

# Christian Aid (CA)

## Maintenance Audit – Summary Report 2021/05/11

### 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	
<b>Head office location</b>	London, United Kingdom		
<b>Total number of country programmes</b>	--	<b>Total number of staff</b>	--

#### 1.2 Audit team

<b>Lead auditor</b>	Dorte Busch
<b>Second auditor</b>	--
<b>Third auditor</b>	--
<b>Observer</b>	--
<b>Expert</b>	--
<b>Witness / other</b>	--

#### 1.3 Scope of the audit

<b>CHS Verification Scheme</b>	Certification
<b>Audit cycle</b>	2nd
<b>Phase of the audit</b>	Maintenance Audit (MA)
<b>Extraordinary or other type of audit</b>	--

#### 1.4 Sampling\*

Randomly sampled country programmes	Included in final sample	Replaced by	Rationale for sampling and selection of sites	Onsite or remote
14 Ethiopia	Yes		Ethiopia was randomly selected. It includes development and humanitarian actions implemented through national and international partners. Budget: USD 1.8 mill.	Remote
15 Kenya Case	No	11 Myanmar	15 Kenya Case was part of CHS RA in 2020. Myanmar was part of the random sampling list, and was selected to include Asia. The CP includes development and humanitarian actions, implemented through national and international partners. Budget: USD 5.7 mill.	Remote
2 Malawi	No	3 Nigeria	Nigeria was purposely selected to include West Africa. It includes development and humanitarian actions, implemented through national and	Remote

			international partners. Budget: USD 8 mill.	
<p><b>Any other sampling performed for this audit:</b>          A random and purposive sampling was undertaken for the selection of country programmes (CPs) and for selection of projects within each CP. The purposive sample ensured a geographical spread and adequate representation of thematic areas of CA's work.</p> <p>The auditor interviewed key staff at CA headquarters to get an understanding of the organisational change process and how its impact on CA's commitment to the CHS. The audit also included interviews with CA Country Directors and Safeguarding Officers in the selected CPs and interviews with Directors and Safeguarding/Accountability Officers of Ca's partners implementing the selected projects.</p>				
<p><b>Sampling risk:</b>          Due to the COVID-19 pandemic the previous recertification audit (RA) was unable to ensure interviews at partners and beneficiaries levels. The minor CARs previously identified were therefore extended, and it was agreed that this MA should include interviews with CA CPs staff and partners.</p> <p>Due to the ongoing pandemic of COVID-19 and continuing restrictions, the present MA did not include on-site community consultations and the auditor could therefore not directly verify some elements of the non-conformity areas. Other means have been used, such as document review and remote interviews with CA CP staff and partners. CA has worked steadily through each audit and has demonstrated improved performance over time. Since the RA, CA has strengthened its internal quality assurance and control systems to address requirements of the CHS, and other strategic commitments. This gives the auditor sufficient confidence to recommend that CA's CHS certification is maintained (<b>see auditor's recommendation page 7</b>)</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
CA Head Office	12 – 16/04/2021	Remote
Ethiopia Country Programme and partners	19-22/04/2021	Remote
Nigeria Country Programme	15 -22/04/2021	Remote
Myanmar Country Programme	19/04/2021	Remote

### 2.2 Interviews

Position / level of interviewees	Number of interviewees		Onsite or remote
	Female	Male	
<b>Head Office</b>			
Management	2	2	Remote
Staff	4	3	Remote
<b>Country Programme Office(s)</b>			
Management		3	Remote
Staff	1	2	Remote

Partner staff	4	7	Remote
Others			
<b>Total number of interviewees</b>	<b>11</b>	<b>17</b>	

### 2.3 Opening meeting

<b>Date</b>	2021/04/12
<b>Location</b>	Online
<b>Number of participants</b>	17
<b>Any substantive issues arising</b>	NO

### 2.4 Closing meeting

<b>Date</b>	2021/04/23
<b>Location</b>	Online
<b>Number of participants</b>	12
<b>Any substantive issues arising</b>	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. CA was founded in 1945 by British and Irish churches following the Second World War to help refugees. 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 global strategy, *Standing Together 2019-26*, affirms its commitment to the CHS and prioritises a portfolio of activities around three pillars: Poverty – reaching those most in need; Power – addressing the root causes of poverty; and Prophetic Voice – speaking truth to power and building local and collective agency.

In 2019, CA embarked on an organisational change process to better align to the global strategy and to increase impact and effectiveness. The change process included a reduction of CA's country presence from 37 countries to 15 country programmes and 2 regional programmes; and an integration of humanitarian, longer term development work and advocacy through a "one-CA approach". The change process was concluded in the main by July 2020.

### 3.2 Governance and management structure

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 reports regularly to the Board of Trustees. A cross-organisation Safeguarding Governance Group is responsible for overseeing the implementation of safeguarding initiatives.

