

CAFOD

Maintenance Audit – Summary Report 2021/08/18

1. General information

1.1 Organisation

Type	Mandates	Verified	
<input checked="" type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	
Head office location	London, UK		
Total number of country programmes	35	Total number of staff	400

1.2 Audit team

Lead auditor	Johnny O'Regan
Second auditor	
Third auditor	
Observer	
Expert	
Witness / other	

1.3 Scope of the audit

CHS Verification Scheme	Certification
Audit cycle	Second audit cycle
Phase of the audit	1st Maintenance Audit
Extraordinary or other type of audit	N/A

1.4 Sampling*

Randomly sampled country programme sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
Eswatini	Yes		Part of initial random sample and is geographically and programmatically representative	Remote
Guatemala	Yes		Part of initial random sample and is geographically and programmatically representative	Remote
Israel	Yes		Part of initial random sample and is programmatically representative; also interesting because of possibility to compare with two other geographically contiguous sampled programme sites	Remote
Jordan	Yes		Part of initial random sample and is programmatically representative; also interesting because of possibility to	Remote

			compare with two other geographically contiguous sampled programme sites	
Lebanon	Yes		Part of initial random and is programmatically representative; also interesting because of possibility to compare with two other geographically contiguous sampled programme sites	Remote

Any other sampling performed for this audit:

Staff (at HQ and programme site) were selected based on their ability to speak to specific corrective action requests.

Sampling risk:

The recertification report (and sampling table) recommended four sites to be sampled, one of which should be on site. However, due to Covid the on-site visit was not possible and so the sample was extended to one further site for remote assessment, providing greater coverage and hence assurance. Because of ongoing concerns with community gatherings in the countries, the auditor decided not to undertake remote community consultations. The auditor has confidence in the sample, and the findings they generated; nonetheless, the result of the lack of community consultation is that none of the open CARs could be closed at this audit.

**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	Dates	Onsite or remote
Eswatini	June 2021	Remote
Guatemala	June 2021	Remote
Israel	June 2021	Remote
Jordan	June 2021	Remote
Lebanon	June 2021	Remote

2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	1	1	Remote
Staff	1		Remote
Country Programme / Project Office(s)			
Management	4		Remote
Staff	4	1	Remote
Partners			
Partner staff	5	1	Remote
Others			
Total number of interviewees	15	3	

2.3 Opening meeting

Date	2021/05/05
Location	Remote
Number of participants	2
Any substantive issues arising	No

2.4 Closing meeting

Date	2021/06/28
Location	Remote
Number of participants	3
Any substantive issues arising	No

