



CAFOD

CHS Mid-term certification audit Report

CAFOD-MTA-2018-004

Date: 2018-07-03

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## 1. General information

Organisation			
Type	<input type="checkbox"/> National <input checked="" type="checkbox"/> International <input type="checkbox"/> Membership/Network <input type="checkbox"/> Federated <input type="checkbox"/> Direct assistance <input checked="" type="checkbox"/> Through partners		
Mandate	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input checked="" type="checkbox"/> Advocacy		
Verified Mandate(s)	<input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy		
Size (Total number of programme sites/ members/partners – Number of staff at HO level)	40 countries 400 partners	Sampling Rate (Country programme sampled)	2 countries - Ethiopia: 3 programmes - Kenya : 3 programmes
Lead auditor	Claire Boulanger	Auditor	Liliane Bitong-Ambassa
		Others	
	Location	Dates	
Head Office	Remote visit	March 12 and 14, 2018	
Programme Site(s)	Ethiopia	Feb. 20-24, 2018	
	Kenya	Feb. 24-March 2, 2018	

## 2. Schedule summary

### 2.1 Verification Schedule

Name of Programme sites/members/partners verified	Location	Mandate (Humanitarian, Development, Advocacy)	Number of projects visited	Type of projects
<b>Ethiopia</b>				
Brothers of Good Work	Addis Ababa	Development	1	HIV Aids
Timret Lehiwot	Addis Ababa	Development	1	HIV Aids and women empowerment
WISE	Addis Ababa	Development	1	Economic Empowerment of women
<b>Kenya</b>				
Caritas Isiolo	Isiolo	Humanitarian/ Development	2	Integrated food security project
Diocese of Kitui	Kitui	Humanitarian / development	1	Integrated food security project
Assumption Sisters of Nairobi	Nairobi	Development	2	HIV AIDS programme

### 2.2 Opening and closing meetings

#### 2.2.1 Remote visit of Head Office:

	Opening meeting	Closing meeting
	Interviews took place remotely / no opening meeting planned.	Interviews took place remotely / no closing meeting planned.

#### 2.2.2 On-site visits at Programme Site(s):

	Opening meeting	Closing meeting
<b>Ethiopia</b>		
Date	Feb. 21, 2018	Feb. 23, 2018
Location	Addis Ababa	Addis Ababa
Number of participants	23	2 (top management, as beyond office hours).
Any substantive issue arising	<p>Is CHS applicable to development as well as to humanitarian?</p> <p>What is the merit of being certified?</p> <p>What are the next steps in the audit cycle?</p>	<p>Findings confirmed CST perception.</p> <p>Complaints mechanisms and child protection were discussed.</p>

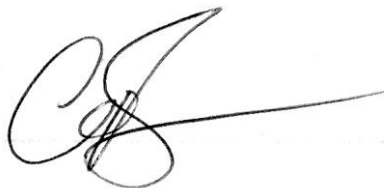
	<p>Is it possible to lose certification? What is the appeal process?</p> <p>How can the sampling reflect the entire organisation?</p> <p>Is certification compulsory?</p> <p>How does certification apply to a partnership organisation?</p>	
<b>Kenya</b>		
Date	Feb. 26, 2018	Closing meeting did not take place.
Location	Nairobi	Nairobi
Number of participants	24	0
Any substantive issue arising	No issue / question raised. Opening meeting came down to a short presentation of the audit, as part of a larger team meeting the auditors did not take part in.	Country Rep could not make time for an interview during that week and was travelling on the last official day of the audit. No alternative plans had been made for the closing meeting.

### 3. Recommendation

In our opinion, CAFOD has not implemented the necessary actions to close all the minor CARs identified in the previous audit and does not continue to conform with the totality of the requirements of the Core Humanitarian Standard. We do not recommend maintenance of certification.

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

Lead Auditor's Name and Signature



Claire Boulanger

Date and Place: Paris,  
May 23, 2018

## 4. HQAI Quality Control

<b>Quality Control by</b>	Elissa Goucem Pierre Hauselmann
<b>Follow up</b>	
First Draft	2018-04-12
Final Draft	2018-07-03

## 5. Background information on the organisation

### 5.1 General

Catholic Agency for Overseas Development (CAFOD), established in 1962, is the official overseas development and relief agency of the Catholic Church in England and Wales. CAFOD acts as part of the global Caritas network, a federation of approximately 160 Catholic relief and development agencies and works in 4 main thematic areas: Sustainable Development, Disaster and Emergency Response, Campaigning and Advocacy, and (in the UK), Education. CAFOD works in approximately 40 countries worldwide.

In the wake of “Laudato Si”, a pivotal document for CAFOD, the organisation has translated localisation and sustainability into accentuated focus on partners, proactively working on their financial growth and sustainability as well as on the development of their expertise. Ultimately, CAFOD’s goal is to address the root causes of poverty in a context of growing environmental issues, which call for a profound shift in modes of intervention. For CAFOD, shifting modes of intervention has meant placing finance and expertise as close as possible to the field. As a result, CAFOD has downsized its senior management teams by 25% over the last 3 years, while protecting grants to partners and reducing some of its expertise held at Head Office (e.g. HIV/AIDS).

