

Finn Church Aid

Maintenance Audit 1 – Report – 2024/06/25

1. General information and audit activities

Name of auditor	Ivan Kent	
Audit cycle	Third	
Opening Meeting	Date / number of participants	Any substantive issues raised
	22 April 2024 / 11 participants	-
Closing Meeting	10 May 2024 / 9 participants	
Sampling from Offices	Name / location	
	Service and Accountability Centre (Head Office) - Finland	Remote
	Ukraine	Remote
Interviews	Position / level of interviewees	Number
	Management	2
	Staff	2

2. Actions and progress of organisation

2.1 Significant change or improvement since previous audit

Finn Church Aid (FCA) has incorporated findings of the 2023 Renewal Audit into its systems, making reference to these in the instructions for the 2024 planning process and in presentations to country offices. Since the last audit, FCA has taken some specific actions to address the Corrective Action Requests (CARs). In addition, the continued roll out of policies, including a new Safeguarding Policy, the recruitment of a new role to operationalise FCA's partnership approach, and the introduction of minor changes to FCA's organisational structure have each strengthened the general application of the Core Humanitarian Standard (CHS).

Country-office Self-assessments and Accountability Improvement Plans continue to be promoted by the Service Accountability Centre (FCA HQ) in order to monitor progress and reduce re-occurrence of non-conformities against the CHS. Not all country offices have completed these processes.

Minor CAR 2023-6.6: The 2023 Renewal Audit found that FCA does not ensure that its partner organisations always receive the support needed to understand and apply FCA policies, including those highlighted in project agreements. Since the previous audit, FCA has continued to socialise the Operational Partnership Policy (2022), which mentions the need for realistic project agreements, systematic partner assessments, and partner capacity-building plans.

The Localisation Framework (revised in autumn 2023) commits FCA to improving its capacity-strengthening approach, tools, guidelines and services. This framework is being supplemented by a set of indicators (May 2024) to track the progress of country offices with partner assessments and capacity building plans, and on the number of partners that report capacity improvements following FCA's support.

FCA has created a new post of Operational Partnership Adviser to support and systematise partner assessments and capacity support initiatives. The position was filled in February 2024 and has begun to engage with country offices to re-design the partner assessment tool, with an aim to make this more efficient. The post is located in the

Impact Team within the Strategy Development Unit, has good access to senior management, and a direct link to country offices. The next step for the post is to finalise the revised partnership assessment tool and to convene a knowledge sharing session with focal points from country offices to discuss practice on partner capacity-building.

In sum, the creation of new Operational Partnership Adviser post is a significant step forward in helping to bridge the gap between the Operational Partnership Policy and provision of consistent partner support at country level so that all partners can implement FCA policies. Further investment will be needed at country level to close the gap. A challenge is to systematise tools and approaches to the wide range of FCA partners and operating contexts, including rapid humanitarian response. A further challenge is to avoid over-burdening partners. This audit found that not all staff are aware of the opportunities to transfer some assessments of partners already carried out by other agencies, as outlined in the Operational Partnership Policy. The link between partner capacity assessments and grant approval processes (including the role of the finance team) is yet to be worked out.

Minor CAR 2023-8.7: The 2023 Renewal Audit found that FCA does not ensure that their Code of Conduct is always used by partners, consultants or service providers. Following the last audit, FCA continued to promote the revised Code of Conduct (2022) across the organisation, highlighting the role of partners, consultants and other persons working on behalf of FCA. Sessions have been held for all country offices and for Service and Accountability Centre (SAC) staff, placing emphasis on the obligation of country offices to ensure that partners have a code of conduct in place and that it meets FCA minimum requirements (including the prevention of sexual exploitation and abuse, fraud and corruption).

The profile of FCA's Code of Conduct has been reinforced by the release of a new Safeguarding Policy (2024). This highlights the specific responsibilities of each FCA staff position in promoting, applying and monitoring the policy. At the time of this audit, sensitisation workshops had taken place in Kenya, S. Sudan and Uganda. During these sessions, examples of scenarios that include consultants, service providers and contractors have been provided to reinforce the Code of Conduct. The remaining country programmes are planned for sensitisation in 2024-5.

Partner Assessments are used to check if partners have a Code of Conduct and whether this meets FCA minimum requirements. FCA aims to make the use of partner assessments more systematic (through application of a more efficient version of the tool, and monitoring via the localisation framework – see above) to help close this gap.