3. Background information on the organisation

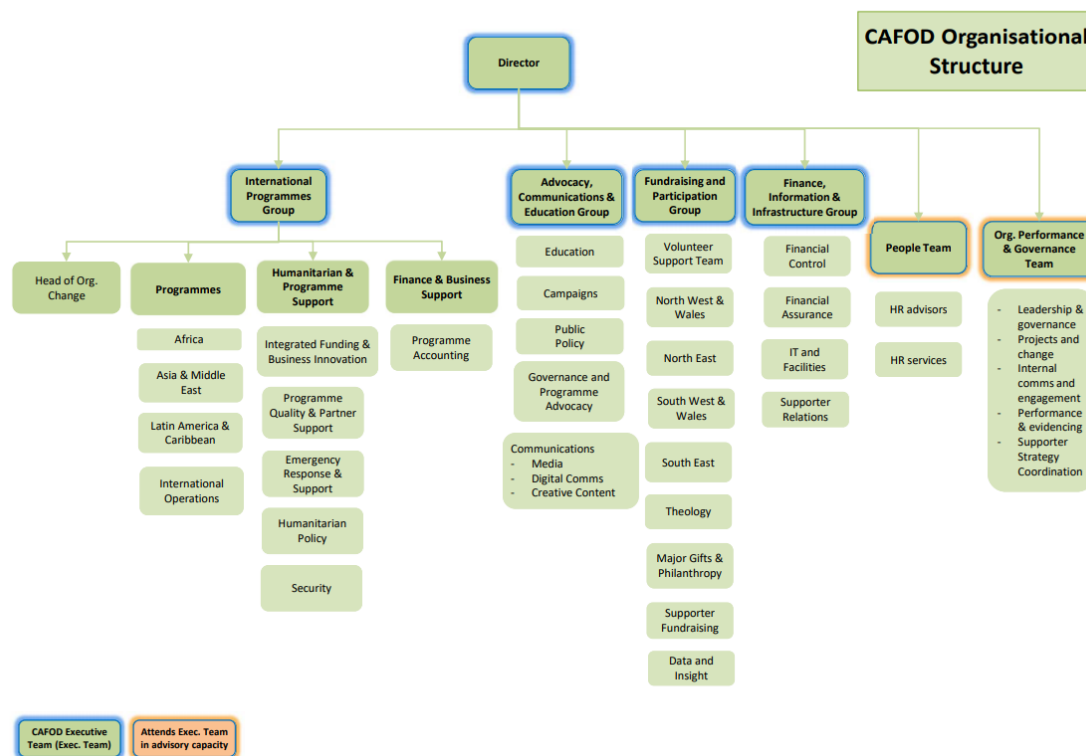
3.1 General information

Catholic Agency for Overseas Development (CAFOD) (est. 1962) is the official overseas development and relief agency of the Catholic Church in England and Wales. CAFOD acts as part of the global Caritas network, a federation of approximately 160 Catholic relief and development agencies and continues to work in 4 main thematic areas: Sustainable Development, Disaster and Emergency Response, Campaigning and Advocacy, and (in the UK) Education. CAFOD currently works in approximately 35 countries worldwide though it has decided to exit a number of country programmes during 2021, including Niger, Zambia and Cambodia. A new Head of Africa Programme Change has been recruited. CAFOD is developing a new Integral Ecology Programme Model (IEPM) to support the delivery of the CAFOD Strategic Framework, Our Common Home (2020). One of the main features is the move from a projectized to a programmatic approach. This will involve a more strategic and long term approach that will focus on root causes of poverty. In future, all new Core Programmes will need to demonstrate alignment with Integral Ecology Characteristics, which also includes clear commitments to monitoring and evaluation and to safeguarding. CAFOD is in the process of revising its humanitarian strategy to ensure it aligns with these new ways of working.

3.2 Governance and management structure

Compared to the 2020 recertification report, there are no major changes in CAFOD's organisational governance, four new governors have been appointed in line with CAFOD's procedures for rotation of members of the governing body. There have been some changes to mechanisms and processes relevant to decision-making at organisational level. The emergency and development strands of CAFOD are now unified under the International programmes group; CAFOD also narrowed its leadership group – previously there were eight members; now the Executive Leadership Team has six members: Director, International Programmes Director and heads of finance, advocacy, fundraising, and people.

Other areas of change include, for example, a new programme finance team to allow CAFOD to ensure the partners finance model marries with Our Common Home.



3.3 Internal quality assurance mechanisms and risk management

CAFOD continues to implement the Safe, Accessible, Dignified and Inclusive (SADI) programming that addresses a number of areas where it encountered issues previously such as complaints handling, data protection and staff behaviour. CAFOD also completed Partner Safeguarding Profiles for all partners in line with its commitment to complete this process by October 2020. These are reflected in key performance indicators (KPIs).

The remit of the Programme Quality and Partner Support Team has been revised to work across the international programme to strengthen programme quality, with a focus on areas identified by CHS audits including Monitoring Evaluation and Learning and Inclusion. A number of new roles have been completed that have relevance for quality assurance, including Programme Quality Lead, Data Quality and Evidencing Officer, Gender & Inclusion Advisor, and a Capacity Strengthening Advisor.

The Strategy and Performance Committee (a sub group of the trustees) continues to exercise responsibility for oversight of ensuring programme delivery and quality assurance as an organisation and risk management. CAFOD undertakes learning reviews such as the recent review of its Humanitarian Capacity Strengthening process and the Covid-19 response learning review.

3.4 Work with partner organisations

Outside the UK, CAFOD works through approximately 350 short and long-term partnerships including local and international organisations, both faith-based and secular.

There have been no fundamental changes in the way CAFOD works with partners since the previous audits and its focus on capacity strengthening continues. A recent review of CAFOD's humanitarian capacity strengthening programme found that it is partner led. CAFOD has committed unrestricted funding to drive its localization agenda forward and the subsidiarity principle remains central to CAFOD's way of working. CAFOD is seeking to move towards more programmatic (rather than projectised) funding of partners.

CAFOD continues to customise its approach according to each partner based on their needs, risks and institutional approach. The biggest challenge for CAFOD is the prioritisation of partners for

support. However, this will be mitigated by reductions in partner numbers (by 30% from 2020-23) as well as a shift towards more 'systematic' capacity strengthening support that will prioritise support based on needs and the extent to which partners are meeting minimum requirements in relation to programme quality. CAFOD will coordinate and 'connect' partners with capacity strengthening providers so that any risks identified in terms of capacity gaps and duplication of support are minimized/avoided.

