



Caritas Denmark  
CHS Certification Mid-term Audit Report

CARITASDK-MTA-2019

2019-12-13

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# 1. General information

## 1.1 Organisation

Organisation	Caritas Denmark		
Type	<input type="checkbox"/> National <input type="checkbox"/> International <input type="checkbox"/> Membership/Network <input type="checkbox"/> Federated <input type="checkbox"/> Direct assistance <input checked="" type="checkbox"/> Through partners		
Mandate	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy		
Verified Mandate(s)	<input checked="" type="checkbox"/> Humanitarian <input type="checkbox"/> Development <input type="checkbox"/> Advocacy		
Size (Total number of country programmes/ members/partners – Number of staff at HO level)	4 humanitarian programme sites, all implemented through partners	Sampling Rate (Country programme sampled)	2
Lead auditor	Camille Nussbaum	Auditor	
		Others	
	Head Office	Country programme(s)	
Location	Copenhagen, Remote visit	Bangladesh (visit) Niger (remote)	
Dates	29 <sup>th</sup> -30 <sup>th</sup> of August 2019	Visit: 2 <sup>nd</sup> to 6 <sup>th</sup> of September 2019 Remote: 11 <sup>th</sup> and 12 <sup>th</sup> of September	

## 1.2 Indicators verified at the Mid-term Audit

CHS Commitment	Organisational Responsibilities	Key Actions
<b>1</b>	1.4 1.5	1.1 1.2 1.3
<b>2</b>		2.1 2.2 2.3 2.4 2.5
<b>3</b>	3.7 3.8	3.1 3.2 3.3 3.4 3.5 3.6
<b>4</b>	4.5 4.6 4.7	4.1 4.2 4.3 4.4
<b>5</b>	5.4 5.5 5.6 5.7	5.1 5.2 5.3
<b>6</b>	6.5 6.6	6.1 6.2 6.3 6.4
<b>7</b>		7.1 7.2 7.3
<b>8</b>	8.6 8.9	8.1 8.2 8.3
<b>9</b>		9.1 9.2 9.3 9.4 9.5

## 2. Schedule summary

### 2.1 Verification Schedule

Name of Country programmes/members/partners verified	Location	Mandate (Humanitarian, Development, Advocacy)	Number of projects visited	Type of projects
Caritas Bangladesh	Bangladesh	Humanitarian	1	Refugees
CADEV	Niger	Humanitarian	1	Refugees

### 2.2 Opening and closing meetings

#### 2.2.1 Remote visit of Head Office:

	Opening meeting	Closing meeting
Date	29 <sup>th</sup> of August 2019	23 <sup>rd</sup> of September 2019
Location	Remote	Remote
Number of participants	7	1
Any substantive issue arising	-	-

#### 2.2.2 On-site visits at Country programme(s):

	Opening meeting	Closing meeting
Date	2nd of September 2019	16 <sup>th</sup> of September 2019
Location	Cox's Bazar	Remote
Number of participants	3	1
Any substantive issue arising	-	-

### 3. Recommendation

In our opinion C-DK has implemented the necessary actions to close the CARs identified in the previous audit and continues to conform with the requirements of the Core Humanitarian Standard. We recommend maintenance of certification.

Detailed findings are laid out in the rest of this report.

Lead Auditor's Name and Signature

Date and Place:



