

Maintenance Audit – Summary Report MA 2020-01-31

1. General information

Organisation	Medair		
Туре	Mandates		Verified mandates
 National Membership/Network Direct Assistance International Federated With partners 	 ☐ Humanitarian ☐ Development ☐ Advocacy 		 ☐ Humanitarian ☐ Development ☐ Advocacy
Head office location	Ecublens, Vaud, Switzerland		
Total number of country programmes	13	Total number of staff	1,699 (2019 estimate)

Audit team		
Lead auditor	Marie Grasmuck	
Second auditor	-	
Third auditor	-	
Observer	-	
Expert	-	
Other	-	

Scope of the audit

•	CHS Verification Scheme			
Audit Stage	Certification	Independent Verification	Benchmarking	Other
Initial audit (IA)				
First maintenance audit (MA1)	\square			
Mid-term audit (MTA)				
Second maintenance audit (MA2)				
Recertification audit (RA)				
Extraordinary audit				
Short notice				
Other (specify)				

Sampling

Randomly sampled country programme sites	Included in final sample	Replaced by	Rationale / Comments	Onsite visit / remote assessment
Bangladesh	Yes	-	-	Remote assessment
DR Congo	Yes	-	-	Remote assessment
South Sudan	Yes	-	-	Remote assessment

Sampled project sites:	Included in final sample	Replaced by :
Bangladesh - Shelter project (BGD 108)	Yes	-
DR Congo - Emergency Multi-sectoral response to the Ebola outbreak in DRC	Yes	-



		ASSURANCE INITIATI	VE
South Sudan - Multi-sector support to vulnerable	Yes	-	
populations in South Sudan: Health, Nutrition,			
WASH, PSS			

*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

Interviews

Position / level of interviewees (add information as necessary)	Number of interviewees	Onsite or remote
Head Office		
Management	3	Remote
Staff	2	Remote
Country Programme(s)		
Management	3	Remote
Staff	1	Remote
Partner staff	0	-
Others (specify)	-	-
Total number of interviews	7	

Opening meeting

Date	(2020/01/22)
Location	Remote
Number of participants	10
Any substantive issues arising	No

Closing meeting

Date	(2020/01/24)
Location	Remote
Number of participants	8
Any substantive issues arising	No

3. Background information on the organisation

Governance and management	Since the initial audit of Medair (October 2018), its governance bodies haven't significantly changed, although 2 additional positions now sit in the Executive
structure	Leadership Team (ELT)- the GSO (Global Support Office) International Programmes Director and the Quality & Innovation Director. In terms of management structure, the headquarters (Global Support Office) is now divided into two branches: Programmes (1) and Quality & Innovation (2). This change resulted in the removal of the Head of Programmes layer, and a structure where decision-making is designed to be flatter, less cumbersome, and closer to the communities than it was before.



Effectiveness of the internal quality assurance systems	Medair has updated some quality management guidelines and published documents that were missing or at a draft stage at the time of the Initial Audit. For instance, Medair updated its Code of Ethics and released the Guidelines on Guidance Documents.
	The quality assurance systems described at the initial audit are still in place. In addition, Medair developed a CHS action plan, in an effort to work through the findings from the initial audit. Part of this action plan is to have dedicated working groups (one per CAR, and one per group of observations) in order to identify root causes of the weaknesses and design solutions to improve Medair's compliance with the CHS indicators. Some working groups use a participatory approach regarding the root cause analysis, as they usually include both staff from headquarters and from the country programmes.
	Medair also conducted a survey on the views of its employees, stakeholders, communities and donors regarding Medair's core values and their application of the CHS.
Work with partner organisations	As at the time of the initial audit, Medair mostly directly implements its humanitarian assistance and the percentage of the funds going to partners vs. direct implementation remains low (an average of 6% of the total funds are allocated to partners). In cases where it does establish partnerships, set processes are applied to manage the work, including due diligence processes, partnership agreements, partner appraisals and statement of needs.