4. Overall performance of the organisation

4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation

Because CAFOD's customary approach to partners (and other stakeholders) was relational, its biggest challenge to quality assurance has been systematising its approach. The safeguarding profiling (and information collation and analysis) has been systematic by prioritising high risk projects and using this to drive change internally and with partners. The available evidence continues to suggest that these mechanisms and processes are delivering the required change. CAFOD's governing body and senior management's continuing championing of this process has resulted in the strong focus at all other levels of the organisation. Nonetheless, despite progress reflected in the annex, CAFOD is still working towards implementing PDMEAL to include standardising and harmonising its approach with common indicators.

Webpromise (the programme management system) remains a useful tool for programme management but less so for extracting information and learning. For this reason CAFOD is migrating it to another platform, which is intended to allow analysis of information at the organisational as well as programmatic level. This forms a significant part of the IEPM workstream on programme quality. In terms of monitoring improvements, the new approach is intended to provide a common language framework and indicators to monitor programmes. Some common indicators were trialled as part of covid-19 response and will gradually be embedded in ways of working in addition to systematic reporting through Organisational Portfolio Management. These are useful mechanisms to keep the organisation on track.

4.2 How the organisation applies the CHS across its work

CAFOD continues to make strong progress in systematically addressing issues identified in previous audits while recognising the principle of subsidiarity. For example, Partner Safeguarding Profiles include questions on the areas identified as Minor CARS: whether systems are in place to protect personal data collected from communities, if the organisation has a safe and responsive complaints handling mechanism(s), whether communities are consulted on their design and how partners promote awareness of expected staff behaviour.

4.3 Average score per CHS commitment

Commitment	Average Score*
Commitment 1: Humanitarian assistance is appropriate and relevant	2.8
Commitment 2: Humanitarian response is effective and timely	2.4
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	2.8
Commitment 4: Humanitarian response is based on communication, participation and feedback	2.7
Commitment 5: Complaints are welcomed and accepted	1.7
Commitment 6: Humanitarian response is coordinated and complementary	3.3
Commitment 7: Humanitarian actors continuously learn and improve	2.5
Commitment 8: Humanitarian response is effective and timely	2.8
Commitment 9: Resources are managed and used responsibly for their intended purpose	2.8

* *Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each Commitment, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0.*

5. Summary of non-conformities

Corrective Action Requests (CAR)*	Type	Resolution due date	Date closed out
2019 - 3.8: CAFOD has not yet demonstrated sufficient capacity strengthening and oversight of partners to ensure that partners are systematically protecting personal information.	minor	2022-08-04	
2019 - 5.1: CAFOD has not yet demonstrated that it has undertaken sufficient capacity strengthening and oversight of partners to ensure they consult with communities on the design, implementation and monitoring of complaints-handling processes.	minor	2022-08-04	
2019 - 5.3: CAFOD has not yet demonstrated systematic capacity strengthening and oversight of partners to ensure that partners are managing complaints timely, fairly and appropriately.	minor	2022-08-04	
2019 - 5.6: CAFOD has not yet demonstrated formal oversight over partners' efforts to ensure that communities are aware of expected staff behaviour.	minor	2022-08-04	
2020 - 7.2: CAFOD does not yet systematically use learning from M&E, complaints and feedback to implement change.	minor	2022-08-04	
Total Number	5		

* *Note: The CARs are completed by the audit team based on the findings.*

6. Sampling recommendation for next audit

Sampling rate	The standard sampling rate indicates that 4 CPs should be included in the Mid Term Audit (2 visits, 2 remote). No deviation from this standard sampling is recommended.
Specific recommendation for selection of sites	N/A

7. Lead auditor recommendation

In our opinion, CAFOD has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.

Based on the evidence obtained, we confirm that we have received reasonable assurance that CAFOD is implementing the necessary actions to address the minor CARs identified in the previous audit, and continues to meet the requirements of the Core Humanitarian Standard.


We recommend maintenance of certification.

Name and signature of lead auditor:  Johnny O'Regan	Date and place: 29 July 2021, Dublin, Ireland
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8. HQAI decision

<input checked="" type="checkbox"/> Certification maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Next audit: Surveillance audit before 2021/08/18	
Name and signature of HQAI Executive Director:  Pierre Hauselmann	Date and place: 18 th August 2021, Geneva

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 the organisation's representative:  J G O'Donoghue	Date and place: 23.08.21, Romero House, London

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*

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.	<p>Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>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:</p> <ul style="list-style-type: none"> • 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.	<p>Score 2: indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>Score 3: indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> • 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.	<p>Score 4: indicates an exemplary performance in the application of the requirement.</p>

* Scoring Scale from the CHSA Verification Scheme 2020