

# CAFOD

## Mid-Term Audit – Summary Report 2022/08/09

### 1. General information

#### 1.1 Organisation

| Type   | Mandates  | Verified  |     |
|--|---|---|-----|
| <input checked="" type="checkbox"/> International<br><input type="checkbox"/> National<br><input type="checkbox"/> Membership/Network<br><input type="checkbox"/> Direct Assistance<br><input type="checkbox"/> Federated<br><input checked="" 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 checked="" type="checkbox"/> Development<br><input checked="" type="checkbox"/> Advocacy |     |
| <b>Head office location</b>  | London, UK  |   |     |
| <b>Total number of country programmes</b>  | 33 with support for humanitarian programmes in 6 other countries  | <b>Total number of staff</b>  | 378 |

#### 1.2 Audit team

|                        |                    |
|------------------------|--------------------|
| <b>Lead auditor</b>    | Joanne O'Flannagan |
| <b>Second auditor</b>  | Camille Nussbaum   |
| <b>Third auditor</b>   | --                 |
| <b>Observer</b>        | --                 |
| <b>Expert</b>          | --                 |
| <b>Witness / other</b> | --                 |

#### 1.3 Scope of the audit

|   |   |
|---|---|
| <b>CHS Verification Scheme</b>              | Certification   |
| <b>Audit cycle</b>                          | Second  |
| <b>Phase of the audit</b>                   | Mid-Term  |
| <b>Coverage of the audit</b>                | The entire organisation and its work through partners in humanitarian, development and advocacy mandates. |
| <b>Extraordinary or other type of audit</b> | N/A   |

#### 1.4 Sampling\*

| Randomly sampled country programme sites | Included in final sample | Replaced by | Rationale for sampling and selection of sites  | Onsite or remote |
|--|--------------------------|-------------|--|------------------|
| Brazil                                   | Yes                      |             | Large CAFOD programme with a diverse range of partners and projects across all mandates including, more recently humanitarian programming in response to the COVID-19 pandemic.  | Onsite           |
| Guatemala                                | No                       | Bolivia     | Guatemala was sampled in three previous audits. Bolivia is part of the same region and provides a good alternative to maintain onsite travel within the region for effective use of time and to minimise carbon footprint. In Bolivia it is possible to consult with | Onsite           |

|         |     |  |  |        |
|---------|-----|--|--|--------|
|         |     |  | human rights/advocacy partners working with marginalised communities which is less feasible in Brazil for safety and access reasons. |        |
| Uganda  | No  | Portfolio of humanitarian projects managed from London | Replaced with CAFOD's portfolio of humanitarian portfolio projects (x 6) that are managed from London.                               | Remote |
| Liberia | Yes |  | Important to retain at least one programme in Africa given CAFOD's focus on the region.  | Remote |

**Any other sampling performed for this audit:** Of the 6 projects currently operational in the portfolio of humanitarian projects managed from London, 2 were sampled for this audit: Nepal and Philippines, providing complementary geographical coverage in the sample across the full range of CAFOD programming.

**Sampling risk:** Sampling risk was considered through the purposive replacement of the Uganda Country Programme with the portfolio of humanitarian projects managed from London: these projects represent a degree of risk in meeting the requirements of the standard. These projects are not supported or managed by an in-country CAFOD team, but are fully implemented through partners, with primarily remote support and oversight from CAFOD. This is particularly true over the past 2 years due to the lack of onsite monitoring as a result of COVID-19 travel restrictions.  
The audit team is confident in the sample and in the findings from the available evidence generated.

*\*It is important to note that the audit findings are based on a sample of an organisation's country programmes, its documentation and observation. Findings are analysed to determine an organisation's systematic approach and application of all aspects of the CHS across different contexts and ways of working.*

## 2. Activities undertaken by the audit team

### 2.1 Locations Assessed

| Locations                              | Dates            | Onsite or remote |
|--|------------------|------------------|
| Bolivia                                | 03 - 06 May 2022 | Onsite           |
| Brazil                                 | 07 – 13 May 2022 | Onsite           |
| Liberia                                | 18 – 19 May 2022 | Remote           |
| Humanitarian (managed from HO, London) | 18 – 19 May 2022 | Remote           |

### 2.2 Interviews

| Position / level of interviewees   | Number of interviewees |      | Onsite or remote  |
|------------------------------------|------------------------|------|-------------------|
|                                    | Female                 | Male |                   |
| <b>Head Office</b>                 |                        |      |                   |
| Management                         | 5                      | 5    | Remote            |
| Staff                              | 9                      | 5    | Remote            |
| <b>Country Programme Office(s)</b> |                        |      |                   |
| Management                         |                        | 1    | Remote            |
| Staff                              |                        | 1    | Remote            |
| Partner staff                      | 29                     | 14   | Onsite and remote |

|                                     |           |           |           |
|-------------------------------------|-----------|-----------|-----------|
| <b>Total number of interviewees</b> | <b>43</b> | <b>26</b> | <b>69</b> |
|-------------------------------------|-----------|-----------|-----------|