4. Overall performance of the organisation

Effectiveness of the management system and internal quality assurance and governance	In 2019, Medair has changed its management structure in order to improve its decision-making process and its timeliness (see above). All other aspects of Medair's management and quality assurance systems remain the same as at the time of its initial audit.
Overall organisational performance in the application of the CHS	Medair has developed an action plan and has set up cross-organisational working groups to address the CARs and weaknesses identified at the initial audit. Medair is progressing through its plan and meeting its targets. The maintenance audit has maintained the CARs, giving the remaining time (until 12/03/2021) to fully implement the necessary changes. No new CARs or observations have been made. This maintenance audit focused on the CARs, and therefore Medair's application of other CHS commitments has not been reviewed in detail at this stage.
Overall performance on PSEA	Medair has implemented several activities in order to improve its performance on PSEA since the initial audit. Medair developed new guidance on PSEA, safeguarding and child protection, with a specific focus on candidate screening at the time of recruitment. In order to improve the staff awareness on the code of conduct, Medair developed one page and two pages summaries of its Code of Ethics and started a mandatory training cycle for all its staff on ethics, which includes training on the Code of Ethics, data safeguarding, child protection policy. To improve awareness of the communities, Medair developed ethics posters and a checklist to help its staff communicate on PSEA with the communities.
Overall performance on localisation	No significant changes have been noted since the initial audit and this aspect will be further assessed at the Mid Term Audit.

Overall performance on gender and diversity

No significant changes have been noted since the initial audit and this aspect will be further assessed at the Mid Term Audit.

Average score per commitment

CHS Commitment	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	3
Commitment 2: Humanitarian response is effective and timely	2.6
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	2
Commitment 4: Humanitarian response is based on communication, participation and feedback	2.4
Commitment 5: Complaints are welcomed and addressed	2.1
Commitment 6: Humanitarian response is coordinated and complementary	3
Commitment 7: Humanitarian actors continuously learn and improve	2.3
Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably	2.3
Commitment 9: Resources are managed and used responsibly for their intended purpose	2
Note: scores are culminative and updated at this audit stage based on the results from previous audits	

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5. Summary of non-conformities

Corrective Action Requests (CAR) / Weaknesses (YYYY – indicator)	Type (minor / major)	Close-out due date (YYYY/MM/DD)	Date closed out (YYYY/MM/DD)
2018-3.6: Medair does not formally analyse the full range of potential or actual unintended negative effects of programmes	Minor	2021/03/12	-
2018-3.8: Medair has not sufficiently operationalised its data protection policy	Minor	2021/03/12	-
2018-5.1: Medair does not systematically consult communities on the design, implementation and monitoring of complaints mechanisms.	Minor	2021/03/12	-
2018- 5.6: Communities and people affected by crisis, including particularly vulnerable groups are not aware of the expected behaviour of staff, and of the policies that govern their behavior.	Minor	2021/03/12	-
2018-8.7: Medair does not systematically provide ongoing training to staff on its code of conduct, which has resulted in a number of staff lacking awareness of the contents of the code.	Minor	2021/03/12	-
2018- 9.4 Medair does not systematically consider the impacts of the use of local and natural resources on the environment.	Minor	2021/03/12	-



Sampling recommendation for next audit

Sampling rate	According to the total number of countries of operations
Specific recommendation for selection of sites	-

6. Lead auditor recommendation

In our opinion, Medair is implementing the necessary actions to close the minor CARs identified in the previous audit 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: pine Grasmudk Date and place: Metz (France), Friday 31st January 2020

7. HQAI decision

\square	Certificate maintained		Certificate reinstated
	Certificate suspended		Certificate withdrawn
Next audits Mid-term audit before 12th March 2021			
Execu	Hauselmann Itive Director nitarian Quality Assurance ve	Date:	2020-01-31

8. Acknowledgement of the report by the organisation

Space reserved for the organisation		
Reservations regarding the findings / remarks regarding the behaviour of the audit team:	⊠ yes	🗌 no
Reasons, please give details:		



Acknowledgement and Acceptance of Findings:

I acknowledge and understand the findings of the audit I accept the findings of the audit

Name and signature of Medair representative:

William ANOFRON William A. A.

Date: 12 FEBRUARY 2020

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

0	Major non-conformity or Major weakness
	Your organisation currently does not work towards applying this requirement, either formally or informally. It's a major weakness that prevents your organisation from meeting the overall commitment.
1	Minor non-conformity or Minor weakness
	Your organisation has made some efforts towards applying this requirement, but these efforts have not been systematic.
2	Observation
	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.
3	Conformity
	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled
4	Exceptional conformity
	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.

MEDAIR-MA-2020