CAFOD’s senior management group is developing strategies to grow income, strengthen partners and communities in sustainable and resilient ways, and prioritise local capacity strengthening within the wider mission of the organisation. As part of this process CAFOD is working on increasing its reach to the poorest and most marginalised in ways that also respect the needs of the earth and its environments, while experimenting with new forms of funding such as social enterprise investment and local partner fundraising. These changes are guided by 4 strategic directions, that were launched by CAFOD’s leadership group (CLG) in 2016 and are reviewed on an annual basis:

- Strategic Direction 1: Demonstrating and Communicating the Quality and Distinctiveness of CAFOD’S work
- Strategic Direction 2: Growing CAFOD’s Income and Ensuring Stewardship of Resources
- Strategic Direction 3: Increasing Participation and Impact of the Catholic Community
- Strategic Direction 4: Developing more Equitable, Effective and Accountable Partnerships to Redress the Imbalance of Power at Global and National Level

As part of its ongoing development CAFOD has reviewed its standard operating procedures, and in particular the Programme Management Manual, the International Partnership Manual, and the Finance Manual and has developed substantial tools in child protection, mainstreaming of gender, resilience and protection.

Country programmes visited:

i) In Ethiopia, CAFOD is part of an integrated office associating three UK organisations into one team: CST (CAFOD-SCIAF-Trocaire). This office was created in 2006 through a consortium

agreement with a governance based on equal representation and power, under the leadership of a joint agency management group. This group meets physically twice a year (1 meeting in HO, 1 meeting in the field) and on a quarterly basis over Skype. The Country Management team (including the Country Rep) systematically participates in those meetings. Legally, CAFOD and Trocaire are registered as two separate organisations in Ethiopia, while SCIAF is officially a back donor, transferring funds to Trocaire which in turn transfers funds to CST. Yet, CST has developed a strong identity of its own, embracing best practices and strengths from each organisation. For instance, CST is using CAFOD's HR and security systems, and Trocaire's finance, IT, Programme Cycle Management and thematic division or expertise.

CST has just engaged into a new programme cycle as part of its new 4-year country strategic plan. This plan will rely on two key pillars: women empowerment and resilient communities programme (emergency, recovery, development), for which CST will continue operating in the same geographic areas, but with new partners. One significant change will come about with the completion of the HIV Aids programmes, and subsequent phasing out with partners. CST works with 30 partners in Ethiopia, half of which are secular partners.

Given CST Ethiopia is a joint office with SCIAF and Trócaire, CAFOD weaknesses pointed out in this report do not necessarily apply to CST Ethiopia, except when specifically mentioned.

ii) Since 1998, Kenya had been CAFOD's regional office for East Africa (Kenya, Uganda and Tanzania, where CAFOD has been operating since 1962). After the recent reorganisations, Nairobi became the HO of the Kenya country office, covering Kenya and Uganda. The office is currently operating under the 2013-2018 strategic plan (CAFOD East Africa Strategy), which outlines four strategic priorities: Food Security, Governance, Justice and Peace, HIV & AIDS and Humanitarian Response. CAFOD currently supports 30 partners in East Africa (Kenya, Uganda and Tanzania), which are both faith based and secular organisations. However, all partners in Kenya are faith-based organisations. The new country strategy plan is being discussed, however perspectives and details were not shared with auditors who could not meet with CAFOD's Country Representative in Kenya.

## 5.2 Organisational structure and management system

The initial audit mentioned that CAFOD had been undergoing a major restructuring of the organisation. The new leadership group was to be comprised of the executive director group heads including International Development, Emergency Response, Advocacy and Education, Parish, Participation and Volunteering, Supporter Fundraising, Finance, Information and Infrastructure, People and Performance (including HR and Planning, Performance and Evidencing) and Communications. The Head Office Accountability Advisor was on a contract tied to institutional funding and sat outside the international programmes structure.

In 2018, the CAFOD Leadership Group (CLG), which resulted from the restructuring, has become CAFOD's key decision-making body on strategic orientations as well as on quality and accountability (see most recent organogram below).

Two main changes occurred since the last audit:

- a) "T2020" (towards 2020) initiated 2 years ago, with the localisation agenda which included investing in partners (shifting the power and shifting resources) and deleting several technical advisor roles (apart from safeguarding and resilience) to have them deployed at country rather than at HO level.
- b) Creation of the Performance and Governance team in February 2018, which will comprise of 6 people and whose function is to support and co-drive organisational development and cross-organisational processes. This includes ensuring that actions required to improve in line with CHS Commitments are considered in strategy development and workplans, and progress is monitored.

