

1.2 The audit team

Christian Relief and Development Organization (CREDO) Initial audit - Summary report -2025/02/25

1. General information

1.1 Organisation

Тдре	Mandate	tVerified	Auditor principal	Aninia Nadig
<pre> _] International</pre>	-			
@ National	Humanitarian	ËÜ Humanitarian		
@	@ Deweloppent @	@ Developmenteidt	Local	Diane Nanema
Membership/network	Advolatower	Advocacy	facilitators	Issaka Kaienga
@ Direct assistance				
@ Dedicated				
@ With partners	CREDO (Chnstian Re-			
Legal regis tretiblé gal	Development Organi Gogarnisaental Organ ulndierbBrkkinabe law #993/alstgan independ withéitsdewn governar	ization established on 28 January ent organization		—
Head officerlocatisinge	gouverna Ouagadougou, Burki Ouagado	na Faso ————		
Total number of members	pers of Person I of	48		
of the organisation				

1.3 Scope of the audit

CHS:2014 Audit scheme Audit	Benchmarking
cycle	N/A
Type of audit	Benchmarking
Scope of the audit	Elorgorganisation in Burkina Faso and all its projects (humanitarian and developerant)
Purpose of the audit	N/A, these hale organisation is considered for this first audit.

1 4 The audit sample

Sampling unit	Projects
Total number of project sites included in the sample	17
Total number of sites for on-site visit	2
Total number of sites for remote evaluation	2
Selection of sampling unit	
Random sampling - on-site/remote	Purposive sampling (none)
Technical college - not selected	
VISSER - selected: on site in Kaya	
PRUAG - selected: remote (Gorom-Gorom)	
Prise en charge des PDI (partnership) PCPDI - selected: distance (Don)	
Training centre - not selected	



Endogenous sponsorship (PENDO) - selected: on site in Ouagadougou	
Breaking work chains - not selected	
PCRU - not selected	
Development, education - not selected	
Any other considerations relating to sampling: The random sampling was included in the audit.	s sufficient to identify the four projects to be
four projects to be included in the audit. No purposive sampling required	
Sampling risks identified: The auditor did not identify any risks related to s	sampling.

2. Activities of the audit team

2.1 Opening meeting

Date	2024/11/18	Number of participants	9
Location	En ligne	Any substantive issues raised	None

2.2 Locations assessed

Location of sites	Dates	On-site or remote
Ouagadougou	2024/11/18 - 2024/11/21	Remote
VISSER : Kaya	2025/02/20 - 2025/02/22	On site
PENDO: Ouagadougou	2025/02/23	On site
PRUAG: Gorom-Gorom	2025	Remote
PCPOI: Dori	2025	Remote

2.3 Between friends

Level / Resition of respondents	Number of peop	on-site or	
Level / Position of respondents	Female	Male	remote
Head office			
Management	0	4	Remote
Staff	3	0	Remote
Project management			
Personal	1	1	Remote
Partner staff	0	1	
Total number of people interviewed	4	6	



[&]quot;It is important to note that audit results are based on a sample of an organisation's activities, programmes and documentation, as well as direct observation. The results are analysed to determine the organisation's systematic approach and the application of all aspects of the CHS in different contexts and methods of operation.



2.4 Consultations with the community

Tune of group and leasting	Number of peop	" place" or	
Type of group and location	Women	Men	"distanc e
Kaya: WASH awareness-raising	8		On site
Kaya: hygiene kits	6	5	On site
Kaya: Water management	5	1	On site
Kaya: Saponification	12		On site
Ouagadougou: Host beneficiaries	4	3	On site
Ouagadougou: sponsored children	10	3	On site
Ouagadougou: parents Internally Displaced Persons (IDPs)	9		On site
Ouagadougou: Humanitarian and Development Association	4	1	On site
Total number of participants	58	13	71

2.5 Closing meeting

Date	2025/02/04	Number of participants	9
Location	En ligne	Any substantive issue raised	None

3. General information about the organisation

3.1 rmati ons

CREDO (Christian Relief and Development Organisation) is a Non Governmental Organisation Info established in 1993 as an independent organisation with its own general governance structure.

The Monitoring, Evaluation and Learning Department and six programmes are attached to the Programmes, Studies and Planning Department (DPEP). The Accounting and Finance Department and the Purchasing and Supply Department are attached to the Administrative and Financial Department (DAF).