Madrid, 7<sup>th</sup> of November

Camille Nussbaum

### 4. HQAI Quality Control

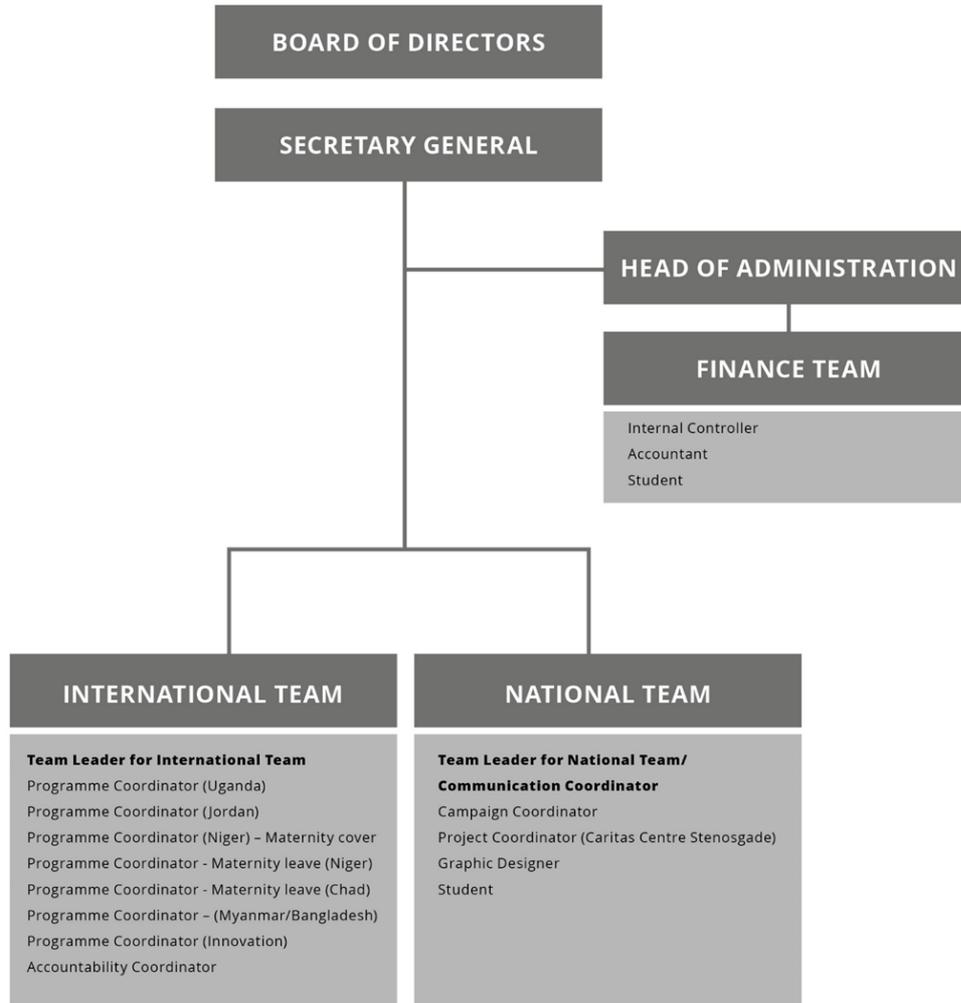
First Draft	2019-11-08
Final Draft	2019-12-13

## 5. Background information on the organisation

### 5.1 Organisational structure and management system

In 2019 Caritas Denmark (C-DK) established an Accountability Coordinator position, as a commitment to improve on Monitoring Evaluation Accountability and Learning (MEAL) processes and to prioritise the CHS commitments. Recruitment for this position was ongoing during the audit.

Since the Maintenance Audit (2018), C-DK has not undergone more significant changes in its organisational structure and management systems. The bishop of the diocese of Copenhagen designates the chairman of the board. The Board of Directors appoints the Secretary-General who manages the day-to-day management of the organisation and the secretariat. Other board members come from the catholic school system and parish network. The secretariat has a staff of approximately 20 people with volunteers and student assistants. The international team is responsible for development and humanitarian programmes along with global fundraising and advocacy. It is supported by the other teams for communications, campaigns and finance as it can be seen in the graphic below.



## 5.2 Organisational quality assurance

C-DK works in line with the Caritas Internationalis Management Standards (CIMS), a set of common standards that all members of Caritas Internationalis (CI) must meet in governance, organisational structure, finance and accountability, and ethics. C-DK participated in the revision of CIMS in 2018 to streamline it with other standards, including the CHS. As the C-DK Information Disclosure Policy was based upon elements of the CIMS, this document was updated.

## 5.3 Work with Partners

As observed in the Initial and Maintenance audits, C-DK works solely through partners organisations members of Caritas Internationalis. C-DK provides its partners with targeted support in coordination with other members of the confederation for policy and capacity development. Since the initial audit in 2017, C-DK developed monitoring tools for its staff to follow up on local partners’ operationalisation of Complaints Handling Mechanisms and Data Safety management. In 2019, a new monitoring tool was developed to cover the Information Disclosure Policy. In 2018 C-DK ended its cooperation with a partner due to inadequate performance in a number of key aspects. C-DK financially contributed to the roll-out of the CI development and roll-out of a confederation-wide whistle blower mechanism for Sexual Exploitation and Abuse (SEA).

## 5.4 Certification or verification history

Initial Audit	2017-07-14
Maintenance Audit	2018-11-13

## 6. Sampling

### 6.1 Rationale for sampling

Bangladesh (visit) and Niger (remote assessment) were randomly selected. Both were considered to offer a good representation of C-DK's work with partners.

