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HUMANITARIAN QUALITY
ASSURANCE INITIATIVE

Danish Refugee Council
Maintenance Audit – Summary Report MA 2020/11/05

1. General information

1.1 Organisation

Type	Mandates	Verified
☒ International ☐ National ☐ Membership/Network ☒ Direct Assistance ☐ Federated ☒ With partners	☒ Humanitarian ☒ Development ☒ Advocacy	☒ Humanitarian ☒ Development ☒ Advocacy
Head office location	Copenhagen (Denmark)	

Total number of country programmes	39	**Total number of staff**	8.740

1.2 Audit team

Lead auditor	Jorge Menéndez Martínez
Second auditor	--
Third auditor	--
Observer	--
Expert	--
Witness / other	--

1.3 Scope of the audit

CHS Verification Scheme	Certification
Audit cycle	First Audit Cycle
Phase of the audit	2nd Maintenance audit (MA2)
Extraordinary or other type of audit	-

1.4 Sampling*

Randomly sampled country programme sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
Iraq	Yes		Iraq was randomly selected. It represents a programme from the Middle East Region, giving geographical coverage.	Remote
Somalia	Yes		Somalia was randomly selected. It represents a programme from the East Africa Region, giving geographical coverage.	Remote
Central African Republic	No	Bosnia and Herzegovina	Bosnia and Herzegovina was included instead of Central African Republic to include a programme from the European region, giving better geographical coverage.	Remote

Yemen	No	Bangladesh	Bangladesh was selected instead of Yemen to include a programme from the Asian Region, giving better geographical coverage.	Remote
Democratic Republic of the Congo	No	Turkey	Turkey was included instead of Democratic Republic of the Congo, because the country programme could not provide the evidence and conduct the interviews in the period agreed for the audit due to other commitments.	Remote

Any other sampling performed for this audit:
None

Sampling risk: The auditor could not directly verify some elements of DRC´s plan for addressing certain CARS, mainly as the maintenance audit did not include onsite community and stakeholder consultations. Other means have been used, such as documental review and interviews. Nevertheless, since the Initial Audit, DRC has demonstrated good and improved performance over time and has demonstrated strong internal quality assurance and control mechanisms. These give the auditor sufficient confidence to make a recommend on the maintenance of certification.

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
Head office	2020/09/08 – 2020/09/18	Remote
Iraq	2020/08/31 and 2020/09/14	Remote
Somalia	2020/09/10– 2020/09/14	Remote
Bosnia and Herzegovina	2020/09/15– 2020/09/16	Remote
Turkey	2020/09/07	Remote
Bangladesh	2020/09/09 – 2020/09/11	Remote

2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	3	3	Remote
Staff	2	1	Remote

Country Programme Office(s)			
Management	3	4	Remote
Staff	1	3	Remote
Partner staff			
Others			
Total number of interviewees	**9**	**11**	

2.3 Opening meeting

Date	2020/08/11
Location	Remote
Number of participants	28
Any substantive issues arising	None

2.4 Closing meeting

Date	2020/10/15
Location	Remote
Number of participants	15
Any substantive issues arising	None

