

# Office de Développement des Églises Évangéliques (ODE)

## Initial audit - Summary report - 2025/06/04

With the exception of the format and sample sentences, which are unofficial translations from English to French, the text of this document is originally written in French.

### 1. General information

#### 1.1 Organisation

Type	Mandates	Verified
<input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy
Legal registration	Development association not-for-profit religious organisation	
Head office location	No. 235 rue Gandaogo, Zone du Bois, Sector no. 22 01 BP 108 Ouagadougou 01	
Total number of the organisation staff		88

#### 1.2 The audit team

Senior Auditor	Meur Elisabeth
Second auditor	
Third auditor	
Observer	
Expert	
Witness / other participants	Local facilitators: - Kazienga Salamata - Savadogo Wendpanga Alain

#### 1.3 Scope of the audit

CHS:2014 Verification scheme	Benchmarking
Audit cycle	Initial audit, first cycle
Type of audit	Benchmarking
Scope of the audit	This audit covers the entire organisation. ODE's humanitarian and development mandates and its various areas of work are covered by this audit.
Purpose of the audit	The sampling of ODE programmes reflects the diversity of its mandates, areas of activity and the localities in which it operates. The security and humanitarian dimensions of its operating context are also taken into account in the selection of participants at operational level.

#### 1.4 Sampling

Sampling unit	National programmes
Total number of projects included in the sample	22
Total number of sites for on-site visits	2
Total number of sites for remote assessment	3
Selecting the sampling unit	

Random sampling - on-site/remote	Re-sampling - on-site/remote
project to build people's resilience Kourwéoso Internally Displaced Persons (PCORDIK) - à distance.	Project to Prevent and Combat the Worst Forms of <u>Child Labour</u> (PPITE) - on site.
Drops For Crops North (D4C_N) - remote.	Wash assistance project for POIs (PAW) - on site.
ARFSA (Cultivating hope for (dry) (Burkina) (Faso)) (-) (not)selected.	Social cohesion and peace-building project (PCS CP) - à distance.
Small one-off projects / mango operation (3XP/OM) - no selected.	
Project to Strengthen Food and Nutrition Security Nutritional support for vulnerable households in Boulkiemdé (PRESAM-B) - not selected.	
Risks <b>identified through sampling</b> :	

*"It is important to note that the results of the audit are based on (a sample of) (the) (activities,) (programmes) (and) (documentation) of an organisation, as well as on direct observation. (The) (results) (are) (analysed) (to) (determine) (the)organisation's (systematic) approachand application of all aspects of the (humanitarian) (core) (standard) ((CHS)) (in) (different)contexts and working methods.*

## 2. Activities of the audit team

### 2.1 Opening meeting

Date	2024/11/27	Number of participants	16
Location	Remote	Any substantive issues raised	

### 2.2 Locations assessed

Location of sites	Dates	On-site or remote
Ouagadougou	27.11.24 - 12.12.24	Remote
Koupéla	21.01.25	On site
Fada	22.01.25	On site
Ouahigouya	4-05.02.25	Gur place

### 2.3 Interviews

Level / Position of respondents	Number of <b>people</b> questioned		On-site or remote
	Women	Men	
<b>Head office and offices</b>			
Management	1	2	Remote
Staff	4	3	À distance
Member of the Board of Directors		1	Remote
Sampling unit (project sites / office(s)) local)			
Management		5	Remotely and on place

Staff		2	On site
Others: Provincial Directorate for Humanitarian Action and de la Solidarité Nationale ; Direction provinciale en charge de l'Education ; Direction provinciale en charge de la jeunesse ; Direction régionale en charge de l'eau du Nord ; Services d'Hygiène	2	6	On site
<b>Total number of respondents</b>	7	19	26

## 2.4 Community consultations

Type of group and location	Number of people interviewed		On-site or remote
	Women	Men	
School club/group of girls, Zaogo	5		On site
School club/boys' group, Zaogo		5	On site
Parents of children (mothers' group), Zaogo	14		On site
Individual interview, boy, Zaogo		1	On site
Pupils receiving education and training grants professional, Fada	11		On site
Pupils receiving education and training grants professional, Fada		10	On site
Parents, meres group, Fada	11		On site
Individual interview, girl, Fada	1		On site
Internally Displaced Persons (IDPs) women's group beneficiaries of showers and toilets, Ouahigouya	2		On site
PDI men's group, beneficiaries of showers and toilets, Ouahigouya		6	On site
Host group, men, Ouahigouya		3	On site
Solid waste management association group, Ouahigouya	4	2	On site
<b>Total number of participants</b>	48	27	75

