ZOA
Maintenance Audit – Summary Report MA 2020/08/04

1. General information

1.1 Organisation

Type	Mandates	Verified
☐ National ☐ Membership/Network ☒ Direct Assistance ☒ International ☐ Federated ☒ With partners	☒ Humanitarian ☒ Development ☐ Advocacy	☒ Humanitarian ☒ Development ☐ Advocacy

Head office location	Apeldoorn, the Netherlands		
Total number of country programmes	15	**Total number of staff**	1077, 86 head office

1.2 Audit team

Lead auditor	Nik Rilkoff
Second auditor	
Third auditor	
Observer	
Expert	
Other	

1.3 Scope of the audit

CHS Verification Scheme

Audit Stage	Certification	Independent Verification	Benchmarking	Other
Initial audit (IA)	☐	☐	☐	☐
First maintenance audit (MA1)	☒	☐	☐	☐
Mid-term audit (MTA)	☐	☐	☐	☐
Second maintenance audit (MA2)	☐	☐	☐	☐
Recertification audit (RA)	☐	☐	☐	☐
Extraordinary audit	☐	☐	☐	☐
Short notice	☐	☐	☐	☐
Other *(specify)*	☐	☐	☐	☐

1.4 Sampling*

Randomly sampled country programme site	Included in final sample *(Yes/No)*	Replaced by	Rationale / Comments *(If random sample not selected explain why and give rationale for the country programme selected)*	Selected for onsite visit or remote assessment
Liberia	Yes		Included as the first random country in the selection, for ZOA's development work implemented through partners.	Remote, document review, 1 interview.
Burundi	No	Nigeria	The second random country in the selection, but not included as it was part of the Initial Audit (2019).	
Uganda	Yes		Included as the third random country in the selection, for ZOA's directly implemented development work.	Remote, document review, 1 interview.

Nigeria	Yes		Included as the fourth random country in the selection, for ZOA's directly implemented humanitarian work.	Remote – document review, 1 interview.

Add any other sampling performed for this audit:
The Initial Audit (IA) (2019) recommended that sampling follow the HQAI sampling table, based on the number of country programmes (CPs) in operation. With 15 CPs, the sample was three country programmes. The percent of programmes implemented through partners has not changed since the IA, and thus partner-implemented programmes were included in one of the three sampled CPs. As well as a review of ZOA's progress against the open CARs, this Maintenance Audit (MA) has also included a review of indicators 3.8, 4.5, 4.6, 4.7, 8.4, 8.6 and 8.7 as they are particularly relevant to how ZOA is addressing the identified weaknesses at an institutional level.

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
Uganda	13 / 07 / 20	Remote
Nigeria	14 / 07 / 20	Remote
Liberia	14 / 07 / 20	Remote

2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	1	1	Remote
Staff	3	1	Remote
Country Programme(s)			
Management		2	Remote
Staff	1		Remote
Partner staff			
Others (specify)			
Total number of interviews	**9 (5F/4M)**		

2.3 Opening meeting

Date	2020/06/30
Location	Team Meetings
Number of participants	3 (3F)
Any substantive issues arising	None

2.4 Closing meeting

Date	2020/07/20
Location	Team Meetings
Number of participants	4 (3F/1M)
Any substantive issues arising	None

# 3. Background information on the organisation

3.1 Governance and management structure

ZOA is governed by a Supervisory Board and an Executive Board comprised of the Chief Executive Officer (CEO) and the Chief Programme Officer (CPO). Together with the heads of the support functions at Head Office (HO) including finance, human resources (HR), programmes and funding and communications and the Company Secretary, these form the Directors Management Team (DMT). The Company Secretary role was added in Q4 of 2019, covering policy development and project planning and review. The CEO and the CPO directly line manage the 15 Country Directors (CDs). DMT and CDs together form the International Management Team (IMT).