## 2.3 Consultations with communities

| Type of group and location  | Number of participants |           | Onsite or remote |
|---|------------------------|-----------|------------------|
|   | Female                 | Male      |                  |
| Bolivia, La Paz: Human Rights Defenders – group and individual interviews   | 5                      | 3         | Onsite           |
| Bolivia, El Alto: Community leaders (water rights) – group interview  | 1                      | 3         | Onsite           |
| Bolivia, Pacharia, La Paz Dept: community project participants (agriculture and nutrition) – group interviews x 2 (mixed) | 16                     | 14        | Onsite           |
| Brazil, Maranhao State, Caixas: community project participants (emergency food COVID-19) – group interviews x 2 (female)  | 24                     | 0         | Onsite           |
| Brazil, Sao Paulo: community project participants (urban rights programme) – group interviews x 2 (female)                | 9                      | 0         | Onsite           |
| Brazil, Sao Paulo: community project participants (emergency food COVID-19) – group interview (mixed)                     | 8                      | 3         | Onsite           |
| <b>Total number of participants</b>   | <b>63</b>              | <b>23</b> | <b>86</b>        |

## 2.4 Opening meeting

|                                       |            |
|---------------------------------------|------------|
| <b>Date</b>                           | 2022/04/20 |
| <b>Location</b>                       | Remote     |
| <b>Number of participants</b>         | 9          |
| <b>Any substantive issues arising</b> | None       |

## 2.5 Closing meeting

|                                       |            |
|---------------------------------------|------------|
| <b>Date</b>                           | 2022/05/27 |
| <b>Location</b>                       | Remote     |
| <b>Number of participants</b>         | 16         |
| <b>Any substantive issues arising</b> | None       |

## 3. Background information on the organisation

### 3.1 General information

Catholic Agency for Overseas Development (CAFOD) (est. 1960) is the official overseas development and relief agency of the Catholic Church in England and Wales with the primary aim of tackling poverty globally. CAFOD is a company limited by guarantee, and registered as a charity with the Charity Commission for England and Wales. The organisation's work is based on Gospel values and Catholic social teaching. CAFOD is part of Caritas Internationalis, a federation of approximately 160 Catholic aid organisations and a member of the Disasters Emergency Committee (DEC). CAFOD's current Strategic Plan, *Our Common Home 2020-2030*, takes its name from Pope Francis' Encyclical 'Laudato Si - On care for our common home'. The global strategy focuses CAFOD's work on the interconnected cry of the earth and the cry of the poor; and supporting and celebrating the abilities and achievements of local people, especially women, together with the global network of the Catholic community.

*Our Common Home* is underpinned by a number of interlinked commitments:

- Integral ecology that benefits people, communities and the environment,
- Local agency, voice and leadership,
- A culture of encounter for transformative change,
- Our ecological conversion to transform ourselves.

CAFOD continues to work in the areas of sustainable development, humanitarian response, campaigning and advocacy, and (in the UK) development education.

For the financial year ending in 2021 CAFOD delivered an overall programme of £48.9 million, with £5.8 million (11.9%) spent on raising funds and £43.1 million (88.1%) spent on CAFOD's charitable programmes; of this £43.1 million, £26.5 million was spent on grants and programme payments.

As of February 2022, CAFOD employs around 380 staff and works in 33 countries worldwide. It also currently funds and supports humanitarian programmes in six other countries, primarily in coordination with Caritas Internationalis.