3. Background information on the organisation

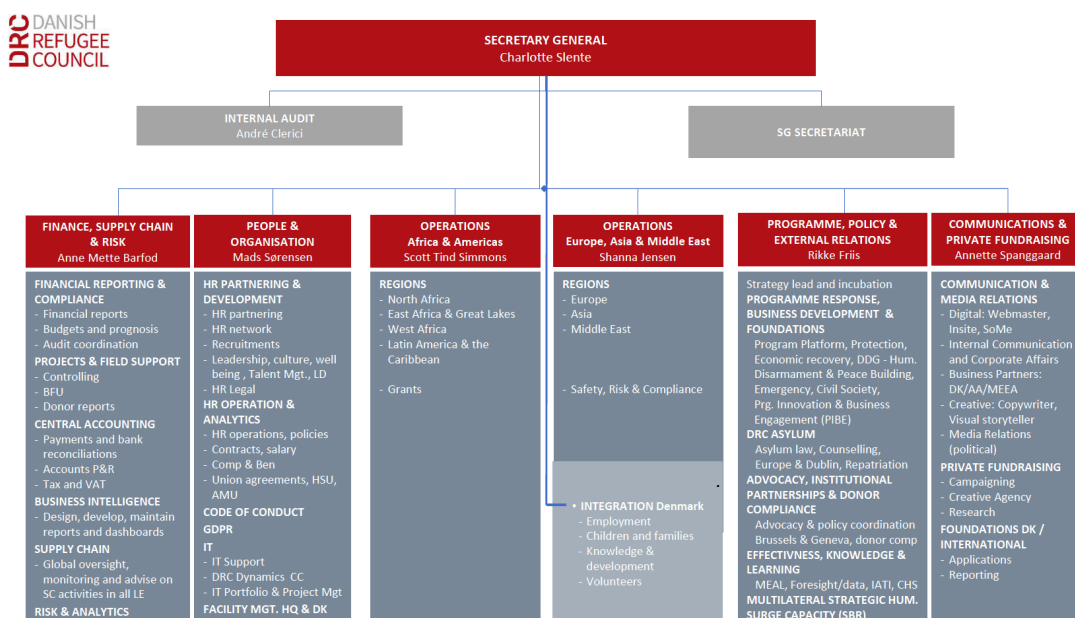|	
3.1 General information	Danish Refugee Council (DRC) is a humanitarian, non-governmental, non-profit organisation founded in 1956 by Danish organisations to integrate Hungarian refugees in Denmark. DRC is an umbrella organisation, including 26 member organisations and volunteer groups. National or humanitarian organisations are eligible for the Danish Refugee Council. However, all member organisations must be non-political. In 1991, DRC started its first international programme assisting forcibly displaced persons in countries of the former Yugoslavia. Danish Demining Group (DDG) was established in 1997 to provide efficient and community-oriented solutions to human security problems caused by mines and other explosive remnants of war. DRC and DDG united as an organisation in 2007. DRC's mission is to assist refugees and the displaced, protecting them from harm, safeguarding their legal rights, and empowering them towards a better future. Its key interventions sector are protection, economic recovery, humanitarian disarmament and peacebuilding, shelter and settlements, and camp coordination and management. A cooperation agreement gives DRC preferred partner status with the UN, and the organisation is present in 44 countries, including the world's most critical hotspots.
3.2 Governance and management structure	The Council is the Danish Refugee Council's highest authority. The Council includes the following: up to three representatives from each member organisation, six representatives from volunteer groups and counselling entities cooperating with the Danish Refugee Council and the Danish Refugee Council's Council. Under the Council sits the Executive Committee; which has overall responsibility for the management of the Danish Refugee Council. The Executive Committee consists of a President, a Vice President and six members elected by the Council. The Executive Committee is responsible for appointing the Secretary-General. The new Secretary-General was appointed in December 2019. The Secretary General and the executive management team are responsible for running the daily business. During 2020 some changes have been implemented on the management structure: • The executive management team is now composed of six executive directors.

- The Operations Africa and America, Operations Europe, Asia and the Middle East and Programme, policy and external relations have been upgraded, and now report directly to the Secretary General.
- The area of monitoring, evaluation and learning have been upgraded to division category as Effectiveness, Knowledge and Learning.
- The Danish operation and the International operation are no longer separated.
- DRC has five core sectors, instead of the previous 10: protection, economic recovery, humanitarian disarmament and peacebuilding, shelter and settlements, and camp coordination and management.

