

# Diakonia Sweden

## Initial Audit STAGE 2 – Summary Report IA 2020-08-03

### 1. General information

#### 1.1 Organisation

Type	Mandates	Verified	
<input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input checked="" type="checkbox"/> International <input type="checkbox"/> Federated <input type="checkbox"/> With partners	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy	
<b>Head office location</b>	Stockholm, Sweden		
<b>Total number of country programmes</b>	25	<b>Total number of staff</b>	265

#### 1.2 Audit team

<b>Lead auditor</b>	Birgit Spiewok
<b>Second auditor</b>	Elisabeth Meur
<b>Third auditor</b>	-
<b>Observer</b>	Désirée Walter
<b>Expert</b>	-
<b>Other</b>	-

#### 1.3 Scope of the audit

##### CHS Verification Scheme

Audit Stage	Certification	Independent Verification	Benchmarking	Other
<b>Initial audit (IA)</b>	<input checked="" 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 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"/>

#### 1.4 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
Egypt	No	Colombia	Programme size and sensitivity issues	Remote
Burkina Faso	Yes			Remote
Mali	Yes			Remote
Sri Lanka	No	Bangladesh	CHS self-assessment was done in Sri Lanka in 2017(2018)	Remote
Peru	Yes			Remote

**Any other sampling performed for this audit:** It is to be noted that due to the exceptional situation related to the COVID-19 pandemic, which has prevented the audit team from carrying out planned site visits, a revised audit plan has been pre-discussed with Diakonia Sweden prior to conducting the stage 2 of the initial audit (May 2020) as below:

All planned site visits (HO, Colombia, Bangladesh) had to be cancelled and conducted remotely. The audit team remotely interviewed staff at Regional Offices, Country Offices and Partner Organisations.

Given the restrictions in the capacities of Diakonia Sweden’s partners, it was not possible to arrange remote interviews with community members. Proposed interview lists were adapted to accommodate staff who were able to participate during the time of this audit. In addition, a remote assessment of the Regional Office Nairobi, Kenya was added in order to get a broader sample of Regional Offices due to Diakonia Sweden’s decentralized structure.

The auditors have taken into account all the available evidence presented to us during the audit and have also used the information provided by the CHS Alliance verified self-assessment of Diakonia Sweden. The audit confirmed that Diakonia Sweden has internal quality assurance and control systems in place to address requirements of the CHS, and other strategic commitments. Despite the limitations inherent to the exclusive use of remote auditing methodologies for the present process, the auditors are confident that the evidence obtained is sufficient and appropriate to provide a basis for their conclusions and recommendation.

Additional mitigation measures have been recommended that should be taken in the next audits. See section 6 for recommendations on sampling and onsite visit at the next audits.

*\*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
Latin America Regional Office, Bogotá, Colombia	18/05-21/05/2020	Remote
Country Office, Colombia	18/05-21/05/2020	Remote
Country Office Peru	02/06-08/06/2020	Remote
Country Office Mali	01/06-03/06/2020	Remote
Country Office Burkina Faso	01/06-09/06/2020	Remote
Country Office Bangladesh	18/05-19/05/2020	Remote
Africa Regional Office, Nairobi, Kenya	02/06-03/06/2020	Remote

### 2.2 Interviews

Position / level of interviewees	Number of interviewees	Onsite or remote
<b>Head Office</b>		
Management	5	Remote
Staff	20	Remote
<b>Country Programme(s)</b>		
Management	7	Remote
Staff	20	Remote
Partner staff	8	Remote
Others (specify)		Remote
<b>Total number of interviews</b>	60	

### 2.3 Consultations with communities

Type of group	Number of participants
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	Female	Male
<b>NONE</b> – DUE TO THE EXCEPTIONAL SITUATION RELATED TO THE COVID-19 PANDEMIC, ALL SITE VISITS WERE CANCELLED AND POSTPONED TO THE MA1 IN JULY 2021.		
<b>Total number of participants</b>	--	--