As mentioned in the initial audit, CAFOD's information management and collaboration systems comprise the intranet (CAFOD Connect) and SharePoint for document management which includes thematic portals, the Cross Organisational Workspaces. CAFOD's programme information management system (WebPromise) contains programme, project and institutional contracts details such as project summaries, outcome matrices (logframes) and partner profiles (including partner assessments) organisational profiles and logframes. The document management system (SharePoint) can be accessed from WebPromise





### 5.3 Work with Partners

CAFOD works primarily through approximately 400 short and long-term partnerships with local and international organisations. Local organisations may be both secular civil society organisations, or faith-based organisations. CAFOD disaggregates partners in three categories (strategic, fellowship, project); this forms the basis for different levels of engagement and capacity strengthening support including on quality and accountability. CAFOD is currently reviewing its partners' portfolio in order to focus on the ones that make most sense to reach the poorest.

In 2017, CAFOD issued two key documents framing the organisation's partnership principles and processes: The International Partnership Manual and the Programme Management Manual. In particular, the Programme Management Manual indicates CAFOD's vision on how to implement the CHS as an organisation working through partners: *"As a partnership agency CAFOD does not deliver on CHS itself instead CAFOD's role is to support partners to deliver the CHS by having the appropriate systems, structures, policies, procedures, guidance and tools that increase quality and accountability. Specifically, CAFOD is committed to: explaining our commitment to CHS to partners; seeking understanding of how partners approach the Nine Commitments; doing whatever we can to work with them to implement CHS commitments. Our approach to this will continue to develop alongside other areas of work, especially capacity strengthening"*.

For more details on the work with partners of the organisation, see section 7 of this report.

### 5.4 Certification or verification history

April 2009 HAP Certification Audit – Head Office	May 2009 HAP Certification Audit – Programme site (Mozambique)
September 2009 HAP Certification Awarded	April 2011 HAP Mid-Term Progress Audit (MTPA) – Head Office
June 2011 MTPA – Programme Site (Kenya and Uganda)	October 2012- HAP Re-certification Audit- London/DRC
2013: People in Aid kite mark (certification)	–
2015 – Verification against the CHS	March 2016 – HQAI Certification granted

## 6. Sampling

### 6.1 Rationale for sampling

Ethiopia and Kenya were chosen out of a range of country programmes based on the following criteria:

- security,
- access,
- size,
- timeliness and balance (countries with reasonable yet average history in quality and accountability).

Sierra Leone and Nicaragua had been ruled out, as this country had been visited during the initial audit.

In Ethiopia and Kenya, programme sites were sampled in order to offer the best possible representation of the organization's work. However, time and access issues did not allow visiting programmes outside Addis Ababa, thus limiting observation on CAFOD's development programmes in Ethiopia.

#### Disclaimer:

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

### 6.2 Interviews:

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

Position of interviewees	Number of interviewees
Head Office	
<b>Management</b>	4 (remote)
<b>Programme site(s)</b>	
<b>Ethiopia</b>	
Management	4
Staff	6
Partners	4 (over 3 partners)
<b>Kenya</b>	
Management	3
Staff	5

Partners	14 (over 3 partners)
<b>Total number of interviews</b>	40

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

Type of Group	Number of participants	
	Female	Male
<b>Ethiopia</b>		
HIV Aids (Brothers of Good Work)	9	1
Women empowerment (Timret Lehiwot)	17	
Economic empowerment of women (WISE)	31	
<b>Kenya</b>		
<b>Caritas Isiolo (2 FG)</b>	18 + 7	6 + 3
<b>Caritas Kitui (1 FG)</b>	12	5
<b>Sisters of Assumption (2 FG)</b>	10 + 6	4 + 4
<b>Total number of participants</b>	110	23

## 7. Report

### 7.1 Overall organisational performance

The initial audit described CAFOD's strengths and weaknesses as follows: Partnership is core to CAFOD and working with local partners with shared values has clear advantages. These include well-informed context analysis, timely interventions, and programmes that address needs and vulnerabilities, build on strengths and capacities and are adaptable to changes in context. There is a strong trust and respect for partners' autonomy, but not necessarily a commensurate support to partners to develop strong systems to warrant the level of autonomy granted. For example, CAFOD does not necessarily support partners to develop their own strategic plans and some significant partners do not have their own strategic plans. This is mirrored across all commitments where there is limited formal work undertaken with partners on many of the CHS commitments. The result is that performance tends to be very context specific - where partners have capacity gaps, programmes (including but not limited to accountability) underperform and CAFOD does not have the resources necessary to provide the support required. Where there are strong partners, programmes perform well but it is generally difficult to gauge the extent to which this is attributable to CAFOD.

The Mid-term audit found a relatively unchanged situation, with the following adjustments:

CAFOD had robust procedures and practices on HR and resource management, and this translates in the support provided to partners on organisational capacities. In addition, CAFOD demonstrates very high capacities to coordinate with other organisations, as evidenced for example in the way CAFOD participated in creating an integrated office (CST) with other UK organisations in Ethiopia, or in the way CAFOD became one of the lead agencies of the START network at a more global

level. Partners that were interviewed during the audit unanimously praised CAFOD's qualities as a positive, constructive and reliable partner, open to dialogue and willing to support where necessary, while being very respectful of local cultures. Since the latest audit, CAFOD has decided to focus expertise and resources on the most strategic partners and worked on clarifying its partnership principles and tools. This appears in documents such as the International Partnership Manual, the Programme Management Manual or the (draft) Partner Guidance document.

