

# Maintenance Audit – Summary Report MA 2020/07/07

## 1. General information

| Organisation  |   | ACT ALLIANCE SECRETARIAT  |                          | Audit team            |            |
|---|---|---|--------------------------|-----------------------|------------|
| <b>Type</b>   | <b>Mandates</b>   | <b>Verified</b>   |                          | <b>Lead auditor</b>   | Nik Rilkoﬀ |
| <input type="checkbox"/> National<br><input checked="" type="checkbox"/> Membership/Network<br><input type="checkbox"/> Direct Assistance<br><input type="checkbox"/> International<br><input type="checkbox"/> Federated<br><input type="checkbox"/> With partners | <input checked="" type="checkbox"/> Humanitarian<br><input checked="" type="checkbox"/> Development<br><input checked="" type="checkbox"/> Advocacy       | <input checked="" type="checkbox"/> Humanitarian<br><input type="checkbox"/> Development<br><input type="checkbox"/> Advocacy |                          | <b>Second auditor</b> | --         |
| <b>Head office location</b>   | ACT Alliance is legally registered in Geneva, Switzerland and has a decentralised secretariat (Amman, Bangkok, Nairobi, San Salvador, New York, Toronto.) |   |                          | <b>Third auditor</b>  | --         |
| <b>Total number of country programmes</b>   | 135 members in over 120 countries, 52 national forums, 6 sub-regional forums and 3 regional forums  | <b>Total number of staff</b>  | 35 including 5 vacancies | <b>Observer</b>       | --         |
|   |   |   |                          | <b>Expert</b>         | --         |
|   |   |   |                          | <b>Other</b>          | --         |

## Scope of the audit

### CHS Verification Scheme

| Audit Stage                    | Certification                       | Independent Verification | Benchmarking             | Other                    |
|--------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Initial audit (IA)             | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| First maintenance audit (MA1)  | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mid-term audit (MTA)           | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Second maintenance audit (MA2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recertification audit (RA)     | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Extraordinary audit            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Short notice                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other ( <i>specify</i> )       | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## 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 |
|---|-----------------------------------|-------------|--|--|
| Indonesia                               | Y                                 |             |  | Remote   |
| Nigeria                                 | N                                 | Chad        | The Appeal is not funded by the ACT Alliance   |  |
| Chad                                    | Y                                 |             |  | Remote   |

|           |   |  |  |        |
|-----------|---|--|--|--------|
| Palestine | Y |  |  | Remote |
|-----------|---|--|--|--------|

**Add any other sampling performed for this audit** (for example federations, regional offices, etc.):

The sampling was based on the number of open appeals that were active in December 2019: sixteen.

*\*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

### Locations assessed

| Locations (offices, projects at country programme level) | Dates              | Onsite or remote |
|--|--------------------|------------------|
| Chad   | 1, 4 May           | Remote           |
| Indonesia  | 30 April           | Remote           |
| Palestine  | 29-30 April, 3 May | Remote           |

### Interviews

| Position / level of interviewees (add information as necessary) | Number of interviewees | Onsite or remote |
|---|------------------------|------------------|
| <b>Head Office</b>  |                        |                  |
| Management  | 2                      | Remote           |
| Staff   | 1                      | Remote           |
| <b>Country Programme(s)</b>                                     |                        |                  |
| Management  |                        |                  |
| Staff   |                        |                  |
| Partner (member) staff  | 6                      | Remote           |
| Others (specify)  |                        |                  |
| <b>Total number of interviews</b>                               | <b>9</b>               |                  |

### Opening meeting

|                                       |            |
|---------------------------------------|------------|
| <b>Date</b>                           | 2020/04/15 |
| <b>Location</b>                       | Remote     |
| <b>Number of participants</b>         | 4          |
| <b>Any substantive issues arising</b> | None       |

### Closing meeting

|                                       |   |
|---------------------------------------|---|
| <b>Date</b>                           | 2020/05/11  |
| <b>Location</b>                       | Remote  |
| <b>Number of participants</b>         | 4   |
| <b>Any substantive issues arising</b> | Minor clarification of certain phrasing, some extra documentation to be shared. |