As part of its change process, CA established a new International Department structure with three delivery divisions (Humanitarian Division, Africa Division, and Asia/Middle East, Latin America/Caribbean and Global Division); and two enabling divisions that support the work of the International Department 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 Change process also led to the formation of a new safeguarding team based in PQOD. The safeguarding team comprise a new post as Global Programme Safeguarding Advisor and a Safeguarding Officer based in Asia. In November 2020, a Safeguarding Officer role for Africa was added to the team. The accountability structures were retained the way they were prior to the change process with a Global Programme Accountability Advisor and two global Accountability Officer roles. The safeguarding position for Africa and one of the accountability officer roles are still vacant.

### 3.3 Internal quality assurance mechanisms and risk management

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:

- An annual Internal Control Self-Assessment directly linked to the QS and the CHS. The self-assessment was paused during the change process (from Sept 2019) and is being refreshed in 2021 with a new digital interface.
- A country level/regional level self-assessment against the QS. A Quality Management Working Group is developing a digital tool to facilitate open and transparent reflection. A pilot self-assessment was facilitated in January 2021 linked to a 3-month review of the Lebanon humanitarian response. A further country-level pilot will take place in late March 2021 in Zimbabwe. Lessons learned from the pilots will add to further development of the self-assessment tool in F22.
- A project risk assessment tool with annual programme reporting against the QS

CA is also rolling out COMPAS to establish a systematic management of feedback from communities. COMPAS is CA's digital feedback case management system, with feedback through the system first received in May 2020. CA has faced some challenges with partners uptake of COMPAS and the focus is now on ensuring systematic documentation of feedback, using the Feedback Tracker and/or COMPAS.

### 3.4 Work with partner organisations

CAs approach to partnerships is through accompaniment where CA helps partners to develop capacity including for the CHS commitments.

CA undertakes a Partner Organisational Capacity and Risk Assessment (POCRA) to establish the capacity and risks of CA engaging with the partner. POCRA includes risks relating to governance, financial management, internal controls, and programme cycle management. It also includes risks related to accountability to communities, protection and safeguarding and gender, power and inclusion. CA develops an action plan with the partner based on the POCRA assessment.

CA is also rolling out the three-step safeguarding process where partners are expected to have CoC and safeguarding policies in place and where CA monitor the quality of these documents and assist the partner if there is need for improvements (Step 1 and 2). Step 1 and 2 is complemented by CA conducting safeguarding education of trainers for the partner staff. If a new partner has no safeguarding documents, or their documents are insufficient, the partner and CA will ensure that partner staff receive a basic introduction to safeguarding, that the risk assessment for the project is done jointly and that the partner subscribe to CAs interim safeguarding commitments, while they develop their own safeguarding documents.

## 4. Overall performance of the organisation

### 4.1 Effectiveness of the governance, internal quality

CA re-established its CHS Steering Group in November 2020. The Steering Group provides leadership on the purpose and benefits of the CHS and oversees CA's CHS action plan. The CHS Steering Group reviews progress and communicates achievements and

**assurance and risk management of the organisation**

challenges to the CA director's meeting on a monthly basis. The CHS Steering Group is comprised of staff and management from across the organisation. The CHS steering Group reports quarterly to the Audit and Risk Committee of the CA Board. The Audit and Risk Committee is responsible for oversight of CA's work on the CHS including on safeguarding. It reports regularly to the Board of Trustees.

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

The RA noted that Christian Aid had worked steadily through the previous audit cycle to more closely address the requirements of the CHS identified in each audit, and other commitments arising out of the World Humanitarian Summit such as the localisation agenda. The change process has further strengthened CA's application of the CHS.

At the MA CA has implemented the following actions to apply the CHS across its work:

- The CA CHS Working Group oversee CA progress in addressing the CARs and improving CA's commitment to the CHS.
- CA has approved the 10 QS and the Programme Quality Handbook (PQH) The PQH provides guidance on how to design, implement and monitor projects in accordance with the 10 QS.
- As part of the PQH, CA is rolling out the Community Accountability Assessment (CAA) which among others asks about the communities' preferred way of engagements and their preferred feedback and complaints mechanisms.
- CA has established an overview of how its partners adhere to the three-step safeguarding approach. The overview is found on the Power Bi. The overview is established per country and analysis show the number of partners who have CoCs and safeguarding policies and if a revision is needed. The overview also indicate that information is not available for a number of partners. CA is committed to continuing this work to ensure full commitment to CHS safeguarding requirement of its partners.
- CA has trained CA staff and partner staff on safeguarding and accountability. Originally the training was a five-day course, but it has been transferred into 5 webinars which are being rolled out in all country programmes. Partners will cascade the trainings to their staff.
- CA has included accountability and safeguarding elements from the 10QS in the annual performance goals for managers and staff in the International Division, the aim being on strengthening accountability and safeguarding in country teams. The goals were included in CA's new performance management system on Dayforce.
- CA has rolled out its digital feedback and complaints handling system (COMPASS). COMPAS can be used by CA country teams and by partners. Partners can also report feedback and complaints in the CA feedback and complaints tracker system which will then be uploaded to COMPAS. COMPAS can provide CA with a global overview and the possibility to analyse trends in feedback received at country or project level.