Caritas Bangladesh was selected as it provided the possibility to observe a recent collaboration while Caritas Développement Niger (CADEV) was a long-term partner. Niger was kept for the remote assessment.

#### **Disclaimer:**

*It is important to note that the audit findings are based on the results of a sample of the organisation's documentation and systems as well as interviews and groups with a sample of staff, partners, communities and other relevant stakeholders. Findings are analysed to determine the organisation's systematic approach and application of all aspects of the CHS across its organisation and to its different contexts and ways of working.*

### 6.2 Interviews:

#### 6.2.1 Semi-structured interviews (individual interviews or with a small group <6)

Position of interviewees	Number of interviewees
Head Office	
Staff	11
Country programmes	
Implementing Partners	17
Other partners	3
<b>Total number of interviews</b>	<b>31</b>

## 5.2.2 Group Discussions (interviews with a group >6)

Type of Group	Number of participants	
	Female	Male
Site Improvement and Shelter Men Beneficiaries		9
Site Improvement and Shelter Women Beneficiaries	8	
Street Light Men Beneficiaries		8
Street Light Women Beneficiaries	8	
Water Reservoir Beneficiaries		10
<b>Total number of participants</b>	<b>16</b>	<b>27</b>

## 7. Report

### 7.1 Overall organisational performance

C-DK has made efforts to address the corrective actions and observations highlighted in the previous audits. As flagged in the Maintenance Audit, C-DK took major steps to improve its complaints handling mechanisms, data safety management and safeguarding, internally and at partners' level. Notably, the organisation worked within the Caritas Internationalis confederation to provide a platform for appeal processes on complaints.

At the time of Mid-term audit, C-DK was also in the process to fully develop and implement tools and approaches that will provide more consistency in key areas such as information sharing with affected communities and the management of unintended effects. This audit could observe that, despite C-DK's follow up with its partners, the level of implementation of new policies, especially for the data safety management, varies.

### 7.2 Summary of corrective action requests

Corrective Action Requests	Type (Minor/Major)	Original deadline for resolution	Status of CAR at MTA	Time for resolution
2017 - 3.8: Caritas Denmark does not ensure that its partners have systems in place to safeguard personal information collected from communities and people affected by crisis that could put them at risk	Minor	2018-09-21	Closed	

2017 - 5.6: Communities and people affected by crisis are not aware of the organisations commitment on prevention of sexual exploitation and abuse	Minor	2018-09-21	Closed	
2019 - 5.6: C-DK does not ensure that its partners inform people affected by crisis of the expected behaviour of staff, and organisational commitments on the prevention of sexual exploitation and abuse	Minor		New	2021-09-21
<b>Total number of open CARs</b>				1

### 7.3 Strong points and areas for improvement:

#### Commitment 1: Humanitarian assistance is appropriate and relevant

**Score: 2,8**

The initial audit found that C-DK has policies and processes in place to ensure that the context and status of stakeholders are analysed at the outset and throughout the implementation of its programmes. However, it observed that C-DK and its partners had no clear commitment to considering the capacity and diversity of communities.

At the time of Mid-term Audit, C-DK and its partners are working in line with policies and tools that consider both, capacity and diversity of communities (CIMS, CI toolkit and Sphere charter) with clear understanding of humanitarian principles.

Organisational responsibilities for this commitment were not all reviewed during the mid-term audit.

#### Feedback from people affected by crisis and communities on Commitment 1

Communities state that C-DK partner takes into account their specific needs and culture.

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

**Score: 3**

The initial audit found that C-DK works with its partners effectively and in a timely manner and has the capacity to respond quickly to emergency appeal initiatives within the CI confederation. C-DK monitors and evaluates programmes' implementation using primary data collected and assessed by its partners. The Mid-term Audit documented changes as a result of partner's monitoring and feedback from communities. C-DK therefore conforms to all the requirements of this commitment.

Organisational responsibilities for this commitment were not reviewed during the Mid-term Audit.

#### Feedback from people affected by crisis and communities on Commitment 2:

Communities expressed satisfaction in the timeliness in implementation of C-DK's programmes.

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

Score: 2,4

The initial audit found that C-DK works with its partners based on the capacities of local communities, local authorities and humanitarian agencies, to improve the resilience of communities and people affected by crisis. The Mid-term Audit gave further examples of improvements in the development of local leadership as affected communities were engaged through the participation to local committees and community work. Partner's humanitarian response took also into account the previous risks and preparedness plans.