### 2.4 Opening meeting

<b>Date</b>	2020/03/31
<b>Location</b>	remote
<b>Number of participants</b>	27
<b>Any substantive issues arising</b>	-

### 2.5 Closing meeting

<b>Date</b>	2020/06/12
<b>Location</b>	remote
<b>Number of participants</b>	14
<b>Any substantive issues arising</b>	-

#### De-briefing Meeting HO

<b>Date</b>	2020/04/07
<b>Location</b>	remote
<b>Number of participants</b>	27
<b>Any substantive issues arising</b>	-

#### Briefing for all Field Sites

<b>Date</b>	2020/05/15
<b>Location</b>	remote
<b>Number of participants</b>	15
<b>Any substantive issues arising</b>	-

## 3. Background information on the organisation

### 3.1 General

Diakonia Sweden is a Swedish faith-based organisation founded in 1966 by five Swedish churches. It is a multi-mandate organisation involved in development, humanitarian emergency response, and advocacy. It supports and works with around 403 partner organisations in 4 regions (Asia, Africa, Middle East, Latin America), and in 25 different countries.

Diakonia Sweden has a vision of a world where all people live in dignified circumstances in a just and sustainable world, free from poverty. Diakonia Sweden's mission and overall goal is to change unfair political, economic, social and cultural structures that generate poverty, inequality, oppression and violence. Diakonia Sweden is guided by two principles: the Strategy for Change and a Rights Based Approach. The strategy 2015-2020 is organized around six intervention areas with respective operational expense: Human Rights (20%), democracy (30%), gender equality (16%), social and economic justice (24%), conflict and justice (7%), and emergency response and disaster resilience (3%).

Diakonia Sweden has several institutional donors like Sida (Swedish International Development Cooperation Agency), the EU, Radiohjälpen, and the Swedish Postcode Lottery. In 2018, 73% of Diakonia Sweden's income came from Swedish state funding via Sida and other Swedish agencies, and the Swedish Ministry of Foreign Affairs through Swedish embassies. Diakonia Sweden's revenues amounted to almost SEK 517 million (approximately USD 58 millions) and SEK 476 (USD 54) million were devoted to operational expenses.

Diakonia Sweden is member of the Swedish Fundraising Council, Svenska Postkodföreningen (which administers the proceeds from the Swedish Postcode Lottery that go to charitable organisations) and the global ACT Alliance network. At European level, it is also part of Eurodad and takes part in Concord. Diakonia Sweden is, amongst others, a member of the Core Humanitarian Standard, Charter for Change, the Swedish Humanitarian Network, the Swedish

Network for Disaster Risk and Resilience, and the Global Network of Civil Society Organisations for Disaster Reduction (GNDR).

**3.2  
Governance  
and  
management  
structure**

Diakonia Sweden has a decentralized organisational structure, with Head Office (HO) in Stockholm (44 employees), 4 regional offices (RO) that support the 23 country offices (COs) (221 employees in total at RO and CO levels) with overall coordination and administration (2018). Diakonia Sweden mainly works through local partners based on a contractual agreement - except for advocacy and resources mobilization in Sweden and their IHL programme which is self-implemented. Regarding the governance structure, there are 5 main levels of responsibility: the General Assembly (GA), the Board of Directors (BoD), the HO, the RO, and the CO.

1. The GA (appointed by the founding churches) is the highest decision-making body. It is responsible for, and has the authority to decide on statutes, general policy and planning of activities and the regions, countries and themes that shall be prioritised.

2. The BoD is ultimately responsible for Diakonia Sweden's activities. It makes decisions on strategy, the overall operational plan and budget in accordance with the guidelines drawn up by the Annual GA. The BoD appoints Managers at HO.

3. At HO level, the Secretary General (SG) ensures that activities are carried out in accordance with the guidelines set by the GA and the BoD. The SG delegates authority and responsibility to the Directors at HO for the various intervention areas (5 directors). Each Director manages, develops, and coordinates their department's work on the basis of established guidelines, policy, strategy, planning and other steering documents: Administration and Finance, Fundraising and Communication, HR, International, and Policy and Advocacy. The International Director manages, develops and coordinates the development cooperation and humanitarian work and delegates responsibility and authority to the Regional Directors.