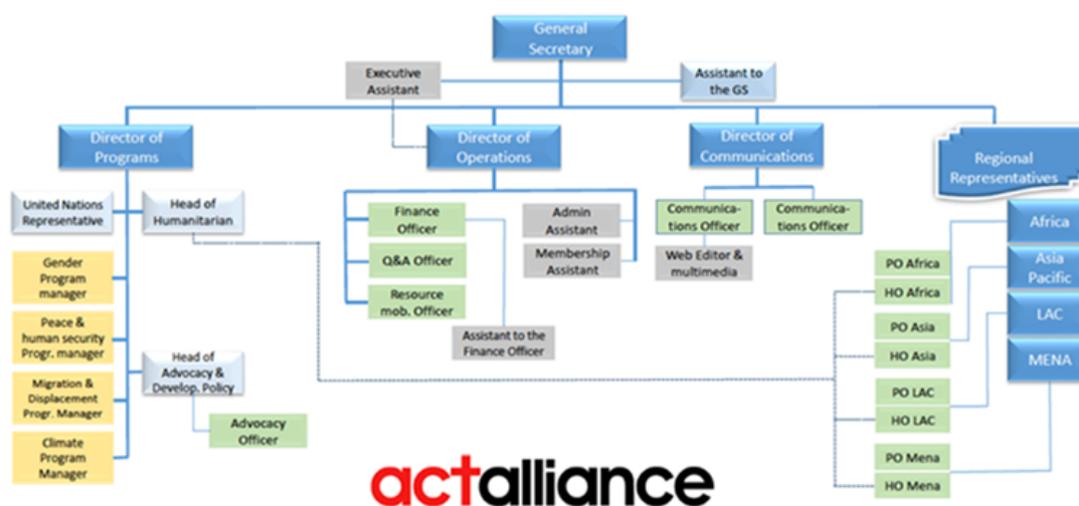
### 3. Background information on the organisation

#### Governance and management structure

ACT Alliance's mission remains unchanged from the initial and mid-term audits. Its decentralisation ambition is realised through the 35 ACT Secretariat staff positions, including 2 secondments, based in 7 offices (Geneva, Nairobi, Amman, Bangkok, Toronto, New York and San Salvador).

Revisions were made to ACT Alliance's Membership Model in October 2018 to foster active engagement in the alliance. From 2019, the General Assembly, the highest decision-making body of the alliance, has one category of voting membership. Principles of this new engagement model include inclusivity and participatory decision-making. Representation on ACT Governing Bodies, including the Governing Board, Executive Committee and Membership and Nominations Committees was formerly based on regions, for example by-laws allocated a specific number of spaces per region for the Governing Board. In the new engagement model, membership to any of the governing bodies of ACT Alliance prioritises engagement and capacity over regional representation, although regional balance will still be sought. Active engagement also requires adherence to mandatory policies as well as participation in ACT Forums.

#### ACT Alliance Secretariat Core Organigram



#### Effectiveness of the internal quality assurance systems

The ACT Alliance Global Strategy (2019-2026) outlines ACT's longer-term plan for strengthening quality, accountability, learning and impact of the work undertaken by ACT members. The Accountability Framework (2019) describes a complex accountability chain comprised of churches, departments of churches, ecumenical organisations (including membership-organisations) established to do humanitarian and development, member organisations working primarily through partners and implementing programmes themselves. ACT Alliance members are each accountable to their own governance structures as well as to the ACT Alliance Secretariat in terms of the accountability-related obligations of membership.

Embedded in ACT Alliance membership are twenty mandatory standards and six international mandatory standards, including the Humanitarian Policy that references the Core Humanitarian Standard to ensure quality and accountability. Members report on aspects of CHS compliance in annual membership surveys that were updated in 2019 to include the Code of Conduct (CoC), complaint-handling mechanisms (CHM),

child protection and gender justice. Historically, not all members complete this survey but it is now an expectation of membership. Appeal monitoring outcomes will be linked to member's management responses that address monitoring recommendations. Evidence of the changes and learning from monitoring, along with outcomes of membership surveys, will be captured in future annual reports to the ACT Alliance Board of Governors, signalling a significant shift of oversight capacity for members' compliance with the CHS.

A revision of the Advisory Structures policy by the Governing Board (May 2019) has transitioned seven former advisory groups into reference groups. These support the Secretariat in the thematic and programmatic implementation of the Global Strategy 2019-2026 as well as operationally supporting the development of implementation plans and policies, training materials, and promoting accountability and standards. The Quality and Accountability (Q&A) Reference Group advises and supports the ACT Alliance Secretariat on the Q&A component of the Global Strategy 2019-2026, including the CHS Implementation Action Plan, PSEA and complaints handling. Reference groups also coordinate with each other on thematic areas of overlap.

Increased staffing resources support the ACT Alliance Secretariat's commitments to quality and accountability (Q&A), including a Compliance Officer (May 2020) joining the Global Q&A Officer recruited in February 2019. The latter supports the humanitarian programme team and national forum members to implement the ACT Quality and Accountability Framework and develop capacities where gaps exist, through face to face trainings, e-learning; and coordinated support. Other structural changes include recruitment of specialist Humanitarian Programme Officers who are better able to monitor and support quality and accountability in humanitarian responses.

