Danish Red Cross
Maintenance Audit 1 – Report – 2023/12/05

1. General information and audit activities

Role / name of auditor(s)	Lead Auditor, Claire Goudsmit	
Audit cycle	Second cycle	
	Date / number of participants	Any substantive issues raised
Opening Meeting	19.09.2023 / 10 participants	No
Closing Meeting	23.10.2023 / 9 participants	No
Sampling from Country Offices	Nepal, Lebanon and Yemen	
	Position / level of interviewees	Number of interviewees
Interviews	Head Office Managers and Advisors	4
	Country Managers	3
	Country level Senior Programme staff	3

2. Actions and progress of the organisation

2.1 Significant change or improvements since previous audit

Since the previous audit (Recertification, 2022), Danish Red Cross (DRC) established its strategic Global Must-Win to "strengthen quality and accountability in all decision-making and action by firmly embedding the CHS in all units and regions". Specific targets are set to drive improvement in areas related to Greening, Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA) to meet the global International Federation of the Red Cross (IFRC) and overall objective of DRC, that all "DRC programmes and emergency operations are people-centred, inclusive, trusted and safe".

These strategic targets are pushing DRC to explore ways to fully embed and integrate its commitments to quality and accountability across the organisation, for example, working closely with Communication and Digitalisation to explore how DRC can align its communications in its policy and strategic frameworks. The Humanitarian Policy and Analysis Unit looks at reports from the Country Offices (CO), programme and quarterly progress reports and coordinates CHS certification, action plans, and Framework for CEA and safeguarding, including Code of Conduct and Complaint handling. PGI and CEA Working Groups are established, with the Senior PGI and CEA Advisors and appointed CEA-PGI Country Office Focal Points. Comprehensive CEA-PGI Joint Framework 2023-2025 and Work Plan. In September 2023, DRC hosted a 3-day CEA Global Movement Wide Workshop meeting in Copenhagen, Denmark. The workshop aimed at scaling up the CEA Movement Action Plan established working groups to deliver and agree on monitoring and reporting on the Plan and foster peer learning amongst National Societies (NS), IFRC and ICRC across regions and globally.

These are anchored in DRC's International Strategy and its management response to the CHS audit findings. DRC is systematically addressing the open CARs of the CHS audits and investing resources to progress. The CARs remain open at this MA. Many CARs require further verification at the programme and community level, which will be carried out in DRC's renewal audit with onsite country visits, where direct feedback from DRC country staff, NS and communities will be gathered.

Documents 660, 661, 664 - 667

2.2 Summary of corrective actions

Corrective Action Requests (CAR)	Type and resolution due date	Progress made to address the CAR and in response to the findings of the indicator	Evidence (doc no., KII)
2022-1.2: DRC programmes do not consistently ensure an impartial assessment of risks, and an understanding of the vulnerabilities of different groups in order to design and implement appropriate programmes.	Minor 2025/09/07	Since the previous audit, a senior advisor on Needs Assessment has joined DRC with the role of supporting the implementation of the CEA- PGI work plan directly with country programme teams. This is further supported by the in-country CEA-PGI focal points, which are appointed in each Country Office and all projects are required to budget for PGI and CEA. Mainstreaming PGI through skills development and awareness raising is integrated into country strategies. Sampled COs have received training and in-depth deep dive sessions on PGI-CEA. Some COs have received and delivered with NS, training on Protection mainstreaming and how to assess and integrate Dignity, Access, Participation and Safety (DPAS) into all sectors of their programme, and some COs describe joint DRC and NS staff and community volunteer training to conduct vulnerability and capacity assessments. DRC Project proposal templates include sections on PGI-CEA mainstreaming. Sampled proposals include processes for community-based protection risk assessments, e.g. through household surveys, focus group discussions and stakeholder interviews, and community engagement in disaster risk management (DRM) programmes. Examples were given by COs sampled of communication methods tailored to different types of disabilities and developed in multiple local languages and to ensure accessibility of information and communication technology (ICT) materials. Data-driven approaches are being used to understand social behaviour related to disasters and diseases, such as Covid/Ebola, and identify vulnerable groups and their needs. Whilst DRC's expectations on collection and use of Sex, Age, Disability Disaggregated Data (SADDD) in assessments and project design and monitoring frameworks are outlined, how these results are used to inform project design are not described in all proposals sampled. This was also highlighted in the findings from a DRC global analysis report on CEA and PGI, which identified that NS collect SADDD to a moderate or high degree, but that this information is not routinely used to inform project amendment and design.	ORG658 ORG664 ORG665 ORG658 ORG667 ORG668 ORG669 LEB YEM NEP Staff interviews
2022-3.4: DRC staff do not systematically plan a transition or exit strategy in the early stages of humanitarian programmes.	Minor 2025/09/07	There is an increased focus on localisation and nationalising country teams. The ICRC working group is addressing how to improve cooperation and localisation in disaster response. A key strategy is to build strong NS and remain community-based at its core. DRC is looking holistically and has increased its focus on how it can build sustainability into its programme work and remain dynamic. DRC hosted a respected author to speak on the subject of how to exit humanitarian responses at a global staff meeting to challenge its own assumptions and hold challenging conversations openly amongst leadership and staff, as it looks at developing strategies for responsibly transitioning its humanitarian programming. DRC, alongside other IFRC members, are working on addressing budget gaps for NS strengthening, transitioning offices responsibility, recruiting international delegates for shorter periods of time, improving	ORG658 ORG659 LEB NEP YEM Staff interviews