### 3.2 Governance and management structure

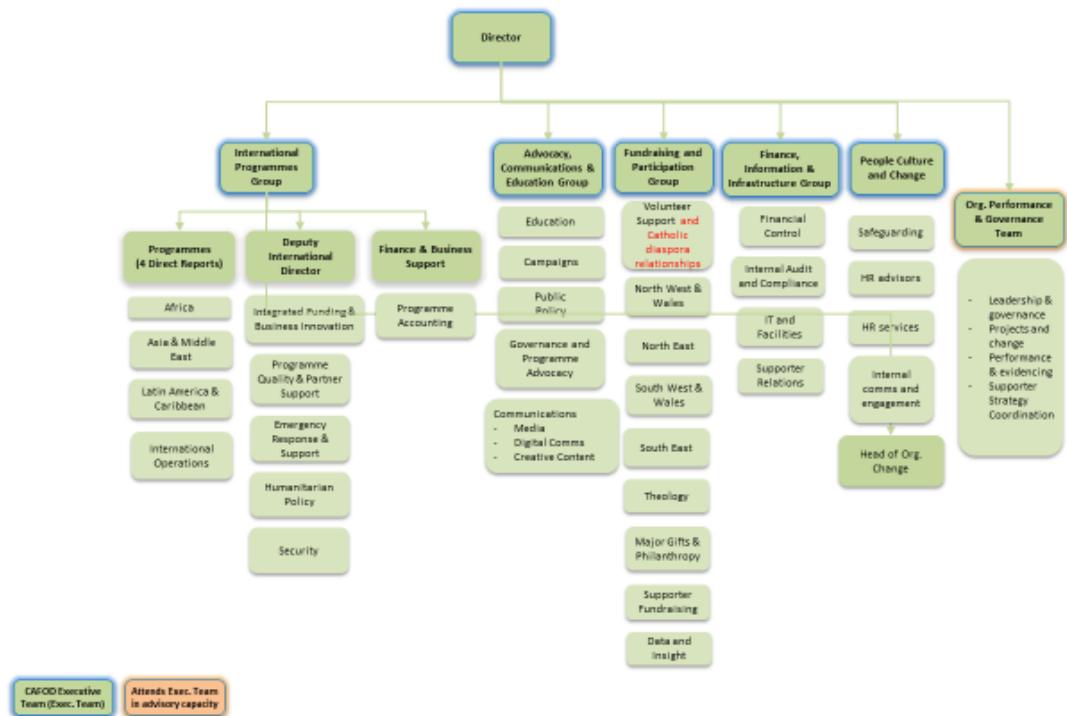
Compared to the 2021 maintenance audit report, when four new governors were appointed in line with CAFOD's procedures for rotation of members of the governing body (2021), there are no major changes in CAFOD's organisational governance at this audit.

CAFOD is governed by a Board of Trustees and managed by the CAFOD Executive Team, its key decision-making body on strategic orientation and on quality and accountability. Since 2021 the emergency and development strands of CAFOD have been unified under the International Programmes Group. Since 2022 there are 2 (down from 3) leadership roles in the International Programmes Group: an International Programmes Group Director with a strategic as well as external focus, and a Deputy International Director with a focus on programme quality, funding, and humanitarian response and policy. This is another step in the process of building a more unified and coherent structure for management while maintaining emergency response, longer-term sustainable development and advocacy capacities within the programming team.

The Executive Leadership Team has six members: Executive Director, International Programmes Director and Heads of Finance, IT and Infrastructure, Advocacy, communications and education, Fundraising and participation, and People, culture and change. The People team expanded to include the Head of Organisational Change (corporate role since 2016 but previously in International Programmes), Safeguarding (previously in Advocacy & Education) and Internal Communications (previously in Performance & Governance).

CAFOD is committed to becoming a more inclusive, flexible and anti-racist organisation; a range of resources have been directed to these aims including the development of a *Home and Hybrid Working Policy* after significant staff consultation; a project, in partnership with an external expert organisation, to conduct an Equality, Diversity and Inclusion (EDI) Audit; and the setting up of a *Racial Justice Reference Group* with the aim of offering insights on racial (in)justice based on diverse voices and experiences.

CAFOD’s organisational structure is shown below:



### 3.3 Internal quality assurance mechanisms and risk management

CAFOD’s *Risk Management Policy (2022)* sets out the organisation’s objective to establish a consistent framework and protocol for determining risk appetite; managing risk and assigning accountability; and providing a structured process for risk to be considered, reported and acted upon. The *Corporate Risk Register* is reviewed and approved by the Board of Trustees annually. CAFOD’s risk appetite is ‘open’ unless indicated otherwise, in general this is related to areas of compliance with the CHS (e.g. safeguarding; fraud and corruption).

CAFOD has a portfolio of five organisational-wide Integrity Policies covering: fraud and loss; anti-terrorism; bribery; money laundering; and conflict of interest (new). Management standards, procedures and ways of working, to assure quality and manage risk, are set out in the Programme Financial Manual and Programme Management Manual. The *Ethical Donations Policy* stipulates that CAFOD should accept and allocate funds from corporate donors legally and ethically. A member of the senior leadership team oversees EthicsPoint (CAFOD’s complaint management system) and reviews the status of complaints on a six-monthly basis with a nominated Safeguarding trustee.

CAFOD has a three-person Internal Audit and Compliance team which works to a three-year, risk-based plan, with an annual rolling update process. The team is accountable to a member of the Executive team and reports to the *Finance, Legal, Audit and Risk (FLAR) Committee* on a quarterly basis.

The Partner Safeguarding Profiles continue to provide information for tracking and monitoring, through key performance indicators (KPIs) which are reviewed by the Board on a quarterly basis, and provide data on the number of high-risk partners meeting minimum safeguarding requirements.