The six strategic areas are explained in the Five-Year Strategic Plan 2021-2025: education, child protection, food security, employment and training, the environment and humanitarian action. This last area has become more important in recent years, due to the insecurity situation in the country. Organisational strategies are defined by the SP on the basis of the Strategic Plan. Programmes and projects follow an annual action plan.

In line with its strategic axes, CREDO's areas of intervention are

- Formal and non-formal education (including child sponsorship to facilitate access to education)
- Technical and vocational training
- Employment and socio-professional reintegration of young graduates
- Food security and nutrition
- Humanitarian support
- Support for urban and non-urban refugees
- Promoting the rights of children and vulnerable adults.
- The environment

CREDO is governed by the values of compassion, respect for others, difference, equity, devotion and openness. Its activities are strictly non-confessional.

CREDO opened an office in Benin in 2024.







CREDO ORGANISATION CHART

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3.2 Stru ctu re of and management structure The strategic and decision-making bodies are the General Meeting (GM) and the Board of Directors (BD). The AGM meets once a year. It provides general guidance, approves the accounts and elects the members of the Board. The Board meets four times a year. It approves programmes and budgets and oversees the smooth running of the organisation. It has nine members, including six institutional members and three co-opted members.

The executive bodies include the Permanent Secretariat (PS), which manages CREDO's programmes, mobilises resources and represents CREDO and its bodies before the authorities. The PS reports to the Board and is headed by a Secretary General (SG) supported by three Directorates: the Programmes, Studies and Planning Directorate (DPEP), the Administrative and Financial Directorate (DAF) and the Human Resources Directorate (DRH). The PS and the three Directorates are supported by the Internal Audit Department and the Department in charge of partnership management.

All programmes are coordinated by the DPEP. Each programme is managed by a Coordinator. The Management Board (MB) brings together the heads of projects/programmes, MEAL, finance and SP every six months to analyse the level of project implementation. The Coordination Council meets every six months to monitor and evaluate the progress of projects. The financial consultation frameworks meet twice a year. The teams hold monthly meetings to review progress on the ground.

3.3 Work with partner organi sati ons

CREDO has traditional partnerships with international organisations for the implementation of projects. These partnerships are governed by agreements. CREDO fulfils its obligations under these agreements and is seen as a reliable partner.

To implement certain projects, CREDO works with local and community organisations. CREDO signs agreements with most of its local partners, specifying the responsibilities of each stakeholder. The organisation is in the process of formalising this type of relationship, putting in place a partnership policy, procedures for an action plan, monitoring and validation of activities, and evaluation of partner associations. At the time of the audit, these mechanisms had not yet been finalised.

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4. Overall performance of the organisation

4.1 Mechanisms Human resources, financial, logistical and MEAL procedures are in place. The internal Olitiques de CREDO couvrent le genre, la lutte contre la corruption et le terrorisme, la santé, la (d'assurance) (qualité) sécurité et sûreté, les conflits d'intérêts, la protection de l'enfant et de l'adulte vulnérable, et la PEAS. (E) (t management of) The organisation has created a post of internal auditor who reports directly to the General Secretary.

Fi e •au

cREDO has an internal control system, managed by an internal auditor who reports directly to the General Secretary. The internal auditor also monitors compliance with procedures throughout the organisation. External audit reports are produced annually, in accordance with national legislation. CREDO has policies and mechanisms to prevent, identify and address fraud and corruption and detailed logistical procedures.

At the time of the audit, certain aspects of quality assurance and risk management were in draft form, including documentation governing the internal audit procedure and a systematic approach to risk management. This approach includes risk mapping at an organisational level. On the basis of these results, as well as the results of external audits and recommendations, CREDO draws up annual action and monitoring plans.

CREDO has a well-established monitoring and evaluation system covering planning, monitoring, evaluation, learning and data quality control policies. The quality of projects is assessed using an evaluation grid. CREDO carries out regular evaluations and provides a space for weekly, monthly, quarterly, half-yearly and annual discussions to monitor certain key indicators and to exchange and coordinate the various programmes and projects. This enables regular monitoring and learning at both project and organisational levels.

The human resources system is up and running, with a clear recruitment procedure and a salary scale. The Code of Conduct is signed by all employees and sanctions for breaches of the code are explicit.