However, some weaknesses remain as C-DK does not systematically ensure with its partners that humanitarian programming has longer-term positive effects and reduces dependency. C-DK is in the process of fully including Do No Harm principles in its policies and tools to identify potential or actual unintended effects in a systematic manner.

While the organisation improved the development of systems to safeguard personal information of communities by its partners, the newness of policies (still frequently in draft form) do not yet ensure effective implementation and systematic practice.

#### Feedback from people affected by crisis and communities on Commitment 3:

Communities expressed satisfaction about the benefits gained from projects, for themselves and their families.

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

Score: 2,5

The initial audit found that C-DK and its partners' work emphasises the engagement with communities in each step of its programmes. However, the audit noted that the information shared with communities was limited due to the lack of a specific policy guideline.

At the time of the Mid-term Audit, C-DK supports its partners to share information with affected communities in line with the Information Disclosure Policy. The document was updated to ensure it is fully in line with the last version of CIMS (2018) providing more guidance to ensure better accountability and participation. Partners' staff are fully aware of the importance of language and culture in communication with affected communities. They receive feedback from communities via surveys, community meetings, post-distribution monitoring, interviews or mechanisms, as part of the Complaints Handling Mechanism (CHM). However, it was observed that information dissemination is almost exclusively based on oral communication which may lead to misunderstandings and can limit awareness on key messages. In addition, the new monitoring tool based on the Information Disclosure Policy is not yet used in all Country Programmes (CP).

#### Feedback from people affected by crisis and communities on Commitment 4:

Communities reported that information provided by C-DK's partner about the organisation and its programmes is generally clear.

### Commitment 5: Complaints are welcomed and addressed

Score: 2,3

Since the initial audit C-DK continues to improve its Complaints Handling Mechanism (CHM) based on learnings from field experiences and external trainings. The organisation also supports its

partners to develop Complaints Handling Policies. C-DK continuously follows up with partners to assess their status during field visit and a checklist was developed for this specific purpose.

However, information regarding staff behaviour and sexual exploitation and abuse is not systematically publicised and discussed with communities. The consultations made by partners to design the CHMs have had limited participation as the exercise was done only through local leaders.

#### Feedback from people affected by crisis and communities on Commitment 5:

Communities reported good general knowledge regarding CHMs. However, they mentioned that they are not fully aware of the expected behaviour of partners' staff, and organisational commitments made on the prevention of sexual exploitation and abuse.

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

**Score: 3**

C-DK still conforms to the requirements of this commitment and there is no significant change from the initial audit in 2017.

#### Feedback from people affected by crisis and communities on Commitment 6:

Communities report that C-DK's partner coordinates its response with local authorities and other humanitarian agencies.

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

**Score: 2,8**

The initial audit was largely positive regarding C-DK's policies and processes on continuous learning and innovation. However, a deficit was found around the systematisation of sharing learning and the roll-out of CRMs as enablers of continuous improvement.

At the time of Mid-term Audit, innovation is defined as a new strategic priority in C-DK's international interventions. C-DK and its partners use monitoring and evaluation results to inform innovation along with CRMs (see C5). C-DK improved the way learnings are shared with partners, the CI confederation and its peers. However, C-DK does not share learnings with affected communities.

Organisational responsibilities for this commitment were not reviewed during the mid-term audit.

#### Feedback from people affected by crisis and communities on Commitment 7:

Communities reported limited examples of sharing learning with communities.

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

**Score: 2,8**

The initial audit was positive regarding C-DK's policies and processes to support staff to do their job effectively and treat them fairly and equitably. However, it noted that wellbeing policies did not exist at C-DK or partner level.

At the time of the Mid-term Audit, CDK staff and their partners have personnel policies and processes in place. These cover wellbeing of staff. However, C-DK has no systematic process for ensuring that partners' security commitments are fully implemented.

Organisational responsibilities for this commitment were not all reviewed during the mid-term audit.

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Feedback from people affected by crisis and communities on Commitment 8:

Communities reported that C-DK's partner staff are professional in their approach to them.

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

**Score: 3**

The initial audit found that C-DK has policies and processes in place to ensure resources are managed and used responsibly for their intended purpose. However, it observed that the lack of complaints and whistleblowing mechanisms limited the control of corruption.

At the time of the Mid-term Audit, C-DK and its partners made significant efforts to improve their CHMs (see C5) identifying corruption cases as part of their scope. C-DK therefore conforms to all the requirements of this commitment.

