

Act Church of Sweden (Act CoS)

Recertification Audit – Summary Report 2020/06/15

1. General information

1.1 Organisation

Type	Mandates	Verified	
<div><input checked="" type="checkbox"/> International</div> <div><input type="checkbox"/> National</div> <div><input type="checkbox"/> Membership/Network</div> <div><input type="checkbox"/> Direct Assistance</div> <div><input type="checkbox"/> International</div> <div><input type="checkbox"/> Federated</div> <div><input checked="" type="checkbox"/> With partners</div>	<div><input checked="" type="checkbox"/> Humanitarian</div> <div><input checked="" type="checkbox"/> Development</div> <div><input checked="" type="checkbox"/> Advocacy</div>	<div><input checked="" type="checkbox"/> Humanitarian</div> <div><input checked="" type="checkbox"/> Development</div> <div><input checked="" type="checkbox"/> Advocacy</div>	
Head office location	Uppsala, Sweden		
Total number of country programmes	25	Total number of staff	110

1.2 Audit team

Lead auditor	Camille Nussbaum
Second auditor	Joanne O'Flannagan
Third auditor	--
Observer	Elissa Goucem, HQAI
Expert	--
Other	--

1.3 Scope of the audit

CHS Verification Scheme

Audit Stage	Certification	Independent Verification	Benchmarking	Other
Initial audit (IA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First maintenance audit (MA1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mid-term audit (MTA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Second maintenance audit (MA2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recertification audit (RA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extraordinary audit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short notice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>specify</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1.4 Sampling*

Randomly sampled country programme site	Included in final sample	Replaced by	Rationale / Comments	Selected for onsite visit or remote assessment
Colombia	Yes			Remote
Myanmar	Yes		Myanmar was initially excluded because it was part of MA2019 (remote) and South Sudan was selected for balance of geographical spread and scale of operations, however, after consultation with Act CoS South Sudan was rejected due to updated security information and Myanmar was reinstated for the onsite visit. Zimbabwe was selected as a back-	Initial plan onsite, but due to Covid-19 disruptions it was remotely assessed.

			up alternative to Myanmar due to risks of delay with visas and potential security issues. The disruptions caused by COVID-19 prevented the auditors from travelling to Myanmar. As a result, the onsite visit was cancelled and replaced by remote auditing methodologies.	
Central America (Guatemala / Honduras)	No	Iraq	Central America was discarded because it is geographically very close to Colombia. Iraq was selected to give better geographical coverage.	Remote

Add any other sampling performed for this audit:

Additional interviews were undertaken with Act CoS staff to gather further evidence due to the cancellation of the programme site visit as a result of COVID-19 disruptions.

No community consultations were carried due to the cancellation of travel to the selected country programme site; at the time of the audit, movement restrictions meant that arranging and facilitating community consultations using remote technology was not considered safe nor feasible.

CoC is at the beginning of its second 4-year audit cycle with HQAI. Over the first audit cycle (2015-2020) CoS has demonstrated good and improving performance over time and has strong internal quality assurance and control mechanisms in place. These give the auditors sufficient confidence, that despite the lack of a site visit and consultations with communities for this audit, CoC can be re-certified. Furthermore, to compensate for the cancelled site visit, the next maintenance audit will include a programme site visit, so that consultations with communities and affected populations can take place directly.

**It is important to note that the audit findings are based on a sample of an organisation's country programmes, its documentation and observation. Findings are analysed to determine an organisation's systematic approach and application of all aspects of the CHS across different contexts and ways of working.*

2. Activities undertaken by the audit team

2.1 Locations assessed

Locations (offices, projects at country programme level)	Dates	Onsite or remote
Head office, Uppsala	25-26 February 2020; 24-27 April 2020	Onsite
Iraq (2x partner)	23-24 March 2020	Remote
Colombia (2x partner)	24-27 March 2020	Remote
Myanmar (joint ACT country office and 1x partner)	6-7 April 2020	Remote
Ethiopia	27 April 2020	Remote

2.2 Interviews

Position / level of interviewees (add information as necessary)	Number of interviewees	Onsite or remote
Head Office		
Management	12	8 onsite / 4 remote
Staff	9	7 onsite / 2 remote
Country Programme(s)		