4.2Level of application of the CHS

CREDO has a CHS focal point. The organisation is a member of the CHS Alliance and has carried out a self-assessment, followed by an action plan. The organisation is making efforts to put in place policies and procedures based on this action plan. Donor partners confirm that quality and accountability structures and activities have improved over the last few years. In its five-year strategy, CREDO refers to the CHS standard.

Strengths:

CREDO has put in place a PEAS policy and a complaints handling policy, and is in the process of systematising its relations with local partners and its approach to risk.

CREDO carries out regular context analyses and identifies community needs and capacities.

CREDO has developed an organisational structure that enables its projects to be implemented. The organisation differentiates between emergency, humanitarian and development response, enabling it to organise its projects in an appropriate and timely manner.

CREDO ensures that humanitarian aid includes aspects of resilience and development. CREDO has

financial and audit systems, with an internal auditor position.

Weaknesses:

CREDO does not have an established risk management system at organisational and project level.

CREDO does not have defined processes for communicating about the organisation and staff with communities. This has implications for the communities' understanding of the organisation and the complaints mechanism in place.

CREDO does not systematically share the results of evaluations with communities. In all, 11 minor

weaknesses were noted, and no major weaknesses.





4.3 Organisational performance against each CHS commitment

Strengths and areas for improvement	Average score
Commitment 1: The humanitarian response is adapted and appropriate.	2.8

CREDO has policies which commit it to providing impartial assistance based on the capacities of communities and which take account of their diversity. Activities are based on regular conlex and stakeholder analyses and impartial assessments of needs, risks, vulnerabilities and capacities of communities. They are adapted as needs, capacities and contexts evolve.

Nevertheless, CREDO does not sufficiently mention the importance of deappearighte data collected in its policies and guidelines.

Community feedback:

Communities appreciate the assistance provided by CREDO and find it appropriate and in line with their needs, mentioning also that these needs go further than the assistance provided. Communities say they have been consulted during initial assessments and during project implementation and that CREDO adapts projects to changing needs or contexts.

Commitment 2: The humanitarian response is effective and timely. 2.7

The systems for programming and monitoring, evaluating and adapting projects enable CREDO to implement projects on time, adapted to contextual constraints and without endangering communities. Its work is based on systematic monitoring of relevant standards and indicators, which also enable projects to be adapted if necessary. CREDO is well integrated into a network of organisations and is in contact with local and national authorities to ensure that needs that the organisation cannot cover are referenced. Its projects are designed in such a way as not to endanger communities.

CREDO's workload is adapted to the organisation's capacity. Nevertheless, the workload is high, in particular due to an adjustment to the CHS standard, which risks exceeding the organisation's capacity.

Feedback from the communities:

The communities say that the assistance is provided on time and that it does not pose any danger to them. They confirm that CREDO staff are competent.

Commitment 3: The humanitarian response strengthens local capacities and avoids negative effects.

2.5

CREDO ensures through its policies, strategies and guidelines that projects do not have negative effects, including on the safety, dignity and rights of people, sexual exploitation and abuse by CREDO staff, cultural, social and political issues, livelihoods, the local economy and the environment. However, the fact that not all communities are aware of the established complaints system poses the risk that some abuses may go unreported.

The organisation ensures that its projects strengthen local capacity, including economic capacity, and the resilience of communities. This last point is reinforced by the fact that CREDO works closely with local authorities and on the basis of information provided by them. CREDO has a system for collecting, processing and storing community information in a secure manner.

CREDO is committed to sustainability in its projects. However, the organisation does not systematically ensure that projects have a transition or exit strategy.

CREDO has policies, processes, strategies or guidelines aimed at identifying the actual or potential negative effects of its actions. However, the organisation does not systematically identify the actual or potential negative effects of its actions.

Feedback from the communities

The communities appreciate CREDO's support in building their capacity, particularly in income generation and education. and education. They say that CREDO's projects have no negative effects on them.

Commitment 4:	The humanitarian response is based on communication, participation	n and
feedback		

2.1





CREDO strives to promote a culture of open communication. However, policies and processes for internal communication and communication with partners are not sufficiently developed and implemented. This means that there is no systematic sharing of information.

CREDO involves the communities and their priorities and the risks they identify and encourages them to express their level of satisfaction with the project. Nevertheless, the organisation does not systematically inform the communities, in appropriate formats and on an ongoing basis, of the principles to which it adheres, and of its code of conduct.