		sustainable financing for NS, looking beyond project capacity development towards institutional strengthening and developing humanitarian diplomacy with local authorities. DRC is increasingly nationalising its structure and localising positions; CDs reported that they are continually monitoring how they can nationalise strategic positions. DRC are providing support for COs, and all COs interviewed are engaged in ongoing discussions on what localisation means for DRC, and how to build sustainable programming with the engagement of NS and communities. Whilst not yet used by all CO's interviewed, the CEA Toolkit has a section dedicated to exit strategies and transitioning, and sustainability of actions. Sustainability strategies are emphasised in country plans and sustainability of proposed actions are integrated into programme design and cited throughout project proposals sampled. Country teams interviewed demonstrate examples of where NS are supported to advocate local government, build emergency response programmes with a focus on the ownership of resources by local authorities and communities. Community-based emergency response, DRM and disease prevention and response interventions are working on this basis. Technical support is being provided to local governments to establish early warning and response systems using SMS and community volunteers.	
2022-5.2: DRC does not systematically communicate how DRC's or HNS' complaint mechanism can be accessed and the scope of issues it can address.	Minor 2025/09/07	DRC has made significant progress in enhancing its whistle-blower system in line with its Whistleblower Policy and the new Danish Act on the Protection of Whistle-blowers and rules on data protection. DRC has taken measures to ensure that its whistle-blower system is fully accessible and provides survivor-led protection for all users. The Whistleblower policy is published online To receive and handle reports of misconduct, DRC has a revised online Whistleblower portal on its website, which is available in English and Danish. The portal includes a clear link to a dedicated email for feedback and complaints, and a link to DRC's whistleblower scheme with an online reporting form to report a serious breach of DRC's Code of Conduct (CoC) including illegal or irregular acts. DRC has assigned the receipt and initial screening of reports to a legal firm. DRC has published its CoC and annual complaint reports on its website. CEA and informative videos are available on DRC's internal intra in English, French, and Arabic. Work is underway to establish resources for survivor support and referral pathways, at all levels of the organisation and with its partner NS. DRC and COs are engaged to promote CEA and PGI accountability systems in general. DRC has also provided training on PSEAH, which supports conversations regarding raising complaints formally between DRC and NS staff and volunteers. Staff interviewed emphasised the importance of aligning and coordinating efforts within the Movement, particularly for NS, to better understand how to openly discuss specific issues such as SEAH and GBV. Staff interviewed raised challenges to having conversations regarding managing complaints or reports from communities to and with volunteers, to NS and DRC, about NS or DRC. DRC country teams highlight the complex relationships and dynamics between them, NS staff, volunteers, and communities present challenges to these types of conversations. While there is confidence among CO teams that reports would travel through the management chain between	ORG655 ORG657 ORG661 ORG662 ORG667 DRC Website LEB NEP Staff interviews

