Christian Aid
Maintenance Audit Report
CHS Certification

CERT-MA1-CA-2017-006

Date: 2017-04-05

Table of Contents

1. General information

Organisation Name:	Christian Aid	Certification Nª:	CERT-MA1-CA-2017-006
Type of organisation: ☐ National ☒ International ☐ Federated ☐ Membership/Network ☐ Direct assistance ☒ Through partners		Organisation Mandate: ☒ Humanitarian ☒ Development ☒ Advocacy Verified Mandate(s) ☒ Humanitarian ☒ Development ☒ Advocacy	
Organisation size: (Total number of programme sites/ members/partners)	UK staff: 502 Overseas staff: 397 Programme Sites: 30 Countries CA work in: 44 Partners: 422	Legal Registration: (NGO, Church, etc)	NGO
Head Office visit Location and date:	London / 2017-03-15	Lead Auditor:	Elissa Goucem

2. Scope

   ☐ External verification   ☒ Maintenance Audit

   ☐ Certification audit   ☐ Recertification audit

The auditor did not identify substantial changes in CA systems that would require an investigation on areas that were not part of the non-conformities identified in the initial audit report.

The maintenance audit focused on the non-conformities identified in the previous audit report and found that Christian Aid took action to close the non-conformities in the given times for resolution.

Lead Auditor's Name and Signature:	Elissa Goucem	Date and Place:	2017-04-05, Geneva

3. Schedule summary

3.1 Opening and closing meetings

	Opening meeting	Closing meeting
Date	London, UK	London
Location	2017-03-15	2017-03-15
Number of participants	2	2
Any substantive issue arising	none	none

3.2 Interviews

Type of people interviewed	Number of people interviewed
Head Office	
Management	3
Staff	1

4. Decision

Certification Decision:	
Certification	Intermediate audit
☐ Certified	☒ Maintenance of certificate
☐ Preconditioned (Major CARs)	☐ Suspension of Certificate (Major CARs)
Certification Decision Pierre Hauselmann Executive Director Humanitarian quality assurance Initiative	Date: 13 APRIL 2017

Appeal

In case of disagreement with the conclusions and/or decision on certification, the organisation can appeal to HQAI within 30 days after the final report has been transmitted to the organisation.

HQAI will investigate the content of the appeal and propose a solution within 15 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform in writing HQAI within 15 days after being informed of the proposed solution of their intention to maintain the appeal.

HQAI will take action immediately, and identify two Board members to proceed with the appeal. These will have 30 day to address it. Their decision will be final.

The details of the Appeal Procedure can be found in document PRO049 – Appeal and Complaints Procedure.

5.   Summary on actions taken to resolve non-conformities

CA integrated its management response to the audit report into an organisation wide review of its processes, focused on streamlining and integrating its quality management processes, strengthening existing policies, mechanisms and procedures on the one hand, and trialling new approaches through organisation wide integral projects such as its "Inclusion programme framework". As part of this work CA identified 3 main areas that address the different non-conformities: complaints and feedbacks, inclusion and PSEA. Follow up on the action plan for closing the CARs was ensured through the CHS organisational lead in charge of reporting on progress on a regular basis to the organisational accountability group.

The auditor found that these approaches are relevant to most of the non-conformities identified in the initial audit and extended the time for resolution of CAR 5.4 and 5.6 to one additional year.

CAR 1.2:   CA does not assure that programmes are based on impartial assessment of the needs and risks of the community involved in all projects.

Time for resolution: 18 months

CAR in resolution

Findings: As part of its "Inclusive programming" framework, CA has integrated the CHS training with power analysis and inclusion trainings. These are being rolled out across the organisation and are all built around core programme principles that include the need for thorough context and needs analysis to ensure that the most vulnerable are reached.

CA updated its Humanitarian Handbook to clarify and strengthen the requirements on identification and analysis of the vulnerabilities and needs of different community groups. The Handbook have standard formats for proposals and concept notes that integrate the requirement for partners to identify how the marginalised and disadvantaged groups have been identified and/or considered in the project.

Evidence: Documents 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 21, 23, 24, 25, 28, 29, 30 and interviews with staff

CAR 1.5: CA does not routinely and systematically collect disaggregated data, taking into account the diversity of communities, including disadvantaged or marginalised people

Time for resolution: 18 months

CAR in resolution

Findings: The work on inclusive programming includes commitments to routinely collect Sex, Age, Disability data and particular vulnerabilities. In parallel to the inclusive programming framework CA put a strong emphasis on developing standardised digital monitoring and evaluation tools that shall contribute to the efforts for a more systematic collection and analysis of disaggregated data. The development of Part 2 of the Humanitarian Handbook clarifies which mandatory data shall be collected by staff at design, monitoring and evaluation. The ongoing review of part 3 of the Handbook aims at aligning the actual tools to the objectives of the inclusive programming framework.