Since the previous audit CAFOD has finalised Version 1 of the *Integral Ecology Programme Model (IEPM)*, the strategic programming framework to enable CAFOD to deliver on the commitments outlined in its Strategic Plan, *Our Common Home (OCH)*. Under IEPM, which is currently being piloted in eight programme countries, CAFOD’s Safe, Accessible, Dignified and Inclusive (SADI) framework will become a programme quality requirement across all programmes. The framework is under review at the time of this audit and will continue to address a number of areas where CAFOD had previously encountered challenges with CHS assurance, such as complaint handling, data protection, staff behaviour, MEL and financial/resource stewardship (including consideration of environmental impact). The

framework will be reviewed and updated (if necessary) each year, and country programmes will be required to report on SADI compliance annually; it covers all core aspects of the CHS.

IEPM defines ten integral ecology characteristics and CAFOD has recruited or reshaped a number of positions to ensure it has the technical capacity to fulfil the commitments set out in OCH through the IEPM model, including a Gender and Inclusion Advisor and Environmental Advisor. The launch of IEPM is accompanied by a number of initiatives to support quality assurance including the establishment of a MEL Community of Practice and a mapping of current MEL tools in use. The approach to MEL under IEPM will be determined alongside a Theory of Change (ToC) as outlined in Programme Strategies. In updating its MEL framework, to ensure coherence with IEPM, CAFOD will not establish a set of standardised tools, templates and indicators but rather require that the MEL approach at programme level is tailored to the diverse capacities of partners and is consistent with ToCs and other programmatic and contextual analyses. It should be noted that the above outlines the changes that CAFOD is in the process of refining and developing and are not yet rolled out. The effectiveness of new tools for programme quality and risk management at the programme/project level will need to be assessed in future audits.

### 3.4 Work with partner organisations

Outside the UK, CAFOD works through approximately 350 short and long-term partnerships, including local and international organisations, both faith-based and secular. CAFOD is reducing the number of partners it works with over the coming period in line with IEPM, to ensure a mixed portfolio of both large and small partners that can support delivery of OCH. There are no plans to reduce the overall level of grant funding to partners. CAFOD is also seeking to expand the range of types of partners it works with beyond faith based and community-based organisations to include, for example, social movements and representative bodies.

There have been no fundamental changes in the way CAFOD works with partners since the previous audits and its focus on capacity strengthening continues. CAFOD continues to commit unrestricted funding to drive its localisation agenda forward and the subsidiarity principle remains central to CAFOD's way of working. As part of the IEPM approach CAFOD is moving towards more programmatic (rather than projectised) funding of partners.

CAFOD continues to customise its approach to each partner based on their needs, risks and institutional approach. The organisation launched a *Due Diligence Passporting* project to map existing tools and develop plans for piloting these from, May 2022 to August 2023. The project aims at improving the alignment of partners in terms of due diligence and to eliminate duplication of effort. The exercise was initiated by CAFOD and developed in collaboration with other INGO signatories of the Charter for Change. The next step of the process will involve consultation with national and local NGO partners to ensure an associated learning exercise will address their priorities and is informed by their insights.

## 4. Overall performance of the organisation

### 4.1 Effectiveness of the governance, internal quality assurance and risk management of the organisation

CAFOD's systems of governance, internal quality assurance and risk management are broadly comprehensive and effective. There is a clear understanding between Trustees and the executive with recent improvements in the presentation of documents to the Board to assist them in executing their responsibilities in a systematic manner.

Reporting by the Internal Audit team is focused on compliance, internal audits and fraud and loss, and may include reporting on investigations or other risk-based assessments, e.g., bribery, governance. The team covers three main categories of audit: 1. Corporate audits (systems, risk-based), 2. Programme audits (according to context with priority given to high-risk situations), and 3. Compliance audits (e.g. to fulfil Charity Commission requirements). The FLAR committee is responsible for reviewing post audit letters, internal and external audit updates, and audit follow-up.

The *Strategy and Performance Committee* continues to exercise responsibility for oversight of ensuring programme delivery, quality assurance and risk management. CAFOD undertakes learning reviews, including more recently, the *COVID Response Learning Review*, *Environmental Programming Review* and the *Mount Nyiragongo After Action Review*.



As described in the Maintenance Audit (2021), the remit of the Programme Quality and Partner Support Team was revised to work across international programmes to strengthen programme quality, with a focus on areas identified by previous CHS audits, including Monitoring Evaluation and Learning (MEL) and Inclusion. A number of new roles were added with relevance for quality assurance, including Programme Quality Lead, Data Quality and Evidencing Officer, Gender & Inclusion Advisor, and a Capacity Strengthening Advisor.

