

Christian Aid

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

1. General information

1.1 Organisation

Type	Mandates	Verified	
<input checked="" type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Membership/Network <input checked="" type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input checked="" 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 type="checkbox"/> Advocacy	
Head office location	London, United Kingdom		
Total number of country programmes	16	Total number of staff	868

1.2 Audit team

Lead auditor	Dorte Busch
Second auditor	Marie Grasmuck
Third auditor	Andrew Nzimbi
Observer	--
Expert	--
Witness / other	--

1.3 Scope of the audit

CHS Verification Scheme	Certification
Audit cycle	Second
Phase of the audit	Mid-term audit
Extraordinary or other type of audit	--

1.4 Sampling*

Randomly sampled country programme sites	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
Afghanistan	Yes	--	Afghanistan was randomly selected. It includes activities representative of Christian Aid's two audited mandates, in various sectors. Budget: USD 1.5M	Remote
Myanmar	No	Malawi	Myanmar was not selected, as it had already been sampled for the last maintenance audit in 2021. It was decided to replace it by Malawi, which has projects representative of Christian Aid's two audited mandates. Budget: USD 3.3M	Onsite
MENA Regional	No	Burundi	MENA Regional was not selected, as two of the countries it covers have been sampled in the last maintenance audit in 2021 (Lebanon), and in the recertification audit in 2020 (OPT). The Latin America Regional Office (LAC) was briefly	Remote

			discussed as a replacement but discarded due to the current (emergency) relocation of the office. Burundi was proposed as a replacement, as it has never been visited, and has a diverse portfolio of projects and of partners. Budget: USD 2M	
<p>Any other sampling performed for this audit: Projects were randomly sampled out of the portfolios of Malawi, Burundi, and Afghanistan. In Burundi and Afghanistan, the projects were selected by the auditors in order to be representative of the countries' portfolio and mandates covered. For the Malawi onsite visit, three projects were initially selected by the auditors as representative of CA's mandate. Two of the sampled projects were replaced by other similar projects to allow the auditors sufficient time for community and stakeholder interviews. Given that CA implements its activities through partners, interviews were also conducted with the partners of the sampled projects. The audit team is confident in the sample and in the findings from the available evidence generated.</p>				
<p>Sampling risk: The current sampling is representative of CA's mandates and activities.</p>				

**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
Head Office, UK	29 th March – 06 th April	Remote
Malawi	7 th May – 14 th May	Onsite
Afghanistan	25 th April – 28 th April	Remote
Burundi	25 th April – 28 th April	Remote

2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
Head Office			
Management	6	2	Remote
Staff	5	1	Remote
Country Programme Office(s)			
Management	1	4	Remote
Staff	2	1	Remote
Partner staff	-	5	Remote
Management	1	2	Onsite
Staff	1	2	Onsite
Partner staff	5	8	Onsite

Total number of interviewees	21	25
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2.3 Consultations with communities

Type of group and location	Number of participants		Onsite or remote
	Female	Male	
Community authorities, Balaka	3	3	Onsite
Community authorities, Chikwawa	3	3	Onsite
Community authorities, Lilongwe	3	3	Onsite
Female Focus Group Discussions, Balaka	6	-	Onsite
Female Focus Group Discussions, Chikwawa	6	-	Onsite
Female Focus Group Discussions, Lilongwe	6	-	Onsite
Male Focus Group Discussions, Balaka	-	6	Onsite
Male Focus Group Discussions, Chikwawa	-	6	Onsite
Male Focus Group Discussions, Lilongwe	-	6	Onsite
Total number of participants	27	27	

2.4 Opening meeting

Date	2022/03/29
Location	Remote
Number of participants	22 (12F, 10M)
Any substantive issues arising	No

2.5 Closing meeting

Date	2022/05/25
Location	Remote
Number of participants	21 (13F, 8M)
Any substantive issues arising	No

2.6 Programme site(s)

Briefing

Date	2022/05/09
Location	Lilongwe, Malawi
Number of participants	17 (9F, 8M)
Any substantive issues arising	No

De-briefing

Date	2022/05/13
Location	Lilongwe, Malawi
Number of participants	15 (8F, 7M)
Any substantive issues arising	No

3. Background information on the organisation

3.1 General information

Christian Aid (CA) is the official relief, development, and advocacy agency of 41 sponsoring churches in Britain and Ireland. It was founded in 1945 by the British and Irish churches following their relief activities during the Second World War. Today CA provides humanitarian relief and long-term development support for poor communities worldwide. The support includes tackling injustice and advocating for people's rights.

