

## Diakonia Maintenance Audit 1 – Report - 2023/01/04

#### General information and audit activities

Role / name of auditor(s)	Jorge Menendez Martinez		
Audit cycle	Second cycle		
	Date / number of participants	Any substantive issues raised	
Opening Meeting	10/16/2023 / 7 participants	None	
Closing Meeting	12/04/2023 / 5 participants	None	
	Name/location		
Sampling from country	Cambodia		
programme sites	Somalia		
	Bolivia		
	Position / level of interviewees	Number	
Interviews	Head Office Managers and Advisors	3	
	Country Programme Staff	6	

## 2. Actions and progress of organisation

### 2.1 Significant change or improvement since previous audit

Since the Renewal Audit (2022), Diakonia has approved its Humanitarian Strategy 2023, which states Diakonia's commitment to applying the nine commitments of the Core Humanitarian Standard (CHS), the Humanitarian Principles, Diakonia's Human Rights Based Approach and commitment to Feminist Principles, and the principle of Do No Harm in all humanitarian projects and programmes. Diakonia's Global Strategy (2021) and new Humanitarian Strategy (2023) commit the organisation to engage more actively with, and support and work through local civil society organisations and social movements to implement projects and programmes with and for rights-holders. Diakonia refers to communities and people affected by the crisis as rights-holders to reflect the organisation's rights-based approach; this audit report also uses the terminology of rights-holders.

The Humanitarian Strategy recognises that Gender-based Violence (GBV) is one of the most prevalent violations of human rights worldwide and is exacerbated by crises and disasters, and states that Diakonia will focus on preventing and responding to GBV. The Global Strategy and Humanitarian Strategy impel Diakonia to explore ways to fully embed and integrate its commitments to quality and accountability across its humanitarian its programmes and projects through, for example:

- The development of a Humanitarian Procurement Policy that will allow for transparent, participatory, locally sourced, recovery-enabling logistics and procurement practices.
- The development of a Monitoring and Evaluation System specific to Humanitarian Response focused on measuring the changes in people's lives (outcomes) that result from a humanitarian project, striking a balance between qualitative and quantitative data. This system aims to put rights-holders in the centre to ensure their voice is heard throughout the project cycle.

To address the <u>Corrective Action Requests (CARs)</u> opened in the previous audit, Diakonia has developed an action plan that includes the development of a Humanitarian Needs Assessment tool and a participatory methodology for the design of Complaints and Incident Reporting Mechanisms (CIRM), as well as the updating of the Data Protection



Policy. The plan indicates that these will be developed and updated by April 2024, with piloting and rollout at the country level during the last quarter of 2024 and early 2025.

Diakonia shows a high level of commitment to addressing the issues raised at the Renewal Audit; however, at the time of this audit, the action plan has not been implemented yet, so the CARs remain open at this MA.

#### 2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution due date	Progress made to address the CAR and in response to the findings of the indicator	Evidence (doc no., KII)
2022-1.2: Diakonia does not consistently ensure that its partners conduct impartial assessments of needs in order to design and implement appropriate humanitarian projects.	Minor 2025/11/10	The previous audit found that, in humanitarian projects, Diakonia does not consistently ensure that impartial needs assessments are effectively conducted by its partners, and that rights-holders are not systematically engaged in needs assessments.  The new Humanitarian Strategy indicates that projects and programmes must focus on the needs of the rights-holders. To ensure that partners can effectively assess the needs of rights-holders, Diakonia is developing a Humanitarian Needs Assessment tool. At the current time, Diakonia has conducted	ORG2, ORG6, ORG7, SOM3. Interviews with staff
projecto.		a benchmarking exercise to identify existing tools in the sector on which to base this new tool. As indicated by staff, the tool will focus on ensuring the engagement and participation of rights-holders, as required by the new Humanitarian Strategy.	
		The tool is expected to be developed by the second quarter of 2024 and rolled out during the 4th quarter of 2024 or 1st quarter of 2025. Staff state that Diakonia has allocated the necessary funds required to develop the tool and roll it out at the country level.	
2022-3.8: Diakonia does not support POs to establish systems to safeguard personal information collected from rights-holders.	Minor 2025/11/10	The previous audit found that:  - The new Privacy Policy explains how Diakonia processes personal data and safeguards people's rights concerning data protection in line with the requirements of GDPR. However, this policy only concerns information that is provided and communicated to Diakonia but not information collected from rights-holders.	
		<ul> <li>Diakonia's mandatory partnership assessment does not consider if partner organisations (POs) have a policy and functional systems in place to safeguard any personal information collected from communities and people affected by crisis that could put them at risk.</li> </ul>	
		<ul> <li>None of the partners sampled had been supported by Diakonia on data protection to ensure they establish appropriate systems for its programmes to safely manage personal information about communities and other stakeholders.</li> </ul>	
		At the time of this audit,	
		- Diakonia plans to update the Data Protection Policy with a focus on safe data storage and management systems, and on transparency and accountability towards rights-	= 1, v