An output of the IEPM Programme Quality workstream will be a new Monitoring, Evaluation, and Learning (MEL) approach as an integral component of IEPM to ensure a consistent approach to all aspects of programme quality and MEL. Elements of these are already integrated into the new programme strategy guidance and other key supporting resources e.g., the updated and expanded SADI Framework. A key shift is that use of SADI will be compulsory under the IEPM whereas previously, while all staff were trained on the approach, there were only some compulsory elements (captured in the Partner Safeguarding Profile).

However, the development of the IEPM approach and ongoing refinement of the procedures and systems to support its rollout has temporarily directed much of the primary focus of programme quality staff towards the more strategic aspects of their responsibilities rather than operational accompaniment and support to country programme teams and partners, for improved monitoring and programme quality in practice. For this reason, there have been some delays to the delivery of improved procedures for monitoring, evaluation and learning.

## 4.2 How the organisation applies the CHS across its work

Overall, CAFOD complies with the commitments of the CHS with particularly strong performance on inclusiveness, strengthening local capacities, coordination and fair and non-discriminatory policies and procedures. CAFOD has made sustained efforts to address the corrective actions and observations highlighted in previous audits, particularly in the area of ensuring community awareness of the expected behaviour of staff and supporting partners to have documented policies and procedures for timely and fair management of complaints. The vast majority (99%) of partners have a completed safeguarding profile (February 2022). CAFOD monitors areas of risk of non-compliance with CHS and supports partners to develop appropriate systems and procedures based on the safeguarding profiles and ongoing dialogue and capacity support.

The recent launch of the new programmatic approach (IEPM) and the development and review of important programme quality tools are an important opportunity to continue to improve relevant areas in relation to quality and accountability, particularly in relation to MEL capacity. Monitoring of outcomes; disaggregation, diversity and inclusion; mechanisms for community feedback; and learning remain areas that require further strengthening and there is less evidence of improvement in practice these areas. CAFOD is aware of these gaps and has plans in place to address a number of these areas.

Across all levels of CAFOD - Trustees, executive and staff - and among partners, there is good awareness of the CHS and CAFOD explicitly builds the CHS requirements into its tools and guidelines.

Overall, the current audit records:

- One new Minor CAR (2022-4.4),
- Four Minor CARs closed (2019-3.8; 2019-5.3; 2019-5.6; 2020-7.2),
- One Minor CAR extended (2019-5.1).

## 4.3 PSEA

CAFOD performs well in relation to PSEA and continues to strengthen its policies and procedures for the prevention of SEA across the organisation, its programmes and partners. CAFOD's culture around complaint handling is strong, including promoting that culture in partners and supporting them to develop their own mechanisms. Partners testify to a deepening of their organisational understanding of PSEA, and describe a growing appreciation, as a result of CAFOD's continuous engagement, of the importance of effective complaint handling mechanisms to deal with sensitive complaints. The positive effects of CAFOD's sustained efforts are reflected in the tracking and reporting of key performance indicators (KPIs) that track progress against all safeguarding minimum standards, including community awareness of expected behaviour of staff, which shows sustained improvement over time from 61% in 2020 to 88% as of February 2022.

CAFOD tracks and monitors all sensitive complaints including those related to SEA. The compulsory partner safeguarding profile remains a key tool for systematically tracking and monitoring that all partners are managing complaints safely and CAFOD staff continue to

engage with partners to address gaps (prioritised according to level of risk). The Safeguarding KPI report indicates that 95% of high-risk partners meet or partially meet the safeguarding requirements as of February 2022 and up from 90% at the last audit. A Safeguarding Case Management Committee, led by the Corporate Safeguarding Champion, maintains an overview of safeguarding complaints, reviews their status and agrees any actions to be taken.

CAFOD has processes in place to ensure staff and partners are aware of policies related to zero-tolerance of SEA. Staff and partners indicate a clear understanding of the codes of conduct (CoC), PSEA policies, mandatory reporting requirements and responsibilities to ensure communities are made aware of expected standards of behaviour. Communities demonstrate awareness of expected behaviours of staff and confirm that information relating to CoC and PSEA had been shared with them. However, CAFOD does not systematically assure partners consult with communities on the design of complaint handling mechanisms.

#### 4.4 Localisation

CAFOD performs strongly on localisation. Since 2016, in the wake of Pope Francis' Encyclical "Laudato Si" (2015), CAFOD has increasingly focused on localisation and sustainability; this is reflected in both OCH and in the IEPM approach. CAFOD's commitment to localisation is evident in its policies and overall approach to coordination, and a strong focus on resilience and empowerment of local structures, partners and communities in all humanitarian, development and advocacy activities.

CAFOD remains committed to the *Charter for Change* (C4C) initiative (CAFOD was one of the four organisations that originally drafted and launched C4C in 2015) and related *Grand Bargain* commitments including, for example, through its work on due diligence passporting.

While CAFOD's partnerships are generally multi-year relationships, funding and decision-making was mainly on an annual basis. Under the new OCH, and through the IEPM approach, CAFOD is developing the finance, compliance and other prerequisites to facilitate multi-year funding and planning with local partners.

