

# Developmental Action Without Borders / Naba'a Maintenance Audit – Summary Report 2021/07/08

## 1. General information

### 1.1 Organisation

Type	Mandates	Verified	
<input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input checked="" type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	
<b>Head office location</b>	Saida, Lebanon		
<b>Total number of country programmes</b>	12	<b>Total number of staff</b>	Approx. 150

### 1.2 Audit team

<b>Lead auditor</b>	Marie Grasmuck
<b>Second auditor</b>	--
<b>Third auditor</b>	--
<b>Observer</b>	--
<b>Expert</b>	--
<b>Witness / other</b>	--

### 1.3 Scope of the audit

<b>CHS Verification Scheme</b>	Certification
<b>Audit cycle</b>	Second
<b>Phase of the audit</b>	1 <sup>st</sup> Maintenance Audit
<b>Extraordinary or other type of audit</b>	--

### 1.4 Sampling\*

Randomly sampled country project sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
1 - Reproductive Health (South, Palestinian refugee camps)	Yes	--	Randomly selected and maintained in the sample because the focus of the project contributes to the diversity of the sample. It focuses on reproductive health in the South of Lebanon. Relatively small budget compared to the others.	Remote
4 - Child Rights Governance	No	9 - Strengthening the resilience of young people without and with disabilities through socio-economic empowerment. (South and North, Palestinian refugee camps)	Randomly selected and replaced by 9, since it is very similar to the Manara project, sampled at the recertification audit.	Remote



5 - BLN and CBECE (South and North - Supporting vulnerable girls and boys to access and remain in education in Lebanon)	Yes	--	Randomly selected and maintained in the sample because the focus of the project contributes to the diversity of the sample. It focuses on educational activities for children, and is both in North and South, of Lebanon. Relatively important budget compared to the others.	Remote
9 - Strengthening the resilience of young people without and with disabilities through socio-economic empowerment. (South and North, Palestinian refugee camps)	Yes	--	Randomly selected and next in line to replace #4. Maintained in the sample because the focus of the project contributes to the diversity of the sample. It focuses on livelihoods and educational activities for youth, and is both in North and South of Lebanon.	Remote

**Any other sampling performed for this audit: --**

**Sampling risk:**

Due to the Covid-19 pandemic and associated travel restrictions, the recertification audit (RA, 2020) had to be conducted remotely, using remote communication technologies. A special recommendation had been made in the RA summary report to organise an on-site visit for the present maintenance audit (MA, 2021), especially as two open minor CARs were directly related to communities' participation and awareness (CAR 2021-5.6 and CAR 2020-5.1). While community interviews have indeed been organised for this MA, the Covid-19 pandemic and associated travel restrictions were still in place, and all MA activities have been organised remotely.

The sampling recommendations from the RA also highlighted that in-person individual interviews of randomly chosen individuals were recommended for the MA. While the interviews organised at the MA were individual, the persons interviewed were selected directly by Naba'a, amongst communities involved in the sampled projects. In total, twelve community members were selected for phone interviews, and 11 were available and effectively interviewed.

The sampling recommendations from the RA also highlighted that there should be a stronger focus on communities outside of the scope of the Naba'a centres, which usually receive more scrutiny. This recommendation has been applied for this MA.

The sampling recommendations from the RA also highlighted that the MA sample should include community development committees' members. This recommendation has been applied for this MA.

Taking into account the available evidence provided for this MA, and the information provided in the previous audit reports, and the findings of the interviews with staff and community members, Naba'a has demonstrated its commitment to implementing corrective actions to the minor CARs issued or reiterated at the RA. However, the inability to organise on-site visit, to organise focus groups, and to discuss with randomly chosen community members during site visits, limits the ability of the auditor to triangulate the consistency of the effects of the corrective actions taken by Naba'a. Hence, the recommendation to organise on-site visits and random interviews at the next audit (MTA, 2022) is reiterated.