However, CAFOD has not yet come to terms on dilemmas such as how to reconcile respect of the autonomy of their partners and the need for principled intervention. As a result, CAFOD is not in a position to ensure a thorough and systematic implementation of the totality of the CHS commitments. In addition, the audit found serious and connected weaknesses around complaints systems that clearly indicate a systemic gap which would require not only dedicated resources, but also strategic, focused and systematic dialogue with partners, in the framework of robust systems to ensure that CAFOD always understands how its partners implement this commitment of the CHS and is in position to work with them when gaps are identified.

The systemic weakness identified on commitment 5 during the mid-term audit leads to the issuance of a major non-conformity on commitment 5 and corrective actions are requested.

Major CARs identified during a Mid Term Audit (MTA) normally lead to a 3 months suspension of the certificate to allow the organization to correct the situation. This deadline can be extended to 6 months under exceptional circumstances, as per HQAI POI114 – Third party quality assurance policy. Recognizing that, while the efforts to be made to close the systemic gap identified are substantial and that their effect on the ground will take time to develop, the lead auditor recommends to use this possibility and give a 6 months' timeframe for addressing the Major Corrective Action Request.

Please find the details in table 7.3 below and in the Detailed Findings Annex of the audit report.

## 7.2 Status of the Corrective Action Requests of the previous audits

Corrective Action Requests /Weaknesses	Type (Minor/Major)	Original deadline for resolution	Status of CAR/Weaknesses
2016 - 3.4 CAFOD generally only produces exit strategies for country programmes and where it produces project/programme exit strategies they are not sufficiently robust to provide guidance to partners and communities on how best to manage the transition after CAFOD exits.	Minor CAR	2017-03-21	Closed as evidenced in MA 2017
2016 - 3.8 CAFOD does not systematically engage with partners on safeguarding personal information.	Minor CAR	2017-09-21	Closed See new Minor CAR 2018-3.8
2016 - 4.1. CAFOD has not developed a systematic approach to information sharing with communities and does not check how partners provide information about the principles it adheres to, the expected behaviours of staff, its programmes and deliverables.	Minor CAR	2018-03-21	Closed See new Minor CAR 2018-4.1
2016 - 5.1. Communities and people affected by crisis are not systematically consulted on the design, implementation and monitoring of complaint-handling processes.	Minor CAR	2018-03-21	Open See Major CAR
2016 - 5.2a. CAFOD's complaints mechanism has effectively been non-functional and CAFOD has not undertaken sufficient work with partners to ensure that they welcome and accept complaints	Minor CAR	2018-03-21	Closed as evidenced in MTA 2018 See Major CAR
2016 - 5.2b: CAFODs complaints mechanism is not adequately communicated to all relevant stake-holders and partners are not adequately supported to communicate their complaints mechanisms.	Minor CAR	2018-03-21	Closed See new Minor CAR 2018- 5.2b See Major CAR
2016- 5.3a. CAFOD does not ensure that complaints are managed timely and appropriately.	Minor CAR	2018-03-21	Closed as evidenced in MTA 2018 See Major CAR
2016 - 5.5. CAFOD does not promote complaints at the highest level of the organization nor uses them as a means of learning	Minor CAR	2018-03-21	Closed as evidenced in MTA 2018 See Major CAR
2016 - 7.2. CAFOD does not systematically use learning from M&E, complaints and feedbacks to implement change	Minor CAR	2018-03-21	Closed as evidenced in MTA 2018

### 7.3 Summary of Corrective Action Requests at the Mid-term audit

Corrective Action Requests /Weaknesses	Type (Minor/Major)	Status of CAR/Weaknesses	Time for resolution
2018 - 3.8 CAFOD does not systematically engage with partners on safeguarding personal information.	Minor CAR	New	1 year
2018 - 4.1. CAFOD has not developed a systematic approach to information sharing with communities and does not check how partners provide information about the principles it adheres to, the expected behaviours of staff, its programmes and deliverables.	Minor CAR	New	1 year
2018 - 5.1. Communities and people affected by crisis are not systematically consulted on the design, implementation and monitoring of complaint-handling processes and do not have systematically access to safe and responsive mechanisms to handle complaints.	Major CAR	New	6 months
2018 - 5.2b: CAFOD does not ensure that complaints mechanisms are clearly communicated to all relevant stakeholders and does not systematically work with partners about communicating complaints mechanisms to communities.	Minor CAR	New	6 months
2018 - 5.3b. CAFOD does not ensure its complaints handling mechanism prioritises the safety of the complainant and those affected at all stages nor does it work with partners to ensure the same.	Minor CAR	New	6 months
2018 - 5.4. CAFOD does not systematically work with its partners on complaints mechanisms, to ensure that they are in place, and systematically cover sexual exploitation and abuse.	Minor CAR	New	1 year
2018 - 5.6. CAFOD does not work systematically with partners to ensure communities are made aware of the expected behaviour of humanitarian staff regarding the prevention of sexual exploitation and abuse.	Minor CAR	New	2 years
<b>TOTAL Number of open CARs</b>			6 minor CAR 1 major CAR

## 7.4 Strong points and areas for improvement:

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

**Score: 3**

The initial audit found that CAFOD's policies commit to on-going contextual analysis, impartial and needs based assistance, to disaggregate data by sex and to distinguish between adults and children but not to further disaggregate by age or ability. Context is analysed at the macro level by CAFOD through country strategy plans and programme frameworks, and at the micro level through project proposal development with partners.