### 4.3 Average score per CHS commitment

Commitment	Average Score*
<b>Commitment 1:</b> Humanitarian assistance is appropriate and relevant	2.7
<b>Commitment 2:</b> Humanitarian response is effective and timely	2.7
<b>Commitment 3:</b> Humanitarian response strengthens local capacities and avoids negative effects	2.6
<b>Commitment 4:</b> Humanitarian response is based on communication, participation and feedback	2.9
<b>Commitment 5:</b> Complaints are welcomed and accepted	2.1
<b>Commitment 6:</b> Humanitarian response is coordinated and complementary	2.8

<b>Commitment 7:</b> Humanitarian actors continuously learn and improve	<b>2.7</b>
<b>Commitment 8:</b> Humanitarian response is effective and timely	<b>2.7</b>
<b>Commitment 9:</b> Resources are managed and used responsibly for their intended purpose	<b>2.9</b>

\* Note: Average scores are a sum of the scores per commitment divided by the number of indicators in each commitment.

## 5. Summary of non-conformities

<b>Corrective Action Requests (CAR)</b>	<b>Type</b>	<b>Resolution due date</b>	<b>Date closed out</b>
2018 - 3.6: At the Partner level, CA is not systematic in identifying the potential or actual unintended negative effects of people's safety and of sexual exploitation and abuse.	Minor	2020/03/21 Extended 2021/07/16	2021/05/04
2018 - 4.1: CA does not ensure information is systematically provided to communities and people affected by crisis about the organisation's principles and expected behaviours of staff.	Minor	2020/03/21 Extended 2021/07/16	2021/05/04
2018 - 5.1 Communities are not always consulted on the implementation and monitoring of complaints.	Minor	Extended 2022/07/16	
2018 - 5.6: Communities are not always aware of the expected behaviour of CA staff, and that of its partners, nor of its specific commitments to PSEA.	Minor	2021/07/16	2021/05/04
<b>Total Number</b>	<b>4</b>		

## 6. Sampling recommendation for next audit

<b>Sampling rate</b>	The standard sampling rate indicates that 3 CPs should be included in the Mid-term Audit. No deviation from this standard sampling is Recommended and further analysis will need to take place in the preparation phase of the MTA.
<b>Specific recommendation for selection of sites</b>	Given the travel restrictions linked to the COVID-19 pandemic, the recertification audit and the maintenance audit did not include a CP site visit with consultations with communities. <b>It is therefore recommended that CPs are selected where on-site consultations can be undertaken with partners and communities.</b>

## 7. Lead auditor recommendation

In my 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, I confirm that I have received reasonable assurance that the organisation is implementing the necessary actions to close the minor CARs identified in the previous audit, and continues to meet the requirements of the Core Humanitarian Standard.

I recommend maintenance of certification.

**Name and signature of lead auditor:**



Dorte Busch

**Date and place:**

2021/05/11

## 8. HQAI decision

Certification maintained  
 Certificate suspended

Certificate reinstated  
 Certificate withdrawn

**Next audit:** Surveillance audit before 2022/03/21

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

Pierre Hauselmann

**Date and place:**

June 7th 2021, Geneva

## 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:

Yes  No

*If yes, please give details:*

### Acknowledgement and Acceptance of Findings:

I acknowledge and understand the findings of the audit

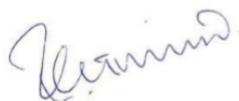
Yes  No

I accept the findings of the audit

Yes  No

**Name and signature of the organisation's representative:**

Robin Greenwood  
 International Programmes Director



**Date and place:**

21/05/2021  
 London

## Appeal

In case of disagreement with the decision on certification, the organisation can appeal to HQAI within 14 days after being informed of the decision. HQAI will investigate the content of the appeal and propose a solution within 10 days after receiving the appeal.

If the solution is deemed not to be satisfactory, the organisation can inform HQAI in writing within 30 days after being informed of the proposed solution, of their intention to maintain the appeal.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will constitute a panel made of at least two experts who have no conflict of interest in the case in question. These will strive to come to a decision within 30 days.

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

## Annex 1: Explanation of the scoring scale\*

Scores	Meaning: for all verification scheme options	Technical meaning for all independent verification and certification audits
0	Your organisation does not work towards applying the CHS commitment.	<p><b>Score 0:</b> indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> major weakness;</li> <li>• <b>Certification:</b> major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issue or immediate suspension of certificate.</li> </ul>
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p><b>Score 1:</b> indicates a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against it. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification:</b> minor weakness</li> <li>• <b>Certification:</b> minor non-conformity, leading to a minor corrective action request (CAR).</li> </ul>
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p><b>Score 2:</b> indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> observation.</li> </ul>
3	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled.	<p><b>Score 3:</b> indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> <li>• <b>Independent verification and certification:</b> conformity.</li> </ul>
4	Your organisation's work goes beyond the intent of this requirement and demonstrates innovation. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	<p><b>Score 4:</b> indicates an exemplary performance in the application of the requirement.</p>

\* Scoring Scale from the CHSA Verification Scheme 2020