

ADRA Denmark Maintenance Audit 2 – Report - 2024/10/02

1. General information and audit activities

Role / name of auditor(s)	Lead Auditor / Marie Grasmuck		
Audit cycle	First cycle		
	Date / number of participants		
Opening Meeting	2023/09/06 3 participants	No	
Closing Meeting	2023/09/11 2 participants	No	
Interviews	Position / level of interviewees	Number	
interviews	Head Office Staff	4	

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

There have been some changes in ADRA DK since the first maintenance audit (MA1, 2023). ADRA DK recruited an additional staff under the finance department, and two additional staff in the Programme Department (Climate adaptation, sustainable agriculture and livelihoods coordinator, and field support advisor). It is expected that these additional human resources will alleviate the workload of existing staff and overall improve time and resources for internal quality assurance.

ADRA DK changed its accounting software system, changed its statutory auditor (to be in line with DANIDA's recommendations of changing the auditor every five years), and revised its Procurement Manual to be in line with the latest donors' guidelines. ADRA DK introduced the conflict sensitivity and conflict analysis assessment tools as part of the routine tools to be used at project design.

ADRA DK's strategy is coming to an end in December 2024. The new Global Strategy, covering 2025-2029 is being developed with the contribution of all departments and partner offices. ADRA DK is in the process of establishing thematic working groups (climate & sustainable livelihoods, peace & social cohesion, localization) to provide forums for quality assurance of programme implementation and programmatic excellence in those thematic areas.

In line with the MA1, ADRA DK continued to implement its CAR action plan through the work of relevant focal points (safeguarding, environment/climate and MEAL/complaints response mechanism). The overall follow-up of the action plan rests with the safeguarding and CHS focal point, and is reviewed with senior management during routine coordination meetings.

ADRA DK shows continued commitment to the CHS.

2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution timeframe	Progress made to address the CAR and in response to the findings of the indicator	Evidence (doc no., KII)
2022-3.8: The organisation does not systematically ensure that its PO safeguard personal information collected	Minor / by 2025 (RA)	ADRA shows progress to address this CAR: - In a continuity with previous activities, ADRA DK included a session on data protection in the May 2024 Partnership Workshop to discuss the basics of data protection and share on practical questions.	Documents: 130, 134, 136, 137, 138, 147, SUD

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from communities and people affected by crisis.		 ADRA DK decided that the Data Protection and Open Information Checklist should be completed once a year. The safeguarding and CHS focal point is in charge of compiling results and ensuring all countries have been through this exercise annually and supported as relevant. If the annual checklist review highlights a need for support at partner level, ADRA DK can support the partner directly or coordinate with ADRA International's newly recruited data protection focal point. ADRA DK is planning to offer the data protection training it has developed to additional partner office staff. Further, ADRA DK is planning to coordinate with ADRA International to consider how this training can be used further to align with training plans. 	Interviews with staff
2022-4.1: ADRA DK does not ensure that its POs have a process in place to share required information systematically with communities.	Minor / by 2025 (RA)	 ADRA shows progress to address this CAR: In a continuity with previous activities, ADRA DK pursued the discussion on information sharing during its 2024 Partnership Workshop, and distributed an Open Information Cheat sheet to outline its requirements and best practices regarding information sharing. (As in 3.8), ADRA DK decided that the Data Protection and Open Information Checklist should be completed once a year. The safeguarding and CHS focal point is in charge of compiling results and ensuring all countries have been through this exercise annually and supported as relevant. ADRA DK's updated Trip Report Template and Checklist have already been introduced to programme and humanitarian coordinators (see MA1). ADRA DK further plans on developing a standard slide deck for project inception workshops, where this topic will be covered. The slide deck will be developed in 2025. 	Documents: 130, 134, 137, 140, SSD, SYR Interviews with staff
2022-4.3: ADRA DK does not ensure systematically that its partner organisations promote inclusive representation and engagement throughout all stages of the project cycle.	Minor / by 2025 (RA)	 ADRA shows progress to address this CAR: In a continuity with previous activities, ADRA DK continued the discussion on inclusive representation during its 2024 Partnership Workshop. The updated Project Document Template and Monitoring Checklist have been introduced to staff. To be noted that the Project Document Template could take time to be used across ADRA's projects, since the majority of new projects are planned at the beginning of 2026. ADRA DK further plans to review its Programme Manual to better emphasise its expectations and guidelines on inclusive representative — amongst others — by the end of 2024. ADRA DK further plans on developing a standard slide deck for project inception workshops, where the topic of community engagement will be covered. The slide deck will be developed in 2025. 	Documents: 130,137, SSD, YEM Interviews with staff
2022-5.1: ADRA DK does not work with its partners to ensure communities	Minor / by 2025 (RA)	ADRA shows progress to address this CAR: - In a continuity with previous activities, ADRA DK continued the discussion on the design of complaints mechanisms (CRM) during its 2024	Documents: 145, SYR