In the meantime, CAFOD has strengthened its programme and partners' policies and procedures in order to strengthen needs and context analysis and the support to partners in designing their strategic plans. Country offices and partners in Ethiopia and in Kenya have strategic plans in place. Programme documents outline vulnerabilities, indicating how to disaggregate data by sex, age, socio-economic factors, disabilities and various diversity factors. Processes are in place to ensure on-going contexts, needs and vulnerabilities. Programmes are adapted to changing needs, capacities and contexts.

Feedback from people affected by crisis and communities on Commitment 1: In Ethiopia and in Kenya, communities expressed satisfaction about the appropriateness of programmes with regards to their needs, vulnerabilities and capacities.

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

**Score: 2,6**

The initial audit observed that CAFOD and partner's programmes were based on local realities and primary data; they generally took communities safety and capacity constraints into account and apply the 'do no harm' approach. CAFOD has processes (such as senior management meetings during a crisis) to ensure that programme commitments are in line with organisational capacity. However, the range of partners supported exceeded CAFOD's capacity to provide an appropriate level of support, which was focused on 'selected' partners; one result was that partnership tools and assessments were not being used systematically to improve partner capacity. Monitoring of activities and outputs was reasonable; monitoring at outcome (or intermediate outcome) level was a challenge. Because CAFOD's monitoring of partners was relatively light (relative to the level required for analysis of where and why programmes are underperforming), and because of the 'familial' relationship with partners, CAFOD was comparatively slow to take decisive action on poor performance (such as more intensive support for programmes that are not delivering on objectives).

The Mid-term audit confirmed strengths identified in the initial audit; CAFOD still ensures that programs are realistic and safe for communities. Ethiopia and Kenya have strategic and contingency plans in place, supporting timeliness in the response. CAFOD uses relevant standards and good practice in designing and assessing programmes, and these are generally fit to organisational capacities. Over the last two years, CAFOD has developed new programme guidance, insisting on results-based approaches and focus on outcomes. However, monitoring remains an issue: CAFOD does not have sufficient guidance and resources to monitor partners' work and to support partners in developing their own M&E systems, leading to discrepancies on how outcomes and poor performance are identified and addressed. In addition, referral protocols are still not addressed in programmatic guidelines or in partnerships documents.



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

Communities felt that assistance was delivered on time. In Ethiopia and in Kenya, communities felt that poor performance is addressed and managed. However, interviews with some communities indicated that outcomes and poor performance are not systematically monitored and addressed.

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

Score: 2.7

The initial audit underlined that CAFOD and partners were generally strong on disaster risk reduction and in some areas worked with communities to develop risk maps to inform contingency plans. CAFOD worked very well on developing local leadership and organisations in their capacity as first responders by virtue of working through local partners. The number and quality of (project/programme) exit strategies was limited although CAFOD and partners were very cognisant of the need to promote early disaster recovery. There were no formal systems to safeguard personal information collected from communities; partners tended to hold this information and CAFOD did not provide guidance on how to protect it. CAFOD and partners were more systematic about identifying negative effects such as safety/security/dignity, and sexual exploitation and abuse than about the local economy and the environment. Staff were generally good at acting on negative effects when they were observed.

The mid-term audit confirmed that CAFOD is strong in resilience programming and continuously supports the development of local leadership as well as partners' ability to plan, prepare and respond to emergencies. CAFOD has also improved on the design of transition and exit strategies, involving partners and communities at an early stage. While CAFOD has developed various policies, principles, standards, guidance, frameworks and checklists designed to prevent programmes having negative effects and strengthen local capacities, the organization still does not have the adequate systems in place to monitor, capture, and address potential unintended and negative effects. Despite improvement in developing resources aimed at ensuring partners safeguard personal information collected from communities and people affected by crisis, practice has not yet been impacted. CAFOD staff in the field still does not systematically engage with partners on safeguarding personal information.

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

Community members generally stated that CAFOD's programmes improved their resilience. CAFOD's consistent engagement with and involvement of local government structures in Ethiopia and in Kenya also participated in improving their resilience.