## 2.5 Closing meeting

Date	2025/03/12	Number of participants	16
Location	Remote	Any question of substance raised	

## 3. General information about the organisation

3.1 General information	The Office de Développement des Généraux Évangéliques (ODE) is a non-profit, faith-based development association set up in 1973 to help the victims of the great drought. It is legally registered with the Ministry of Territorial Administration of Burkina Faso. The organisation is an instrument of the evangelical community working to restore human dignity by promoting integral (holistic), responsible and sustainable development. Its vision is that of partner communities enterprising, with knowledge, tools and methods
----------------------------	--

to mobilise sufficient resources for their integral development". ODE defends and promotes the values and principles of justice, equity, tolerance, solidarity, cohesion, good governance, cooperation, etc.

ODE is headquartered in Ouagadougou and employs 88 people. It operates in a wide range of fields, including sustainable agriculture, rural water supply, sanitation, savings and credit, community health, capacity building, peace, justice, human rights and local governance. Its mission is set out in a four-year strategic plan based on a theory of change. As a national NGO, ODE has been faced since 2015 with the rise of terrorism, which has led to massive population displacements and a widening of the social divide. These upheavals have not been without consequences for ODE's mission, with increased needs in terms of humanitarian action. From then on, and especially from 2018 onwards, with the support of some of its partners, ODE strengthened its humanitarian remit with targeted recruitment and training, involvement in the work of clusters, as well as its integration into regional emergency funds and an emergency preparedness platform. Today, its programme portfolio is split 30% humanitarian and 70% development. Visit [www.ode-burkina.org/](https://www.ode-burkina.org/)  
 ODE's 2024 budget, 13.94% higher than in 2023, is €1,580,072.

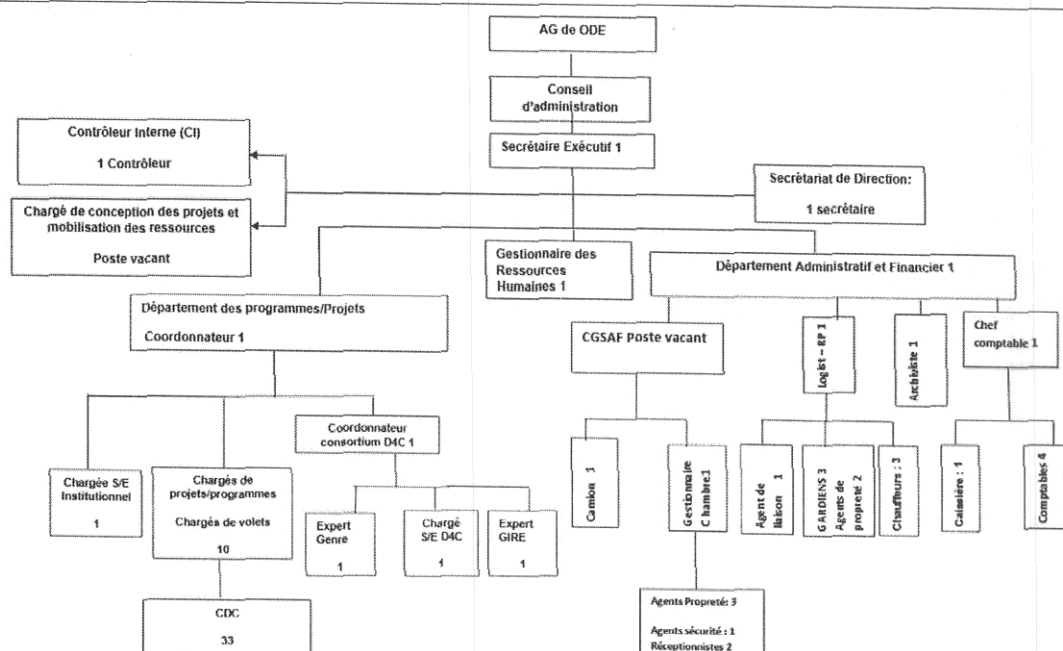
### 3.2 Governance and management structure

ODE's governance structure is made up of three bodies. Firstly, ODE was set up by the Fédération des Églises et Missions Évangéliques (FEME) du Burkina Faso (BF) as an instrument of intervention to achieve its objective of economic, social, cultural and spiritual development.