Despite the limitations inherent to the exclusive use of remote auditing methodologies for the present process, we believe that the evidence obtained is sufficient and appropriate to provide a basis for our 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, Saida	24/05/2021	Remote
Naba'a projects, North	25 and 26/05/2021	Remote
Naba'a projects, South	25 and 26/05/2021	Remote

### 2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
<b>Head Office</b>			Remote
Management	1	1	
Staff	1	-	
<b>Country Project Office(s)</b>			
Management	1	1	
Staff	1	3	
Partner staff	-	-	
Others	-	-	
<b>Total number of interviewees</b>	<b>4</b>	<b>5</b>	

### 2.2bis Consultations with communities

Type of group and location	Number of participants		Onsite or remote
	Female	Male	
Community members volunteering in Naba'a's activities	2	1	Remote
Community members – vocational training activities	2	1	
Community members – health & psychosocial support activities	4	1	
<b>Total number of participants</b>	<b>8</b>	<b>3</b>	

### 2.3 Opening meeting

Date	2021/05/24
Location	Remote
Number of participants	8
Any substantive issues arising	No

### 2.4 Closing meeting

Date	2021/05/29
Location	Remote
Number of participants	8
Any substantive issues arising	No



### 3. Background information on the organisation

**3.1 General information**

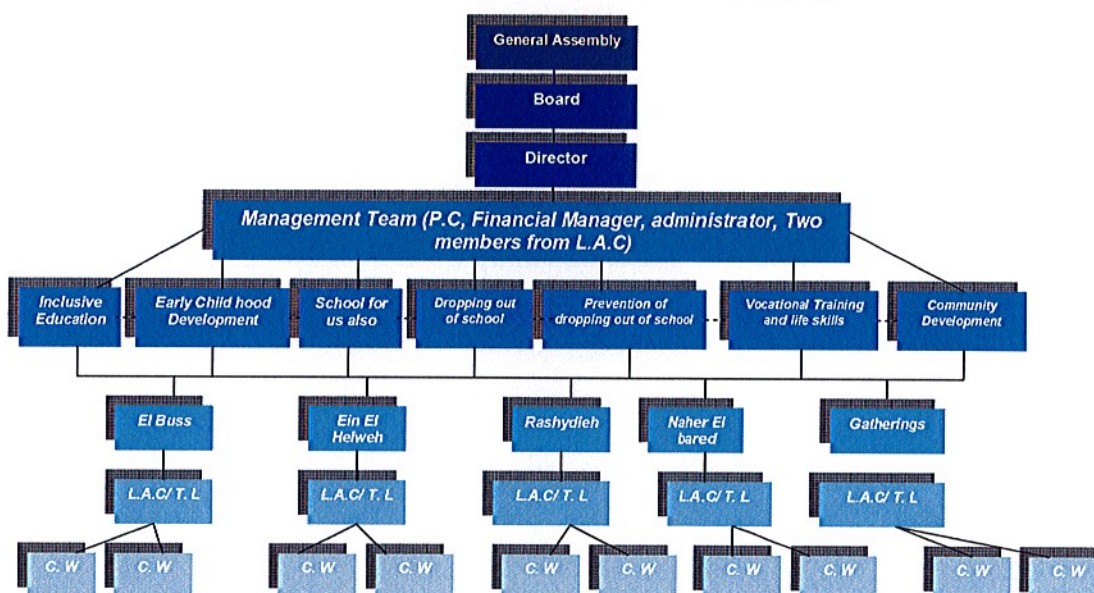
There has been no significant change since the RA. Naba'a had initially planned to review its Strategic Plan in 2020; however, this activity has been moved to 2021 to accommodate the challenging 2020 context (Covid-19 pandemic, national socio-economic crisis, Beirut blast) that has mobilised the staff. Naba'a plans on having several sub-strategies attached to its future strategic plan, which will focus on cross-cutting issues such as a Complaint Response Mechanism, Gender, Child Management and Protection.

**3.2 Governance and management structure**

There have been some changes since the RA. Naba'a has set up two new departments as part of its organigram:

- A Human Resources department, that is completely set up and staffed, and which operates with dedicated software;
- A Monitoring and Evaluation department, that is not yet completely set up, and staff will be recruited after Naba'a's Monitoring and Evaluation strategy is finalised.

***Developmental Action without Borders / Naba'a***



**N.B**  
**C.W:** Community workers  
**L.A.C:** Local Admin committee composed of community members. Their tasks include (Setting plan, consultation role, budgeting, monitoring work, participating in review and evaluation, dealing with obstacles, all L.A.Cs having bilaws.  
**T.L:** Team Leader, He/she is a member of L.A.C committee, but he/she cannot vote, Program Team leader manage all community members.