CREDO's external communication is factual, ethical and respectful of the dignity of the communities.

Feedback from the communities

The communities say that their views on the projects are sought and that they are involved in the various stages of the project. They say that they have not always been informed by CREDO about the organisation and its activities.

Commitment 5: Complaints are well received and dealt with

1.9

CREDO has policies and approaches for managing complaints, including any abuse of power by the organisation. However, this approach is not systematically operational and CREDO is working to strengthen them.

CREDO has an organisational culture in which complaints are taken seriously. Communities are often involved in the design of complaints mechanisms and committees. CREDO records feedback and complaints from its projects and responds within established timeframes. Complaints that do not fall within CREDO's remit will be referred to a competent party.

Nevertheless, CREDO does not systematically communicate key information about the organisation, its commitments and the expected behaviour of staff, with the result that not all communities are aware of the complaints mechanism in place, nor of the expected behaviour of staff.

Feedback from the communities

The communities say that CREDO listens to them and comes back to them with any complaints. However, some communities say they are not informed about CREDO and its complaints system.

Commitment 6: The humanitarian response is coordinated and complementary

2.6

CREDO coordinates with local, regional and national authorities in accordance with the laws of Burkina Faso. The organisation also works closely with other international, national and local organisations.

Its partnerships with international organisations are governed by clear agreements. For its local partners, at the time of this audit, CREDO was in the process of establishing partnership policies and procedures, including an evaluation of the quality of partnerships.

CREDO participates in local coordination meetings, including clusters and multi-partner projects, and benefits from the exchange of information at these meetings.

Feedback from the communities

Communities have indicated that they find CREDO projects complementary to other assistance projects.

Commitment 7: Humanitarian actors continuously learn and improve

2.5

Evaluation of projects and programmes is systematic and policy-based. This includes a periodic review of feedback and complaints received by communities.

Learning from this information is shared within the organisation, but not systematically with stakeholders, the communities themselves, particularly those in emergency projects.

Feedback from communities

Communities say they do not receive feedback on evaluation and learning results.

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

2.6





CREDO has the policies, skills and human resources to deliver its programmes in a fair, transparent and non-discriminatory manner. Nevertheless the workload is mentioned by the staff.

CREDO obeys local labour laws and has clear job descriptions and work procedures, with individual annual action plans for each employee. Each employee signs the Code of Conduct and is familiar with its contents, including sanctions for breaches of the code.

CREDO has procedures in place to ensure that staff work in accordance with its mandate, values, objectives and performance standards. However, these procedures are not systematically translated into practice.

CREDO has procedures and a security policy for staff. However, staff welfare is not explicitly mentioned in the policy. This poses the risk that measures to ensure well-being will not be regularly applied in the future and that institutional memory will be lost.

Feedback from the communities

The communities say that CREDO staff are honest and competent. Nevertheless, for certain projects, the communities have noted that the staff do not work in accordance with the organisation's mandate and values.

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

2.8

CREDO has a zero tolerance approach to fraud and corruption. This is supported by an anti-corruption policy and a conflict of interest policy. CREDO has specific logistics procedures, which are known by staff.

CREDO manages and uses its funds in a responsible, ethical and legal manner. Programme and project resources are used efficiently, balancing quality, cost and speed.

CREDO minimises waste and the impact of its projects on the environment. The organisation has included the environment in its five-year strategy. The environment is one of CREDO's areas of intervention, for which the organisation is active in fundraising.

CREDO has internal and external audit policies and procedures, as well as an approach to assessing, managing and mitigating risks on an ongoing basis.

Community feedback

The communities say that CREDO manages its resources responsibly and that this includes respect for the environment. They consider CREDO staff to be honest and non-corruptible.

5. Summary of weaknesses

^{*} Note: The average scores are the sum of the scores per commitment divided by the number of indicators in each commitment, except if one of the indicators in a commitment scores 0 or if several scores of 1 on the indicators in a commitment lead to the issuance of a major non-conformity/weakness at the commitment level (in these two cases, the overall score for the commitment is o).