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

Score: 2.4

The initial audit found that CAFOD had strong policies and practice around presenting communities ethically and with dignity. CAFOD's gender focus helped promote representation in programme design and feedback from women and girls, however there was less focus on feedback from other groups and CAFOD did not work systematically with partners on this area. CAFOD did not have clear targeting strategies to engage communities to systematically reflect their priorities and risks and this tended to be driven by staff/partner experience. Policies committed to transparency at a general level but were not sufficiently well developed to provide guidance to staff and partners regarding what information should be shared. The result was that this was quite context specific; participation of communities in on-going project development in Sierra Leone was limited but stronger in Nicaragua. CAFOD/partner communication with communities was in appropriate language and media; community knowledge of CAFOD was (unsurprisingly) limited as partners are the interface with communities; knowledge of partners and projects was mixed.

The mid-term audit reinforced previous findings. CAFOD has policies and guidance on information sharing but does not provide staff and partners with guidance on which information to share with communities, nor systematically monitor the way partners provide information about the principles they adhere to and the expected behaviours of staff. Communication with communities is in suitable languages, media and formats. CAFOD ensures representation of people with disabilities, indigenous groups, children, elderly, people with terminal illnesses, people living with HIV/AIDS, but does not systematically monitor their participation at all stages of the work. CAFOD and partners encourage communities and people affected by crisis to provide feedback on their level of satisfaction with the quality and effectiveness of assistance, but does not disaggregate that information by gender, age and diversity. CAFOD has policies to engage communities and people affected by crisis but does not have fully in place mechanisms to reflect the priorities and risks communities have identified in a systematic way.

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

Local communities in Ethiopia and Kenya generally felt they were well informed on programmes and deliverables. While they all were adamant they would be able to report inappropriate behaviour of a staff, the information on how staff should behave or the principles CAFOD or its partners adhere to had not been always communicated to them. In all but one case, communities said they were regularly asked for their feedback on their level of satisfaction with the quality and effectiveness of assistance.

## Commitment 5: Complaints are welcomed and addressed

Score: 0

The initial audit pointed that CAFOD had a complaints handling policy and mechanisms to report and investigate complaints, but the mechanism had only recently become operational after a gap (of almost 18 months) where it was effectively non-functional. There was no meaningful consultation with communities or partners on CAFOD's complaints mechanism and staff had limited knowledge and sense of ownership of the mechanism and procedures. Although complaints received were investigated they were not necessarily addressed in a timely manner because of CAFOD's level of remove from complainants; there were so few complaints in the system that it seemed likely that it was not yet embedded. The verification team accepted that developing a meaningful complaints procedure is very challenging where CAFOD had limited interaction with communities. However, complaints procedures were not in place even where CAFOD was semi-operational and partners generally had limited knowledge of the CAFOD complaints mechanism. There had been limited formal work with partners (other than strategic partners) on the area of developing their own complaints mechanisms.

In the meantime, CAFOD has systematized information about its complaints mechanism through partnership agreements and has diversified access to it (e.g.: complaints box in the office in Ethiopia). In addition, complaints have become a Key Performance Indicator and are reported to the Leadership Group and the Board of Trustees. However, the mid-term audit confirmed findings from the initial audit; still very few complaints are captured by the mechanism, and in the field, communities are not aware of CAFOD and its complaints mechanism. Complaints are only likely to come through partners, however CAFOD does not systematically work with them on putting in place documented complaints mechanisms based on communities' preferences, safe for them, and capable of handling serious complaints such as sexual exploitation and abuse. None of the partners complaints mechanisms are formally described: as a result, some communities did not have a clear idea of how to raise a complaint and the management process was not always clear.

Although CAFOD has made some recent improvements on the complaints mechanism system, mainly at the head office, the conjunction of the weaknesses identified on the totality of the indicators of the present commitment indicate that CAFOD is not presently in position to ensure communities have access to safe and responsive mechanisms to handle complaints. This is a systemic gap and a major CAR was issued on this commitment.

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

In Ethiopia and Kenya, communities demonstrated confidence in partners staff, and gave a sense that partners have established an "open-door" policy and have generally informed about the possibility to raise complaints. Communities generally indicated that complaints related to programmes are welcomed and accepted; all but one community felt that CAFOD's partners manage their complaints in a fair, timely and appropriate manner.

However, as none of these complaints' mechanisms are formally described some communities did not have a clear idea of how to raise a complaint or how these would be handled. Generally, communities were not consulted on the complaints handling process, hence were not able to indicate how they would find it safe to raise a complaint on a serious issue.

In Ethiopia and in Kenya, communities feel that CAFOD's partners are respectful of them, and their expectations are mostly about feedback related to programme. However, there is no evidence that communities are made aware of expected behaviour of CAFOD and partners' staff, specifically

regarding sexual exploitation and abuse, and that CAFOD monitors and has an overview on this specific issue. Communities were usually not aware of CAFOD and how to complain to CAFOD.

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

Score: 3,5

The initial audit mentioned that CAFOD coordinates well with its partners, participates in relevant coordination bodies and collaborates well with other agencies to improve coverage and minimise demands on communities, and has strong relationships with its partners. It does not systematically identify roles and responsibilities of different stakeholders but does this informally through partners. There is a policy commitment to coordination though CSPs provide limited insight into coordination mechanisms. Grant agreements generally focus on financial accountability and mutual obligations rather than recognising constraints and commitments though these are recognised and respected informally.