Partners consistently testify to CAFOD's respectful and open approach to partnership. CAFOD performs particularly strongly in its support for the development of local organisations and leadership.

#### 4.5 Gender and diversity

CAFOD scores well on gender and diversity, driven by its commitment to social justice and its inclusive approach to vulnerable groups in programmes. The organisation is committed to gender sensitive programme design and to advancing gender equality in its programmes. The recent recruitment of a Gender and Inclusion Advisor has redirected organisational focus on gender (a previous Gender Advisor left in 2018) as well as on inclusion and diversity. With the development of the IEPM approach, CAFOD is establishing gender and environmental minimum standards across all programmes. A *Gender Consultation Group* has been established to consider gender at a strategic level across organisational policy and practice, while a *Gender and Inclusion Community of Practice* meets regularly to discuss, exchange experiences and expand their knowledge on inclusion and gender.

In 2022 CAFOD initiated a project, in partnership with an external expert organisation, to conduct an Equality, Diversity and Inclusion (EDI) Audit, as part of its commitment to becoming an anti-racist organisation and to continue to invest targeted resources towards EDI in line with OCH. A Terms of Reference for a *Racial Justice Reference Group* was developed in 2021 with the aim of offering insights on racial (in)justice, based on diverse voices and experiences, providing assurance that CAFOD is working to achieve racial justice and to recommend adaptations and initiatives. Inspired in part by the Black Lives Matter Movement, CAFOD is in the process of developing a set of principles and improved guidelines for communications (internal and external) to empower and inform staff on how to communicate antiracism in their work and enable them to make informed decisions about the images and language they use.

Staff and partners show a shared commitment to women's participation and empowerment and demonstrate the technical skills and capacities to deliver gender and age sensitive programming.



## 4.6 Organisational performance against each CHS Commitment

| Commitment   | Strong points and areas for improvement  | Feedback from communities  | Average score* |
|--|--|--|----------------|
| <b>Commitment 1:</b><br>Humanitarian assistance is appropriate and relevant                            | CAFOD commits to impartial assistance through its mission statement and has different processes in place to ensure ongoing analysis of the context. CAFOD's global strategy, OCH commits the organisation to an inclusive approach that celebrates and draws strength from diversity. The organisation shows particular strength in providing tools and guidance on gender, disability and inclusion and has a number of initiatives on anti-racism, inclusion and decolonisation. However, CAFOD does not yet systematically disaggregate by disability.  | Communities perceive that the assistance they receive is appropriate and relevant to their needs and takes account of groups who may be more vulnerable. | 3              |
| <b>Commitment 2:</b><br>Humanitarian response is effective and timely                                  | CAFOD operates effectively and in a timely manner across its different operational contexts. CAFOD primarily monitors and evaluates projects based on the information collected and reported by partners. Monitoring of outcomes is not always systematic and the approach to monitoring, learning and evaluation aligned with the new IEPM approach remains to be fully developed and implemented over the coming months.   | Communities are satisfied with the timeliness of support provided by CAFOD's partners, particularly during its COVID-19 response programming.            | 2.7            |
| <b>Commitment 3:</b><br>Humanitarian response strengthens local capacities and avoids negative effects | CAFOD is committed to supporting local leadership and avoiding negative effects at governance, management, and operational levels. The organisation works with partners to collaboratively design projects which are oriented towards supporting local capacities.<br><br>CAFOD has improved its processes and tools to ensure partners safeguard the personal information of communities and has provided capacity support to improve partners' processes. The limitations of CAFOD's programme information management database (WebPromise) constrains the identification, monitoring and follow up of potential unintended and negative effects in a systematic manner.   | Communities confirm that projects strengthen local capacities and avoid negative effects.  | 3              |
| <b>Commitment 4:</b><br>Humanitarian response is based on communication, participation and feedback    | CAFOD staff are fluent speakers of the languages of the countries with which they primarily engage, and are deeply knowledgeable about political context and sensitivities as well as cultural norms and practices. This allows them to work sensitively and effectively with partners in identifying the most appropriate and respectful ways to communicate with local communities.<br><br>CAFOD continues to make consistent efforts to ensure that partners systematically communicate who they are and what affected people can expect of them and this aspect is fully integrated in CAFOD's policies and guidelines. As noted in the Recertification Audit this does not guarantee consistent application in practice. CAFOD does not ensure that communities are systematically facilitated to | Communities confirm inclusive engagement with project activities across the project cycle.   | 2.4            |

