to emergencies. With some staff newly in post and other positions vacant, the benefits of this development are yet to be fully realised, in terms of meeting CHS requirements. Whereas compliance with CHS by the ACT Alliance Secretariat is generally strong, oversight of members' compliance, and the mandate to address deficits, remains a challenge.

Risk associated with this audit

Documentary evidence and discussions with communities and staff suggested to auditors that the members and communities may have been inadvertently over-prepared for the audit. There is a risk that the findings of the audit process may have been unintentionally influenced.

Corrective Action Requests	Type (Minor/Major)	Original deadline for resolution	Status of CAR at MTA	Time for resolution
2017-2.3 ACT Alliance Secretariat does not support members to ensure that unmet needs are systematically referred to organisations with relevant expertise.	Minor	2019-03-05	Closed	
2019: 2.5b Programmes are not systematically adapted based on monitoring results	Minor		New	2021-04-30
2019: 2.5c ACT Alliance Secretariat does not systematically identify and address poor performance of its members.	Minor		New	2021-04-30
2019: 3.6 Unintended negative effects are not systematically identified and acted upon in a timely manner in the areas of: people's safety, security, dignity, and rights; sexual exploitation and abuse by staff; culture, social and	Minor		New	2021-04-30

7.2 Summary of corrective action requests

		r		
political relationships;				
livelihoods; local economy; the environment				
2017: 3.8 The ACT Alliance				
Secretariat does not support				
members to ensure that				
personal information	Minor	2019-03-05	Closed	
collected from communities	IVIITIO	2019-03-05	Closed	
is systematically				
safeguarded.				
2017: 4.1 There is limited				
evidence of the ACT Alliance				
Secretariat supporting				
members to develop				
contextualised information	Minor	2019-03-05	Closed	
sharing plans; communities				
had limited awareness of				
members' plans beyond the short term.				
2018: 4.4 ACT Alliance				
Secretariat does not have a				
formal system to support				
members to ensure that				
communities are encouraged	Minor	2020-03-05	Closed	
to provide feedback on their	WIITIO	2020 00 00	010300	
satisfaction with assistance				
received.				
2017-5.1 The ACT Alliance				
Secretariat does not support				
members to undertake				
community consultation for	Minor	2019-03-05	Closed	
complaints mechanisms and	-			
members undertook limited				
consultation with				
communities.				
2019: 5.4 The ACT Alliance				
Secretariat does not take	Minor		New	2021-04-30
appropriate action where			11011	01 00
members are found not to				
have a documented				
complaints procedure.				
2017: 5.6 The ACT Alliance				
Secretariat does not support				
members to ensure they				
make communities aware of	N.4.			
expected behaviour of staff	Minor	2020-03-05	Closed	
and there was limited		2020 00 00		
awareness at community				
level in Nepal of these expected behaviours.				
expected benaviours.				

2019: 5.6 The ACT Alliance Secretariat does not take appropriate action when a failure to sign the Code of Conduct is identified and communities are not consistently being made aware of the expected behaviours of staff.	Minor		New	2021-04-30
2017: 9.4 ACT Alliance Secretariat does not support members to consider potentially negative impacts on local and natural resources.	Minor	2019-03-05	Closed	
TOTAL Number of open CARs			5	

7.3 Strong points and areas for improvement:

Commitment 1: Humanitarian assistance is appropriate and relevant

Score: 2.8

The initial audit found that the ACT Alliance Secretariat policies and processes supported ongoing context and stakeholder's analysis and impartial assistance. The Emergency Preparedness and Response Plans (EPRP) were used as guiding documents during a response. It also found that the appeals were designed and adapted on the basis of needs and capacities, but that the level of disaggregation constrained program targeting.

At the mid-term audit, the ACT Alliance Secretariat has updated its humanitarian policy and its templates, and has reinforced its approach of the EPRP through a revision of the template, regional training of trainers, and an EPRP online platform. The ACT Alliance Secretariat continues to comply with the indicators of Commitment 1, and no corrective action request has been identified. However, the commitment to collect disaggregated data, while improved, is not systematic, and remains an observation.

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

The communities expressed satisfaction and gratitude over the appropriateness and the relevance of the assistance received.