4. ROs support COs, providing quality checks on applications and reports. While a country strategy is always required, a regional strategy is required only when relevant. The Regional Director is responsible for budget and budget follow up in the region in accordance with the Board decisions on operational and budget frameworks. The regional director approves on country and programme level (budget, strategy and programme contracts) for all countries. In model 2 countries, the regional director also approves allocations and partner contracts. The Regional director has general follow up of the execution level of the programmes in the region.

5. At CO level, each CO is responsible for designing and implementing a process that will produce a country strategy, for the Regional Director to approve (PME Handbook). The Country Director manages and develops operations and signs agreements with partner organisations (POs). (S)he provides Head Office with updated and relevant information about the situation in the country and among partners. The Country Director is responsible for the compliance of signed agreements in the country.

Please find a diagram of Diakonia's Organisational Development Processes below Section 3.

Regarding rapid humanitarian response, a specific and simplified 4 steps decision making process is used under the supervision of and upon approval by the humanitarian advisor and the International Director at HO. Only "strategic humanitarian countries" and pre-selected partners with an updated humanitarian contingency plan are eligible to engage in humanitarian work.

**3.3 internal  
quality  
assurance  
systems**

Diakonia Sweden has monitoring, evaluation and audit processes in place: The frequency of monitoring depends on the monitoring plan established with partners and Diakonia Sweden's internal practice stipulates, as a minimum level of frequency, one field visit per year for the length of the project's execution, although a greater number of visits are recommended. The data collected by these methods are recorded in the Monitoring Log. At CO level, the project officer carries out the monitoring process in coordination with the financial officer. The "Evaluation guidelines" are applicable at all levels (project, program, strategy) and all projects have to be evaluated at least every five years. An Evaluation plan is elaborated and agreed upon with partners for each programme. The evaluation plan is then registered and uploaded in FIXIT.

Audit of partner's activities is an integral part of Diakonia Sweden's control and support system. Requirements differ depending on the type of funding (project, program or core funding), but all

grants received are to be audited annually. The audit requirements are stated in each contract between Diakonia Sweden and the partner and Diakonia Sweden's audit guidelines are a mandatory appendix to the contract. The auditor shall be external, independent and certified or Authorized Public Accountant connected to the International Federation of Accountants. The audit assesses the finances of partner's project, program or organisation (when core funding), and checks the coherence between finances and activities. When the audit is finished and delivered to Diakonia Sweden, a Management response has to be delivered and an Action plan with deadlines should be submitted to Diakonia Sweden. The regional director is responsible for this while, for global grants, it is the International director. Only an approved audit may result in a payment for a continuing project.

Diakonia Sweden reports and follows up on identified risks to strategies, programs, projects and grants in FixIT. Risks are scored and categorized as contextual or operational risks. Risk analysis and management is considered a responsibility of every employee and board member at all levels of the organisation (Global Risk Matrix 2020). The formal identification and follow up is done at strategy level which means that country strategies and regional strategies have their own risk matrices. "The Global Risk Matrix" responds to the Global Strategy and identifies responsibilities at Head Office level. The Board annually take a position on a risk analysis and, based on it, establishes an organisation-wide risk management plan. Risk analysis are also carried out at RO and CO levels, but it is not systematically required for POs.

In terms of cost, for grant application, the budget template estimates 5% of the net total direct program costs for quality assurance management, including annual financial auditing, monitoring and evaluation. For core funding and programme funding, Diakonia Sweden will finance an annual organisational audit. For project funding, the budget shall include costs for yearly audits of the project according to the Diakonia Sweden Audit Guidelines.

The Regional Office monitors quality assurance and reports from the field offices. The partners are given support on institutional capacity training framework and interpretation of accounting, reporting and auditing standards and guidelines.