CA's aims, as described on its website, are:

- to expose poverty throughout the world;
- to help in practical ways to end it;
- to highlight, challenge and change the structures and systems that favour the rich and powerful over the poor and marginalised.

CA's 2019-2026 Strategy, Standing Together, reaffirms its commitment to the CHS, and states CA's values of dignity, justice, equality and love. It provides a global results framework for its activities, around the following pillars: Poverty (reaching those most in needs); Power (addressing the root causes of poverty); and Prophetic Voice (speaking truth to power and building local and collective agency). A fourth pillar covers Operational Excellence (becoming a networked organisation with digital capabilities, financial resilience and people skills).

At the recertification audit in 2019, CA was engaged in an organisational restructuring process to align with its strategy, and develop a stronger footprint in focus countries while, at the same time, contending with a decrease of funding faced by British NGOs in general. At the time of the mid-term audit, CA had 14 country programmes and 2 regional programmes (comprising a total of 27 countries as opposed to 37 before the restructuring), and an operational budget of GBP89.2M (2021 annual report, as opposed to GBP106.7M in the 2020 annual report).

3.2 Governance and management structure

There has been no significant change since the recertification audit:

CA is Governed by a Board of Trustees with members appointed by the Sponsoring Churches. The Board of Trustees engages with, and has oversight of, CA's CHS certification process. Specifically, the Board's Audit and Risk committee oversees CA's work to align with the CHS commitments. The committee regularly reports to the Board of Trustees. A cross-organisational Safeguarding Governance Group and 3 Safeguarding Trustees are responsible for overseeing the implementation of safeguarding initiatives.

CA's change process has taken place over the last year, and CA is now equipped with a new departmental structure at the Head Office, as per the organigram below. There are five departments:

- Corporate Services Department, including Finances, Information and Communication Technology, Human Resources, Audit Risk and Assurance – where the Safeguarding Manager is hosted, Race and Diversity and Governance.,
- International Programmes Department (see below)
- Fundraising and Supporter Engagement Department (including Philanthropy, Public Engagement, Marketing, Business Operations and Church Relations)
- Policy, Public Affairs and Campaigns Department (including strategy and development, Advocacy and Campaigns, Policy, Research and Learning, Global Advocacy and Policy)
- Strategy and Global Change Department

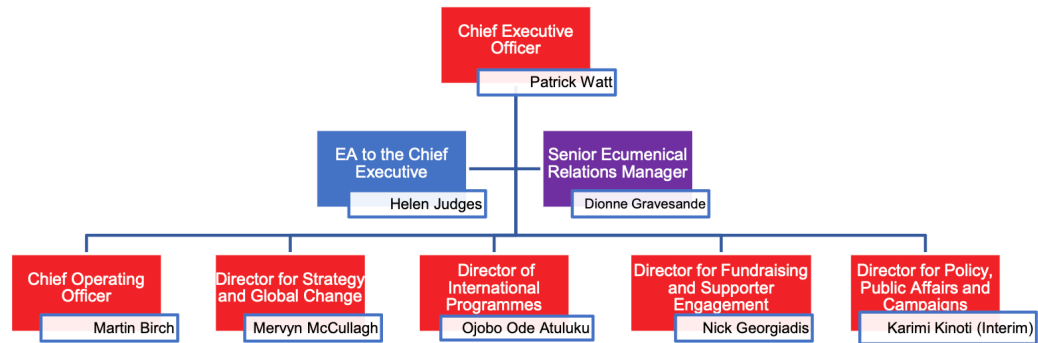
The Strategy and Global Change Department ensures that CA's approach to the change process is aligned and implemented throughout the different focus areas of the change process; that is, to repurpose CA's footprint (complete); to realign planning and reporting processes (medium-term objective, in progress); to redesign systems and processes (medium-term objective, in progress); to transform cultures and behaviours (long-term objective, under way).