**3.3 Internal quality assurance mechanisms and risk management**

There has been no significant change since the RA. Naba'a is currently reviewing its strategy and its monitoring and evaluation system, but those activity are in progress at the time of the report and do not yet change the internal quality assurance mechanisms and risk management that were in place at the time of the RA. Naba'a's internal audit tool (which was piloted at the time of the RA), has been finalised.

**3.4 Work with partner organisations**

There has been no significant change since the RA.

### 4. Overall performance of the organisation

**4.1 Effectiveness of the governance,**

Naba'a's strategy to resolve the CARs identified at previous audit stages has been at policy, planning and practice levels, as explained below:



**internal quality assurance and risk management of the organisation**

- At policy level, Naba'a has reviewed several policies (Child Protection, Code of Conduct, HR Policy) to better reflect its organisational commitments in its policies, including on PSEA. Naba'a has reviewed its HR training plan and the regularity of its communication with the communities in order to increase awareness of the communities on Naba'a's organisational commitments.
- At planning level, Naba'a includes the review of the environmental context and environmental risks at project proposal and design stages.
- At practice level, Naba'a has integrated the topic of the complaint response mechanism and of the environment in its needs assessments, and community discussions.

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

Following the RA, Naba'a has taken several steps to resolve the open CARs, which are reviewed above. Through these corrective actions, Naba'a has improved its application of the CHS:

- Minor CAR 2019-3.6, which focused on the environment has been closed;
- Minor CAR 2020-5.1 has a resolution due date planned at the MTA. Naba'a plans to develop a specific sub-strategy on its complaint mechanism (as part of its multi-year strategy) in order to address this CAR at a systemic level and has taken mitigating actions in the meantime.
- Minor CAR 2020-5.6 has been closed. Several corrective actions have been taken by Naba'a, and the community members interviewed were aware of Naba'a's organisational commitments, including on PSEA. However, given that the corrective actions are recent; and given that the sampling for the interviews limits the ability to further triangulate the effectiveness of the actions, an observation remains.

### 4.3 Average score per CHS commitment

Commitment	Average Score*
<b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant	2.8
<b>Commitment 2:</b> Humanitarian response is effective and timely	2.7
<b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects	2.9
<b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback	2.7
<b>Commitment 5:</b> Complaints are welcomed and accepted	2.1
<b>Commitment 6:</b> Humanitarian response is coordinated and complementary	3
<b>Commitment 7:</b> Humanitarian actors continuously learn and improve	2.3
<b>Commitment 8:</b> Humanitarian response is effective and timely	3
<b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose	2.4

\* *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
CAR 2019 – 3.6: Potential effects on the environment are not systematically covered in Baseline Analysis, Risk Analysis or Participatory Needs Assessment and acted upon.	Minor	2021/07/23	2021/06/05



CAR 2020 – 5.1: The communities are not consulted on the design, implementation and monitoring of the complaint handling mechanism.	Minor	2022/03/06	
CAR 2020 – 5.6: Communities are not fully aware of the expected behaviour of humanitarian staff, including organisational commitments made on the prevention of sexual exploitation and abuse.	Minor	2021/07/23	2021/06/05
<b>Total Number</b>	<b>1</b>		

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

## 6. Sampling recommendation for next audit

<b>Sampling rate</b>	No variation from the standard sampling rate is recommended. Sampling should be based on the numbers of projects active at the time of the MTA.  It is recommended to organise in-person site visits at the MTA and to organise random community interviews if possible.
<b>Specific recommendation for selection of sites</b>	--

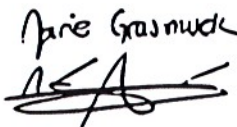
## 7. Lead auditor recommendation

In our opinion, Naba'a 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 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.

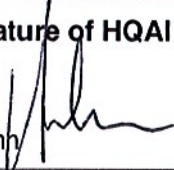
**Name and signature of lead auditor: Marie Grasmuck**



**Date and place:  
Metz (FR), June 5th, 2021**




## 8. HQAI decision

<input checked="" type="checkbox"/> Certification maintained	<input type="checkbox"/> Certificate reinstated
<input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate withdrawn
<b>Next audit:</b> Surveillance audit before YYYY/MM/DD	
<b>Name and signature of HQAI Executive Director:</b>  Pierre Hauselmann 	<b>Date and place:</b> 8 <sup>th</sup> of July 2021, Geneva

## 9. Acknowledgement of the report by the organisation

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

## 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