ZOA's *Strategic Plan 2019-2022* sets medium to longer-term priorities which are then operationalised in *Annual Business Plans* for the whole organisation, guiding Country Directors (CDs) and their teams to develop *Country Strategy and Annual Plans (CSAPs)*.

Although ZOA still works to a decentralised approach, central guidance and monitoring on compliance to organisation policy and regulations has been strengthened in the past period. Guidance on quality and accountability from HO has been positively received in CPs, as it helps avoid duplication of effort and ensures a standard approach to issues and requirements. While contextualisation is still expected, it is now obligatory to follow established standards and processes, and this is checked.

Organisation chart
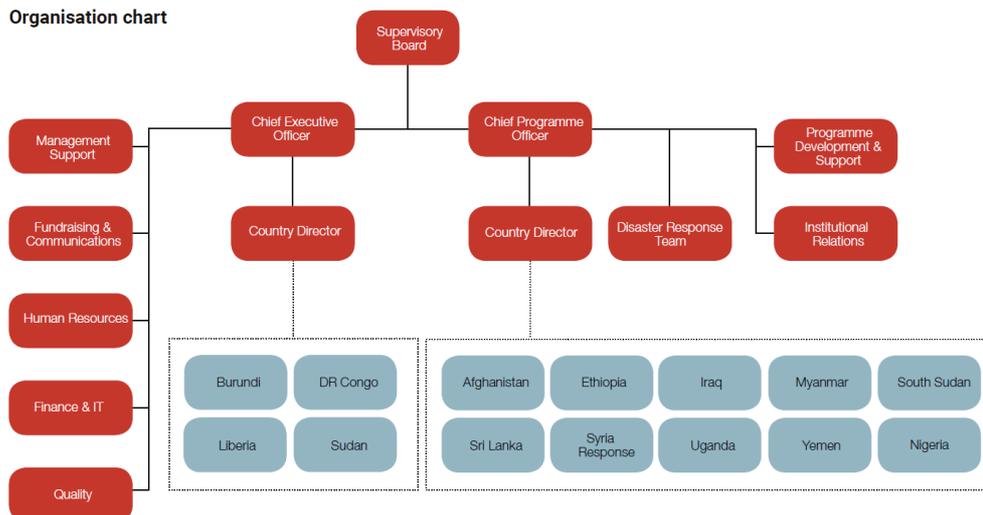
3.2 Effectiveness of the internal quality assurance systems

ZOA's quality assurance is structured around a quality management system that defines and reinforces the ZOA 'Way of Working' including through technologies that enable transparency, collaboration and internal accountability, reinforcing processes that are the same for all countries:

1. ZOA Manager is a tool for project information, monitoring task completion, sharing results and compiling donor and stakeholder information. It also strengthens ZOA's internal monitoring and external reporting capacity.

2. A new digital enterprise resource planning system, ERP, supports and standardises practices according to processes throughout the organisation: project accounting and reporting, financial accounting and reporting, procurement and human resources (HR). COVID-19 has contributed to delays in the planned 2020 roll out of the ERP.

3. The Quality Library simplifies and updates existing resources including policies, procedures, and guidelines, to enable users to understand the wider quality management framework.

These initiatives have benefitted from significant investment of time and resources, including effective helpdesk support that CPs specifically credit with the smooth roll out and uptake of ZOA Manager.

Intensified requirements for evidence of accountability practice according to ZOA's Way of Working are understood at country level, particularly given the new Integrity Framework (IF) and the imperative to learn and adjust as it is rolled out. The IF is a systemic change, backed by support as well as controls and monitoring. All levels of management are now clear on what is expected, and they are held to account. Internal auditing is based on ZOA's 29 Key controls and performance indicators on the minimum standards expected, against which CDs self-assess and implement strategies to address gaps. The Quality Unit conducts regular checking and internal audits and management including the Board ensures audit findings and recommendations are followed up.

