

# Corporación Infancia y Desarrollo (CID) Initial Audit – Summary Report – 2025/02/11

# 1. General information

# 1.1 Organisation

Туре	Mandates	Verified
☐ International ☐ National ☐ Membership/Network ☐ Direct Assistance ☐ Federated ☐ With partners	<ul><li>☑ Humanitarian</li><li>☑ Development</li><li>☑ Advocacy</li></ul>	<ul><li>☑ Humanitarian</li><li>☑ Development</li><li>☑ Advocacy</li></ul>
Legal registration CID is registered a corporation under 0		•
Head Office location	Bogotá (Colombia)	
Total number of organisation staff		308

### 1.2 Audit team

Lead auditor	Jorge Menéndez
Second auditor	Camille Nussbaum
Third auditor	Lina Figueredo
Observer	-
Expert	-
Witness / other participants	-

# 1.3 Scope of the audit

CHS:2014 Verification Scheme	Certification
Audit Cycle	First cycle
Type of audit	Initial Audit
Scope of audit	The audit covers the whole organisation. The audit includes CID's Head Office in Bogota and all the programmes for the two programmatic axis, Rights and Territorial Peace and Education for Development and Peacebuilding, implemented by CID. Also, the scope includes the regional programme implemented as a service provider to the Ministry of Health and the helpline that provides support for Spanish-speaking Child Protection Coordination Group.
Focus of the audit	The audit focus covers the organisation's two main areas of operation, Vichada and Cundinamarca. In addition, the audit focuses on ensuring that its work with children has no safeguarding risks and that it has in place the mechanisms to prevent the negative effects of Sexual Exploitation, Abuse and Harassment.

# 1.4 Sampling\*

Sampling unit	Project
Total number of Project included in the sampling	5
Total number of sites for onsite visit	2

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Total number of sites for remote assessment	1
Sampling Unit Selection	
Random Sampling — onsite/remote	Purposive Sampling — onsite/remote
Building Bridges of Life – onsite	
Child development in a family environment – onsite	
Help Desk – remote	

#### Any other sampling considerations:

None

#### Sampling risks identified:

There is no sampling risks identified. The audit team has full confidence in the findings and conclusions of this audit based on the sample as outlined above.

# 2. Activities undertaken by the audit team

### 2.1 Opening Meeting

Date	2024/10/02	Number of participants	5
Location	Remote	Any substantive issues arising	None

#### 2.2 Locations Assessed

Locations	Dates	Onsite or remote
Bogota	8, 18, 21, 23, 25 October, 22 November	Onsite and remote
Vichada	9-11 October	Onsite
Girardot	24 October	Onsite

#### 2.3 Interviews

Level / Position of interviewees	Number of interviewees		Onsite or
	Female	Male	remote
Stafff			
Management	3	0	Onsite & remote
Staff	11	2	Onsite & remote
Project Sites			
Management	3	0	Onsite & remote
Staff	3	0	Onsite

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<sup>\*</sup>It is important to note that the audit findings are based on a sample of an organisation's activities, programmes, and documentation, as well as direct 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.



Partner staff	0	1	Remote
Stakeholders	5	1	Onsite & remote
Total number of interviewees	25	4	29

#### 2.4 Consultations with communities

Town of annual and leasting	Number of interviewees		Onsite or	
Type of group and location	Female	Male	remote	
Group discussion – teachers project participants – Vichada, Colombia	3	3	Onsite	
Group discussion - participants in GBV and Legal Training workshops – Vichada, Colombia	5	0	Onsite	
Group discussion – migrants project participants – Vichada, Colombia	6	3	Onsite	
Group discussion – community leaders – Vichada, Colombia	4	1	Onsite	
Group discussion –families project participants – Girardot, Colombia	9	2	Onsite	
Total number of participants	27	9	36	

#### 2.5 Closing Meeting

Date	2024/11/22	Number of participants	6
Location	Remote	Any substantive issues arising	None

## 3. Background information on the organisation

# 3.1 General information

Corporación Infancia y Desasarrollo (CID) is a humanitarian, development, non-profit civil corporation founded in 2001 to improve the quality of life of vulnerable populations, registered in Colombia and regulated according to decree 0427 of 4 March 1996.

Its mission is to seek the transformation and social development of victims and vulnerable populations through capacity building, collective action, governance and territorial management.

CID operates in all provinces of Colombia, with 308 employees. Among them, 132 have labour contracts, which provide them with full-time employment benefits, while 177 have service provider contracts, which are project-based contracts.