Weaknesses	Туре	Status	Resolution resolution
2025 - 3.4: CREDO does not systematically plan a transition strategy or a transition plan from the start of the humanitarian programme.		ıre. disengagem – ———	MinorNew ent strategy
2025 - 3.6: CREDO does not systematically identify the actual or potential negative effects of the actions covered in this indicator, in order to be able to respond to them in a timely and systematic manner.	Minor	New	By 2028
2025 - 4.1: CREDO does not systematically inform communities of the principles to which o which it adheres, the code of conduct for its staff, its programmes and what it what it intends to achieve	it adheres	S	By 2028
2025 - 4.2: CREDO does not systematically use communication formats and methods hat are easily understood by different members of the community, particularly rulnerable and marginalised groups.	Minor	New	By 2028
2025 - 4.5: CREDO does not have information-sharing policies in place to ensure that ts communication systematically includes communities.	Minor	New	By 2028
2025 - 5.1: CREDO does not systematically consult communities and people affected by crises on the design, implementation and monitoring of complaints management processes.	Minor	New	By 2028
2025 - 5.2: CREDO does not systematically provide information on how to access he complaints mechanism and its scope.	Minor	New	By 2028
2025 - 5.4: The complaints management process for communities and people affected by crises is not systematically operational.	Minor	New	By 2028
2025 - 5.6: Crisis-affected communities and individuals are not fully ully aware of the behaviour to be expected of humanitarian personnel, including ncluding the organisation's commitments on prevention of sexual exploitation and abuse	Minor	New	By 2028
2025 - 6.6: CREDO does not systematically ensure that work with partners is governed by clear and consistent agreements.	Minor	New	By 2028
2025 -7.3: CREDO does not systematically share learning and innovation with communities and people affected by crises.	Minor	New	By 2028
Total number of open weaknesses	11		



6. Lead auditor's recommendation BENCHMARKING In our opinion, CREDO has demonstrated compliance with the requirements of the Fundamental Humanitarian Standard of Quand Accountability.

In our opinion, CREDO has demonstrated compliance with the requirements of the Fundamental Humanitarian Standard of Quality Name and signature of lead auditor: Date and place: Aninia Nadig Geneva, 25 February 2025 7. HQAI decision Validity of calibration report : 2025/03/25 until 2026/03/25 Date and place: Name and signature of HQAI Quality Assurance Manager: 25/03/25 Geneva Victoria Lyon Dean 8. Acknowledgement of the report by the organisation Space reserved for the organisation Any reservations regarding the results of the audit and/or any comments regarding the conduct of the HQAI audit team Q Yes No If yes, please specify: Acknowledgement and acceptance of I acknowledge and understand the audit findings I accept the Yes @ No audit findings [Yes Q No Name and signature repagganisation organisation representative : Date et lieu: adoreçõe, le 16/04/2023



Appeal

If the organisation disagrees with the quality assurance decision, it may appeal to HQAI within 14 working days of being informed of the decision.

HQAI will refer the matter to the Chair of the Advisory and Complaints Committee who will confirm that the basis for the appeal meets the requirements of the appeals procedure. The Chair will then appoint an Appeals Panel consisting of at least two experts who have no conflict of interest in the case in question. The panel will endeavour to reach a decision within 45 working days.

Details of the appeals procedure can be found in document PR 0049 - Appeals Procedure.



Appendix 1: Explanation of the scale

scoring system*

Your organisation is not working to apply the CHS commitment.

Your organisation is making efforts to apply this requirement, but these efforts are not systematic.

Your organisation is making systematic efforts to apply this requirement, but some key points are still not being addressed.

Your organisation complies with this requirement and organisational systems ensure that it is met throughout the organisation and over time - the requirement is met.

The work of your organisation goes beyond the objective of this requirement and is innovative. It is applied in an exemplary way throughout the organisation and the organisational systems ensure that a high level of quality is maintained throughout the organisation and over time.

Score 0: indicates a weakness 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 issued or immediate suspension of the certificate.

Score 1: indicates a weakness which does not immediately compromise the integrity of the commitment, but which must be corrected if the organisation is to continue to meet it. This leads to

- Independent verification: minor weakness
- Certification: minor non-conformity, giving rise to a minor corrective action request (CAR).

Score 2: indicates a problem that warrants special attention but does not currently compromise compliance with the requirement. This leads to ô

 Independent verification and certification : observation.

Score 3: indicates full compliance with the requirement. This leads to

Independent verification and certification compliance.

Score 4: indicates exemplary performance in the application of the requirement.

^{*} AMSC 2020 verification system rating scale