

# Medair

## Maintenance Audit – Summary Report 2022/04/27

### 1. General information

#### 1.1 Organisation

Type	Mandates	Verified	
<input checked="" type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input checked="" type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input checked="" type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy	
<b>Head office location</b>	Ecublens, Vaud, Switzerland		
<b>Total number of country programmes</b>	11 [Nov 2021]	<b>Total number of staff</b>	1479

#### 1.2 Audit team

<b>Lead auditor</b>	Annie Devonport
<b>Second auditor</b>	N/A
<b>Third auditor</b>	N/A
<b>Observer</b>	N/A
<b>Expert</b>	N/A
<b>Witness / other</b>	N/A

#### 1.3 Scope of the audit

<b>CHS Verification Scheme</b>	Certification
<b>Audit cycle</b>	First Audit Cycle
<b>Phase of the audit</b>	Second Maintenance Audit
<b>Extraordinary or other type of audit</b>	

#### 1.4 Sampling\*

Randomly sampled country programme sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
DR Congo	Yes		Random selection. Not selected for any previous audits; Direct implementation only; relatively large budget and workforce.	Remote
DR Congo	Yes	N/A	Duplicate in the random sampling.	
Bangladesh	No	Somalia	Bangladesh programme was subject of the remote mid-term audit and is due to close imminently.	
Sudan	Yes		Random selection and had not been subject of a previous audit. Direct implementation; relatively new programme	Remote
Somalia	Yes		No 4 on random selection table; not selected for previous audits; established programme; direct implementation and working through partners	Remote

**Any other sampling performed for this audit:** None

**Sampling risk:** Despite the limitations of remote auditing methodologies, the auditor is confident that the evidence obtained is sufficient and appropriate to provide a basis for their conclusions and recommendation.

*\*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	28 February – 4 March 2022	Remote
Somalia [with office in Nairobi]: health; nutrition; WASH; protection. Mogadishu and Kismayo	1 -2 March 2022	Remote
DRC: Emergency Response to Vulnerable Populations in the East of the Democratic Republic of the Congo. Bunia, South Kivu	3 – 4 March 2022	Remote
Sudan: Shelter project refugees in Tunaydbah	28 February 2022	Remote

### 2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
<b>Head Office</b>			
Management	1	1	Remote
Staff		3	Remote
<b>Country Programme Office(s)</b>			
Management	1	1	Remote
Staff	1	4	Remote
Partner staff		1	Remote
Others			
<b>Total number of interviewees</b>	<b>3</b>	<b>10</b>	

### 2.3 Opening meeting

<b>Date</b>	2022/02/28
<b>Location</b>	Remote
<b>Number of participants</b>	15 [4 women; 11 men]
<b>Any substantive issues arising</b>	None

### 2.4 Closing meeting

<b>Date</b>	2022/03/14
<b>Location</b>	Remote
<b>Number of participants</b>	9 [1 woman; 8 men]
<b>Any substantive issues arising</b>	None

### 3. Background information on the organisation

#### 3.1 General information

Medair is a faith-based humanitarian organisation founded in 1989 in Switzerland. The organisation is active in the sectors of health and nutrition, shelter and infrastructure, and water, sanitation and hygiene. In 2022, Medair is operational in 11 countries, and apart from its Global Support Office (GSO) in Ecublens (Switzerland), it has 5 affiliate offices in United Kingdom, Germany, France, the United States of America and the Netherlands. These affiliates are not part of the present audit.

The aim of Medair, as per the organisations' statutes, is to '[pursue] a charitable and humanitarian aim, with a mission to respond to human suffering in emergency and disaster situations by implementing multi-sectoral relief and rehabilitation projects, in a compassionate and serving attitude inspired by its Christian ethos'.

Medair preliminary numbers for 2021 report 3,362,168 direct beneficiaries. The breakdown of staff is GSO - 134; Internationally recruited - 129; Nationally recruited 1216; Volunteers – 6272. This is a drop of 10% in the staff numbers over the year.

Preliminary 2021 operating expenses amount to 84,000,000 USD, [with gifts in kind] an 8% decrease compared to 2020.

Medair continues to work to the 2020–2023 People-to-People (P2P) organisational strategy, which builds on the previous one (2017–2019). The current strategy aims to expand Medair's reach, with a focus on 'Consolidating Quality, Growth and Stability'. There are seven goals in the current strategy.