The mid-term audit found that conclusions from the initial audit on commitment 6 still stand. In Ethiopia and in Kenya, CAFOD participates in a number of coordination bodies, and has been the lead agency for interagency projects such as START. Grant agreements have remained unchanged since the initial audit.

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

No specific feedback from communities was recorded on this specific commitment, although communities understood the complementary aspects of the projects they were involved in.

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

Score: 2,8

The initial audit found that CAFOD contributed well to sectoral learning and innovation and in some instances, it worked with partners to develop their own learning and improvement practices, generally on-the-job rather than formally. CAFOD had an evaluation policy that describes evaluation criteria and thresholds for evaluations, but learning was not comprehensively addressed at a policy level and the sense from interviews was that learning was not an organisational priority. Partners were generally not aware of how their reports or monitoring information were used to improve programmes. Baselines were sometimes conducted by partners though it was not clear how well the information was recorded to facilitate later measurement. Mechanisms to record and share knowledge and experience existed (WebPromise and SharePoint) but were not being used for this purpose, likely because they were not sufficiently well adapted. This meant that CAFOD's ability to draw on prior experience when designing programmes was more ad hoc and reliant on personal experience; this often worked well through surge teams and communities of practice. However, implementing change based on monitoring and evaluation was limited and was not based on complaints due to the low level of complaints received.

The mid-term audit reiterated CAFOD's strong contribution to learning and innovation in the humanitarian sector. CAFOD regularly shares learning and good practice externally, internally, with partners, affected communities and other stakeholders, at local, national

and international levels, and the organization has mechanisms and systems to do so.

CAFOD has evaluation and learning policies in place, as well as guidance on process, content, roles and responsibilities for evaluation and learning, but the actual incorporation of that learning in practice still remains a challenge for the organisation. Despite clarified learning and M&E approaches and subsequent improvement to its Information Management System, evaluations, data monitoring and complaints handling only allow for limited change.

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

Communities in Ethiopia as in Kenya, benefited from a wide range of technical and generic training - including on accountability for a few of them, experience exchanges at times abroad, etc. - provided by CAFOD and partners and expressed strong appreciation for that.

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

Score: 2,8

The initial audit indicated that CAFOD was open to providing training and staff felt supported in their work and had an understanding of the relevant standards and procedures of the organisation. Security policies and plans were developed, and the code of conduct was explained to staff. Job descriptions and performance processes were in place and functioning well. CAFOD generally had the staff capacity to deliver its programmes although the audit noted that staff were stretched in many cases owing to workload and the number of partners to support, which could impact on the quality of the work if not addressed.

The mid-term audit found that initial conclusions still stand. Codes of conducts and child protection policies are in place and widely disseminated, and partners have codes of conduct in place. Staff procedures, policies and tools (including job descriptions, annual appraisals, capacity building mechanisms) are in place, and are seen as a model: for instance, CST has chosen CAFOD's HR systems as the common system for the office in Ethiopia. However, CAFOD struggles with insufficient M&E capacity, both at HO and field level, which could have an impact on the quality of responses.

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

Generally, communities in Ethiopia and in Kenya praised CAFOD/CST and partners' staff high level of professionalism and the quality of their relations with them.

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

Score: 2,7

The initial audit observed that there were generally strong policies and procedures around use and management of resources (e.g. ethical fundraising, audit, anti-corruption) and there were good systems for designing programmes (particularly for institutional funding) with efficiency in mind. However, staff training on financial monitoring was variable and there was limited value for money analysis of programmes so the system relied more on

appropriate design and financial management controls. The level and quality of budget to actual and variance analysis was quite person dependent - where it worked well it helped drive financial management. The internal audit function was a helpful detective control where other controls had not been well applied. CAFOD took action where corruption was identified though its trust-based relationship with partners meant that it was more reactive than proactive in this regard. Partner financial capacity was reviewed but there was limited formal work with partners to follow through on these assessments in order to strengthen financial capacity or other aspects of resources management. The commitment to environmental stewardship was well described and the focus on working with local partners promoted the efficient use of resources. However, procedures underlying the environmental stewardship were not sufficiently developed, which meant the implementation was largely dependent on the knowledge and environmental sensitivity of individual staff members.

The mid-term audit confirmed the quality of CAFOD's policies and procedures around use and management of resources, including financial management. However, as in the initial audit, it raised issues on how CAFOD takes into account the environmental impact of its activities and manages waste. While CAFOD provides support to partners on organisational, thematic and compliance issues, this support does not necessarily cover processes governing the management and use of resources.

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

In Ethiopia and in Kenya, partners and communities were not aware of actions taken to consider environmental consequences in project design and monitoring, aside from boreholes projects.