Management	2	2 remote
Staff	1	1 remote
Partner staff	13	13 remote
Others (specify)		
Total number of interviews	37	15 onsite / 22 remote

2.3 Consultations with communities

Type of group	Number of participants	
	Female	Male
<i>Please see note above regarding sampling</i>	0	0
Total number of participants	0	0

2.4 Opening meeting

Date	2020/02/25
Location	Uppsala
Number of participants	13
Any substantive issues arising	No

2.5 Closing meeting

Date	2020/02/26
Location	Uppsala
Number of participants	3
Any substantive issues arising	No

2.6 Programme Site(s)

Briefings

De-briefings

No programme site briefings were carried out as a result of COVID-19 disruptions and cancellation of travel to selected country programme site.

3. Background information on the organisation

3.1 Governance and management structure

Act Church of Sweden (Act CoS) is the International Department of the Church of Sweden based in Uppsala. The department is one of seven at a national level. Act Church of Sweden is formally governed by the Church Board and supported by an advisory body, the International Council, appointed by the Church Board.

At the Initial Audit in 2015 Church of Sweden had just undergone a major restructuring of the International Department. The structure was further refined in November 2017 and involved the development of a simpler two-tier management system designed to improve decision making, enhance thematic support to programmes and Programme, Monitoring Evaluation, Reporting and Learning support (PMERL) and improve fundraising and external communications. There was an increased emphasis on quality and accountability, with the revised and expanded Quality and Accountability Framework (QAF) integrated into the strategic plan and into Planning, Monitoring, Evaluation, Reporting and Learning (PMERL).

During 2019 Church of Sweden International Department changed its name to "Act Church of Sweden" to increase engagement and visibility of Act Church of Sweden in Sweden and to

increase the clarity of its mandate and mission with partners and donors. Two key roles were introduced in 2019 with a focus on quality: 1. Operational Controller with responsibility for improving and streamlining risk and strategic management 2. Deputy Director of Act CoS with a focus on support to management planning and reporting along with coaching of managers on leadership and management.

The structure of the International Department is shown below:



3.2 Effectiveness of the internal quality assurance systems

Act CoS' current Strategic Plan, 2018-22, affirms its commitment to the Core Humanitarian Standard (CHS) and to closer collaboration with ACT Alliance and its members. The Strategic Plan and internal organisation development goals are, since 2017, complemented by a strategic map (balanced scorecards) at overall organisational level. The strategic maps are an internal quality management tool that are reflected on and analysed biannually. The organisational risk matrix is also reviewed and updated biannually and provides the basis for senior management oversight and control with an emphasis on ensuring organisational and partner capacities. Both tools are designed to ensure that Act CoS remains fully aligned with its strategic priorities.

Act CoS plays a significant role within the ACT alliance on key quality and accountability matters. The organisation participates in several ACT Reference Groups including the Quality and Accountability Reference Group, with the aim of providing strategic advice and support to ACT members on programme implementation. In late 2019 the Act CoS Director of Strategic Planning was appointed to the Board of the CHS Alliance with a focus on a supporting a more active role for rights holders in the work of the Alliance.

3.4 Work with partner organisations

Act CoS works entirely with partners and this has not changed since the initial audit. Act CoS makes significant efforts to work more closely with the ACT Alliance (particularly for humanitarian work) and is involved in a number of ACT Alliance Reference Groups and other initiatives to support capacity building of partners including in relation to complaints response and feedback mechanisms and Code of Conduct. A commitment with the eight European ACT Alliance members (E8) also focuses on collective efforts to improve partner capacity and maximising use of collective resources and improving programme impact. Currently Act CoS works in 25 countries: 13 country and 3 regional programmes, 1 humanitarian programme

(the refugee response in the Horn and East Africa) and one Global policy dialogue programme.

4. Overall performance of the organisation

4.1 Effectiveness of the management system and internal quality assurance and governance

At the time of Initial Audit in 2015, Act CoS had a robust management and quality assurance system in place. Across the first certification cycle, Act CoS has continued to develop standards and procedures to strengthen its systems in line with the commitments of the CHS.