Secondly, the General Assembly (GA) of ODE, which is the supreme body of ODE and is made up of all the full members, i.e. any church/denomination or evangelical mission that is a member of the FEME-BF, and the members of the national Executive Bureau of the FEME-BF. The GA is responsible for validating the accounts and annual reports, and the various policy documents of the ODE on the proposal of the Board of Directors (BD).

Finally, the ODE Board is made up of representatives of the denominations and resource persons appointed by the FEME Executive Board. It is elected for three years and meets quarterly, as well as in extraordinary sessions. The Board is responsible for proposing strategic guidelines to the General Meeting and ensuring that procedures comply with the law. The Board also has an internal control function. The Board monitors the results of the organisation and the performance of the various projects on the basis of half-yearly reports submitted by the Executive Secretary (ES).

ODE is headed by an ES, who is recruited by the Board and reports to it. He is responsible for the governance of ODE at both strategic and operational levels. Reporting to him are the Programme Coordinator and the Administrative and Financial Director. (DAF).



### 3.3 Working with partner organisations

In its *2022-2026 Strategic Plan*, ODE emphasises the synergy of actions between complementary partners as the most appropriate approach for achieving modern development. For ODE, this means forming coalitions bringing together several multisectoral players from civil society, as well as working with the private sector, government technical services and government research to implement programmes.

ODE has a small number of financial partners, including international NGOs and United Nations agencies. It is also involved in consortia and receives funding from the Regional Humanitarian Fund for West and Central Africa (FHRAOC). Together with another national NGO, ODE has set up CEDOC, a framework for strategic orientation and the exchange of practices aimed at formulating synergistic project proposals. ODE is a founder member of the Permanent Secretariat of NGOs (SPONG) in Burkina Faso. Finally, memorandums of understanding and agreements have been signed with various ministries in order to coordinate activities and receive technical support from government departments. ODE takes part in various government consultation frameworks on agro-ecology, education, gender, etc.

## 4. Overall organisational performance

### 4.1 Internal quality assurance and risk management mechanisms

In terms of accounting and financial control, ODE carries out regular internal and external audits. The budget and activities are monitored at weekly ODE management meetings. In addition, monthly meetings are held between all project managers, accountants, logisticians and the Finance Department to summarise the accounting and financial aspects of each project. At the operational level, accountants are dedicated to monitoring project budgets and enter expenditure in accounting software. *Manuel de Procédure* has been strengthened in recent years to cope with changes in programming - an increase in humanitarian operations - and in the context - an increase in security risks. Policies have therefore been adopted to reduce the risks associated with the financing of terrorism, as well as the safety and security of employees.

ODE's protection system is well developed, with, in particular, the *Policy on Protection against Sexual Harassment, Exploitation and Abuse*, the *Policy on Reporting Irregularities for Staff*, the *Gender Policy*, the *Policy on the Protection of Children and Vulnerable Adults*, and the *Complaints Management Mechanism*. Staff are trained in these policies and receive regular refresher training.

ODE has a *Monitoring and Evaluation Policy* (SIM) and a Manual is currently being drawn up. The *Annual Work Plan and Budget (AWPB)* articulates annual programme planning, performance analysis and certain risks, with M&E and budgeting. Programme monitoring is also based on the reporting templates of its financial partners.

Finally, ODE has an internal control function which covers both organisational risks and risks relating to the governance of projects and programmes. However, the identification of programmatic risks depends on the varying requirements of financial partners, and some risks relating to sexual exploitation and abuse by staff, the local economy and environmental protection are not systematically documented across projects. In addition, the lack of a robust learning system across the organisation and of feedback via an operational complaints system represent a limitation of the quality assurance and risk management system.

#### 4.2 Level of application of the CHS standard

With the increase in humanitarian interventions, ODE is integrating the CHS standard into its work from 2018. Since then, ODE has adopted around ten policies to better meet the requirements of the humanitarian sector and the CHS norm. Management explains that the CHS standard has enabled it to better structure its approach to accountability. ODE staff are familiar with the standard and have received training, thanks in particular to some of its financial partners. ODE management establishes numerous links between its vision of a dignified human being and the requirements of the CHS standard in terms of accountability, capacity building and protection.