## 8. Organisation's report approval

### Acknowledgement and Acceptance of Findings

For Organisation representative – please cross where appropriate

I acknowledge and understand the findings of the audit

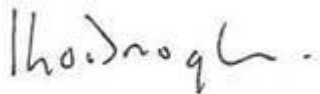
I accept the findings of the audit

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

Please list the requirements whose findings you do not accept

Name and Signature: Geoff O'Donoghue

Date and Place: London, 12/10/2018



Date of document: 2018-07-03

## 9. HQAI's decision

<b>Certification Decision</b>	
Certificate:	
<input type="checkbox"/> Maintained	<input type="checkbox"/> Reinstated
<input checked="" type="checkbox"/> Suspended	<input type="checkbox"/> Withdrawn
<b>Pre-conditions to the reestablishment of the certificate:</b>	
Major corrective action request. Corrections and corrective actions taken will need to be assessed in 6 months by HQAI senior auditor as per POL114- Third party quality assurance policy	
Pierre Hauselmann Executive Director Humanitarian Quality Assurance Initiative	Date: 2018-07-03

### Appeal

*In case of disagreement with the conclusions and/or decision on certification, the organisation can appeal to HQAI within 30 days after the final report has been transmitted to the organisation.*

*HQAI will investigate the content of the appeal and propose a solution within 15 days after receiving the appeal.*

*If the solution is deemed not to be satisfactory, the organisation can inform in writing HQAI within 15 days after being informed of the proposed solution of their intention to maintain the appeal.*

*HQAI will take action immediately and identify two Board members to proceed with the appeal. These will have 30 day to address it. Their decision will be final.*

*The details of the Appeal Procedure can be found in document PRO049 – Appeal and Complaints Procedure.*



## Annex 1: Explanation of the scoring scale

0	<p>A score of 0 denotes a weakness that is so significant that it indicates that the organisation is unable to meet the required commitment. This is a major weakness to be corrected immediately.</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> <li>Operational activities and actions contradict the intent of a CHS commitment.</li> <li>Policies and procedures contradict the intent of the CHS commitment.</li> <li>Absence of processes or policies necessary to ensure compliance at the level of the commitment.</li> <li>Recurrent failure to implement the necessary actions at operational level make it impossible for the organisation to ensure compliance at the level of the commitment.</li> <li>Failure to implement to resolve minor non-conformities in the adequate timeframes</li> <li>More than half of the indicators of one commitment receive a score of 1 (minor non-conformity), making it impossible for the organisation to ensure compliance at the level of the commitment.</li> </ul>
1	<p>A score of 1 denotes a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against the commitment.</p> <p>EXAMPLES:</p> <p>There are a significant number of cases where the design and management of programmes and activities do not reflect the CHS requirement.</p> <p>Actions at the operational level are not systematically implemented in accordance with relevant policies and procedures.</p> <p>Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.</p> <p>Existing policies are not accompanied with sufficient guidance to support a systematic and robust implementation by staff. A significant number of relevant staff at Head Office and/or field levels are not familiar with the policies and procedures.</p> <p>Absence of mechanisms to monitor the systematic application of relevant policies and procedures at the level of the requirement/commitment.</p>
2	<p>A score of 2 denotes an issue that deserve attention but does not <u>currently</u> compromise the conformity with the requirement.. This is worth an observation and, if not addressed may turn into a significant weakness (score 1).</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> <li>Implementation of the requirement varies from programme to programme and is driven by people rather than organisational culture.</li> <li>There are instances of actions at operational level where the design or management of programmes does not fully reflect relevant policies.</li> <li>Relevant policies exist but are incomplete or do not cover all areas of the requirement/commitment.</li> </ul>
3	<p>The organisation conforms with this requirement, and organisational systems ensure that it is met throughout the organisation and over time.</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> <li>Relevant policies and procedures exist and are accompanied with guidance to support implementation by staff.</li> <li>Staff are familiar with relevant policies. They can provide several examples of consistent application in different activities, projects and programmes.</li> <li>The organisation monitors the implementation of its policies and supports the staff in doing so at operational level.</li> <li>Policy and practice are aligned.</li> </ul>

4	<p>The organisation demonstrates innovation in the application of this requirement/commitment. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> <li>• Field and programme staff act frequently in a way that goes beyond CHS requirement to which they are clearly committed.</li> <li>• Relevant staff can explain in which way their activities are in line with the requirement and can provide several examples of implementation in different sites. They can relate the examples to improved quality of the projects and their deliveries.</li> <li>• Communities and other external stakeholders are particularly satisfied with the work of the organisation in relation to the requirement.</li> <li>• Policies and procedures go beyond the intent of the CHS requirement, are innovative and systematically implemented across the organisation.</li> </ul>
5	<p>On top of demonstrating conformity and innovation, the organisation receives outstanding feedback from communities and people. This is an exceptional strength and a score of 5 should only be attributed in exceptional circumstances</p> <p>EXAMPLES:</p> <ul style="list-style-type: none"> <li>• Actions at all levels and across the organisation go far beyond the intent of the relevant CHS requirement and could serve as textbook examples of ultimate good practice.</li> <li>• Policies and procedures go far beyond the intent of the CHS requirement and could serve as textbook examples of relevant policies and procedures.</li> </ul>