### **3.4 Work with partner organisations**

Diakonia Sweden supports and works with more than 400 implementing partner organisations worldwide and with the exception of its advocacy programmes and resource mobilisation in Sweden and its IHL programme does not implement itself.

The organisation is committed to long-term partnerships. Partnerships are guided by the principle of "Good Donorship and Partnership" which states the organisations commitment to align with each partner organisations' specific conditions, emphasize capacity-building and long-term partnerships, give priority to core funding and work based on mutual transparency and accountability. Becoming a Diakonia Sweden partner organisations requires several steps, which are describes in the General Conditions, an annex to Diakonia Sweden's PME handbook. including a partner capacity assessment and partner capacity planning.

The organisation provides core funding, programme and project funding, and contracts are signed by both parties. These contracts include several annexes which are also mandatory to comply with: Diakonia Sweden's Code of Conduct, Procurement Guidelines, Anti-corruption policy and Audit Guidelines, but not complaints-handling procedures or Child Safeguarding policy. Compliance with these policies and guidelines and all other contractual obligations including reporting is monitored by the relevant Country Office and this is supervised by the relevant Regional Office.

While a formal risk analysis is not required from partners, the monitoring of risks at RO and CO levels is done in dialogue with partners. The principle is established that Diakonia Sweden can participate in or directly evaluate the activities . Diakonia Sweden is entitled to visit, audit and/or evaluate every project financed fully or partly by funds from Diakonia Sweden. Both visits and audits/evaluations shall be preceded by consultations with the Organisation.



## 4. Overall performance of the organisation

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

Diakonia Sweden has a well-developed quality assurance system in place, built on a Results Based Management (RBM) approach.

The management structure of Diakonia Sweden is outlined in various process descriptions including the Order of Delegation, which defines roles and regulations at the different levels of the organisation. The organisation also has a well-developed HR system including performance management and staff capacity building. Its Financial controlling system allows the managements of hundreds of grants from different donors, implemented by a large variety of partner organisations. These systems are documented and in place and staff interviewed at HO, RO and CO level state that they are trained in these systems, use them and rate them as practical and easy to apply.

The systematic analysis of results and risks cover all the processes at all levels (CO, RO and HO) to ensure, respectively: (i) effectiveness and efficiency of operations, (ii) reliability of reporting and (iii) compliance with applicable laws and regulation. The organisation has several steering documents such as the PME Handbook, the Accountability Framework, the Guidelines for Evaluations, as well as practical tools, formats, instructions and routines e.g. the Monitoring Log, Assessment New Partners, the Global Risk Matrix, Audit FAQ. These documents are accessible for all staff in the intranet, Voicelt. In addition, the project handling system FixIt ensures the overall access to and the consistency of quality assurance mechanisms.

### 4.2 Overall performance of how the organisation applies the CHS across its work

Diakonia Sweden shows commitment to accountability and transparency and applies the commitments of the CHS. It puts communities and rights holders at the centre of its long-term partnerships with CSOs combining development, humanitarian and advocacy programmes. These programmes and projects are based on participation of rights holders and the approach taken is mostly rights based (apart from the humanitarian projects which are needs based).

Interviews with staff at Head Office, Regional Offices and Country Offices confirm overall a good level of performance in the application of the CHS.

Diakonia Sweden has shifted to a decentralized structure with responsibility for programmes being handled at regional and country offices. This makes it more complex to ensure systematic

application of its processes and procedures at all regional and country offices. Diakonia Sweden has weaknesses mainly around the mechanisms to promote the CHS amongst its 400+ partner organisations, support them in working towards compliance with the CHS and apply consistent due diligence processes. The systematic application of the requirements of the CHS at PO and community level will have to be further assessed during the next surveillance audit, when travelling to project sites and direct interviews with communities and rights holders become possible again.