Internal controls also include joint monitoring on large and complex appeals, donor compliance checks and audits on all appeals over USD\$50,000, member surveys and membership agreements. Risk-based monitoring of member programmes occurs in the case of a complaint or if a potential issue is identified by Humanitarian Programme Officers.

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### **Work with members**

As with previous audits, and agreed between the ACT Alliance Secretariat and HQAI, this maintenance audit considers members of the ACT Alliance as partners, as described in the Core Humanitarian Standard. This understanding acknowledges that the ACT Alliance Secretariat does not have control over the autonomous members of the ACT Alliance, rather, it has influence.

Membership of the ACT Alliance requires members to adhere to mandatory ACT Alliance policies and to meet agreed standards. Under certain circumstances membership may be suspended, although awareness raising and advocacy are more common approaches to enable compliance, along with communication of new and revised policies; development of e-learning and TOT modules; monitoring regular reports from members and field visits where possible or required by the scale of an appeal. Where members self-report on smaller appeals, regional ACT Alliance Secretariat staff remain in regular contact for sit-reps and remote programme follow-up.

Members must be engaged in an ACT Alliance forum, if one exists, to participate in an appeal. Those interviewed appreciate the coordination elements of the Forum, often finding it easier to discuss guidelines and issues in a local forum than through online platforms and communications. Larger ACT Alliance members contribute staff capacity to guiding operational humanitarian processes.

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## 4. Overall performance of the organisation

### Effectiveness of the management system and internal quality assurance and governance

The ACT Alliance Secretariat is addressing the corrective action requests (CARs) through a system-level approach in data management, the humanitarian mechanism, the monitoring system, the feedback and complaints mechanism and the Code of Conduct. A CHS Action Plan (2019) has been jointly developed by the Humanitarian & Operations teams to monitor corrective action implementation, aspects of which are also included in the annual workplan of the Quality and Accountability Reference Group. These plans set out policy-, structure-, mechanism- and tool- related revisions, assigning timelines and responsibility to staff, management and the Reference Group.

Additional staff and resources have been dedicated to Q&A to enable a more sustained focus on implementing the Accountability Framework. Detailed actions on observations and minor non-conformities include revisions to templates, strengthening national and regional ACT Forums, awareness raising and detailed guidance on aspects of quality and accountability. Internal quality assurance and risk management indicators currently average a score of 2.7 (See Annex 3).

An in-depth reform of the ACT Alliance's Humanitarian Mechanism is underway, incorporating a quality and accountability focus. The ACT Alliance Secretariat continues to strengthen its humanitarian mandate, through increased capacity of humanitarian programme staff and reform of the four pillars of the Humanitarian Mechanism: the Rapid Response Fund, the Appeal process, the work of member consortia and ACT Forums. The focus on the Forum structure noted in the mid-term audit continues, including Forum MOUs, emergency preparedness and response plans (EPRP) and reporting processes, in order to support effective humanitarian assistance. The reform process started in 2019 and will not be in place until mid-2021, given the global Covid-19 pandemic.

### Overall organisational performance in the application of the CHS

The initial audit in 2017 found the ACT Alliance Secretariat performed well against the requirements of the Core Humanitarian Standard. The main areas of weakness related largely to those areas for which the organisation, as the ACT Alliance Secretariat, has limited control. After the initial audit the ACT Alliance Secretariat revised the Humanitarian Mechanism in an effort to address some of the core weaknesses, leading to the closure of 7 CARs.

The mid-term audit noted that oversight of members' compliance, and the mandate to address deficits, posed a challenge for the ACT Alliance Secretariat, particularly given the different levels of experience with the CHS and capacity to comply with it among members. Improved oversight will be realised through multiple factors including the revised Engagement Model of Membership, policies including the Forums Policy and increased reporting on compliance.

Throughout the audit cycle, including the period since the mid-term audit, ACT Alliance Secretariat continues their focus, commitment and practical interventions to correct identified non-conformities. The ACT Alliance Secretariat is both strong in implementation of the requirements of the CHS, and responsive with systematic actions to improve the observations and corrective actions identified. The new format Reference Groups aid this further, drawing on the extensive experience of members, as well as communities of practice and ACT Forums for disseminating good practice. The ACT Alliance Secretariat's CHS Action Plan 2019-2020 outlines systemic changes to address non-conformities, however it is too early at this maintenance audit to see these realised.

Engagement with the CHS Alliance, including representation on the Accountability to Affected Populations Community of Practice; participation in the Sphere Board; uptake of the SCHR Inter-Agency Misconduct Disclosure Scheme; and work with the ACT Learn online learning Platform all contribute to the ACT Alliance Secretariat's objectives to promote and advocate for quality and accountability in the humanitarian sector.