		holders, by establishing enhanced ethics protocols that emphasise consent, confidentiality, and non-abusive use of personal data.	
		<ul> <li>Diakonia is in the process of identifying training for staff to increase their knowledge about Data Protection and is going to dedicate IT staff to support Country Programmes on data protection. However, at the current time, staff in the sampled country programmes indicate that they do not support partners on data protection.</li> </ul>	
		<ul> <li>The Corrective Action Plan does not include actions to consider whether partner organisations have a policy and functional systems in place to safeguard any personal information collected from rights-holders, as part of the mandatory partnership assessment process.</li> </ul>	
2022-5.1: Diakonia does not systematically consult its partners as community representatives on the design, implementation and monitoring of its own Complaints and Incident Reporting Mechanism.	Minor 2025/11/10	The previous audit found that Diakonia and its partners do not systematically involve community representatives in the design, implementation and monitoring of its own complaints handling processes, and does not have a system in place to regularly consult its partners on the effectiveness of of its CIRM or on how to improve it or adapt it to the local context in order to encourage feedback and complaints.	ORG5, ORG6, ORG7. Interviews with staff
	2 2	At the time of this audit, Diakonia is planning to develop a participatory methodology for the design of the Complaints and Incident Reporting Mechanisms. In 2023, Diakonia has contracted a senior business controller, who will be in charge of developing the methodology in close collaboration with Diakonia's CHS Focal Point/Humanitarian Advisor.	
		This methodology will support Country Programmes to consult partners and community representatives on the design, monitoring and implementation of the CIRM. However, at the time of this audit, the staff indicate that rights-holders and partners are not systematically involved in the development of the CIRM.	

# 3. Summary of non-conformities

Corrective Action Requests (CAR)	Туре	Resolution due date	Status	New resolution due date (if applicable)
2022-1.2: Diakonia does not consistently ensure that its partners conduct impartial assessments of needs in order to design and implement appropriate humanitarian projects.	Minor	2025/11/10	Open	
2022-3.8: Diakonia does not support POs to establish systems to safeguard personal information collected from rights-holders.	Minor	2025/11/10	Open	
2022-5.1: Diakonia does not systematically consult its partners as community representatives on the design, implementation and monitoring of its own Complaints and Incident Reporting Mechanism.	Minor	2025/11/10	Open	



		ASSURANCE INITIATI
Total Number of open CARs	3	
4. Lead auditor recommendation		
In our opinion, Diakonia has demonstrated that it is taking previous audit(s) and continues to conform with the require Accountability.	necessary s ements of th	steps to address the CARs identified in the ne Core Humanitarian Standard on Quality ar
We recommend maintenance of certification.		
Name and signature of lead auditor:	Date and place:	
Ja-	Buenos Aires, 8 December 2023.	
Jorge Menéndez Martínez		
t and the second		
5. HQAI decision		
<ul><li>Certificate maintained</li><li>Certificate suspended</li></ul>	tificate reinstated tificate withdrawn	
Surveillance audit before: 2025/01/04		
Name and signature of HQAI Executive Director:		Date and place:
Désirée Walter	Geneva, 04 January 2024	
6. Acknowledgement of the report  Space reserved for the organisation	by the	organisation
Any reservations regarding the audit findings and/or any re	marke rogar	rding
the behaviour of the HQAI audit team:	☐ Yes ☐ No	
If yes, please give details:		1763 1700
Acknowledgement and Acceptance of Findings:	1 250	
I acknowledge and understand the findings of the audit	☐ Yes ☐ No	
I accept the findings of the audit	☐ Yes ☐ No	
Name and signature of the organisation's represent	ative:	Date and place:

Date and place: 22/02/2024

MATTIAS BRUNANDER



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## **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.

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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.	<ul> <li>Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</li> <li>Independent verification: major weakness.</li> <li>Certification: 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.	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