Evidence: Documents 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 21, 23, 24, 25, 28, 29, 30 and interviews with staff

CAR 2.4: CHS (HAP) protection and PSEA standards are not used in the planning and assessment of all programmes, especially for non-humanitarian programmes

Time for resolution: 1 year

CAR closed

Findings: CA developed a Child safeguarding policy, and an improved mandatory e-learning on its Code of Conduct with the objective to raise awareness amongst staff around it and its specific commitments on PSEA. The e-learning, also accessible to partners through CA platform, is also expected to form the basis of a dialogue with partners on issues related to PSEA in programmes.

As part of its work on protection mainstreaming, CA included specific indicators in its "Inclusive Programming checklist" and "Inclusion scoring tool" to ensure protection needs are taken into account from the onset of programme and project design. The programme management induction also offers guidance on protection and PSEA as part of the programme cycle. Evidence at country level show a more consistent integration of the do no harm approach by partners through the roll out of the inclusive programming approach.

Evidence: Documents 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 21, 23, 24, 25, 28, 29, 30, 31 and interviews with staff

CAR 3.3a: CA does not fully enable first responders to perform their role

Time for resolution: 2 years

CAR in resolution

Findings: CA is reviewing its country strategic plans with a view at enabling the capacity of partners to perform their roles as first responders. Its approach to "inclusive programming" and the review of its Humanitarian Handbook provide guidance for preparedness work.

Evidence: Documents 1, 2, 3, 4, 6, 7, 14, 15 and interviews with staff

CAR 3.3b: Programmes do not systematically promote an appropriate representation of marginalised and disadvantaged groups

Time for resolution: 18 months

CAR in resolution

Findings: CA developed the inclusive programming tools as a way to tackle appropriate representation of marginalised and disadvantaged groups. New tools such as the Inclusion guidance, Inclusive Data collection (use of inclusive methodologies) and Scoring checklists ("challenge power imbalances") require staff to pay attention to the participation of vulnerable groups in the planning, monitoring and closure of projects. The Humanitarian Handbook part 2 have standard formats for proposals and concept notes that require partners to identify how the marginalised and disadvantaged groups have been identified and considered in the project

Evidence: Documents 1, 2, 3, 4, 6, 7, 14, 15 and interviews with staff

CAR 3.6a: CA does not systematically identify the potential or actual unintended negative effects on people's safety and of sexual exploitation and abuse by CA or partners staff.

Time for resolution: 1 year

CAR closed

Findings: CA is in the process of reviewing the assessment templates to strengthen how these capture potential and actual unintended negative effects. For example the Rapid Assessment templates now ensures that information is collected on formal and informal systems in place for receiving complaints. As part of the inclusive programming and protection mainstreaming approach, the project assessment is being revisited to include peoples' safety and PSEA and a series of guidance on protection and a Child Protection Policy are in the process of being approved.

The new training on the Code of Conduct is expected to help raise awareness and be the prompter of consistent dialogue with partners on people's safety and PSEA.

Evidence: Documents, 10, 12, 13, 14, 19, 26, 27, 37, 40 and review of the e-learning module, interviews with staff

CAR 3.7: CA does not routinely assure robust protection and PSEA mechanisms are in place at the partner level

Time for resolution: 2 years

CAR in resolution

Findings: CA has taken steps to strengthen (see 3.6a) and test its own organisational systems and frameworks before taking further steps with partners. The inclusive programming framework is again considered a key driver for rolling out more specific work with partners.

Evidence: Documents, 10, 11, 14, 19, 26, 27 30, 31, 37, interviews with staff

CAR 4.1: Information is not systematically provided to communities and people affected by crisis about the organisation, the principles it adheres to, the expected behaviours of staff, its programmes and deliverables

Time for resolution: 2 years

CAR in resolution

Findings: CA is in a process of benchmarking different approaches to identify the best way to formalise and strengthen existing processes related to feedback and accountability. Testing ways of strengthening accountability and inclusion was part of specific pilot projects such as the PPA 9 month extension from April to December 2016 in 17 countries.

CA also delivered a series of accountability trainings, workshops and consultations as part of the inclusive programming project

Evidence: Documents 1,2,3,4,5,6, 8,9, 15, 21, 23, 24, 25, 29 and interviews with staff

CAR 4.3: Inclusive representation is not ensured at all stages of the work

Time for resolution: 18 months

CAR in resolution

See 1.2

Findings: The inclusive programming project is the main framework that CA chose to approach this issue and is expected to set the grounds for tackling this non-conformity in the coming year.

Evidence: Documents 1,2,3,4,5, 21, 22, 23, 30, 31, 32 and interviews with staff

CAR 5.1:   Communities and people affected by crisis are not systematically consulted on the design, implementation and monitoring of complaint-handling processes.

Time for resolution: 2 years

CAR in resolution

See 1.2

Findings: CA approach to strengthening its complaints handling mechanisms was integrated as part of its ongoing inclusive programming framework. As part of this project CA is in a process of organisation wide consultations to identify and trial different ways to approach feedbacks and complaints.

CA also chose to strengthen its own staff understanding of complaints handling and to strategically raise awareness on the subject through a series of consultations and trainings organisation wide.