Commitment 2: Humanitarian response is effective and timely

Score: 2.5

The initial audit found that policies committed to effective and timely assistance, based on monitoring processes. The ACT Alliances' systems facilitated the design of programmes based on safety and capacity constraints, and that swift action had been possible in Nepal at time of the earthquake. The ACT Alliance Secretariat and the appeal members used relevant technical standards and supported good practices. However, the initial audit found that there were no formal mechanisms to refer unmet needs beyond the scope of the ACT Alliance members.

At the mid-term audit, the ACT Alliance Secretariat updated several of its templates and its humanitarian policy, and continued to comply with most of the indicators of Commitment 2. However, the mid-term audit found that timeliness of the response had been a concern in some appeals, and that interviewees reported timeliness as an issue, leading to a new observation. The corrective action request identified on the referral of unmet needs has been closed, but remains an observation, as some members are not sufficiently supported to ensure that unmet needs are referred and addressed.

Activities, outputs and outcomes are monitored. However, the mid-term audit found that programmes are not systematically adapted according to monitoring results, and that the ACT Alliance Secretariat does not systematically identify and address poor performance of its members. While the ACT Alliance Secretariat organizes monitoring visits, the follow-up of the recommendations and the identification of poor performance is a responsibility that remains primarily with forums and members, which have variable capacity to meet this commitment. This opens a new corrective action request.

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

The communities stated that they were satisfied with the response and its timing, and that the design of the response had been realistic and safe.

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

Score: 2.5

The initial audit found that policies were designed to prevent programmes having negative effects, and that they were built on local capacities, designed to benefit the local economy and promote early recovery. However, the initial audit found that no specific processes supported the members to ensure that personal information collected from the communities was systematically safeguarded.

At the mid-term audit, the ACT Alliance Secretariat has taken several steps to further protect its own data and the data of its members that goes through its platforms and communication channels. The ACT Alliance Secretariat released a digital security guide and the members had systems in place to safeguard the information collected from the communities. Hence, the corrective action request is closed.

The mid-term audit revealed a corrective action request regarding the identification and acting upon potential or actual unintended negative effects in a timely and systematic manner that was not identified at the time of the initial audit. The ACT Alliance Secretariat has some activities in place to identify and act upon unintended negative effects, such as monitoring visits (see also C2). However, compliance with this commitment is hampered by the lack of awareness of the communities on the expected behaviour of the staff (see also C5), the lack of guidance to perform do no harm analysis and to identify negative effects linked to livelihoods and economy, and the time needed to implement new requirements of the ACT Alliance Secretariat, such as the environmental risk marker.

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

Communities stated that the programmes were designed to strengthen local capacities and that the response was building on existing community capacities and preparedness plans. They also explained that local authorities had been involved at all stages of the response, and that all groups had been represented throughout the programme cycle. However, they were not knowledgeable about the end of the assistance and exit or transition plans. They all agreed that the response was benefitting the local economy and helped them in the early recovery phase.

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

Score: 2.7

The initial and maintenance audits found the ACT Alliance Secretariat generally complied with this commitment except that it was not adequately supporting members to develop contextualised information sharing plans or putting in place adequate feedback mechanisms.

At the mid-term audit, the ACT Alliance Secretariat has revised appeal templates, including prompts requesting information on how members will communicate with and involve communities in the response. ACT Alliance Secretariat has developed a communication sub-strategy as a sub-section of the Global Strategic Plan 2019 – 2026 and social media policy introduced in 2017. The Quality and Accountability framework reinforces members' responsibilities in relation to the provision of information but has not yet led to consistent good practice. ACT Alliance Secretariat has taken steps to emphasise to members the importance of gathering feedback from communities and it uses tools such as post-distribution monitoring to gather feedback as well as informal monitoring visits, the immediacy of which is favoured in some cultures.

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

Communities stated they were satisfied that they were able to provide feedback and appreciation directly to staff. Groups were generally aware of the programme activities and deliverables but were not aware of whether the organisation was planning any further assistance. Not all community members have been given information on the organisation and the affiliation to ACT Alliance and there was generally very limited awareness of the expected behaviours of staff.

Commitment 5: Complaints are welcomed and addressed

Score: 2.3

The initial and maintenance audits found the ACT Alliance Secretariat's own complaints mechanism was well established but that it was not adequately supporting members to consult with communities on complaints mechanisms or ensure members informed communities about acceptable behaviours.

The Mid-term audit found the ACT Alliance Secretariat has improved compliance with this commitment. The non-conformity around consultation with communities has been addressed. However, a non-conformity relating to oversight of members' efforts to ensure communities are aware of expected behaviours is not resolved.