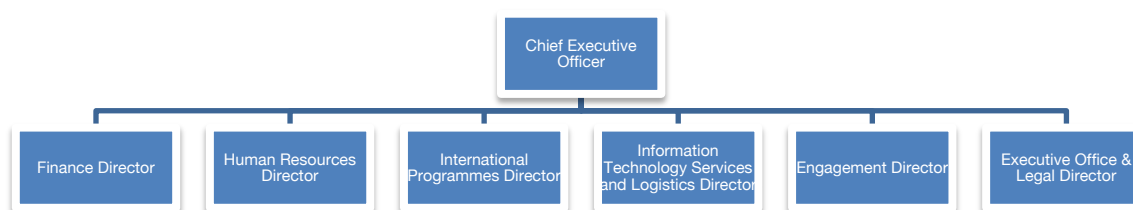
#### 3.2 Governance and management structure

Medair's governing bodies have not changed since the Mid-term Audit (MTA) and are as follows:

- The International Board of Trustees (IBoT) composed of a minimum of 5 members (8 members in 2021). This IBoT is advised by a governance committee of 3 active members of the IBoT. There is also an Audit/Compliance/Finance committee with 3 members. Board members are appointed for 3 years by the Annual General Meeting. The IBoT meets at least once a year (currently 4 times per year). The IBoT has the ultimate responsibility for the affairs of Medair, for ensuring it is solvent, well managed and delivers the outcomes for which it has been established.
- The Annual General Meeting (AGM) elects IBoT members, approves annual reports and appoints auditors.
- The Chief Executive Officer (CEO) is appointed by and responsible to the board for the management and operation of the organisation. The CEO is responsible for maintaining Medair's strategic direction as established by the IBoT. They are responsible for keeping the organisation solvent, providing public representation at the highest levels, and overseeing organisational growth.
- The Executive Leadership Team (ELT) assists the CEO in their duties. A new post of Executive Office Project Coordinator will spend 30% of their time communicating to the IBoT. The organisational chart of the ELT remains as it was at the MTA and is presented below.

As described in its 2020–2023 Strategy, Medair continues to work towards a management structure that is as flat as possible: 'We are working to create a flatter operating structure, with fewer layers of management and more freedom, while still having clarity in expectations, lines of authority and responsibility.'

Medair's ELT organigram:



### 3.3 Internal quality assurance mechanisms and risk management

There have been no major changes to Medair's quality assurance mechanisms and risk management systems since the MTA. However, a new position of Internal Audit and Risk Manager has recently been appointed and is based in Nairobi.

Medair has several systems and processes in place to ensure institutional quality:

- Medair work is guided by key policies, such as its Code of Ethics, Policy on Preventing Harassment, Policy on Preventing Sexual Exploitation, Child Protection Policy, Data Protection Policy, etc.
- Medair work is also guided by operational guidelines and SOPs to frame and support teams in implementing its policies and ensure the quality of its programmes and projects.
- Medair regularly updates its policies, procedures, and guidelines according to the existing law, the need to clarify or to correct practices, or according to lessons learned from implementing those guidelines on the field. Between the Initial Audit (IA) and MTA Medair revised the Accountability to Affected Population (AAP) Guideline; transformed its Environmental Position Paper into an Environmental Policy; and developed a Data Protection Guideline. Since the MTA a policy on preventing racism; a handbook on learning and development; and a DRR position paper have been developed.
- To ensure the understanding and implementation of the policy, guidelines, and procedures, Medair provides training through its week-long recruitment course (Relief Orientation Course - ROC). This course is used as part of the recruitment process for internationally recruited staff, and thereby serves both goals of staff selection and staff education. Medair also provides training on ethics and values through the annual training cycle, mandatory for all staff, in the online learning gateway, and ad hoc trainings. Monthly meetings for all staff reinforce Medair ethics and values. Focal Points are appointed in each programme or project site to ensure that the policy/guideline is understood and implemented.
- Medair has put in place organisational activities (indicator tracking, annual staff and external stakeholders' surveys) to track its progress and performance globally, on topics linked to the quality of its projects, the perception of its work by external actors, the actual performance of the activities implemented, and the progress towards its global strategy. Medair recognises the importance of recording what and how their projects are implemented. To this end, Medair is working to strengthen organisational quality assurance through training of M & E and senior programme staff on data quality. In parallel, data management systems are being up graded, starting with a nutrition module.
- Medair has internal and external audit policies and activities, risk identification activities, and monitoring and evaluation activities implemented at all levels of programme

implementation. The country risk assessment is conducted annually. Senior and technical support staff provide guidance and monitoring of country programme activities.

### 3.4 Work with partner organisations

At the time of the IA, Medair dedicated 6% of its expenses to direct partner implementation. Medair works with partner organisations through working with the communities, local and international NGOs, and public and private structures. Since the IA, Medair set out its approach to localisation, and on how it intends to include national and local partners, in its 2020–2023 Strategy and the Position Paper on Localisation. Medair's interpretation of localisation goes beyond a financial grant making relationship to a broader, more inclusive relationship that focuses on the community and on leaving a lasting legacy.