Evidence: Documents, 1, 2, 3, 4, 5, 17, 20, 21, 23, 26, 27, 29, 40 and interviews with staff

CAR 5.2a: CA does not clearly communicate or ensure that communities are informed of how relevant stakeholders can access its complaint mechanism and the scope of issues it can address.

Time for resolution: 2 years

CAR in resolution

See 5.1

CAR 5.4:   Complaint handling processes are not in place for communities in all country programmes.

Time for resolution: 1 year

Additional time for resolution: 1 year

See 5.1

CAR 5.6: CA does not systematically ensure that communities are aware of the expected behaviour of its staff or commitments to PSEA.

Time for resolution: 1 year

Additional time for resolution: 1 year

See 5.1 and 2.4.

Findings: CA set Inclusive Accountability as a pillar of its inclusive programming framework, with specific objectives to ensure community members receive information so they understand what they can expect in terms of behaviour of staff and partners. Specific trainings for communities and partners are being rolled out as part of the protection mainstreaming.

Evidence: –

CAR 7.3: CA does not systematically share learning emanating from the programme with communities, government and other external stakeholders

Time for resolution: 18 months

CAR in resolution

Findings: CA has set up a Research, Evidence and Learning unit, with the objective of streamlining organisational learning and strengthen CA capacity to disseminate learning coming from programme. CA has also launched a new 'Programme Policy and Practice' website, which aims at centralising information dissemination.

Evidence: Documents 6, 8, 18, 22, 28, 29, 33, review of intraweb and digital tools for M&E, interviews with staff

CAR 8.1a: The Code of Conduct and Child Protection and Vulnerable Adults Policy are not thoroughly covered in induction processes, some staff are not fully aware of these or their implications.

Time for resolution: 1 year

CAR closed

See 2.4

CAR 8.1b: Not all components of the CHS are fully integrated into staff induction and performance management processes.

Time for resolution: 1 year

CAR closed

See 2.4

CAR 8.7a: CA does not systematically assure that partners have a code of conduct in place for its staff.

Time for resolution: 2 years

CAR in resolution

Findings: To ensure this is part of the assessment of partners, the country risk analysis tools and the RICSA process have been updated. The processes for partners' assessment also look at the accountability mechanisms that exist at country levels and the Partnership guidance has been updated to align it with the CHS.

Also see 2.4 and 3.7

Evidence: Documents 10, 13, 14, 19, 26, 27, 37 and interviews with staff

CAR 8.7b: CA does not systematically assure that staff fully understand its code of conduct and Child Protection and Vulnerable Adults policy and how they apply to them.

Time for resolution: 1 year

CAR closed

See 2.4 and 3.7

Evidence: Documents 10, 19, 26, 27 and interviews with staff

6. Organisation's signature

Acknowledgement and Acceptance of Findings

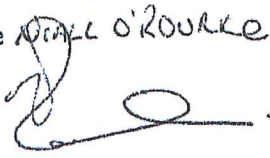(Organisation representative – please cross where appropriate)

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

Organisation's Representative Name and Signature: *NiALL O'ROURKE*

Date and Place: *13/04/17 Dublin, Ireland*

Annex 1: Document Mapping

N°	Title of document	Issue date	Links to which CHS requirement(s)?
1	Resilience framework roll out tracker 2016	2016	
2	Resulting Actions Nov 16	2016	
3	Inclusion Guidance Note Final	2016	
4	Inclusion Scoring Tool Final	2016	
5	Inclusive Programming Checklist Final	2016	
6	Christian Aid Power Learning Review response		
7	Progress Update of Shifting the Power in Bangladesh_May 2016	2016	
8	DME Working Group 25 01 2017	2017	
9	CHS - CASL 2016	2016	
10	259. Safeguarding Policy	09/2015	
11	CHS Partner Level Self-Assessment PDF		
12	CHS Updates on Country Programmes	2016	
13	Template RICSA LITE	2016	
14	Malawi RICSA		
15	Governance and accountability lessons from Bangladesh and oPt		
16	Nepal Complaint response plan	2017	
17	Christian Aid WHS commitments M7		

18	Christian-Aid-DEC-Typhoon-Haiyan-evaluation		
19	Security Refresher Survey _ Inclusion and Gender		
20	Voice to the People summary	2016	
21	275. South Sudan Resilience, CHS and PVCA workshop report Feb 2017	2017	
22	PVCA LEVERAGE REVIEW (draft, 13p)		
23	Bangladesh PPA report 9m 2016	2016	
24	Haiti PPA report 9m		
25	Malawi PPA report 9m 2016		
26	CoC e-learning homepage screenshot		
27	CoC e-learning training screenshot		
28	Myanmar PVCA Project Report Final		
29	284. Accountability principles and practice	2017	
30	Partnership Review Form-English	2016	
31	Programme Management Guide-OH v0.1		
32	Draft Guidance on Strategy Testing Process		
33	Improved Cook Stoves Learning Review		
34	Leave no one behind report		
35	Inclusive Data Collection Checklist Final		
36	Inclusion Working Group Nov Agenda	2016	
37	Itinerary CHS and Inclusion training		
38	Introduction to Inclusive Programming		

39	Resilience framework		
40	Nepal Truth Truck video	2016	