DRC Organigram

3.3 Internal quality assurance mechanisms and risk management	The MTA (2019) noted that DRC internal quality assurance mechanisms had been strengthened with the creation of a Monitoring, Evaluation, Accountability and Learning (MEAL) team. At the MA2 (2020) DRC has further strengthened this area and upgraded it to a division, and by enlarging its staff, which includes a new manager. This new structure is increasing the autonomy of the evaluation and learning processes, and now the reporting is made to the executive director of Programme, Policy and External relations directly. The team is operating at full capacity in all technical areas. DRC continues publishing data on projects, finance, and results in the International Aid Transparency Initiative (IATI); at the time of this report, DRC uploaded information on 27 projects.
3.4 Work with partner organisations	The DRC recognised partnership as a strategic priority and is one of the five pillars of the 2020 strategy. DRC's operational principles clearly have a focus on seeking partnerships to foster local capacities and strengthen abilities of institutions and people, to deliver and safeguard the rights of people affected by conflict and displacement. In October 2019, DRC approved its new policy statement on partnerships, through which it is committed to operating in different operational modalities: through direct assistance, in partnership with other organisations, or through a combination of both, depending on the context. DRC distinguishes between three dimensions of partnerships: states (authorities), civil society, and the private sector. As noted in the previous audit, DRC still implements less than 10 % of its programmes through partners.

4. Overall performance of the organisation

4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation	DRC has robust management and quality assurance systems in place. The Effectiveness, Knowledge and Learning division is in charge of supervising the application of the Core Humanitarian Standard (CHS) across the organisation and supports country offices in the implementation of the CHS. DRC keeps focusing on strengthening the capacity of the division and also the DRC approach to quality assurance and accountability (see also 3.3).

Decision-making is decentralised to Country Directors, who are responsible for the country programme. The country office monitoring and evaluation (MEAL) focal point is in charge of the application of CHS at country level. The MEAL focal point has to prepare and follow up the country CHS self-improvement plan, which details the main actions to be implemented at country level to ensure the application of the CHS. In addition, the biannual Monitoring, Evaluation, Accountability and Learning compliance self-assessment questionnaire now includes questions on Accountability to Affected Populations (AAP) and aims to verify that all COs have a MEAL focal point. Since the MTA, DRC has developed several guidelines and tools to support the COs on the implementation of the CHS and to adapt their activities to the challenges of the COVID-19 pandemic.

Since the MTA, DRC has performed several learning exercises to ensure that the learning from experiences and practices is used to improve its programmes and projects and for decision making. For example: on the implementation and use of the Dynamics, DRC´s response to the COVID-19 crisis, and Feedback and Complaints Response Mechanism (F-CRM).

The organisation shows a high level of commitment to address the issues raised at the MTA, DRC has a CHS working group, which has regular meetings, and is in charge of the action plan for the resolution of the Corrective Actions Requests (CAR) and the Observations raised by CHS audits. |
| **4.2 How the organisation applies the CHS across its work** | DRC shows a strong commitment to implement the CHS and addressing the six corrective actions outstanding at the Maintenance Audit. DRC worked steadily though the previous audit to address the CHS requirements identified in the MTA.

At the MA2, DRC has implemented the following actions to apply the CHS across its work

- DRC has updated the safeguarding and child safeguarding policy and carried out an internal review of best practices.
- DRC has updated the policy on age, gender and diversity so that DRC's capacity for ensuring systematic incorporation of age, gender and diversity specific analyses is strengthened and addressed across all operations for the purpose of enhancing equality and non-discrimination as well as involvement and participation.
- CoCRM and F-RCM are in place in all the CO´s surveyed.
- Development of the Code of Conduct (CoC) training package that includes training for staff, management, volunteers, and community members on CoC and PSEA, and CoC material (posters, cards, brochures, among others).
- Creation of an online repository of F-CRM tools and resources.
- Development of Communicating with Communities guidelines for the COs to improve communication and information provision during and about the Covid-19 pandemic, as well as the CHS and DRC's CoCRM enhanced communication requirements during the Covid-19 crisis.
- Several learning initiatives were undertaken that highlight DRC´s commitment to learn from experience and practice. |

- The new DRC webpage provides information about DRC´s Code of Conduct (CoC), Reporting Mechanism (CoCRM), the programmes that DRC is implementing, and its compliance results and commitment to the CHS and UN sustainable goals.