|  |  |  |     |
|--|--|--|-----|
|  | provide feedback on their level of satisfaction with project quality and effectiveness, or that particular attention is given to the gender, age and diversity of those giving feedback. For this reason a Minor CAR has been recorded (4.4)   |  |     |
| <b>Commitment 5:</b><br>Complaints are welcomed and addressed                  | <p>CAFOD maintains and continues to strengthen its culture in relation to accepting and managing complaints; senior management and the Board receive analysis of complaints and are regularly apprised of progress against goals regarding the roll out of complaints mechanisms of partners. This focus continues to inform and drive an accepting culture of complaints by partners.</p> <p>CAFOD continues to make progress on the completion of partner safeguarding profiles (99% of partners as of February 2022) which describe whether partners have safe and responsive complaint handling mechanisms in place; whether the policy/process is documented; and that the management of non-sensitive and sensitive complaints is covered.</p> <p>Evidence from partners and communities during the onsite phase of the current audit confirm that information is provided to communities on expected staff behaviour.</p> <p>As a result of continued focus and commitment to improvement, two Minor CARs related to this commitment have been closed (5.3; 5.6), while one CAR has been extended (5.1). Evidence gathered during the onsite phase of the current audit indicates that, while partners are aware of the requirement to consult with communities on the design, implementation and monitoring of complaint mechanisms, some of them do not yet do this on an ongoing basis</p> | Communities are aware of how to raise complaints (both formally and informally) and know that they can raise complaints about serious concerns such as violations of codes of conduct or suspicions of fraud or corruption. Communities express their confidence to raise complaints and in partners' willingness to respond to these. | 2.6 |
| <b>Commitment 6:</b><br>Humanitarian response is coordinated and complementary | <p>CAFOD has a strong commitment to coordination and complementary response programming. It supports global emergency response appeals within the Caritas Internationalis (CI) network and contributes to improved coordination through various CI and other forums.</p> <p>CAFOD shows particular strength in participating in relevant coordination networks and initiatives globally and support its partners to coordinate at regional, national and local levels.</p>   | Communities confirm that projects are well coordinated, when relevant, with other initiatives. They also report that assistance complements national and local efforts (e.g., essential items included in food baskets during COVID-19 responses).   | 3.2 |
| <b>Commitment 7:</b><br>Humanitarian actors continuously learn and improve     | CAFOD learns from previous experience and includes learning from experience in the design of new programmes. The organisation takes advantage of available feedback, monitoring, reviews and other learning exercises to improve its work and innovate. Learning is shared internally and with partners and relevant stakeholders in the sector. However, information sharing suffers from the limitations of the information management platform and there is limited evidence of sharing learning with communities.  | Communities do not report examples of learning being shared.   | 2.3 |

|   |  |   |            |
|---|--|---|------------|
| <p><b>Commitment 8:</b><br/>Staff are supported to do their job effectively, and are treated fairly and equitably</p> | <p>CAFOD has clear staff rules and regulations in place, staff are well trained and motivated by CAFOD’s mission and values. CAFOD is committed to open and fair recruitment processes and requires all staff participating on recruitment panels to attend Equality in Recruitment training.</p> <p>Staff are guided by CAFOD’s Code of Behaviour and understand what is expected of them in terms of behaviour. Continuous trainings ensure adequate staff competencies and skills. However, CAFOD does not currently have a clear overview of how consistently performance management processes are followed.</p> <p>Inspired, in part, by the <i>Black Lives Matter Movement</i>, CAFOD is in the process of developing a set of principles and improved guidelines for communications (internal and external) to empower and inform staff on how to communicate antiracism in their work and enable them to make informed decisions about the images and language they use.</p> <p>Staff are aware of, and committed to, the organisational intent to become a more inclusive and anti-racist organisation. Staff also consider that the opportunities for home and hybrid working have shifted CAFOD from being a London-centric organisation, and have dispersed greater power, voice and agency across all parts of the organisation, in line with CAFOD’s strategic ambition to listen to local voices and to nurture local leadership.</p> | <p>Communities attest that staff are professional, competent and effective in their work.</p>                     | <p>2.9</p> |
| <p><b>Commitment 9:</b><br/>Resources are managed and used responsibly for their intended purpose</p>                 | <p>CAFOD maintains a solid policy platform in place to ensure appropriate use and management of resources. Its operating approach supports an appropriate balance between quality, cost and timeliness. CAFOD continues to systematically undertake Mango Health Checks with partners to review systems and procedures for planning and budgeting, accounting systems, financial reporting, internal controls, grant management, staffing and supply chain management.</p> <p>The <i>Environmental Stewardship</i> tool guides staff on environmental aspects of programme design and requires definition of risk mitigation measures as well as providing guidance on sustainable approaches in thematic programmes. The updated SADI framework (draft) includes stronger references to environmental considerations and will become a compulsory quality assurance tool across all programming.</p> <p>CAFOD’s integrity policies (anti-bribery, fraud, conflict of interest, etc.) are updated annually and emailed to all staff. CAFOD shares and discusses these with partners during monitoring visits and meetings. Project Funding Agreements are explicit with regard to the risks of suspension of agreement in the event of</p>   | <p>Communities confirm their awareness of partners’ policies on, and zero tolerance of, fraud and corruption.</p> | <p>3</p>   |

|  |  |  |  |
|--|--|--|--|
|  | <p>actual or suspected fraud or corruption and Partners confirm their awareness and understanding of CAFOD's policies and demonstrate commitment to mitigating risks of fraud and corruption.</p> <p>CAFOD employs a range of measures to prevent, detect and take action on corruption, including its internal audit function and its complaints mechanism.</p> |  |  |
|--|--|--|--|