		partners and with communities, specific guidance on how to manage feedback and complaints about DRC or NS staff or volunteers is not detailed.	
2022-5.4: Complaints handling processes for communities and people affected by crisis are not consistently documented.	Minor 2025/09/07	Based on DRC's global survey of NS capacity related to CEA, PGI, PSEAH and child safeguarding, a global analysis of NS capacity in these areas is documented and has formed planning for support at the country level. The results show that most NS' (75% surveyed) use IFRC's CEA tools, guidelines and kits. NS' have different levels of mechanisms in place and use different methods to collect feedback. 53% of all surveyed have NS-level or project specific tools for collecting community feedback, while 37.5% have none, 6.3% state 'other'. The global survey results and interviews with COs for this audit highlight that whilst COs and NS are good at setting up varied and contextualised feedback channels for communities, documenting feedback and complaints, how they are handled, and actions taken in response to feedback and complaints received remains a gap. DRC global team are providing ongoing advice to country teams and CEA-PGI FPs to support NS to establish feedback mechanisms. This is being done via working groups, trainings, e-learning and webinars. CO staff interviewed are knowledgeable and have received training. Numerous mechanisms, tools and structures which communities have access, to report or raise concerns on issues of misconduct, fraud, GBV to the most relevant staff or volunteers within the accountability chain, are in place. CO highlight that country-specific SOPs, guidance and procedures are not sufficiently documented. Specific guidance on how to manage feedback and complaints on staff or volunteer misconduct is not detailed. This audit finds that there is continued need to establish documented processes for handling complaints and feedback mechanisms at the country level for and between all parties e.g. DRC, NS, communities and other stakeholders, this includes joined-up referral pathways.	ORG668 ORG669 ORG662 ORG663 ORG664 ORG665 ORG667 ORG670 LEB NEP Staff interviews
2022-9.4: DRC does not systematically consider the use of local and natural resources and their impact on the environment.	Minor 2025/09/07	DRC reports its CO_2 footprint annually for its Danish operations through its carbon accounting tool. It is also mapping CO_2 emissions of its international operations and has defined and resourced a roadmap for greening international engagements under a strategic Must-Win objective. Data collection of international operations' CO_2 emissions, supply chain sustainability, waste management, and mainstreaming environmental considerations are ongoing from HQ to country offices. This data will be consolidated by the end of 2023, which will feed into annual planning. DRC's environmental policy is expected to be finalised by the end of 2023, and the principle of greening is included in the Procurement Guidance note. A new Supply chain coordinator is working with ROs to guide and oversee procurements to ensure local procurements and weighting of the CO_2 footprint in bid analyses. Guidance for medical health waste management is in development. DRC's ambitious targets in its Greening Roadmap include all COs, programmes, and projects having an environmental sustainability component by the end of 2025. As well as 100% of pilot COs undertaking climate and environmental risk	ORG640 ORG647 ORG667 ORG668 ORG672 ORG673 ORG674 ORG676 ORG677 ORG678 NEP LEB YEM Staff interviews

| | | assessments in all new programmes and projects by the end of 2025.

Steps to support country teams and NS capacity to systematically consider environmental impacts in operations include NEAT+ (Nexus Environmental Assessment Tool) training to establish two experts within DRC to facilitate country-level assessments. DRC also aims to continue building global and regional technical expertise and internal capacity to use the NEAT+ tool.

All COs sampled have engaged in international and regional meetings held by DRC over the last year, where in-depth discussions on greening policy, global agreements, approaches, and climate resilience issues were held. Regional climate resilience studies have been conducted to assess challenges, obstacles, and solutions to create a roadmap for programming. Orientation sessions on using the greening assessment tool have been received by all COs interviewed, and they are using it to plan how to implement it across their programs and projects.

COs are actively looking for ways to green their offices and move away from petrol-driven vehicles where practical, use of non-plastics, digital banners, investments in solar energy for offices, digitizing data, etc. All COs interviewed procure locally as far as possible and cited strategies to reduce the carbon footprint of purchases, e.g., bulk purchases of medical supplies for different projects. All COs are in dialogue with NS to provide them further support and plan actions for greening. | -5- |

3. Summary of non-conformities

Corrective Action Requests (CAR)	Type	Resolution due	Status	New resolution timeframe (if applicable)
2022-1.2: DRC programmes do not consistently ensure an impartial assessment of risks, and an understanding of the vulnerabilities of different groups in order to design and implement appropriate programmes.	Minor	By 2025 Renewal Audit	Open	
2022-3.4: DRC staff do not systematically plan a transition or exit strategy in the early stages of humanitarian programmes.	Minor	By 2025 Renewal Audit	Open	
2022-5.2: DRC does not systematically communicate how DRC's or HNS' complaint mechanism can be accessed and the scope of issues it can address.	Minor	By 2025 Renewal Audit	Open	
2022-5.4: Complaints handling processes for communities and people affected by crisis are not consistently documented.	Minor	By 2025 Renewal Audit	Open	
2022-9.4: DRC does not systematically consider the use of local and natural resources and their impact on the environment.	Minor	By 2025 Renewal Audit	Open	
Total Number of open CARs	5			

4. Lead auditor recommendation

In our opinion, Danish Red Cross has demonstrated that it is taking necessary steps to address the CARs identified in the previous audits and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.

We recommend maintenance of certification.

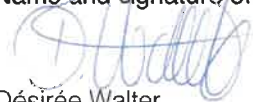| Name and signature of lead auditor:	Date and place:
[signature] Claire Goudsmit	15/11/2023

5. HQAI decision

☒ Certificate maintained ☐ Certificate suspended	☐ Certificate reinstated ☐ Certificate withdrawn
Surveillance audit before: 2024/10/25	
Name and signature of HQAI Executive Director: *[signature]* Désirée Walter	Date and place: Geneva, 05 December 2023

6. 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: If yes, please give details:	☐ Yes ☒ No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	 ☒ Yes ☐ No ☒ Yes ☐ No
Name and signature of the organisation's representative: PETER KLANSØ *[signature/stamp]*	Date and place: 7. 12. 2023

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

* Scoring Scale from the CHSA Verification Scheme 2020