During the four-year certification cycle, Act CoS refined its QAF and the PMERL Handbook, which together provide a basis for internal quality assurance. Both documents have been regularly updated to include new technical standards, approaches and tools, based on good practice in the sector learning from programme reviews and audits, internal reflection and dialogue with partners. Global PMERL processes are divided into different phases during the year, to facilitate systematic and coordinated planning and budgeting. The Organisational Development and Institutional Funding Unit, along with the Unit for International Finance, play key roles in preparing, supporting, and following up on management processes in accordance with the established calendar.

Act CoS is currently working to address challenges that emerged from the development of tools. The alignment of processes for the different mandates of the organisation (Humanitarian, Development and Advocacy) remains a challenge to ensure adequacy and practicality of common templates and processes.

4.2 Overall organisational performance in the application of the CHS

Act CoS performance in the application of the CHS was relatively high in its first audit and improvements have been made throughout the first certification cycle. At the time of this recertification audit, routines and monitoring tools have been refined and the main areas of concern that were identified, have been addressed. Some weaknesses remain in specific areas, such as the systematic referral of unmet needs, risk management linked to safeguarding of information, impact on local economy and the sharing of learnings with affected communities. The improvements made in the communication processes with affected communications and the control of complaints handling mechanisms are also to be completed to ensure all partners (in both, humanitarian and long-term development, programs) are aligned with CHS commitments.

Note: CHS scoring range evolved over the first certification cycle. Since 2019, the scale is no longer from 0 to 5 but from 0 to 4.

4.3 PSEA

Overall Act CoS scores reasonably strongly on PSEA and Do No Harm performance, indicating that the organisation is actively committed to ensuring that risks of harm to people and communities are identified and mitigated and that measures are in place to protect people from sexual exploitation and abuse. Act CoS is particularly strong in relation to supporting partners on effective community consultation, engagement and ownership, which contributes to the creation of a safer programming environment, and acts on negative effects in a timely and systematic manner. Act CoS takes complaint handling very seriously and continues to improve its own processes and systems for handling sensitive complaints confidentially and fairly. Where partner complaint mechanisms are in place these can handle complaints in a fair, timely and appropriate manner.

4.4 Localisation

Act CoS scores strongly on localisation which is very much in line with its principles, values and mission and approach to partnership. This is particularly evidenced in its approach to programming with a focus on strengthening local ownership and community resilience. It is

also reflected in ongoing technical trainings for local partners on community based psychosocial support (CBPS) and survivor and community-led crises responses (SCLR). Guidelines and strategies for humanitarian action emphasise local ownership and leadership and its approach to crisis recovery depends on developing longer term commitments for sustainable recovery with a focus on building local capacities. Act CoS sustains partnerships that emphasise mutual understanding, shared values, accompaniment and solidarity and partners highly value the respectful and collaborative nature of the partner relationship.

4.5 Gender and diversity

Act CoS scores strongly on Gender and Diversity. This is very much in line with Act CoS' commitment to gender justice and equality, a rights-based approach and concern for the inclusion of potentially vulnerable groups in programmes, including women and girls, PLWDs and minority and marginalised groups. Partners are specifically required to include consideration of gender and age analysis and disability inclusion in their reporting. Act CoS provides tools and guidance for partners in relation to gender integration and it is also highlighted in CBPS training and tools (interlinkages between community psychosocial support and gender inclusion). Act CoS' explicit commitment to a gendered and human rights-based approach is clearly understood by partners and is reflected in programme/project documentation, partner dialogue and feedback.