Accountability to communities is central to ODE's work through a participatory approach at all stages of intervention. ODE's programmes focus on building local capacity and resilience, with an emphasis on gender, social cohesion and peace. ODE has a *gender policy*, its staff are trained and the organisation raises awareness in communities. The strengthening of local leadership is based on proven tools such as the systematic setting up of community management committees in the programmes. The programmes are also designed with sustainability in mind, and the communities and stakeholders interviewed report a high degree of satisfaction and very good relations with ODE.

ODE has a system of protection and prevention of Sexual Exploitation and Abuse (PEAS), with specific policies which are presented and discussed with staff. Staff demonstrate a good knowledge of the relevant policies and the *Code of Conduct* (CoC). Awareness-raising campaigns on the subject of PEAS are organised in the communities, demonstrating an understanding of the behaviour expected of staff.

Weaknesses in the application of the standard are found at three levels: at the level of monitoring the effectiveness of the complaints management system, at the level of the internal learning system, and finally, at the level of programme risk analysis. While good practices are observed, the lack of procedures or implementation mechanisms does not ensure the coherence and systematic application of policies across the organisation and its programmes in these areas.



## 4.3 Performances de l'organisation par rapport à chaque r11 \q rj°. 'ITl\\*. T4t of the CHS

	Average score".
<b>Commitment 1:</b> The humanitarian response is appropriate and '-.	2,7
<p>ODE's programmes are developed on the basis of identified needs and community capacities, in consultation with the various stakeholders, such as government bodies, technical services and, at community level, village committees. Thanks to a number of mechanisms <i>and</i> As, ODE establishes a baseline situation upstream of the planning stage and uses participatory targeting. In consultation with the village management committees, ODE adapts its programmes to changing needs, capacities and circumstances. While good practice is observed, no ODE policy explicitly commits the organisation to impartial assistance. Also, continuous analysis of programmatic risks is not guaranteed by ODE's own requirements. This represents a risk in the future of not applying these requirements systematically across all programmes.</p>	
<p><b>Feedback from the communities:</b> The communities say that their needs are being taken into account and they confirm that the projects are appropriate and relevant. They understand the project selection criteria and are satisfied with them.</p>	
<b>Commitment 2:</b> The humanitarian response is effective and timely.	3
<p>ODE has a system in place enabling it to evaluate the performance and effectiveness of its missions and also to ensure that they are in line with its organisational capacities - thanks in particular to the PTBA. Its membership of emergency response mechanisms, such as the FHRAOC, and its presence in clusters and state consultation frameworks are evidence of its commitment to providing an effective, coordinated and timely response. A Monitoring and Evaluation Manual is currently being drawn up to specify the ODE's requirements in this area.</p>	
<p><b>Feedback from the communities:</b> The communities explain that the projects are useful and that they have contributed in particular to empowering women, protecting children and improving living conditions. They confirm the effectiveness and relevance of the interventions, as well as good monitoring and adaptation of the activities. They also demonstrate good communication and responsiveness on the part of ODE.</p>	
<b>Commitment 3:</b> the humanitarian response <b>strengthens local capacities and avoids negative effects.</b>	2,5
<p>The ODE has an arsenal of policies concerning protection, particularly for the most vulnerable populations. These policies are supported by training for staff and awareness-raising campaigns aimed at communities. The ODE's participatory approach not only makes it possible to strengthen local capacities through, for example, the setting up of management committees, but also to prevent certain potential negative effects. In addition, sustainability is a feature of all the projects sampled during this audit. The weaknesses linked to this commitment concern, on the one hand, the absence of a robust system for protecting community data and, on the other hand, the systematic identification of potential negative effects generated by the programmes.</p>	
<p><b>Feedback from the communities:</b> Community members explain in detail and with illustrations that the programmes have not only strengthened local leadership but have also made it possible to ensure the financial autonomy of local associations and the sustainability of their actions,</p>	
<b>Commitment 4:</b> the humanitarian response is based on communication, participation and feedback.	2,9
<p>ODE's participatory approach is described in its policies, programmatic and strategic documents. ODE has a set of good practices for internal communication - staff meetings, thematic groups on WhatsApp, etc. - and external communication - socialisation workshops and project reviews, website, and use of media. - and external - socialisation workshops and project reviews, website, and use of</p>	