In addition, DRC plans to:

- Roll out in 2021 F-CRM Guidance and toolkit, that will provide further support to the country office´s on designing, implementing and supporting the F-CRM. This document will include best practices and examples that COs will be able to use.
- Update the Programme Handbook to refine and clarify how DRC engages with the communities. With the purpose of providing all sectors with a common framework for DRC community engagement to promote complementary and avoid duplications.

The progress made since the MTA is significant; therefore, we recommend the maintenance of the certification. Nevertheless, the effect of these actions at the field level have yet to be measured, as this was not within the scope or purpose of this audit process. Community verification is required to elicit evidence of current DRC practices and only this will allow for a full closure of the five remaining 2019- CARS.

As the original deadlines for resolutions of the five CARs open were set for July 2021, this time-window will allow gathering enough evidence at the community level during the recertifications audit.

4.3 Average score per CHS commitment

Commitment	Average Score*
Commitment 1: Humanitarian assistance is appropriate and relevant	3
Commitment 2: Humanitarian response is effective and timely	2.7
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	2.5
Commitment 4: Humanitarian response is based on communication, participation and feedback	2.1
Commitment 5: Complaints are welcomed and accepted	1.9
Commitment 6: Humanitarian response is coordinated and complementary	3
Commitment 7: Humanitarian actors continuously learn and improve	2.8
Commitment 8: Humanitarian response is effective and timely	2.7
Commitment 9: Resources are managed and used responsibly for their intended purpose	2.5

* Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each commitment.

5. Summary of non-conformities

Corrective Action Requests (CAR	Type	Resolution due date	Date closed out
2019-4.1 DRC does not provide information to communities about the principles it adheres to and the expected behaviours of its staff.	Minor	2021-06-20	Open
2019-4.2 DRC does not consistently ensure communities have access to information that is easily understood and in a variety of formats.	Minor	2021-06-20	Open

2019-5.2 Information on how to access, and the scope of the CoCRM and F-CRM is not systematically provided to communities and stakeholders.	Minor	2021-06-20	Open
2019-5.4 DRC does not ensure that all country offices have A F-CRM which is in place and ensures that it covers programming, sexual exploitation and abuse of people, or other abuses of power.	Minor	2021-06-20	Open
2019-5.6 DRC does not yet systematically implement existing CoCRM policies, practices and tools to ensure that communities are fully aware of DRC organisational commitments on the prevention of sexual exploitation and abuse.	Minor	2021-06-20	Open
2019-7.4 DRC does not have a policy that describes how it learns from its practice and experience.	Minor	2020-06-20	2020-10-28
Total Number	**5**		

6. Sampling recommendation for next audit

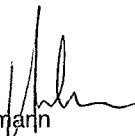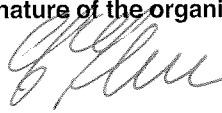|	
Sampling rate	Based on the standard sampling rate, it is recommended that 5 country programmes are included in the Recertification audit.
Specific recommendation for selection of sites	None

7. Lead auditor recommendation

In our opinion, Danish Refugee Council 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 evidence that the organisation is implementing the necessary actions to close 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: Jorge Menéndez Martinez	**Date and place:** 2020/10/28 Buenos Aires

8. HQAI decision

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☒ Certification maintained	☐ Certificate reinstated
☐ Certificate suspended	☐ Certificate withdrawn

Next audit: Surveillance audit before 2021/07/20

Name and signature of HQAI Executive Director:	Date and place:
Pierre Hauselmann	3rd December 2020, 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: *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: Charlotte Slente Secretary-General DRC Danish Refugee Council	**Date and place:** 18/12 2020, Copenhagen

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