4.6 Organisational performance in the application of the CHS commitments

Commitment	Strong points and areas for improvement	Feedback from communities	Average score
Commitment 1: Humanitarian assistance is appropriate and relevant	Act CoS is working in line with policies and tools that consider both, capacity and diversity of communities with a clear understanding of humanitarian principles. Monitoring tools and routines established in the PMERL handbook, along with the constant dialogue with partners, facilitates the adjustment of projects according to changes in needs, capacities and context.	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	3
Commitment 2: Humanitarian response is effective and timely	Act CoS systematically uses relevant technical standards and tools for the design, monitoring and evaluation of its programmes. Diversity, especially in terms of gender and age, is systematically addressed throughout the whole project cycle. However, although some projects have a systematic approach to referrals of unmet needs, particularly for CBPS, it is not the case for all. Previous audits have noted that CoS has improved on how it has created ownership of its PMERL tools and routines by Act CoS staff. However, at the time of recertification audit, while staff have a generally good knowledge of the PMERL tools, the use of common templates is not always consistent.	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	2.9
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	Act CoS is committed to strengthening local capacities which is reflected across its policies and practice. Act CoS leads the ACT Alliance on Community Based Psychosocial Support (CBPS) and regularly deploys CBPS expert capacity for training and technical accompaniment at local levels. The organisation places do no harm at the centre of engagement and dialogue with partners and is committed to increasing its capacity to avoid unintended negative effects in practice (e.g., the recent Environment and Climate Change baseline exercise).	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	2.6

	<p>However, current guidance for partners does not take account of consideration of negative effects to the local economy. While systems to improve the safeguarding of personal information are robust at HO level, assurance processes on partner systems to safeguard personal information collected from people and communities, are not systematic.</p>		
<p>Commitment 4: Humanitarian response is based on communication, participation and feedback</p>	<p>Participation is a core value and principle across Act CoS' work and is systematically embedded in strategies and programmes and in guidance for partners; monitoring templates have been updated to include specific prompts for Act CoS staff to use in discussions with partners on how they ensure community feedback, as well as for Act CoS staff to gather disaggregated data when communities provide feedback to them. However, these practices are more systematic in humanitarian rather than long-term development programmes.</p> <p>Partner agreements require partners to share information with rights holders and target groups relating to the organisation, projects and staff code of conduct. Staff, however, are not fully sensitised to all the requirements and do not systematically integrate them into partner dialogue and monitoring practices and information on expected behaviour of staff is not routinely provided in all projects.</p>	<p>The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.</p>	2.4
<p>Commitment 5: Complaints are welcomed and addressed</p>	<p>Act CoS manages complaints at senior management level and prioritises high levels of confidentiality in its handling of sensitive complaints. In 2019 a working group was established with other ACT Alliance members to share information and promote good practice in all aspects of complaint handling. Act CoS staff carry complaint information cards which they give to partner staff and communities.</p> <p>Partners are required to have a CoC to prevent corruption, fraud, exploitation and abuse (include SEA), and to ensure child safeguarding, and they are required to have risk mitigation measures in place to handle fraud and corruption. However, only humanitarian partners are required to have complaint response mechanisms documented and in place, it is not a requirement for long-term development partners.</p> <p>Act CoS encourages and engages with partners to find safe and appropriate ways to sensitize communities on appropriate behaviour, particularly in humanitarian programmes, however, Act CoS does not yet work with partners in a systematic way to ensure communities are fully aware of these commitments and does not systematically monitor communities' awareness of and access to complaint mechanisms.</p>	<p>The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.</p>	2.4
<p>Commitment 6: Humanitarian</p>	<p>Act CoS continues to have a strong commitment towards coordination with all relevant stakeholders, including national and local actors, in its policies and</p>	<p>The auditors were unable to conduct the site visit and gather</p>	3