The International Programmes Department is structured with three delivery divisions (Humanitarian Division; Africa Division; Asia/Middle East, Latin America/Caribbean and Global Division). Two enabling divisions support the work of the delivery divisions and help bring a One Christian Aid approach to all CA's work – the Programme Quality & Operations Division (PQOD) and Programme Funding.

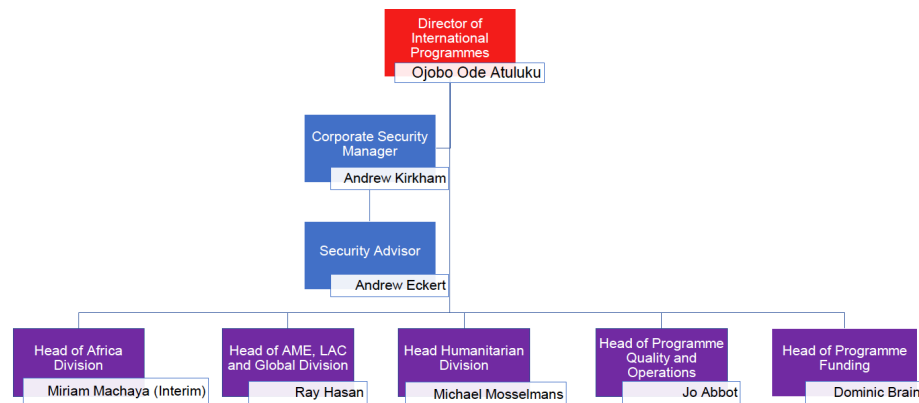
The PQOD brings together functions that were previously in different parts of the International Department, to support programme quality and accountability across the full spectrum of humanitarian, development and advocacy programming. The division is composed of four teams – Programme Quality (advisory capacity); Programme Operations; Global Monitoring,

Evaluation and Learning; and Digital Programme Systems. The PQOD also hosts the safeguarding advisers and officers, which has team members based in different regions of operations of CA.

Directorate



International Department



3.3 Internal quality assurance mechanisms and risk management

The board is ultimately responsible for risk management. It is supported by the Audit and Risk Committee (ARC) which meets three times a year. The ARC reviews the corporate risk register in each of its meetings and also reviews the results of the Internal Control Self-Assessment (ICSA) and of the internal audit reviews performed by the internal audit function. The board reviews the corporate risk register as part of the annual planning process and again as part of the year end process.

CA's 10 Quality Standards (QS) were formally approved by the International Department Senior Leadership team in October 2020. The QS are aligned to the CHS commitments. The 10 QS form the basis for CA's internal quality assurance approach which includes:

- Each country Programme has to maintain a risk register responding to mandatory risks related to people, operations, finance, external factors and legal factors.
- The ICSA is a country/regional level self-assessment against all CA's policies and procedures covering 11 functions including e.g., governance and finance. The IQSA

addresses CA's programme quality standards and minimum requirements. The country programmes develop an action plan based on the ICSA, which is reviewed annually. Both the ICSA and the action plan are online tools, and allow for notifications of follow-up actions for management and oversight purposes.

- CA's digital feedback case management system (COMPAS) is implemented in some projects and ensures documentation of feedback. For projects where COMPAS is not implemented, CA uses an Excel-based log. CA's feedback management system provides CA with tools to analyse feedback trends.
- CA's integrated Programme Information Management Systems (iPIMS), is in its last phase of implementation and is planned to be fully launched by the end of 2022. The system is designed to manage partners, projects and programmes in CA's country and regional programmes.
- Partner due diligence, to assess prospective partners against their own internal quality assurance mechanisms includes finance, human resources and programme quality aspects. If an emergency necessitates timely response, CA can take into account due diligence performed by other INGO or UN agencies in order to override its own due diligence and will conduct a POCRA (see below) after the collaboration is initiated.
- Partner Organisational Capacity and Risk Assessment (POCRA) establishes the capacity and risks of CA engaging with a partner. It is designed to be reviewed every one to three years with the partner in order to provide a basis of support for capacity development activities from CA.
- Monitoring and evaluation activities, at different levels of head office and country programmes

3.4 Work with partner organisations

CA almost exclusively implements its activities through partners. Its approach to partnership is through accompaniment, whereby CA supports partners to develop capacity including in relation to the CHS commitments. CA's Partnership Policy lays out the principles it upholds in its partnerships, such as mutual values, goals and trust, transformational and dynamic partnership, and legitimacy of the parties.