CID has three strategic lines:

- 1- Implement programmes that contribute to the effective enjoyment of the rights of vulnerable populations and victims of the armed conflict.
- 2- Strengthen individual, collective and institutional capacities that promote social development.
- 3- Develop articulation actions between the public, private and civil society sectors for social and public policy advocacy.

CID has 2 programmatic axis in its work:

Rights and Territorial Peace.

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2- Education for Development and Peacebuilding.

The Strategy aims to achieve the following objectives:

- 1- Contribute to the country in the construction of territorial peace through social development, prioritising the territories where the armed conflict has had the greatest impact.
- 2- Generate economic strategies that give sustainability to CID's mission.
- 3- Position CID as an expert organisation in social development and peacebuilding.
- 4- To manage the knowledge and human talent of CID in order to contribute to the fulfilment of the mission.
- 5- To be a social contribution to other countries with similar problems, transferring knowledge and institutional experiences.

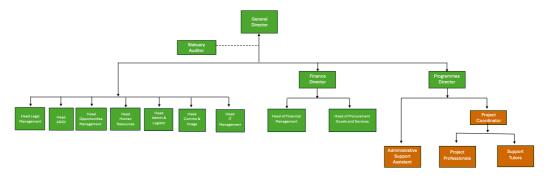
In 2023, CID reached 416.315 people affected by crisis in Colombia. According to its 2023 financial statements, total revenues reached US\$ 6.147.472 (COP 23.888.151.000), with expenses and taxes of US\$ 5.969.708 (COP23.197.387.000) and a result of US\$ 177.764 (COP 690.764.000).

# 3.2 Governance and management structure

The Board of Directors (BoD) is the CID's highest authority and has overall responsibility for the satisfactory administration of CID in accordance with the Articles of Association. It is composed by the President, Secretary, Treasurer and two members. The Board appoints the Statuary Auditor and the General Director. The members of the BoD are the founders of the organisation and the rest of the members are elected by the BoD. All the position are for one year, with the possibilities to be re-elected by the BoD. They meet twice a year on an ordinary basis and when requested by the members of the Board of Directors on an extraordinary basis.

The General Director (GD) is the legal representative of the organisation. The GD is responsible for the overall daily management of the organisation in accordance with instructions given by the Board and in line with the Articles of Association. The GD represents CID externally and is accountable to the Board.

The management structure is made up of the General Director, the Statuary Auditor, the Financial Director and the Programmes Director. The Programme Director is responsible for the design, implementation and monitoring of all programmes implemented under the two programme axes.



# 3.3 Work with partner organisations

CID does not work with partner organisations to implement projects in Colombia. CID is an implementing partner for UNICEF, Diakonie Katastrophenhilfe, Colombian Institute of Family Welfare ICBF and the Ministry of Health and Social Protection of Colombia, with which it has signed agreements detailing the responsibilities and commitments of each party.

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CID does not have a Partnership Policy or other document that sets out the principles and procedures governing its relationship and collaboration with other organisations.

## 4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

CID manages its risks and quality assurance of its interventions through an Integrated Institutional Management System (IIMS), which has procedures, instructions and formats that employees must use systematically.

The IIMS is divided into processes as follows:

- Mission: Project management
- Strategic: IIMS, communication, corporate image, and opportunities management.
- Support: Financial management, human resources management, legal management, goods and services procurement management, technology and communications management, and administrative and logistics management.

The head of IIMS is in charge of ensuring that all risks are identified and implementing measures to minimise them. In addition, the head of IIMS conducts regular internal audits to verify procedures and processes are followed.

CID's risk management policy defines how institutional risks should be managed in a timely and appropriate manner, and it also establishes the organisational commitment to identify treatment, control, and opportunities for continuous improvement. The organisation carries out threat and vulnerability analysis with matrices in which potential risks in the environment are identified in order to adopt measures to mitigate them. The risk management procedure establishes the methodology for identifying risks and their assessment based on context analysis and recognition of stakeholder needs in order to implement actions based on mitigating or minimising the organisation's risks. However, the CID does not systematically ensure that all risks related to negative impacts are identified in all projects and has no mechanism in place to learn from these.

Financial and procurement policies and procedures are clearly described and well understood by management and staff. CID has procedures and controls in place to ensure that risks of corruption and fraud are minimised. However, CID does not have anti-fraud or anti-corruption policies or procedures, nor does it conduct staff training in these areas.

Human resources policy and procedures set out the principles and processes for recruitment, selection, and induction, to ensure that new staff have a clear understanding of key policies and procedures, including the Code of Conduct and other policies related to professional conduct. Staff are clear on related mandatory reporting requirements and associated procedures.