3.3 Work with partner organisations	ZOA continues to have a 'hybrid' model of operation, implementing directly and also working with and through local partners, as localisation is an organisational priority in terms of both capacity building and collaboration. ZOA also places importance on learning from partners' experience and expertise.

ZOA distinguishes two types of partnerships:
- Implementing partnerships are short term and project-based, where ZOA funds a partner for project implementation. A funding agreement is signed by both parties;
- Strategic partnerships are longer-term, programme-based and may include (mutual) capacity strengthening, defined in Strategic Partnership Agreements.

ZOA's Accountability Framework (2013) continues to be a key document, and commits it to upholding internal and external standards towards partners and expects a reciprocal commitment from partners. ZOA commits to assist partners to comply with internal and external quality standards. Partnership assessments have included specific questions on integrity and accountability, and local partners must have a CoC or sign ZOA's. New partner and subcontractor assessment templates will include the prevention of sexual exploitation, abuse and harassment (PSEAH), and new agreements will include the revised CoC. New partners won't be trained on the CoC, but ZOA staff will introduce it.

ZOA is also cognisant that local partners often work with several international NGOs, and if a partner assessment has been done with another INGO/donor within 12 months and it conforms to ZOA's standards of partner assessment, then ZOA does not need a separate partner assessment. This is part of ZOA's commitment to coordinating and harmonising interactions among INGO and national NGO partners, aligning work in emergencies, joint reporting, joint training.

4. Overall performance of the organisation

4.1 Effectiveness of the management system and internal quality assurance and governance	Following the Initial Audit, ZOA established a working group to address the findings, that was led from the DMT-level to ensure management ownership and to keep 'integrity' as an important topic on the IMT agenda. This in itself is a strong signal to staff at every level of the organisation about how the CHS fits within the ZOA Way of Working. While practice-related issues have not been checked in this Maintenance Audit, many significant changes at the organisational-responsibility level are included in the findings.

ZOA's systematic and organisation-wide integrity system includes all policies related to the expected behaviour of staff, and complaints mechanisms and protection for both staff and external parties. An interdepartmental Integrity Framework Working Group ensure implementation of the Integrity Framework throughout the organisation. There are three pillars to ZOA's Integrity Framework:
1) Integrity norms and standards set in Revised Codes of Conduct, including one specifically for suppliers (both explicitly include PSEAH and child protection);

2) Improved and standardised complaint reporting mechanisms (CRM) and feedback processes have been contextualised in all countries ZOA works in, based on *Standards for Complaints Reporting by Beneficiaries, Partners and External Stakeholders* (2020).

3) Standardised procedures for addressing complaints received from communities and staff.

These changes affect the way ZOA functions, and are supported by online and in-person meetings to inform and guide country programmes on the changes required. Accountability is included as a standard Country Management Team meeting topic and a standard part of staff induction. The level of CRM operation is monitored through internal audits, country self-assessments and quarterly reports, all of which will also contribute to learning.

4.2 Overall organisational performance in the application of the CHS	ZOA has made a formal commitment to implement the Core Humanitarian Standard (CHS) and to integrate the nine Commitments into its work. Much of ZOA's work is aligned with the CHS Commitments, and senior management relate the ZOA Way of Working and ZOA's values, to how the CHS is adopted and affects ZOA's work.
	ZOA's strengths in implementing the CHS relate to the systemic approach taken, starting with a root cause analysis that focused their actions on the systemic issues identified in the IA. Corrective actions included full management support to work on PSEAH and complaints handling; resources for supporting the PSEAH approach as well as the complaint mechanism; and training staff and following up through monitoring and internal audits.
	The IF sits at the top of the organisation and the Board are supportive in making resources available to prioritise work toward the standards embodied in the IF. As part of this, ZOA staff are now held responsible for information sharing at the community level, which was not the case in the past.
	The coming period challenges ZOA to continue contextualisation of information and mechanisms, and increasing staff and community trust and comfort levels with the processes associated with the IF.