#### 4.3 Overall performance on PSEA

Diakonia Sweden has policies, guidelines and procedures to prevent sexual exploitation and abuse. There is a clear organizational commitment to protection from sexual abuse and a zero tolerance of sexual harassment (Annual Report 2018). Compliance with Diakonia Sweden's Code of Conduct or an equivalent from PO, is mandatory for all staff, volunteers, interns, consultants, activists, journalists, photographer and other people travelling for Diakonia Sweden and all elected Diakonia representatives (CHS 8.7). The CoC defines unacceptable behaviour including harassment, sexual exploitation and abuse. It is stated that everyone working for, or representing, Diakonia Sweden has an obligation to prevent misconduct, including sexual exploitation and abuse. All staff and POs interviewed confirm that they have signed the CoC, attended training and understood the consequences of not adhering to these rules.

In addition, Diakonia Sweden has both a CIRM policy and Complaints and Incidents Guidelines. Each employee is prepared to prevent misconduct thanks to a mandatory eLearning module on CRM, which is part (with the CoC training) of the onboarding process. Thanks to the gender mainstreaming area, staff and POs are aware of the vulnerabilities of women. The Accountability Framework defines qualitative participation as one of their leading commitments and key principles, including gender and diversity. Staff are aware of the policies and guidance related to PSEA.

However, some weakness could potentially endanger PSEA management. Indeed, it remains unclear how POs identify and act upon sexual exploitation and abuse by staff (3.6, 5.5) but also how they systematically communicate to communities and people affected by crisis about expected behaviour from staff (4.1). The organisation does not provide its COs with any general documents, guidance or tools on how to provide information to communities on staff behaviour. Regarding the CIRM, it is not mandatory for PO to have either their own complaints-handling system in place or to ensure that community members has access to DS' CIRM (5.4).

#### 4.4 Overall performance on localisation

Diakonia Sweden shows a strong commitment to localisation since it implements most of its programmes through more than 400 local partners. The strengthening of local capacities is a key priority of Diakonia Sweden. and it is part of its identity as a "capacity builder". Thanks to the fact that Diakonia Sweden's partners work mainly in development but can, under certain circumstances and according to selecting criteria, implement humanitarian projects, there is not only a continuity between humanitarian and development activities but also a strengthening of local partners capacities as first responders (3.3). Participation is a key principle of Diakonia Sweden works and reference to this can be found throughout all their policy and guidance documents (4.3). All POs have confirmed that they discuss and include communities in the design, the implementation, and follow-up of their projects. Many POs state that they work with local focal points and local committees enabling the development of local leadership. At a strategic level, Diakonia Sweden engages with duty bearers working towards achieving the Sustainable Development Goals; as such the organisation is committed to ensuring that its programmes complement those of national and local authorities. In project proposals, POs outline how they coordinate their response with other stakeholders including national and local authorities. Protection of the environment is a mainstreamed area in all programmes and projects and is often a project sub-objective or overall goal (9.4).

Thanks to the long-term presence of some POs in certain areas, they are in a good position to understand the context and beneficiaries and tend to build trustful relationships with them. Nevertheless, this can, to some extent, hamper the systematic application of some procedures. For instance, regarding an appropriate communication with right holders, there are no policies or guidance in place to ensure that this is done systematically across all POs and with all communities (4.2). Concerning needs assessment and assessment of capacities of specific vulnerable and marginalized groups, it seems, from most POs interviews and some COs, that they are more based on personal knowledge and understanding rather than on objective assessments (1.2).

**4.5 Overall performance on gender and diversity**

The “Global Policy” and the “Accountability Framework” sets out the organisation's commitments to rights holders with a focus on disempowered and marginalised people and their communities. Diakonia Sweden supports its partners in taking aspects of gender and diversity into account. Also, gender is a mainstreaming area. A gender perspective permeates all levels of the organisation, Human Resources policies (8.5), programmes and projects. Gender is part of narrative reports, assessments, monitoring and evaluation procedures. For instance, in the monitoring log, the impact of the project on gender is systematically analysed. This gender perspective is also endorsed by all POs that have been interviewed confirming their awareness of the importance of gender considerations. While humanitarian projects adopt a needs-based approach including systematically gender and age in needs assessments, development and advocacy projects rely on a right-based approach, targeting specific groups according to ad hoc criteria. On practice, and due to the fact that there is no formal commitment to the systematic collection of disaggregated data by age and abilities for all programs, Diakonia Sweden has difficulties to ensure that diversity is consistently considered in all programmes and projects.