A Quality and Accountability Self-Assessment process continues to be used by Country Offices to check, among other things, the appropriate use of the FCA Code of Conduct for consultants, suppliers and partners. The self-assessment process results in a Country Programme Accountability Improvement Plan which is used to close remaining gaps. Since the previous audit, self-assessment workshops had taken place in CAR, Syria, and S. Sudan, completing the first round of assessments for all country offices, except Ukraine. A second round of self-assessments is planned using a revised tool which will be developed in line with the 2024 version of the CHS.

In sum, the roll out of the new FCA Safeguarding Policy is a significant action to strengthen the use of the Code of Conduct among country programme staff, with partners, consultants and service providers, and address the minor CAR. Monitoring via partner assessments and country office self-assessments, followed by the implementation of improvement plans and partner support are yet to be carried out systematically.

Additional updates on the general application of the CHS: A revised version of the FCA Complaints Policy was released in March 2024. This makes clear the roles of different FCA positions (including Board of Directors, Country Directors and Complaints Focal Points) in delivering the policy. It also commits FCA to working with partners to help them set up and operate complaints mechanisms.

A Quality Management Framework was released in March 2024 which pulls together all FCA's quality management processes, and highlights the CHS as the overall framework on quality and accountability. An annex to the document describes the mechanisms for operationalising quality management at FCA.

The Quality and Accountability Unit, which oversees processes for adherence to the CHS has been relocated to the Strategy and Program Development Department in order to provide a better integration with FCA's strategic direction. FCA's focal point for CHS audits has also changed following the retirement of the previous postholder.

A new position of Ethics and Accountability Manager has been advertised (April 2024) to focus on FCA's global complaints response mechanism and code of conduct-related issues. This position will be located within the Administration Department. FCA's Audit Committee charter has also been updated with a stronger role for the Audit Committee in following up on the functionality of the complaints response mechanism.

This audit examined the use of the HQAI CHS certification mark and claim on FCA's website and found these to be appropriate.

2.2 Summary on 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
2023-6.6: FCA does not ensure partner organisations always receive the support needed to understand and apply the full range or applicable FCA policies.	Minor By 2026 RA	<p>This Maintenance Audit found that FCA is taking action to address this Minor CAR. Notable steps since the 2023 Renewal Audit include:</p> <ul style="list-style-type: none"> continued socialisation of FCA's Operational Partnership Policy with staff in SAC and County Offices drafting a set of indicators to track progress of the Localisation Framework including the number of partner assessments and outcomes of partner capacity support initiatives appointment of an Operational Partnership Adviser to revise, support and help systematise partner assessments and capacity support 	<p>ORG002 ORG005 ORG009</p> <p>Interviews with staff</p>
2023-8.7: FCA does not ensure that their Code of Conduct is always used by partners, consultants or service providers.	Minor By 2026 RA	<p>This Maintenance Audit found that FCA is taking action to address this Minor CAR. Progress includes:</p> <ul style="list-style-type: none"> continued promotion of the Code of Conduct with staff in SAC and Country offices with reference to its use by consultants, service providers and contractors release of a new Safeguarding Policy which refers to the Code of Conduct and training workshops with country offices on responsibilities of staff. Quality and Accountability Self Assessments and Initial Partner Assessments are being carried out. 	<p>ORG001 ORG004 ORG008</p> <p>Interviews with staff</p>

3. Summary of non-conformities

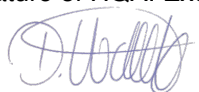
Corrective Action Requests (CAR)	Type	Resolution due date	Status	New resolution due date
2023-6.6: FCA does not ensure partner organisations always receive the support needed to understand and apply the full range or applicable FCA policies.	Minor	By 2026 RA	Open	N/A
2023-8.7: FCA does not ensure that their Code of Conduct is always used by partners, consultants or service providers.	Minor	By 2026 RA	Open	N/A

Total Number of open CARs	2
---------------------------	---

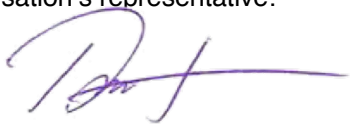
4. Lead auditor recommendation

In my opinion, Finn Church Aid has demonstrated that it is taking necessary steps to address the CARs identified in the previous audit and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability. I recommend maintenance of certification.	
Name and signature of lead auditor: Ivan Kent 	Date and place: Canterbury, UK. 24 May, 2024

5. HQAI decision

<input checked="" type="checkbox"/> Certificate maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Surveillance audit before: 2025/06/27	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 25 June 2024

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:	<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: Tomi Järvinen, Executive Director Finn Church Aid (FCA) 	Date and place: Helsinki, 12 August 2024

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 issued 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