A revised complaints policy reinforces and encourages members to have their own complaints policy. Where individual policies are not yet developed, members may use the Alliance complaints policy. The audit found that whilst a CRM was in place in all locations, not all members have documented complaints procedures. There was no

evidence of action being taken where this was identified by the ACT Alliance Secretariat.

The requirement for members to sign the Code of Conduct (CoC) is clearly stated in the Accountability Framework and the revision of the Humanitarian Mechanism now includes a section on the CoC. Staff complete an on-line training and training for members has been rolled out. However, there is no evidence to show that the ACT Alliance Secretariat takes appropriate action when it identifies that members have not signed the Code of Conduct. Communities are still not consistently being made aware of the expected behaviours of staff.

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

Complaints procedures had been discussed with most, but not all, communities visited. Those who had been consulted were satisfied with the ways they could complain and felt confident to do so had it been necessary. Communities visited were aware of the behaviours which were acceptable but had not been told explicitly; nor had they been told of the members' commitment to the prevention of sexual abuse and exploitation.

Commitment 6: Humanitarian response is coordinated and complementary

Score: 3.7

At the initial and maintenance audits the ACT Alliance Secretariat performed strongly against the indicators of this commitment.

At the mid-term audit the ACT Alliance Secretariat, as a network organisation, continues to demonstrate a commitment to providing coordinated and complementary assistance. The Global strategy 2019 – 2015 and updated Forum and Humanitarian policies reinforce communications systems within the membership and advocate for wider engagement across the sector. Development of Emergency Preparedness Response Plans at Forum level is devised to ensure a coordinated response to new emergencies

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

Whilst there were gaps in provision, communities were not aware of any duplication of aid.

Commitment 7: Humanitarian actors continuously learn and improve

Score: 2.7

The initial audit found that both the ACT Alliance and the ACT Alliance Secretariat was committed to learning through its policies and procedures and demonstrates a willingness to learn from monitoring and evaluation exercises. The ACT Alliance Secretariat and the ACT Alliance share learning internally and externally through its website and participation in learning forums.

At the mid-term audit the ACT Alliance Global Strategy 2019 – 2025 sets out how Forums will be the driver for roll out of the strategy, including being a platform for shared learning. The revised Humanitarian Mechanism guides the design of programmes to include learning from previous responses. Whilst the audit found there is a continued commitment to learning, it was not always possible to see how the organisation has acted on learning findings.

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

Communities visited had limited knowledge of the results of monitoring and evaluation exercises and were not engaged in any learning. As the response to the floods was a recent event, they had no view of whether the aid had improved over time.

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



The initial audit found that the ACT Alliance Secretariat had appropriate human resources policies that are in line with legal requirements and understood by staff. Performance appraisals generally take place annually and staff found these to be meaningful exercises. Policies were in place for staff safety and security and the code of conduct is well understood. The audit noted that the delivery of programmes was a challenge due to the lean structure of the organisation. Individual training was negotiated with supervisors, but there was no overall staff learning and development plan.

At the mid-term audit the ACT Alliance Secretariat's restructuring strengthened the humanitarian team. Through this additional capacity, the ACT Alliance Secretariat has a closer overview of members' activities. However, the ACT Alliance Secretariat still does not have a complete oversight of members' performance and on whether members have codes of conduct. Policies remain in place for staff safety and security and the revised code of conduct has been rolled out with a compulsory e-learning module for ACT Alliance Secretariat staff.

Staff appraisal and performance management systems have been revised; individual development plans are now closely linked to performance reviews. Organisation-wide training needs are systematically identified through the strategic requirements and through development plans. There is a strong commitment to meeting these needs.

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

Communities stated they thought field staff had a good attitude and were knowledgeable and competent.

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

Score: 2.8

The initial audit found that the ACT Alliance Secretariat had policies to promote resources management, but that some key policies were missing regarding the environment, conflict of interests and audits. This corrective action request was closed at the maintenance audit. The initial audit also found that the ACT Alliance Secretariat had efficient processes in place to balance quality, cost and timeliness of the response, and that it routinely monitored expenditures against budget, and took action when corruption was suspected or identified. However, at the initial audit, the ACT Alliance Secretariat did not formally support members to ensure that negative environmental effects were monitored and that environmental impact assessments were undertaken.