**4.6 Organisational performance against each CHS Commitment**

Commitment	Strong points and areas for improvement	Feedback from communities	Average score
<p><b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant</p>	<p>Policies and guidance commit Diakonia Sweden (DS) to and support the implementation of the principle of impartial assistance based on needs and capacities of communities and people affected by crisis. Diakonia Sweden has procedures and tools in place, such as the risk matrix, contingency planning, and humanitarian project design, ensuring regular context analyses at each level of the organisation. The pandemic situation has also shown that DS. is an open, responsive and flexible organisation (see 2.7). All POs interviews confirm that DS. is able to adapt and is listening and supporting partners. While policies, such as the accountability framework, exist regarding the necessity to take into account disempowered and marginalized people, there are no procedure requiring the systematic collection of disaggregated data by age and abilities for all programmes. Some uncertainties remain also when looking closely at methods of analysis and assessment. For instance, it remains unclear how exactly POs “continuously and objectively” analyse context and stakeholders and how capacities and vulnerabilities of different demographic groups are taken into account in needs assessments (see 2.3).</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.3</p>
<p><b>Commitment 2:</b> Humanitarian response is effective and timely</p>	<p>Diakonia Sweden has solid processes and tools in place, such as the PME handbook and its annexes to ensure that design, implementation and monitoring &amp; evaluation of programmes and projects lead to effective and timely response. The specifics of humanitarian work are addressed in a special section of the handbook and by pre-selecting Country Offices and POs as potential humanitarian implementers, the organisation ensures that humanitarian responses are in line with organisational capacities. Some, but not all interviewed partners confirmed the knowledge and use of international technical standards. However, Diakonia Sweden does not require its POs to submit impartial needs assessments (see 1.2) based on pre-defined criteria; unmet needs are not identified at this stage in a systematic manner. Neither are there procedures or tools in place to record unmet needs and how these are referred (2.3).</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.7</p>

<p><b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects</p>	<p>Capacity building is at the core of Diakonia Sweden’s programmes. Indeed, as stated in the Global Strategy 2015-2020, capacity building is prioritized in all programmes and adapted to partners’ needs, identified through a participatory process. There are procedures and tools in place ensuring and monitoring the strengthening of organizational capacities of partners. All POs interviewed have confirmed that they were offered trainings, peer-learning activities, etc. strengthening some of their skills and knowledge in different domains. POs are also encouraged to support and facilitate marginalised groups in local community and leadership roles. Diakonia has developed a program on gender and resilience and its partners implement several resilience projects. Procedures exist to avoid unintended negative effects and to manage internal risks (see 5.4). POs confirm that they have signed a CoC, including prevention from SEA, a Children Safeguarding policy and anti-corruption policy.</p> <p>A conflict sensitivity (a mainstreamed area) assessment allows the organization to be aware of its impact on conflict. While the risk of corruption is systematically included, the risk analysis covers only a limited number of other operational risks (3.6). Therefore, the risks in the six areas mentioned in the CHS (3.6) are not systematically identified and acted upon. Regarding data protection, while there are specific rules and tools in place concerning some specific documents, such as images, and populations, such as children, there is no overarching system and procedure on protection of personal data. There is no clear disseminated rules and knowledge among staff and POs about how to process and protect personal data (3.8). While POs are those who collect most of personal data from people at risk, they have no guidance and procedures about how to protect personal data. The organisation does not require its POs to adhere to personal data protection principles either.</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.5</p>
<p><b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback</p>	<p>Diakonia Sweden bases all programme goals on those needs as expressed by communities and rights holders. Communication, participation and feedback is ensured via continuous interaction between staff and POs including field visits, workshops, assessment and planning activities etc. However, it remains unclear if and how information about the organisation, the principles it adheres to, how it expects its staff to behave, the programmes it is implementing and what they intend to deliver is provided to communities. Diakonia Sweden does not provide its COs with any general documents, guidance or tools on how to systematically do this. (4.1) Diakonia Sweden works with long-term partnerships based on experience of working together, an assumption of trust and the understanding that their partners are community-based organisation that ensure appropriate communication with the rights holders. Diakonia Sweden staff regularly monitor partner activities and get feedback from communities. However, there are no policies or guidance in place to ensure that feedback is gathered systematically across all POs and with all communities (4.2).</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.7</p>