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# 4.2 Level of application of the CHS

CID is dedicated to quality and accountability, adhering to humanitarian standards like the Sphere Standards. The organisation's leaders emphasise that their motivation for CHS certification is to enhance learning, quality, and accountability.

#### Strengths identified in the audit:

- Collaboration: CID effectively collaborates with network members, working groups, local and national authorities, and donor partners, ensuring their projects complement other humanitarian efforts.
- Impartial assistance: CID provides assistance based on community needs and capacities, considering diversity and including marginalised groups.
- Capacity building: CID strengthens local capacities and resilience, empowering local leaders and organisations as first responders.
- Programme adaptation: CID adapts programmes to changing needs, capacities and context.

#### Weaknesses identified in the audit:

- Evaluation and learning: CID lacks clear policies and documentation for evaluation and learning.
- Complaint handling: There are no systems or protocols to ensure learning from complaints, and the community has not been consulted on the design, implementation and monitoring of the complaint-handling process.
- Contract procedures: The staff are unaware of the procedures for using a service provider contract versus a labour contract.
- Negative effects: CID does not ensure that projects and programmes do not have negative effects on livelihoods, the local economy, and the environment.
- Operational security: The CID has developed an operational security procedure; however, it is not in place in all areas where the CID operates.
- Resource Management: CID lacks comprehensive policies for managing resources, including ethical acceptance and allocation of funds, preventing corruption and fraud, and maintaining independence.

Community Feedback: The community is highly satisfied with CID's work, appreciating their involvement, contextual knowledge, transparent communication, and the absence of negative effects.

This audit raises 6 Minor corrective action requests (CARs) (3.7, 5.1, 7.2, 7.4, 8.5, 8.9 and 9.6).

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#### 4.3 Organisational performance against each CHS Commitment

Strong points and areas for improvement	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	2.8

CID commits to attend most vulnerable people in its key policy documents. CID designs and implements programmes based on an impartial assessment of needs and risks and an understanding of the vulnerabilities and capacities of different groups with no discrimination based on nationality, religion, gender, political ideology or other characteristics. However, there is a lack of clear references and definition of humanitarian principles in its main policies and procedures which may lead to different and/or inconsistent interpretations by staff.

CID undertakes systematic context analysis in programmes and projects including needs assessment and stakeholder analysis. CID considers all the different groups in affected communities and disaggregates data by sex, age and disabilities. The organisation is flexible, adapting programmes according to changes in context and the needs or capacities of stakeholders.

The organisation has a right based approach and considers the capacities of communities in humanitarian response.

#### Feedback from communities:

Communities share a deep appreciation for the assistance provided by CID, stating that they feel satisfied with the support and that it is in line with their preferences, needs and capacities.

Communities state that CID consult them during assessments and implementation, and CID adapts projects, if necessary, to changing priorities, needs and capacities.

#### Commitment 2: Humanitarian response is effective and timely

2.9

CID has several processes to ensure that programmes and projects align with the capacities of the organisation and its partners including dedicated protocols and staff. Programmes and projects consider risks and constraints during design and implementation with monitoring-based corrective actions. All projects include monitoring and evaluation plans with dedicated funding and staff.

CID commits to attend affected communities based on consistent monitoring that allows to adapt programs. The organisation implements projects with appropriate timeframes in line with other relevant stockholders. However, there is no specific commitment to deliver aid in a timely manner as part of its key policy documents.

CID has strong relationships with community leaders and stakeholders and refers community members' unmet needs to other organisations with relevant expertise.

#### Feedback from communities:

Community members feel their views are sought on the activities, outputs and outcomes of responses.

Community members are satisfied with the timeliness of projects. They state that they can access activities safely and without any fear of harm.

Community members perceive that CID staff have adequate technical skills.

Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects	2.6
enects	

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CID commits to building resilience and strengthening local capacities through its strategies, policies, and ways of working. CID also promotes projects that support local leadership. CID supports communities by analysing existing hazards and risks and helps them develop preparedness and response plans.

CID has a PSEA Policy in place to prevent programmes and communities from having any negative effects related to exploitation, abuse or discrimination by staff. The organisation relies on donors' and partners' policies also as its own programming guidance to staff.

CID systematically identifies and acts upon negative effects in the areas of people's safety, security, dignity and rights, SEA and culture, gender, and social and political relationships. However, in other areas, such as livelihoods, the local economy and the environment, the assessment and corrective actions are not consistent, and policy documents do not cover specific unintended negative effects in these areas.

CID has data protection process in place, and the staff always ask for consent before taking videos or photos.

#### Feedback from communities:

Community members express deep appreciation for CID and the capacity-building support provided to them.

Community members state that CID programmes and projects do not have any negative effects.