are consulted in regards to the design, implementation and monitoring of complaints handling mechanisms.		 Partnership Workshop. A partner country presented its CRM and how they had involved communities on its design. As explained at MA1 stage, ADRA DK's programme and humanitarian coordinators are responsible for clarifying expectations and following-up on this point, especially during their conversations about the complaints mechanism and how it is monitored. (As in 5.4) The CRM focal point is responsible of having an overview of the existence and support needed for partners' countries on an annual basis. This overview includes a point on the participation of communities to inform the design of the CRM. 	Interviews with staff
2022-5.4: ADRA DK does not always take sufficient measures to satisfy itself that partners have a complaints handling process for communities and people affected by crisis that is documented and in place.	Minor / by 2025 (RA)	 ADRA shows progress to address this CAR: In a continuity with previous activities, ADRA DK continued the discussion on the functionality of CRM during its 2024 Partnership Workshop. At this occasion, a partner country presented its own CRM to share on best practices and challenges. The CRM is also discussed during inception meetings of new projects and this topic will be included in the standard slide deck (see also 4.3). The CRM focal point is responsible of having an overview of the existence and support needed for partners' countries on an annual basis. In addition, the safeguarding focal point's own overview (see also 3.8) includes some aspects related to the CRM, which are also followed up on an annual basis, and used to follow through on the support needs of the partners. ADRA DK requires its partners to report annually on complaints' received and on the CRM they have in place or are developing. ADRA DK also reports annually on the complaints received at both head office and at the partners' level. 	Documents: 132, 133, 134, 145, SYR, YEM Interviews with staff
2022-9.4: The organisation does not ensure that environmental risks are assessed at project level and POs are not systematically supported in considering their impact on the environment.	Minor / by 2025 (RA)	 ADRA shows progress to address this CAR: As of August 2024, ADRA DK has recruited a new position of climate adaptation, sustainable agriculture and livelihoods coordinator, which will be in charge — amongst other responsibilities — of supporting countries in the assessment of environmental risks, in the implementation of mitigation strategy, and of structuring ADRA DK's system with regards to climate adaptation and environmental approaches. ADRA DK conducted a session dedicated to climate, resilience and livelihoods during its 2024 Partnership Workshop. It included a discussion on environmental policies and environmental risks assessments, and on the challenges partners encounter when developing them. ADRA DK further adapted the NEAT+ tool, following feedback from its partners. The adapted NEAT+ has been introduced in April 2024. The adapted NEAT+ tool — or an environmental assessment of some sort, if more relevant — is supposed to be used by partners 	Documents: 132, 137, 142, 143, UGA, SUD, SYR Interviews with staff



offices at project design stage. The Programme Coordinators are therefore planning to start working with partner offices to conduct environmental impact assessments once they start new projects or activities, which for most countries will be in 2026. - ADRA DK plans on updating its annual reporting template for partners in order to better reflect	
 this risk assessment and the mitigation measures identified and implemented. ADRA DK added an environmental mainstreaming indicator to its Results Framework, which will be rolled out across partners for this year's annual reporting. ADRA DK is in the process of developing its 2025-2029 Global Strategy, and there will be a strategic objective dedicated to climate and environment. 	

3. Summary of non-conformities

Corrective Action Requests (CAR)	Туре	Status	Resolution timeframe
2022-3.8: The organisation does not systematically ensure that its PO safeguard personal information collected from communities and people affected by crisis.	Minor	Open	By 2025 (RA)
2022-4.1: ADRA DK does not ensure that its POs have a process in place to share required information systematically with communities.	Minor	Open	By 2025 (RA)
2022-4.3: ADRA DK does not ensure systematically that its partner organisations promote inclusive representation and engagement throughout all stages of the project cycle.	Minor	Open	By 2025 (RA)
2022-5.1: ADRA DK does not work with its partners to ensure communities are consulted in regards to the design, implementation and monitoring of complaints handling mechanisms.	Minor	Open	By 2025 (RA)
2022-5.4: ADRA DK does not always take sufficient measures to satisfy itself that partners have a complaints handling process for communities and people affected by crisis that is documented and in place.	Minor	Open	By 2025 (RA)
2022-9.4: The organisation does not ensure that environmental risks are assessed at project level and POs are not systematically supported in considering their impact on the environment.	Minor	Open	By 2025 (RA)
Total Number of open CARs	6		

4. Claims Review

Claims Review	⊠ Yes		Follow-up required	⊠ Yes	□No
conducted	⊠ res	∐ No	rollow-up required	⊠ Yes	

5. Lead auditor recommendation

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In our opinion, ADRA Denmark has demonstrated that it is taking necessary steps to address the CARs identified in the previous audits and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.					
We recommend maintenance of certification.					
			and place: nd, 2024, France		
6. HQAI decision					
☐ Certificate maintained☐ Certificate☐ Certificate☐ Certificate			reinstated withdrawn		
Surveillance audit before: 2025/10/11					
Name and signature of HQAI Executive Director:			Date and place:		
Désirée Walter			Geneva, 07 October 2024		
7. Acknowledgement of the report	by the	org	anisati	ion	
Space reserved for the organisation					
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: If yes, please give details:			☐ Yes	⊠ No	
Acknowledgement and Acceptance of Findings:					
I acknowledge and understand the findings of the audit			Yes	□No	
I accept the findings of the audit				□No	
Name and signature of the organisation's represent	ative:16 ADRA	NARUM		l place: ber 2024, Denmark	

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Appeal

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

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



Annex 1: Explanation of the scoring scale*

Scores	Meaning: for all verification scheme options	Technical meaning for all independent verification and certification audits
0	Your organisation does not work towards applying the CHS commitment.	Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to: Independent verification: major weakness. Certification: major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	Score 1: indicates 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 it. This leads to: • Independent verification: minor weakness. • Certification: minor non-conformity, leading to a minor corrective action request (CAR).
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	Score 2: indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to: • Independent verification and certification: observation.
3	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled.	Score 3: indicates full conformity with the requirement. This leads to: • Independent verification and certification: conformity.
4	Your organisation's work goes beyond the intent of this requirement and demonstrates innovation. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	Score 4: indicates an exemplary performance in the application of the requirement.

^{*} Scoring Scale from the CHSA Verification Scheme 2020