<p>social networks, among others. ODE's commitment to PEAS is well communicated both internally and externally, in particular through the organisation of awareness-raising sessions for communities. Analysis of external communication reveals that it is ethical and respects the dignity of the communities. However, ODE does not have a communication policy or even guidance on information sharing (which) (may) pose a risk to the integrity of certain requirements linked to this commitment.</p>	
<p>Feedback <b>from the communities</b>: The communities have a good knowledge of the ODE. They receive useful information and are consulted about their needs. Communication is adapted to different audiences, and communities cite the use of local languages, as well as devices <i>such as</i> the theatre, in order to get messages across.</p>	
Commitment 5: <b>Complaints are welcomed and dealt with.</b>	2,3
<p>ODE has a good organisational culture of protection, as demonstrated by its employees and management. This culture is supported by a number of policies, mechanisms and tools. That said, its complaints management system suffers from a number of weaknesses in the documentation of certain operational elements, particularly with regard to scope, investigation, processing times, etc. It should also be noted that, although there is little evidence of operationalisation of the complaints management system, it does have a number of weaknesses. It should also be noted that although little evidence of operationalisation was collected during this audit, the communities confirmed that complaints mechanisms are in place.</p>	
<p>Feedback <b>from the communities</b>: The communities can give examples of prohibited behaviour such as physical violence and sexual propositions. They are aware of the existing complaints mechanism, through complaints committees and a telephone number.</p>	
<b>Commitment 6: the humanitarian response is</b> coordinated and comprehensive.	3
<p>ODE's strategic documents show a strong commitment to coordination and collaboration with national and local authorities as well as with other national and international organisations. Its action is coordinated and complementary. It is based on a set of public, private, technical, national and international partnerships, as well as with civil society. ODE has clear agreements with international and local partners and shares useful information through various networks and forums. The stakeholders interviewed emphasise the very good communication and collaboration with ODE.</p>	
<p>Feedback from the communities: The communities feel that ODE works in a complementary and coordinated way, particularly with public services and other institutions.</p>	
<b>Commitment 7: Humanitarian actors learn and improve continuously.</b>	2,5
<p>ODE shares lessons with communities, notably through debriefing workshops, and contributes to learning in the sector through its participation in consultation frameworks, national platforms such as SPONG, clusters, and so on. Although it has an EM Policy, ODE does not have a robust learning system. Indeed, ODE has no mechanism in place to ensure that lessons are not only disseminated throughout the organisation but also used systematically in the planning of future projects. According to the employees interviewed, the ES Manual, currently under development, should, among other things, address this weakness.</p>	
<p><b>Feedback</b> from the communities: The communities mentioned the complementarity and logical progression of the activities, giving the example of supplies, infrastructure construction, awareness-raising sessions, training and, finally, financial support. They explained, with examples, that the monitoring carried out on the ground by ODE employees enables problems to be identified and quickly remedied.</p>	
Commitment 8: Staff are <b>supported</b> to carry out their work effectively and <b>are treated fairly.</b> in a fair and equitable manner.	3



ODE has a robust personnel management system enabling it to ensure the presence of competent employees to carry out its programmes successfully. This is the case for the PTBA, which makes it possible to anticipate staff and skills requirements, the Staff Retention Policy, capacity building and the staff training plan. HR policies and procedures are fair, transparent and comply with the law. Staff are aware of the organisation's policies, including the Code of Conduct, and participate in refresher training.	
Feedback <b>from the communities</b> : The communities interviewed felt that the staff were respectful, competent, caring and good listeners. Communication with ODE is transparent and knowledge sharing is appreciated.	
Commitment 9: <b>Resources are managed and used responsibly and for the intended purpose. planned.</b>	2,8
ODE has an arsenal of policies and procedures aimed at ensuring the efficient management of resources and preventing the risks of fraud, corruption and waste. In addition, regular external audits and the role of the internal controller ensure ongoing monitoring of the sound accounting and financial management of the organisation and its activities. Despite good practice and programming that is sensitive to environmental protection, the system governing the environmentally responsible use of resources is based on directives scattered across several documents, but also on the requirements of its partners. The absence of formalised requirements in this area represents a risk.	
Feedback from the communities: The communities feel that ODE is transparent in its use of resources and makes good use of the funds available, that there is no waste and that many activities are carried out. They confirm that ODE ensures respect for the environment, particularly through awareness-raising sessions, waste collection, etc.	