CA identifies potential partners through its network, and performs a partner assessment. The POCRA is a due diligence tool used to assess the partner's organisational capacity; it includes risks relating to governance, financial management, internal controls, and programme cycle management. It also includes risks related to accountability to communities; protection, safeguarding and gender; power and inclusion.

CA and partners develop an action plan based on the POCRA and review the POCRA regularly to update its support activities and knowledge of the partner. CA initiate the review of the POCRA according to the level of risk identified after the first exercise. The POCRA is repeated every year if the risk identified is high, and every 3 years if it is low. CA may also conduct stand-alone financial and safeguarding assessments. Partnership can be terminated if continuous problems are revealed by POCRA or other assessments.

4. Overall performance of the organisation

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

CA is governed by a board of trustees which is supported by board level sub-committee. The key points from the committees is presented in each of the board meetings. Internal audit performs risk-based reviews as part of an internal audit plan approved by ARC. Ad hoc internal reviews can be conducted by the Strategy and Global Change Department or the Audit Risk and Assurance Department according to thematic or issues of focus. Recently, CA conducted a global review of the results from all the ICSA filled in at country-level; a benchmarking on anti-racism within CA; and has started an internal assessment around the workload experience of CA staff.

CA's CHS Steering Group, which was re-established in November 2020, is still in place. It is comprised of staff and management from across the organisation. The CHS Steering Group follows up on the CHS certification process, and the root cause analysis and action plans for implementation of corrective actions. The Audit and Risk Committee is responsible for oversight of CA's work on safeguarding, and reports to the Board of Trustees.

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

As noted in the last audit, CA has integrated the CHS into its own Programme Quality Standards (QS), which have been rolled out over the past year. Through the QS, CA mainstreams the CHS at different stages of the project cycle.

CA has strengthened its performance in the areas of local participation and do no harm (commitment 3) of welcoming and handling complaints (commitment 5) and of learning and innovation (commitment 7). CA's application of the CHS is sustained in the areas of effectiveness and timeliness (C2), and community participation and feedback (commitment 4).

CA's performance has slightly decreased in the area of appropriateness and relevance (commitment 1), and coordination and partnership (commitment 6). CA has also seen a slight decrease in performance in relation to the use of resources (commitment 9), since some processes, such as stakeholder analysis, partner reporting requirements, and environmental impact assessments, are not consistently applied across the organisation.

CA's performance has decreased in the area of human resources (commitment 8). This is related to the high workload reported by a majority of staff against their capacity to fulfil their roles as described in job descriptions, and to the lack of systems to ensure that policies and security plans are updated and/or translated in a timely manner.

Overall, this MTA records:

- Three new Minor CARs (2022-1.2, 2022-6.1 and 2022-8.5)
- Five observations lifted
- Fourteen observations reiterated from the recertification audit
- Five new observations

4.3 PSEAH

CA's Safeguarding Policy commits CA and its partners to prevent sexual exploitation and abuse and CA applies a number of tools to develop projects which are realistic and safe for communities. CA has rolled out a 'Step 3' safeguarding and accountability approach whereby CA ensures that partners have strong safeguarding policies and CoC in place and that partners staff understand and live up to the requirements of the safeguarding policy and CoC. CA is rolling out the *Community Accountability Assessment (CAA)* tool whereby communities, including more vulnerable community members, are asked about their preferred feedback and complaint mechanisms. The roll-out of the CAA is, however, not complete, and there are examples of communities not knowing how to file a complaint and not feeling safe to file a complaint.