4.3 Average score per commitment

CHS Commitment	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	2.8
Commitment 2: Humanitarian response is effective and timely	2.6
Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	2.1
Commitment 4: Humanitarian response is based on communication, participation and feedback	2.4
Commitment 5: Complaints are welcomed and addressed	1.7
Commitment 6: Humanitarian response is coordinated and complementary	2.8
Commitment 7: Humanitarian actors continuously learn and improve	2.7
Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably	2.7
Commitment 9: Resources are managed and used responsibly for their intended purpose	2.5

Note: Average scores are updated based on the results from this and previous audits.

5. Summary of non-conformities

Corrective Action Requests (CAR) / Weaknesses *(YYYY – indicator)*	Type	Resolution due date	Date closed out
2019 – 3.4: Exit strategies are not systematically planned or communicated to stakeholders and communities.	Minor	2021/08/07	
2019 – 3.6: Programmes do not systematically identify and act upon potential or actual unintended negative effects in a timely and systematic manner in the areas of people's safety, security, dignity and rights, and sexual exploitation and abuse by staff, and the environment.	Minor	2021/08/07	
2019 – 3.7: Policies, strategies and guidance are not designed to prevent programmes having negative effects such as exploitation, abuse or discrimination by staff against communities and people affected by crisis.	Minor	2020/08/07	2020/08/04
2019 – 4.1: ZOA does not systematically implement the Kick-Off message template, or equivalent process, to provide consistent information to communities about expected staff behaviour, about feedback and complaints processes, and about project budgets.	Minor	2021/08/07	
2019 - 5.1: ZOA does not systematically consult with communities and people affected by crisis on the design, implementation and the monitoring of complaints-handling processes.	Minor	2021/08/07	
2019 – 5.3: ZOA does not systematically manage complaints in a timely, fair and appropriate manner that prioritises the safety of the complainant and those affected at all stages.	Minor	2021/08/07	
2019 – 5.4: A complaints-handling process covering programming, sexual exploitation and abuse, and other abuses of power, is not consistently documented and in place in all country programmes.	Minor	2020/08/07	2020/08/04
2019 – 5.5: An organisational culture in which complaints are acted upon according to defined policies and processes has not been established.	Minor	2021/08/07	
2019 – 5.6: Communities and people affected by crisis are not fully aware of the expected behaviour of staff, including ZOA's commitments on the prevention of sexual exploitation and abuse.	Minor	2021/08/07	

6. Sampling recommendation for next audit

Sampling rate	As per HQAI sampling rate based on number of country programmes operational at time of the MTA.
Specific recommendation for selection of sites	In line with the IA (2019), it is recommended that the sampling of ZOA programmes include those that are implemented through partners and onsite programme visits.

7. Lead auditor recommendation

In our opinion, ZOA has implemented the necessary actions to close two of the minor CARs, and is implementing further actions to address the remaining open 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:	Date and place:
Nik Rilcoff, Lead Auditor	6 August, 2020 Featherston, New Zealand
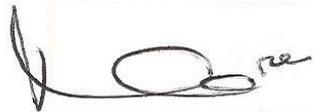
8. HQAI decision

☒ Certificate maintained	☐ Certificate reinstated
☐ Certificate suspended	☐ Certificate withdrawn

Next audit
Mid-Term Audit before: 2021-08-08

Name and signature of HQAI Executive Director:	Date and place:
Pierre Hauselmann	16th September 2020 Geneva, Switzerland
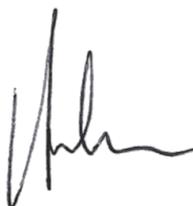
9. Acknowledgement of the report by the organisation

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:*	☐ yes ☑ no
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	☑ yes ☐ no ☑ yes ☐ no
Name and signature of ZOA representative: Chris Lukkien, Chief Executive Officer	**Date and place:** Apeldoorn, 18-09-2020

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.