# Commitment 4: Humanitarian response is based on communication, participation and feedback

2.4

CID's commitment to accountability and information sharing is clearly stated in CID's policies and procedures.

CID communicates effectively and regularly with communities and encourages them to provide feedback; however, the understanding of what feedback communities can share and why is it important to share it is not consistent.

CID systematically shares information with communities about programmes and how staff should behave; however, staff do not always share information about the organisation and its principles.

CID systematically makes efforts to ensure the inclusiveness of communities participation; however, the fact that most of the communication is done via local leaders or administrations may put the meaningful participation of communities at risk. In addition, the CID relies on external policies and tools to engage with communities and has not developed its own policies and tools.

CID's external communications represent communities with dignity and respect.

#### Feedback from communities:

Community members confirm that all people are equally welcome to participate in the design and implementation of projects.

Community members state that they are regularly informed about CID, programme activities and timing of activities and that information is accessible and easy to understand.

Community members feel able to provide feedback to CID staff and consider that their feedback is taken into account although they do not always fully understand post distribution surveys.

#### Commitment 5: Complaints are welcomed and addressed

2.6

CID welcomes complaints and feedback and has multiple channels available for raising complaints, including email, telephone, and suggestion boxes. The mechanism is communicated via conversations with leaders, personal communication and posters in offices. Duty to report SEA is systematically highlighted in communications with communities and training of staff.

CID's requirements for the Complaints Mechanism are well documented in its policies and procedures, including the process of referring complaints to other organisations. The organisation has a culture in which complaints are taken

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seriously and acted upon according to defined policies. However, the understanding of communities on the scope and, in fewer cases, the channels for communication, is not yet consistent and the number of complaints limited.

CID commits to participation and communication with communities; however, CID has not consulted the community on the design, implementation or monitoring of the complaint mechanism.

#### Feedback from communities:

Community members are aware of expected behaviour of staff.

Community members state that they have not been consulted on the design, implementation or monitoring of the complaint mechanism.

#### Commitment 6: Humanitarian response is coordinated and complementary

2.7

CID is committed to the coordination and complementarity of its work, ensures that activities create no duplication and are coordinated with national and local authorities and other organisations. Staff coordinate and participate in working groups and UN Clusters.

CID has a strong understanding of other actors working in their areas of operation; however, CID does not systematically document this information for all programmes. CID's work is complementarity to the work of national and local authorities and other humanitarian actors and is aligned with local policy and priorities.

CID has built transparent and equal relationships with its donor partners, respecting each partner's mandate, obligations, and independence and recognising their respective constraints and commitments. However, CID does not have a partnership policy or other documents that indicate CID procedure or criteria to enter into a partnership.

#### Feedback from communities:

Community members state that there is no duplication of activities and that CID coordinates well with local authorities and other organisations.

Community members consider the assistance and programme activities to be coherent and well-coordinated, without unnecessary demands on their resources.

#### Commitment 7: Humanitarian actors continuously learn and improve

2.3

CID's commitment to evaluating its projects is outlined in the project monitoring and closure procedure. CID allocates funds for monitoring and evaluation in its budget. However, CID currently lacks a formal evaluation and learning policy.

CID draws from lessons learnt and experiences when designing programmes or planning documents. The organisation shares experiences and innovations both internally and externally with partners, stakeholders, and some communities. However, there is no established procedure, protocol, or mechanism to ensure that CID staff share learnings with communities.

Findings from monitoring, feedback, and community complaints are discussed during program meetings, and improvement plans are developed as necessary. Project reports also include lessons learned. However, the monitoring procedures do not address how CID learns, innovates, and implements changes based on monitoring. Additionally, the Procedure for Handling Compliments, Feedback, and/or Complaints does not consider how the organisation learns from these inputs.

CID actively contributes to learning and innovation among peers through various means, such as Helpdesk's Project, cluster meetings, among others.

#### Feedback from communities:

Community members have identified positive changes in projects overall, including links to feedback provided to CID.

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Some communities recall that CID has shared learning and innovation; however, it is not a systematic practice.

# Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably

2.3

CID has effective policies, systems, and processes to ensure that management and staff are properly recruited, inducted, managed, and supported; ensuring that the organisation has the necessary capacity and capability to deliver its programmes. CID has policies to ensure that staff are treated equitably and fairly and comply with labour laws. However, staff hired under a service provider contract do not have the same benefits as staff with a labour contract, such as receiving performance evaluations, paid holidays, among others.