\* *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 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.*

## 5. Summary of non-conformities

| Corrective Action Requests (CAR)*  | Type     | Resolution due date | Date closed out |
|--|----------|---------------------|-----------------|
| 2019 - 3.8: CAFOD has not yet demonstrated sufficient capacity strengthening and oversight of partners to ensure that partners are systematically protecting personal information.   | Minor    | 2022-08-04          | 2022-07-04      |
| 2022 - 4.4: CAFOD does not ensure that communities are systematically facilitated to provide feedback on their level of satisfaction with project quality and effectiveness, and that particular attention is given to the gender, age and diversity of those giving feedback. | Minor    | 2024-07-04          | New             |
| 2019 - 5.1: CAFOD has not yet demonstrated that it has undertaken sufficient capacity strengthening and oversight of partners to ensure they consult with communities on the design, implementation and monitoring of complaints handling processes.                           | Minor    | 2024-07-04          | Extended        |
| 2019 - 5.3: CAFOD has not yet demonstrated systematic capacity strengthening and oversight of partners to ensure that partners are managing complaints timely, fairly and appropriately.   | Minor    | 2022-08-04          | 2022-07-04      |
| 2019 - 5.6: CAFOD has not yet demonstrated formal oversight over partners' efforts to ensure that communities are aware of expected staff behaviour.   | Minor    | 2022-08-04          | 2022-07-04      |
| 2020 - 7.2: CAFOD does not yet systematically use learning from M&E, complaints and feedback to implement change.  | Minor    | 2022-08-04          | 2022-07-04      |
| <b>Total Number</b>  | <b>2</b> |                     |                 |

## 6. Sampling recommendation for next audit

|   |                                   |
|---|-----------------------------------|
| <b>Sampling rate</b>                                  | As per normal HQAI sampling rates |
| <b>Specific recommendation for selection of sites</b> | None                              |

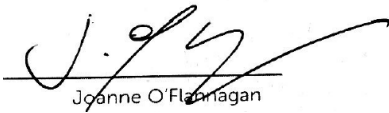
## 7. Lead auditor recommendation

In our opinion, CAFOD has demonstrated that it continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability.

Based on the evidence obtained, we confirm that we have received reasonable assurance that the organisation is implementing the necessary actions to close the minor CARs identified in the previous audit and continues to meet the requirements of the Core Humanitarian Standard.

We recommend maintenance of certification.

**Name and signature of lead auditor:**


  
 Joanne O'Flahagan

**Date and place:**

4<sup>th</sup> July 2022, Belfast

## 8. HQAI decision

**Certificate:**

Certification maintained  
 Certificate suspended

Certificate reinstated  
 Certificate withdrawn

**Next audit:** Surveillance audit before 2024/03/21


**Name and signature of HQAI Executive Director:**


  
 Joost Mönks

**Date and place:**

9<sup>th</sup> August 2022  
 Geneva

## 9. Acknowledgement of the report by the organisation

|   |  |
|---|--|
| <b>Space reserved for the organisation</b>  |  |
| Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team:<br><br><i>If yes, please give details:</i>   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| <b>Acknowledgement and Acceptance of Findings:</b><br>I acknowledge and understand the findings of the audit<br><br>I accept the findings of the audit  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Name and signature of the organisation's representative:</b><br><br><br><br>Rhea Tariq, Deputy International Programmes Director | <b>Date and place:</b><br><br>17/08/22<br>London   |

## 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\*

| 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.   | <p><b>Score 0:</b> indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> major weakness;</li> <li>• <b>Certification:</b> 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.   | <p><b>Score 1:</b> 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:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> minor weakness</li> <li>• <b>Certification:</b> minor non-conformity, leading to a minor corrective action request (CAR).</li> </ul> |
| 2      | Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.  | <p><b>Score 2:</b> indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> observation.</li> </ul>   |
| 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.   | <p><b>Score 3:</b> indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> conformity.</li> </ul>  |
| 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. | <p><b>Score 4:</b> indicates an exemplary performance in the application of the requirement.</p>  |

\* Scoring Scale from the CHSA Verification Scheme 2020