response is coordinated and complementary	practices at global, regional and local levels. The organisation works almost exclusively through local and global partners based on clear partnership agreements. Act CoS participates in coordination bodies, and shares information through different communication channels such as coordination meetings (mostly within the ACT Alliance mechanisms), meetings with decision makers, research studies and global humanitarian initiatives.	feedback from communities due to COVID-19 disruptions.	
Commitment 7: Humanitarian actors continuously learn and improve	Act CoS has robust policies and processes in place to ensure continuous learning and innovation. Learning is defined as one of the key principles of the organisation. Act CoS uses monitoring and evaluation results to improve programmes and inform innovation and key learnings are widely shared across the organisation. As part of the ACT Alliance, Act CoS also shares learnings at global, regional and local levels within other members of the Alliance. However, Act CoS and its partners do not systematically share learnings with affected communities.	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	2.8
Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably	<p>Act CoS policies and procedures are fair and transparent and there are explicit policy commitments to the equal rights of all employees and to non-discrimination. Recent changes in team structures and management have contributed to greater stability of human resource capacities. Revised induction processes are currently being finalised with an increased emphasis on CoC and PSEA. Non-Swedish speaking staff are increasingly provided for through translation into English. Formal performance management is conducted on a bi-annual basis, however, performance management procedures for staff based outside Sweden are less systematic than for HO staff.</p> <p>Staff and partners have access to a range of learning and capacity building opportunities across different areas of technical and management competency.</p> <p>Act CoS is committed to ensuring staff care, and security risks to staff and partners are considered as part of risk management in country strategies and project proposals, however, Act CoS staff safety and security does not form part of risk management procedures at HO and Act CoS does not systematically assess or monitor that partners have security and well-being policies and procedures in place for partner staff.</p>	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	2.8
Commitment 9: Resources are managed and used responsibly for their intended purpose	Act CoS continues to have policies and processes in place to ensure resources are managed and used responsibly for their intended purpose. In recent years CoS conducted a baseline and new tools were developed to improve the assessment of the environmental impact of its projects.	The auditors were unable to conduct the site visit and gather feedback from communities due to COVID-19 disruptions.	3

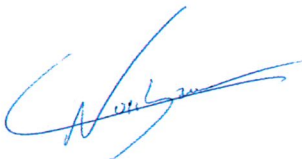
5. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Resolution due date	Date closed out
2020 - 4.1: Act CoS does not systematically ensure that information about the expected behaviour of staff is provided to people and communities.	Minor	2021/06/15	
2019 - 4.4: CoS does not systematically include feedback from communities in their dialogue with partners and does not systematically pay particular attention to gender, age and diversity of those giving feedback.	Minor	2020/04/16	2020/04/16
2019 - 5.2: CoS does not systematically support its partners on communicating with communities on how to access CRM processes.	Minor	2020/04/16	2020/04/16
2020 - 5.4: Act CoS does not support long-term development partners to have documented complaints handling mechanisms in place that cover programming, sexual exploitation and abuse and other abuses of power.	Minor	2021/06/15	
2019 - 5.6: Systemic changes made to CoS processes to ensure that people affected by crisis are aware of the expected behaviour of partner staff including partner's organisational commitments made on the prevention of sexual exploitation and abuse in their Code of Conduct have not yet flowed through to all communities.	Minor	2021/06/15	


6. Sampling recommendation for next audit

Sampling rate	Based on the standard sampling rate, it is recommended that 3 country programmes are included in the Maintenance audit (MA).
Specific recommendation for selection of sites	<p>As the auditors were unable to conduct a country programme site visit for this recertification audit and gather feedback from communities due to COVID-19 disruptions, it is recommended that 1 country programme be selected for a site visit at the Maintenance Audit in 2021.</p> <p>Selection of programme sites should include locations where Act CoS Regional Representatives are established and cover different geographical areas and mandates.</p>


7. Lead auditor recommendation

In our opinion, Act CoS, is implementing 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 on Quality and Accountability. We recommend maintenance of certification.	
Name and signature of lead auditor:  Camille Nussbaum	Date and place: Madrid, 2020-07-15

8. HQAI decision

<input checked="" type="checkbox"/> Certificate maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Next audit Maintenance Audit to be completed before 2021/06/15	
Name and signature of HQAI Executive Director:  Pierre Hauselmann	Date and place: Geneva, 17 July 2020

9. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: <i>If yes, please give details:</i>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
Name and signature of Act CoS representative:  Coleen Heemskerk	Date and place: Uppsala, 18082020

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 HQAI in writing 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 – Appeal Procedure.

Annex 1: Explanation of the scoring scale

0	Major non-conformity or Major weakness
	Your organisation currently does not work towards applying this requirement, either formally or informally. It's a major weakness that prevents your organisation from meeting the overall commitment.
1	Minor non-conformity or Minor weakness
	Your organisation has made some efforts towards applying this requirement, but these efforts have not been systematic.
2	Observation
	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.
3	Conformity
	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled
4	Exceptional conformity
	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.