Medair's Partnership Framework and Operational Partnership Policy describe how it collaborates with partners according to the type of actor and purpose of the partnership. The policy lays out the conditions for operational partnerships, and the mandatory due diligence and contents of the agreement for when Medair establishes a partnership. Since the IA, Medair has reviewed the Partnership Toolkit to reflect the revised policy. The due diligence undertaken before entering into an agreement includes criteria related to code of conduct; safeguarding; capacity of partner; HR policies; and financial policies.

Driven largely by donors, Medair engages with consortia for the purpose of delivering services to a population. Medair requires that consortium partners share the same ethical commitments and has developed a tool kit to guide staff when entering consortium relationships.

At the MTA the staff interviewed were able to explain decisions around partnerships, but the projects sampled did not provide evidence for sufficient analysis of Medair's practices regarding partnership with local NGOs. The limitations of the MTA remain at this MA in this respect.

Medair's partnering expenses for 2021 are shown below. At the MTA it was noted that the calculation method had changed since the IA, which focused on implementing partners. Partnering expenses now include local and national NGO, local and national governmental entities (such as clinics), and local volunteers. Using the same basis of calculation since the MTA, partnering expenses have dropped by 2% since 2020.

Country	Expense to, for or through Partners	Percent to, for or through Partners	Medair Direct Expenses	Percent Medair Direct Expenses
G-ERT Honduras	\$0	0%	\$495,742	100%
G-ERT Ethiopia	\$0	0%	\$553,195	100%
Afghanistan	\$29,589	1%	\$4,368,436	99%
Bangladesh	\$934,923	23%	\$3,214,625	77%
DR Congo	\$3,955,148	40%	\$6,002,221	60%
Jordan	\$481,208	10%	\$4,581,564	90%
Lebanon	\$1,252,650	15%	\$7,098,350	85%
Madagascar	\$362,067	20%	\$1,456,667	80%
Somalia	\$2,202,995	45%	\$2,717,148	55%
South Sudan	\$2,132,433	15%	\$11,690,399	85%
Sudan	\$55,279	3%	\$1,901,542	97%
Syria	\$2,896,650	41%	\$4,168,350	59%
Yemen	\$1,546,030	26%	\$4,370,529	74%
<b>Total</b>	<b>\$15,848,972</b>	<b>23%</b>	<b>\$52,618,769</b>	<b>77%</b>

## 4. Overall performance of the organisation

### 4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation

The new Chair of trustees, appointed in 2020, resulted in some changes to reporting to the Board. A stronger focus has been placed on reporting on issues critical for Medair and to shine a light on things of importance. Committees include Finance and People with topics such as internal control; ethics; risk management; and well-being routinely reported. The BoT also added the new value of 'joy' to Medair to promote employee wellbeing.

Medair references the CHS in its policies and monitors some of the indicators through internal KPI monitoring. Medair's ELT is committed to the CHS audit process and regularly communicates about it.

Following the IA, and up to the MA, Medair developed and followed an action plan to implement corrective actions for both the outstanding CARs and the observations. There are twenty-two separate actions with each assigned an action owner. Working groups were set up to analyse root causes of the CARs, to discuss and implement the agreed actions.

Medair's corrective actions continue to focus on building systems and processes that work towards implementing the organisation's strategy and at the same time, address findings of the CHS audit. Since the MTA Medair has introduced only a few new policies, instead focusing on implementing recently developed guidance, particularly those designed to address the outstanding CARs, related to AAP and the environment.

Medair's annual training cycle is now embedded and known by all staff interviewed at the MA. The training is mandatory for all staff and focuses each month on one ethics related topic such as: the code of ethics; data protection; and accountability to affected populations. Since the MTA Medair has also started a "P2P Innovation Champion" programme to train and coach innovation champions who in turn train and coach teams in their countries.

Medair's senior management recognise the importance of documenting what they are doing, to demonstrate and assure themselves that the organisation is following good practice. Training is being rolled out on data quality assessments to each country programme with clear lines of responsibility set out.

Covid-19 continues to have a significant impact on Medair and their work. The organisation has adapted both what they do and how they do it including an increase in remote management. Since the MTA more country visits have been undertaken than in the previous twelve months.

### 4.2 How the organisation applies the CHS across its work

The limitations of the MA mean that little can be added to the findings of the MTA in terms of the broader application of the CHS. However, it remains evident that Medair dedicates time, thinking and resources to build solutions that are relevant and adapted to its values and strategies, and to existing structures and capabilities. Staff across the organisation are aware of CHS and demonstrated a commitment to improving in line with the standard.