## Average score per commitment

| CHS Commitment   | Average score* |
|--|----------------|
| <b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant                                   | 2.8            |
| <b>Commitment 2:</b> Humanitarian response is effective and timely   | 2.5            |
| <b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects        | 2.5            |
| <b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback           | 2.7            |
| <b>Commitment 5:</b> Complaints are welcomed and addressed   | 2.3            |
| <b>Commitment 6:</b> Humanitarian response is coordinated and complementary                                | 3.7            |
| <b>Commitment 7:</b> Humanitarian actors continuously learn and improve                                    | 2.7            |
| <b>Commitment 8:</b> Staff are supported to do their job effectively, and are treated fairly and equitably | 2.8            |
| <b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose                 | 2.8            |

\*Note: scores are culminative and updated at this audit stage based on the results from previous audits

## 5. Summary of non-conformities

| Corrective Action Requests (CAR) / Weaknesses   | Type (minor / major) | Resolution due date | Date closed out |
|---|----------------------|---------------------|-----------------|
| 2019: 2.5b Programmes are not systematically adapted based on monitoring results  | Minor                | 2021-04-30          |                 |
| 2019: 2.5c ACT Alliance Secretariat does not systematically identify and address poor performance of its members.   | Minor                | 2021-04-30          |                 |
| 2019: 3.6 Unintended negative effects are not systematically identified and acted upon in a timely manner in the areas of: people's safety, security, dignity, and rights; sexual exploitation and abuse by staff; culture, social and political relationships; livelihoods; local economy; the environment | Minor                | 2021-04-30          |                 |

|   |       |            |  |
|---|-------|------------|--|
| 2019: 5.4 The ACT Alliance Secretariat does not take appropriate action where members are found not to have a documented complaints procedure.  | Minor | 2021-04-30 |  |
| 2019: 5.6 The ACT Alliance Secretariat does not take appropriate action when a failure to sign the Code of Conduct is identified and communities are not consistently being made aware of the expected behaviours of staff. | Minor | 2021-04-30 |  |

## 6. Sampling recommendation for next audit

|   |  |
|---|--|
| <b>Sampling rate</b>                                  | The sampling was based on the number of open appeals that were active in December 2019: sixteen. In line with HQAI guidance this indicated a sample of three for remote assessment.  |
| <b>Specific recommendation for selection of sites</b> | Given the decentralisation of the ACT Secretariat to regional offices and their central role in providing support to members and Forums, staff from several of these offices should specifically be included in the Secretariat sample at the recertification audit. |

## 7. Lead auditor recommendation

|  |  |
|--|--|
| In our opinion, ACT Alliance Secretariat is implementing the necessary actions to close the minor 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. |  |
| <br>Nik Rilko, Lead Auditor, HQAI   | <b>Date and place:</b><br>13 May, 2020<br>Featherston, New Zealand |

## 8. HQAI decision

|   |  |
|---|--|
| <input type="checkbox"/> Certificate maintained   | <input type="checkbox"/> Certificate suspended |
| <input type="checkbox"/> Certificate reinstated   | <input type="checkbox"/> Certificate withdrawn |
| <b>Next audit</b><br>type of audit (MTA, MA or re-certification, as relevant) before YYYY/MM/DD             |  |
| <b>Signature</b><br><br>Pierre Hauselmann, Executive Director,<br>Humanitarian Quality Assurance Initiative | <b>Date and place:</b>                         |

## 9. Acknowledgement of the report by the organisation

### Space reserved for the organisation

|  |  |
|--|--|
| Reservations regarding the findings / remarks regarding the behaviour of the audit team:<br><br>If yes, please give details:   | <input type="checkbox"/> yes <input type="checkbox"/> no |
| <b>Acknowledgement and Acceptance of Findings:</b><br><br>I acknowledge and understand the findings of the audit <input type="checkbox"/> yes <input type="checkbox"/> no<br><br>I accept the findings of the audit <input type="checkbox"/> yes <input type="checkbox"/> no |  |
| Name and signature of <b>organisation</b> representative:  | Date and place:  |

## 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

|          |  |
|----------|--|
| <b>0</b> | <b>Major non-conformity or Major weakness</b>  |
|          | 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.   |
| <b>1</b> | <b>Minor non-conformity or Minor weakness</b>  |
|          | Your organisation has made some efforts towards applying this requirement, but these efforts have not been systematic.   |
| <b>2</b> | <b>Observation</b>   |
|          | Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.  |
| <b>3</b> | <b>Conformity</b>  |
|          | Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled  |
| <b>4</b> | <b>Exceptional conformity</b>  |
|          | 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. |