CID has a Code of Conduct (CoC) in place, and the CoC establishes the obligation of staff not to exploit, abuse, or otherwise discriminate against people. SEAH principles are reflected in the CoC, including the duty to report allegations or suspicions of SEAH. Staff are aware of the CoC and the main policies and procedures; in the case of breaches, sanctions are imposed, ranging from verbal warnings to contract termination.

CID staff have up-to-date job descriptions and receive training to improve their skills and competencies, as well as performance appraisals; except for staff under service provider contracts.

The organisation has several procedures, policies, and plans in place for staff welfare and safety. The CID has operational security procedures to ensure the safety of its staff, however, they are not in place in all areas where it operates.

#### Feedback from communities:

Communities consider that CID staff treat them with respect, dignity and compassion.

Communities perceive CID staff as highly competent and technically proficient.

#### Commitment 9: Resources are managed and used responsibly for their intended purpose

2.5

CID has zero tolerance for fraud, corruption and bribery. CID has policies and processes in place to ensure that resources are managed and used responsibly; however, CID does not have a policy or procedure that sets out CID's commitment to prevent and address corruption, fraud, conflicts of interest and misuse of resources, nor does CID provide trainings on CID's approach and mechanism to eliminate corruption and fraud for CID. CID does not have policies or procedures to ensure that funds accepted are in line with CID's principles and values.

CID manage the risk of corruption through several activities, including separation of duties in the procurement procedure, internal audits and external audits. Systems and procedures for designing and implementing programmes that balance quality, cost and timeliness are in place, and CID manages resources to minimise waste. However, not all projects have carried out environmental impact assessments.

#### Feedback from communities:

Community members state that CID is not wasteful with its resources.

Community members confirm that they have not experienced any incidents of corrupt activities or extortion from staff, that they are aware of CID's commitment to anti-fraud and anti-corruption, and that they know how to report if a case is detected.

# 5. Summary of non-conformities

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<sup>\*</sup> 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 of 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).



Corrective Action Request (CAR)	Туре	Status	Resolution timeframe
2025-3.7: CID does not have its own guidance that allows it to identify and act upon potential or actual unintended negative effects in a timely and systematic manner on livelihoods, the local economy, and the environment.	Minor	New	By Renewal Audit 2028
2025-5.1: CID does not systematically ensure that communities and people affected by crisis are consulted on the design, implementation and monitoring of complaints-handling processes.	Minor	New	By Renewal Audit 2028
2025 – 7.4: CID does not have evaluation and learning policies in place.	Minor	New	By Renewal Audit 2028
2025 – 8.5: The staff are unaware of the procedures for using a service provider contract versus a labour contract.	Minor	New	By Renewal Audit 2028
2025 – 8.9: Operational security procedures to ensure the safety of its staff are not in place in all areas where the CID operates.	Minor	New	By Renewal Audit 2028
2025 – 9.6: CID does not have all the relevant policies and processes in place governing the use and management of resources.	Minor	New	By Renewal Audit 2028
Total Number of open CARs	6		

<sup>\* &</sup>lt;u>Note</u>: The CARs are completed by the audit team based on the findings. The audited partner is required to respond with a Management Response for each CAR to HQAI before a certificate is issued (reference: HQAI Procedure 114).

## 6. Lead auditor recommendation

CERTIFICATION				
In our opinion, CID conforms with the requirement	ts of the Core Humanitarian S	Standard on Quality and Accountability.		
We recommend certification.				
Name and signature of lead auditor:		Date and place:		
		Buenos Aires, 04th February 2025		
Jorge Menendez				
7. HQAI decision				
Final decision on certification:				
Start date of the certification cycle: 2025/02/11				

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Next audit before 2026/02/11				
Name and signature of HQAI Executive Director:	Date and place:			
Désirée Walter	Geneva, 11 February 2025			

# 8. 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:		⊠ No	
Acknowledgement and Acceptance of Findings:			
I acknowledge and understand the findings of the audit		□No	
I accept the findings of the audit		□ No	
Name and signature of the organisation's representative:		Date and place:	
María Carolina Perdomo G	Bogotá [	D.C.19 de febrero 2025	

# **Appeal**

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

The details of the Appeals Procedure can be found in document PRO049 - Appeals Procedure.

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# 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.	Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:  Independent verification: major weakness.  Certification: major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	Score 1: 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:  • Independent verification: minor weakness • Certification: minor non-conformity, leading to a minor corrective action request (CAR).
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	Score 2: indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:  • Independent verification and certification: observation.
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.	Score 3: indicates full conformity with the requirement. This leads to:  • Independent verification and certification: conformity.
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.	Score 4: indicates an exemplary performance in the application of the requirement.

<sup>\*</sup> Scoring Scale from the CHSA Verification Scheme 2020