CA staff signs the code of conduct (CoC) and safeguarding policies on signing their contracts and are required to complete mandatory e-learnings on CoC and safeguarding annually. The online system automatically notifies staff and their manager if e-learnings are overdue. CA's partners are accompanied to increase their capacity on safeguarding and to have a framework to implement their own safeguarding policies and procedures. One of the tool used by CA to do so is the project level *Safeguarding Risk Assessment*, which is used to identify and mitigate against safeguarding risks at project level. CA identifies areas of concern regarding PSEAH as part of partner due diligence and POCRA, and is able to tailor support according to the concerns identified. The Partnership Agreement reiterates the requirements regarding safeguarding and PSEAH.

4.4 Localisation

CA's localisation approach is strong. As a general rule, CA implement projects through partners and CA uses the POCRA to assess partner's capacity and to help partners develop capacity. In general, partners see the POCRA process as an opportunity for learning. Evidence also indicates that CA programmes support communities in developing sustainable and inclusive community structures. CA also has policies in place to avoid negative effects of projects and to strengthen local capacity; communities are informed about projects and expected staff behaviour in local languages.

If a response analysis leads CA to conclude that direct implementation is preferable, the final decision has to involve one of CA's Director. CA is currently engaged in workshops at departmental and country level around the theme of decolonisation of aid, whereby each

department identifies processes to be reviewed with a decolonisation lens. CA is committed to coordination and collaboration with national and local authorities; how it safeguards humanitarian principles while doing so is defined by practice, rather than by formalised processes. CA has an Environmental Policy with several requirements to assess and reduce its carbon and environmental footprint; however, it does not consistently consider the impact of its projects on the environment.

4.5 Gender and diversity

CA's strategy and policies as well as CA's website call for inclusion and impartial assistance in proportion to needs. At project level, CA's 10 QS and the Programme Quality Handbook includes a section on addressing gender equality and inclusion. CA also require that partners use gender and age disaggregated data when monitoring progress. However, not all projects are based on needs assessments, which, when used, consider the needs of vulnerable groups. Partners conduct frequent visits to communities during project implementation, and CA staff also consult with communities when visiting project sites. CA is in the process of rolling out the CAA which will ensure that vulnerable groups are also consulted when designing feedback and complaints mechanisms (see 4.3).

CA takes account of gender and diversity in recruitment processes, and recently concluded an anti-racism benchmarking exercise across the whole organisation. This process defined 3 workstreams: to become an anti-racist organisation; knowingly visible leadership; HR processes, and data and reporting. However, CA does consistently translate its HR policies into local working languages.

4.6 Organisational performance against each CHS Commitment

Commitment	Strong points and areas for improvement	Feedback from communities	Average score*
Commitment 1: Humanitarian assistance is appropriate and relevant	<p>CA's global strategy and policies commit to inclusion and participation, and CA has a number of guidelines and tools to support its commitment to providing impartial assistance, and monitoring this through the use of disaggregated data. CA undertakes analysis of context when formulating projects, but a systematic stakeholder analysis is not undertaken. CA ensures that projects are adapted to changes in context and to changing community needs.</p> <p>CA does commit to, and has guidelines in place for, inclusive needs assessments. However, in practice not all projects are based on an analysis which considers the particular needs of vulnerable groups. A minor CAR 2022-1.2 is raised as the issue has emerged in a number of previous audits.</p>	The communities interviewed indicate that CA adjusts projects in response to changes in their needs.	2.5
Commitment 2: Humanitarian response is effective and timely	<p>CA's 10 Quality Standards and programming guidelines ensure robust monitoring and evaluation of CA projects. Findings from monitoring and evaluation reports are used to adjust projects as relevant. CA's humanitarian responses are timely, and adjustments are also made in a timely manner.</p> <p>CA conforms to international standards, however, while humanitarian action is guided by government standards, not all partners know about international humanitarian standards and CA's humanitarian management team is not systematically consulted when a local response is developed.</p>	The communities interviewed believe it safe for them to take part in projects, and they appreciated the timeliness of CA's disaster response. Communities interviewed were aware of CA referral of unmet needs to other stakeholders.	2.7