At the mid-term audit, the ACT Alliance Secretariat has taken steps to consider the impact of the environment when using local and natural resources. Its humanitarian

template includes an environmental risk assessment, and the ACT Alliance Secretariat has an environmental policy in place that lays out practical solutions to reduce the impact of its work on the environment. This is sufficient to close the corrective action request. However, the environmental risk marker is not yet systematically used at the time of the appeal, and the ACT Alliance Secretariat does not provide specific guidance or support to assess, monitor and prevent the potential impact of local and natural resources on the environment by its members. Therefore, an observation remains.

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

Communities reported that, as far as they were aware, response resources were used properly and efficiently, and the response had no negative effects on the environment.

8. Organisation's report approval

Acknowledgement and Acceptance of Findings

For Organisation representative – please cross where appropriate

I acknowledge and understand the findings of the audit	
I accept the findings of the audit	
I do not accept some/all of the findings of the audit	

Please list the requirements whose findings you do not accept

Name and Signature

Date and Place

2019-06-04

9. HQAI's decision

Certification Decision			
Certificate:			
MaintainedSuspended	ReinstatedWithdrawn		
Next audits MA before 2020-03-06			
Pierre Hauselmann Executive Director Humanitarian Quality Assurance Initiative	Date:		

Appeal

In case of disagreement with the decision on certification, the organisation can appeal to HQAI within 14 days after being informed of the decision.

HQAI will investigate the content of the appeal and propose a solution within 10 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform in writing HQAI within 30 days after being informed of the proposed solution of their intention to maintain the appeal.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will constitute a panel made of at least two experts who have no conflict of interest in the case in question. These will strive to come to a decision within 30 days.

The details of the Appeals Procedure can be found in document PRO049 – Appeals Procedure.

Annex 1: Explanation of the scoring scale

	A score of 0 denotes a weakness that is so significant that it indicates that the organisation is unable to meet the required commitment. This is a major weakness to be corrected immediately.
	EXAMPLES:
	Operational activities and actions contradict the intent of a CHS commitment.
	Policies and procedures contradict the intent of the CHS commitment.
0	Absence of processes or policies necessary to ensure compliance at the level of the commitment.
	Recurrent failure to implement the necessary actions at operational level make it impossible for the organisation to ensure compliance at the level of the commitment.
	Failure to implement corrective actions to resolve minor non-conformities in the adequate timeframes (for certification only)
	More than half of the indicators of one commitment receive a score of 1 (minor non-conformity), making it impossible for the organisation to ensure compliance at the level of the commitment. (for independent verification or certification only)
	A score of 1 denotes a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against the commitment.
	EXAMPLES:
	There are a significant number of cases where the design and management of programmes and activities do not reflect the CHS requirement.
1	Actions at the operational level are not systematically implemented in accordance with relevant policies and procedures.
	Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.
	Existing policies are not accompanied with sufficient guidance to support a systematic and robust implementation by staff. A significant number of relevant staff at Head Office and/or field levels are not familiar with the policies and procedures.
	Absence of mechanisms to monitor the systematic application of relevant policies and procedures at the level of the requirement/commitment.
	A score of 2 denotes an issue that deserve attention but does not <u>currently</u> compromise the conformity with the requirement This is worth an observation and, if not addressed may turn into a significant weakness (score 1).
	EXAMPLES:
2	Implementation of the requirement varies from programme to programme and is driven by people rather than organisational culture.
	There are instances of actions at operational level where the design or management of programmes does not fully reflect relevant policies.
	Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.
	The organisation conforms with this requirement, and organisational systems ensure that it is is met throughout the organisation and over time.
	EXAMPLES:
3	Relevant policies and procedures exist and are accompanied with guidance to support implementation by staff.
	Staff are familiar with relevant policies. They can provide several examples of consistent application in different activities, projects and programmes.

	The organisation monitors the implementation of its policies and supports the staff in doing so at operational level. Policy and practice are aligned.
	The organisation demonstrates innovation in the application of this requirement/commitment. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.
	EXAMPLES:
4	Field and programme staff act frequently in a way that goes beyond CHS requirement to which they are clearly committed.
	Relevant staff can explain in which way their activities are in line with the requirement and can provide several examples of implementation in different sites. They can relate the examples to improved quality of the projects and their deliveries.
	Communities and other external stakeholders are particularly satisfied with the work of the organisation in relation to the requirement.
	Policies and procedures go beyond the intent of the CHS requirement, are innovative and systematically implemented across the organisation.