The MTA found that Medair had improved application of several CHS commitments since the IA, enabling closure of four Minor CARs. Two minor CARs were extended until the RA in 2023 Medair had developed internal and external audit teams, reorganised its HR team, developed the annual ethics training cycle, and prepared the implementation of HR, finances, and logistics software.

Since the MTA Medair has shown commitment to staff development through a new Learning and Development Handbook and the development of a policy on tackling racism. A position paper on DRR was released in August 2021, to address some of the root causes of humanitarian need. Efforts continue to improve data quality across the organisation with training and support to country programme focal points and the gradual implementation of a new data management system.

Progress continues to be made on addressing the remaining CARs relating to 1) [5.6] ensuring communities are aware of Medair's values and the expected behaviour of staff and 2) [9.4] systematically ensuring consideration of the impact of programmes on the environment. Tools, guidance and training is being rolled out across country programmes.

Overall, and since the IA, this MA records:

- 4 Minor CAR closed (2018-3.6; 2018-3.8; 2018-5.1; 2018-8.7);
- 2 Minor CAR extended (2018-5.6; 2018-9.4)



Observations at the MTA, (not reviewed at the MA) were:

- 12 observations sufficiently addressed;
- 14 observations maintained or slightly modified;
- 5 new observations raised

### 4.3 Average score per CHS commitment

Commitment	Average Score*
<b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant	3
<b>Commitment 2:</b> Humanitarian response is effective and timely	2.9
<b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects	2.6
<b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback	2.4
<b>Commitment 5:</b> Complaints are welcomed and accepted	2.4
<b>Commitment 6:</b> Humanitarian response is coordinated and complementary	3
<b>Commitment 7:</b> Humanitarian actors continuously learn and improve	2.5
<b>Commitment 8:</b> Humanitarian response is effective and timely	2.6
<b>Commitment 9:</b> 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, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0.

## 5. Summary of non-conformities

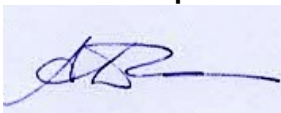
Corrective Action Requests (CAR)*	Type	Resolution due date	Date closed out
2018 - 5.6: Communities and people affected by crisis, including particularly vulnerable groups are not aware of the expected behaviour of staff, and of the policies that govern their behaviour.	Minor	2023/03/12	-
2018 - 9.4 Medair does not systematically consider the impacts of the use of local and natural resources on the environment.	Minor	2023/03/12	-
<b>Total Number</b>	<b>2</b>		

\* *Note:* The CARs are completed by the audit team based on the findings.

## 6. Sampling recommendation for next audit

<b>Sampling rate</b>	As per HQAI guidelines, avoiding as far as possible those countries that have been subject to a previous in-country audit.
<b>Specific recommendation for selection of sites</b>	Endeavour to include a site visit to a programme where Medair is working through partners.


## 7. Lead auditor recommendation

<p>In my opinion, Medair has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.</p> <p>Based on the evidence obtained, I confirm that I have received reasonable assurance 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.</p> <p>We recommend maintenance of certification.</p>	
<p><b>Name and signature of lead auditor:</b></p> <p><b>Annie Devonport</b></p> 	<p><b>Date and place:</b></p> <p>2022.03.30 UK</p>

## 8. HQAI decision

<input checked="" type="checkbox"/> Certification maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
<p><b>Next audit:</b> Surveillance audit before 2023/03/11</p>	
<p><b>Name and signature of HQAI Executive Director:</b></p>  <p>Pierre Hauselmann</p>	<p><b>Date and place:</b></p> <p>2022-04-27</p>

## 9. Acknowledgement of the report by the organisation

<p><b>Space reserved for the organisation</b></p>	
<p>Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team:</p> <p><i>If yes, please give details:</i></p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p><b>Acknowledgement and Acceptance of Findings:</b></p> <p>I acknowledge and understand the findings of the audit</p> <p>I accept the findings of the audit</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p><b>Name and signature of the organisation's representative:</b></p> <p>David Verboom, CEO</p> 	<p><b>Date and place:</b></p> <p>5/2/2022</p>



## 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><b>Score 0:</b> 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"> <li>• <b>Independent verification:</b> major weakness;</li> <li>• <b>Certification:</b> major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.</li> </ul>
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p><b>Score 1:</b> 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"> <li>• <b>Independent verification:</b> minor weakness</li> <li>• <b>Certification:</b> minor non-conformity, leading to a minor corrective action request (CAR).</li> </ul>
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p><b>Score 2:</b> 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"> <li>• <b>Independent verification and certification:</b> observation.</li> </ul>
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><b>Score 3:</b> indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> conformity.</li> </ul>
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><b>Score 4:</b> indicates an exemplary performance in the application of the requirement.</p>

\* Scoring Scale from the CHSA Verification Scheme 2020