Feedback from people affected by crisis and communities on Commitment 9:

Communities say that C-DK partners use resources appropriately. However, they do not have access to budgets for projects.

## 8. Organisation's report approval

### Acknowledgement and Acceptance of Findings

For Organisation representative – please cross where appropriate

I acknowledge and understand the findings of the audit

I accept the findings of the audit

I do not accept some/all of the findings of the audit

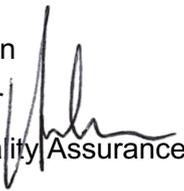
Please list the requirements whose findings you do not accept

MARIA KRASBE HAMMERSTAD  
Name and Signature

Copenhagen 7/1/20  
Date and Place

2019-12-13

## 9. HQAI’s decision

<b>Certification Decision</b>	
Certificate:	
<input checked="" type="checkbox"/> Maintained	<input type="checkbox"/> Reinstated
<input type="checkbox"/> Suspended	<input type="checkbox"/> Withdrawn
<b>Next audits</b>	
Before date: type of audit (MTA, MA or re-certification, as relevant)	
Pierre Hauselmann Executive Director Humanitarian Quality Assurance Initiative 	Date: 2019-12-19

### 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 in writing HQAI 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 – Appeals Procedure.*

## Annex 1: Explanation of the scoring scale

0	<p><b>A score of 0 denotes a weakness that is so significant that it indicates that the organisation is unable to meet the required commitment. This is a major weakness to be corrected immediately.</b></p>
	<p>EXAMPLES:</p> <p>Operational activities and actions contradict the intent of a CHS commitment.</p> <p>Policies and procedures contradict the intent of the CHS commitment.</p> <p>Absence of processes or policies necessary to ensure compliance at the level of the commitment.</p> <p>Recurrent failure to implement the necessary actions at operational level make it impossible for the organisation to ensure compliance at the level of the commitment.</p> <p>Failure to implement corrective actions to resolve minor non-conformities in the adequate timeframes (for certification only)</p> <p>More than half of the indicators of one commitment receive a score of 1 (minor non-conformity), making it impossible for the organisation to ensure compliance at the level of the commitment. (for independent verification or certification only)</p>
1	<p><b>A score of 1 denotes 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 the commitment.</b></p>
	<p>EXAMPLES:</p> <p>There are a significant number of cases where the design and management of programmes and activities do not reflect the CHS requirement.</p> <p>Actions at the operational level are not systematically implemented in accordance with relevant policies and procedures.</p> <p>Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.</p> <p>Existing policies are not accompanied with sufficient guidance to support a systematic and robust implementation by staff. A significant number of relevant staff at Head Office and/or field levels are not familiar with the policies and procedures.</p> <p>Absence of mechanisms to monitor the systematic application of relevant policies and procedures at the level of the requirement/commitment.</p>
2	<p><b>A score of 2 denotes an issue that deserve attention but does not currently compromise the conformity with the requirement.. This is worth an observation and, if not addressed may turn into a significant weakness (score 1).</b></p>
	<p>EXAMPLES:</p> <p>Implementation of the requirement varies from programme to programme and is driven by people rather than organisational culture.</p> <p>There are instances of actions at operational level where the design or management of programmes does not fully reflect relevant policies.</p> <p>Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.</p>
3	<p><b>The organisation conforms with this requirement, and organisational systems ensure that it is met throughout the organisation and over time.</b></p>
	<p>EXAMPLES:</p> <p>Relevant policies and procedures exist and are accompanied with guidance to support implementation by staff.</p> <p>Staff are familiar with relevant policies. They can provide several examples of consistent application in different activities, projects and programmes.</p>

	<p>The organisation monitors the implementation of its policies and supports the staff in doing so at operational level.</p> <p>Policy and practice are aligned.</p>
<p>4</p>	<p><b>The organisation demonstrates innovation in the application of this requirement/commitment. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.</b></p> <p>EXAMPLES:</p> <p>Field and programme staff act frequently in a way that goes beyond CHS requirement to which they are clearly committed.</p> <p>Relevant staff can explain in which way their activities are in line with the requirement and can provide several examples of implementation in different sites. They can relate the examples to improved quality of the projects and their deliveries.</p> <p>Communities and other external stakeholders are particularly satisfied with the work of the organisation in relation to the requirement.</p> <p>Policies and procedures go beyond the intent of the CHS requirement, are innovative and systematically implemented across the organisation.</p>