<p><b>Commitment 5:</b> Complaints are welcomed and addressed</p>	<p>Diakonia Sweden has a CIRM system in place, welcomes and accepts complaints and manages these timely, fairly and appropriately. The organisation publishes an annual report on the complaints it has received through its system, which in 2019 have only been few cases. The report does not include information about complaints received by POs directly.</p> <p>Diakonia actively encourages its PO to have their own CIRM and supports them in doing so through trainings and capacity building. However, it remains unclear how a culture of welcoming complaints is promoted with POs (5.5). Also, Diakonia does not require its POs to have their own CIRM e.g. as part of their contractual obligation. Although staff at RO and COs confirm that they work with each PO on CIRMs, Diakonia lacks an overall strategic and operational approach aiming to ensure that all communities have access to adequate complaints handling mechanism.</p> <p>While Diakonia has a clear CoC in place and this is confirmed by staff and POs alike, due to COVID19 travel restriction, it was not possible to confirm that communities and rights holders are aware of the rules of behaviour that staff should abide by (5.6).</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>1.9</p>
<p><b>Commitment 6:</b> Humanitarian response is coordinated and complementary</p>	<p>Diakonia Sweden has procedures in place to do and use stakeholder analyses, to ensure that the programmes complement those of national and local authorities and other stakeholders and to avoid duplication. The organisation is committed to coordination and some, but not all interviewed partners confirm that Diakonia takes part in some humanitarian coordination fora.</p> <p>Diakonia Sweden`s work with POs is governed by clear agreements and all POs confirm that these are fair and respectful towards the partners mandates, obligations and independence. These agreements are a focus of Diakonia Sweden and are part of a larger framework of how the organisation works with POs.</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.8</p>
<p><b>Commitment 7:</b> Humanitarian actors continuously learn and improve</p>	<p>Diakonia Sweden promotes a learning culture throughout the organisation. A rubric on “lessons learned” is required in reports and activity by activity in the logical framework. In the “PME handbook” and in the “Accountability framework”, DS. supports continuous learning and improvement based on monitoring and evaluation projects/programs. While, it is clear from interviews with staff and POs that DS. learns on the basis of monitoring, evaluation and feedback, evidences were not provided to us about how complaints received by POs have been recorded, documented and have led to changes or learning (see 5.5).</p> <p>Internally, many different platforms exist to exchange experience and knowledge, such as spaces on Teams but also regular meetings like the General Assembly of POs that include discussion and feedback from HO, RO, and CO, but also sharing experience at each level of the organisation. Staff and POs interviewed confirm the existence of different ways and channels of communication that seem appropriate and useful. POs state that they are also in close contact with RHs and continuously discuss with them, receiving their feedback and</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.7</p>