<p>Commitment 3: Humanitarian response strengthens local capacities and avoids negative effects</p>	<p>CA implements projects through partners and its <i>Partner Organisational Capacity and Risk Assessment (POCRA)</i> is used to assess partners' capacity and to help partners develop their capacity. CA also engages with and supports communities and local authorities to strengthen their local structures. In general, CA's projects also aim at building community resilience and CA uses local resources and buys locally as a first choice.</p> <p>CA has policies and procedures in place to avoid negative effects. It has a <i>Safeguarding Policy</i> and a <i>CoC</i> in place, it ensures that partners have <i>CoCs</i> and safeguarding policies; and that staff of CA and partners understand the importance of prevention of sexual exploitation and abuse. CA still doesn't ensure that all projects have exit strategies and that risks to the local economy and the environment are analysed. Not all partners have proper systems for data security.</p>	<p>Communities interviewed explained that CA supported them in building community structures and that more vulnerable community members were also represented. However, not all communities were aware of when projects would come to an end.</p>	2.6
<p>Commitment 4: Humanitarian response is based on communication, participation and feedback</p>	<p>CA's external communication is ethical and represents people as dignified human beings. CA shares information about its work and its values with communities and stakeholders. The communication is in languages, formats and media that are easily understood, respectful and culturally appropriate for vulnerable community members.</p> <p>CA requires that community members give written consent when their images or stories are shared. In practice the consent is mainly verbal and while CA has procedures in place to ensure that consent is given, this is not the case for all partners.</p> <p>CA's guidelines encourage that communities provide feedback to partners and to CA. A range of feedback mechanisms are in place, including face-to-face, suggestion boxes and telephone hotlines. CA and partners also track and analyse feedback and adjust projects based on the feedback. However, trackers do not always segregate feedback based on gender and age and other vulnerability criteria.</p>	<p>Communities interviewed reported that CA and partners communicate in local languages. Communities found the communication respectful and culturally appropriate, and community members explained that they were informed about the values and the expected behaviour of CA and partner staff.</p>	2.7
<p>Commitment 5: Complaints are welcomed and addressed</p>	<p>CA welcomes feedback and complaints and its website displays its complaints mechanisms. CA requires that partners put in place feedback and complaints mechanisms which are safe for community members to use, and CA has strengthened its capacity to ensure that country programmes and partners put in place feedback and complaints mechanisms. CA is rolling out the Community Accountability Assessment to ensure that communities are heard about their preferred mechanisms for providing feedback and filing complaints.</p> <p>However, in practice not all communities have been consulted about their preferred mechanisms for providing feedback and complaints.</p>	<p>Communities interviewed confirmed that CA and partners ask for their feedback during project meetings. However, not all communities had been consulted regarding their preferred ways of providing feedback and complaints, not all community members knew how to file a complaint, and some community members did not feel safe to file a complaint.</p>	2.4

<p>Commitment 6: Humanitarian response is coordinated and complementary</p>	<p>CA commits to collaboration and coordination with other stakeholders, including national and local authorities. CA and its partners participate in relevant coordination forums and affirm their assistance is complementary with other actors. However, CA does not consistently perform country level stakeholder analysis (minor CAR 2022-6.1).</p> <p>CA works with its partners through clear and consistent agreements, and partners explained that CA recognised their own context and constraints, and that they perceived the partnership as equitable.</p>	<p>The communities interviewed explained that the assistance they receive from CA is not duplicated by other actors, and that the partners collaborate with local authorities and other stakeholders in the area.</p>	2.7
<p>Commitment 7: Humanitarian actors continuously learn and improve</p>	<p>CA has evaluation and learning policies, as well as a Research, Evidence and Learning service, dedicated to following up on learning questions and disseminating results of research and learning activities internally and externally. However, the implementation of the evaluation policy is not consistent across CA's countries of operation, and resources are not consistently available for evaluation and learning activities.</p> <p>Mechanisms to record knowledge and experience exist in the form of CA's intranet, thematic or sectoral communities of practice, and the presence of technical advisors who are in contact with programme teams in different countries and can facilitate cross learning. CA integrates learnings into project design through annual project reviews, dialogue with partners and advisors, and occasionally through organisation-wide reviews on specific topics.</p>	<p>The communities interviewed explained that they contribute feedback on the projects and that findings from evaluations and innovations were shared with them. They perceived that projects had improved over time.</p>	2.8
<p>Commitment 8: Staff are supported to do their job effectively, and are treated fairly and equitably</p>	<p>CA's staff work according to the mandates and the values of the organisation, and to agreed objective and performance standards. They adhere to the policies that are relevant to them and understand the consequences of not adhering to them. Several processes exist for CA to provide training and competence development support to staff, and staff interviewed at CA and partner level expressed satisfaction over how CA supports them to fulfil their role.</p> <p>However, a minor CAR 2022-8.5 is raised on the fact that CA does not systematically translate its staff HR policies and procedures into relevant languages. This can influence staff understanding of policies, as well as transparency, and fairness in access to these policies. Furthermore, an observation is reiterated on the fact that several teams within CA expressed that the demands placed on them exceeds their capacities, and that they are subjected to a considerable workload. This issue has been identified by CA, which is implementing an internal review on this topic at the time of the mid-term audit.</p>	<p>The communities interviewed felt that CA's partner staff is qualified to perform their responsibilities and expressed that they behaved in a respectful manner.</p>	2.2