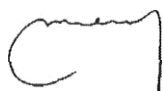
\* Note: The average scores are the sum of the scores per commitment divided by the number of indicators in each commitment, unless one of the indicators in a commitment scores 0 or if several scores of 1 on the indicators in a commitment lead to the issue of a major non-conformity/weakness at commitment level (in these two cases, the overall score for the commitment is 0).

## 5. Summary of weaknesses

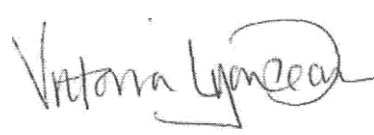
Weaknesses	Type	Status	Time limit resolution"
2025 - 3.6: ODE does not have a system enabling it to systematically identify the potential negative effects of the action in the areas of sexual exploitation and abuse by staff, the local economy and the environment.	Minor	New	2028
2025 - 3.8: ODE does not have a procedure or mechanism to ensure the protection of data collected from communities and people affected by crises.	Minor	New	2028
2025 - 5.2: The scope of the mechanism is systematically from complaints is not communicated to communities.	Minor	New	2028
2025 - 5.4 : The nature of complaints, how they are handled, the timeframes, the investigation and the right to appeal against a decision are not documented.	Minor	New	2028
2025 -7.1: ODE does not systematically use learning from previous experience when designing programmes.	Minor	New	2028
<b>Total number of weaknesses</b>	<b>5</b>		

o e.' Resolution times are given for information only, as they are not relevant to an Oilan audit.  
(benchmarking audit)

## 6. Lead auditor's recommendation


In our opinion, ODE has demonstrated that it complies with the requirements of the UN's Fundamental Humanitarian Standard. quality and accountability.	
Name and signature of lead auditor :  Meur elisabeth 	Date and venue: 30.05.2025, Malbuisson

## 7. HQAI decision

Validity of the benchmarking report :	2025/06/04 until 2026/06/04	
Name and signature of the person responsible for quality assurance at HQAI :  	Date and place: Geneva, 04/06/2025	

## 8. Recognition of the report by the organisation

Space reserved for the organisation		
Any reservations concerning the results of the audit and/or any comments concerning the conduct of the HQAI audit team.  <i>If yes, please specify .</i>	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Acknowledgement and acceptance of findings I  acknowledge and understand the audit findings I accept the  audit findings		
		@ Yes @ No  Yes @ No

<b>Name and signature of organisation representative :</b> 	<b>Date et lieu :</b> Ouagadougou, le 06/06/2025
--	---

## Call

In the event of disagreement with the quality assurance decision, the organisation may appeal to HQAI within 14 working days of being informed of the decision.

HQAI will forward the case to the Chairman of the Advisory and Complaints Committee, who will confirm that the basis for the appeal meets the requirements of the appeals procedure. The Chairman will then appoint an Appeal Panel consisting of at least two experts who have no conflict of interest in the case in question. The panel will endeavour to reach a decision within 45 working days.

*Details of the appeals procedure can be found in document PRO049 Appeals procedure.*

## Appendix 1: Explanation of the scale of rating

Your organisation is not working to implement the GHS commitment.

Score 0: indicates a weakness so significant that the organisation is unable to meet the requirement. This leads to

- **Independent verification:** major weakness.
- **Certification:** major non-conformity leading to a request for major corrective action (CAR) - No certificate can be issued or suspended certificate immediately.

Your organisation is making efforts to apply this requirement, but these efforts are not systematic.

Score 1: indicates a weakness which does not immediately compromise the integrity of the commitment, but which must be corrected if the organisation is to continue to respect it. This leads to

- **Independent verification:** minor weakness
- **Certification:** minor non-conformity, giving rise to a request for minor corrective action (CAR).

Your organisation is making systematic efforts to apply this requirement, but some key points are still not being addressed.

Score 2: indicates a problem that warrants special attention but does not currently compromise compliance with the requirement. This leads to:

- Independent verification and certification: observation.

Your organisation complies with this requirement and organisational systems ensure that it is met throughout the organisation and over time - the requirement is met.

Score 3: indicates full compliance with the requirement. This leads to :

- Independent verification and certification: compliance.

The work of your organisation goes beyond the objective of this requirement and demonstrates innovation. It is applied in an exemplary way throughout the organisation, and the organisational systems ensure that a high level of quality is maintained throughout the organisation and over time,

Note 4: indicates exemplary performance in the application of the requirement.

\* CHSA 2020 verification system rating scale