	<p>adapting their activities accordingly. However, there is no conclusive evidence about how DS. shares learning and innovation with communities. Externally, DS. cooperates with national, regional and international networks through membership and exchanges of experience (see 6.4).</p>		
<p><b>Commitment 8:</b> Staff are supported to do their job effectively, and are treated fairly and equitably</p>	<p>Diakonia Sweden has clear policies and procedure in place to ensure that staff are supported to do their job effectively and are treated fairly and equitably. It is very noteworthy that the organisation has a very low turn-over and many staff are part of Diakonia Sweden for decades, being continuously supported and promoted in their professional development. All staff confirm that staff policies are fair, that they understand and sign a CoC and have up to date Job descriptions. The development and roll-out of the Global HR policy is an exceptional way of ensuring that staff policies and procedures are fair, transparent and non-discriminatory, promoting a standard that is above average in the sector.</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>3.1</p>
<p><b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose</p>	<p>Diakonia Sweden has policies and procedures in place that ensure that resources are managed and used responsibly for their intended purpose. Diakonia Sweden addresses the issue of corruption through policies and procedures (9.6c). The CIRM includes corruption and fraud case management and the annual report provides evidence that the CIRM is being used to address corruption and fraud issues and that the organisation takes appropriate action. A number of steps in management are taken throughout the project cycle to address corruption, however, it is not clear that Diakonia Sweden systematically ensures that POs comply with anti-corruptions rules and how systematically Diakonia Sweden checks the financial systems and reports of POs.</p>	<p>The auditors were unable to conduct the site visit to gather feedback from partner organisations and from communities due to COVID-19 disruptions</p>	<p>2.8</p>

## 5. Summary of non-conformities

Corrective Action Requests (CAR)*	Type	Resolution due date
2020 - 1.5: There is no policy and tools that formally commits the organisation to collect systematically disaggregated data by age and abilities for all programmes.	Minor	2022/08/03
2020-3.8: Diakonia Sweden does not have a system in place to safeguard any personal information collected from communities and people affected by crisis that could put them at risk	Minor	2022/08/03
2020-4.1: Diakonia Sweden does not ensure that information is systematically provided to communities about expected staff behaviour.	Minor	2022/08/03
2020 - 5.4: Diakonia Sweden does not ensure that their partner organisations enable communities and people affected by crisis to have access to documented complaints-handling processes	Minor	2022/08/03
2020-5.5: The organisation does not have robust due diligence processes to ensure that POs welcome complaints and take these seriously.	Minor	2022/08/03

\* *Note: The CARs are completed by the audit team based on the findings. The audited partner is expected to respond with a Management Response for each CAR to HQAI within 15 days of receipt of the report before a certificate is issued (reference: HQAI Procedure 114).*

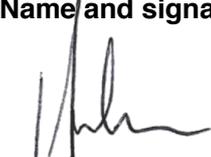
## 6. Sampling recommendation for next audit

<p><b>Sampling rate</b></p>	<p>The first Maintenance Audit (MA1) will need to include site visits in at least one country to allow data collection at partner organisation and community levels.</p> <p>As mentioned in page 2 of the present report under the Sampling section the site visit to Colombia was postponed to the Maintenance Audit 1 in July 2021.</p> <p>Due to the ongoing pandemic and subsequent travel restrictions and security concerns, it is still unclear how this can be accomplished, and any travel plans will need to be discussed and agreed upon between Diakonia Sweden and HQAI in the last quarter of 2020.</p>
<p><b>Specific recommendation for selection of sites</b></p>	<p>Selection of project sites that cover all three mandates of Diakonia.</p>

## 7. Lead auditor recommendation

<p>In our opinion, Diakonia Sweden conforms with the requirements of the Core Humanitarian Standard on Quality and Accountability. We recommend certification.</p>	
<p><b>Name and signature of lead auditor:</b></p>  <p>Birgit Spiewok, Lead Auditor, HQAI</p>	<p><b>Date and place:</b></p> <p>13 July 2020 Berlin, Germany</p>

## 8. HQAI decision

<p><input checked="" type="checkbox"/> Issued <input type="checkbox"/> Preconditioned (Major CARs)</p>	<p>Start date of the certification cycle: 2020/09/09</p>
<p><b>Next audit:</b> Maintenance Audit to be completed before 2021/09/09</p>	
<p><b>Name and signature of HQAI Executive Director:</b></p>  <p>Pierre Hauselmann</p>	<p><b>Date and place:</b></p> <p>9<sup>th</sup> September 2020 Geneva</p>

## 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:  <i>If yes, please give details:</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Acknowledgement and Acceptance of Findings:</b>  I acknowledge and understand the findings of the audit  I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name and signature of organisation's representative:</b>  	<b>Date and place:</b> 2020-09-24 Stockholm

## 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