Commitment 9: Resources are managed and used responsibly for their intended purpose	<p>CA has policies and processes which govern the use and management of resources, including how it accepts, uses and allocates funds legally and ethically, and how it identifies, manages and mitigates risks. CA has an <i>Environmental Policy</i>, however, the policy and its commitments are not known by all staff or partners, and the impact of CA's activities on the environment is not consistently assessed.</p> <p>CA ensures that its resources are used efficiently through its application of procurement and finance procedures, which include segregation of duties, procurement thresholds, narrative and financial reporting according to partner agreements, budget planning, forecasting, and monitoring. The staff interviewed at CA and partner level are aware of channels for whistleblowing.</p>	The communities interviewed explained that they had not observed mismanagement of project resources, but that the delivery of items had sometimes been delayed.	2.5
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* *Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each Commitment, except when one of the indicators of a commitment scores 0 or if several scores 1 on the indicators of a Commitment lead to the issuance of a major non-conformity/ weakness at the level of the Commitment. In these two cases the overall score for the Commitment is 0.*

5. Summary of non-conformities

Corrective Action Requests (CAR)*	Type	Resolution due date	Date closed out
2022-1.2: CA does not ensure that projects are systematically based on an analysis of the needs of vulnerable groups.	Minor	2024-07-27	
2022 - 6.1: CA does not consistently identify roles, responsibilities, capacities and interests of different stakeholders.	Minor	2024-07-27	
2022-8.5: CA does not ensure that all staff policies and procedures are translated into relevant languages meaning that they are not fairly and transparently accessible to all staff.	Minor	2024-07-27	
Total Number	3		

6. Sampling recommendation for next audit

Sampling rate	HQAI standard sampling rate
Specific recommendation for selection of sites	Include a regional programme in the sample

7. Lead auditor recommendation

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

Based on the evidence obtained, we confirm that we have received reasonable assurance that the organisation continues to meet the requirements of the Core Humanitarian Standard on Quality and Accountability.

We recommend certification.

Name and signature of lead auditor: Dorte Busch



Date and place:

27 July 2022, Copenhagen

8. HQAI decision

Certificate:

Certification maintained
 Certificate suspended

Certificate reinstated
 Certificate withdrawn

Next audit: Surveillance audit before 2024/03/21

Name and signature of HQAI Executive Director:

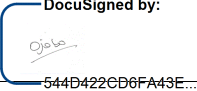


Joost Mönks

Date and place:

8th August 2022, Genève

9. Acknowledgement of the report by the organisation

Space reserved for the organisation	
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 type="checkbox"/> No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
Name and signature of the organisation's representative: Ojobo Ode Atuluku	Date and place: 11/3/2022
	

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>Score 0: 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"> • Independent verification: major weakness; • Certification: major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p>Score 1: 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"> • Independent verification: minor weakness • Certification: minor non-conformity, leading to a minor corrective action request (CAR).
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p>Score 2: 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"> • Independent verification and certification: observation.
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>Score 3: indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> • Independent verification and certification: conformity.
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>Score 4: indicates an exemplary performance in the application of the requirement.</p>

* Scoring Scale from the CHSA Verification Scheme 2020