

Audit Report

Of HAP 2007 Standard

Summary Findings

Application Organisation Information

| | | | |
|-------------------------------|---|--------------------------------|--|
| Organisation: | DanChurchAid / DCA | Audit Ref / No: | E005/0508-HAP |
| Location: | Copenhagen, Denmark Malawi | Head Office/Field Site: | Head Office Field Site |
| Auditor (s): | Sheryl Haw Smruti Patel Riccardo Polastro | Date (s): | 7 th to 9 th May 2008 13 th to 19 th May 2008 |
| Agency Representative: | Lisa Henry Lennart Skov-Hansen | Role of Representative | Relief Director Regional Representative |

Methodology

The scope of DanChurchAid Audit was:

- The Head Office – based in Copenhagen – through on site audit.
- The Field Site Operations (29 country / regional programmes) – through self-assessment audit – NB: Self Assessments Received: 8 regional, and all HMA¹ Sites (5). During the audit it was apparent that as partner management rested with Regional Teams, both relief and development sectors were incorporated into the audit process. However, only relief project sites were observed. The Sample Field Site – Malawi Regional Office – through on site audit.

The audit comprised of the following approaches:

Phase One: Document Review

Documents of processes and policies presented by DanChurchAid in support of their compliance statement.

Phase Two: On Site Audit at Head Office

Document verification and interviews with Head Office staff took place from 7th to 9th May 2008

Phase Three: On Site Audit in Selected Field Site

Document verification and interviews with Field Office staff, Partners and Beneficiaries took place from 13th to 19th May 2008

Phase Four: Review of Self Assessments received from All Field Sites

A summary analysis was reviewed from relief self-assessments carried out by country / regional representatives, including HMA project sites.

This report covers the combined summary findings of all four phases. The detailed findings report compiled by the independent auditors coupled with corrective action requests combine to make the full audit report.

¹ Humanitarian Mine Action

Outcome

The audit team, comprising two certified independent auditors and the chief auditor, of the HAP 2007 Humanitarian Accountability and Quality Management Standard, audited DanChurchAid in relation to its conformity with the HAP 2007 Standard. The audit was carried out between 7th to the 19th May 2008.

The evidence provided in support of the Application for Certification is the responsibility of the Board and the Senior Management of DanChurchAid. Our responsibility is to express an opinion both on the evidence provided and the interviews carried out during the audit. We confirm that we all meet the formal requirements for HAP auditors concerning professional competence and independence.

Our audit was conducted in accordance with the procedures approved by the HAP Certification and Accreditation Review Board, and following the ISO 19011:2002 Auditor Standard, which together require that an audit be planned and performed to obtain reasonable assurance about whether the agency is in conformity with the HAP Standard. We have audited the agency on a sample test basis through an examination of documentary evidence disclosed and through interviews with DanChurchAid staff involved in the Head Office and the Malawi field operations, which included interviews with staff, partners and beneficiaries. Coupled to this a review of the self-assessment statements jointly summarised from the country programmes, including the Humanitarian Mine Action programmes, was considered. We believe that the audit provides a reasonable basis for our opinion.

In our opinion the agency is in compliance with the HAP 2007 Standard, with findings summarised in the auditor's report, the Head Office and Field Site Findings Reports.



Summary Report Compiled by Sheryl Haw
Chief Auditor
HAP International

16th June 2008

Summary Findings

CAR: Corrective Action Request

Date: Deadline for providing a Corrective Action Response that demonstrates what actions have been undertaken to rectify the minor or major non-compliance identified.

| HAP Standard <i>Non-Compliances</i> | Head Office | | Field Site(s) | | Self Assessments |
|--|-------------|--|---------------|--|--|
| | MAJOR | MINOR | MAJOR | MINOR | Opinion |
| Qualifying Norms | | | | | Generic Head Office HAF sent to all sites |
| Benchmark 1 | | | | Requirement 1.1 CAR: 01/11/09 Requirement 1.2 CAR: 01/11/09 | No Contextual HAFs as yet drafted – lack of clarity as to expectations present. Field staff are not fully aware of what the HQMS is. |
| Benchmark 2 | | Requirement 2.2 CAR: 01/11/09 | | Requirement 2.1 CAR: 01/11/09 Requirement 2.3 CAR: 01/11/09 | Limited understanding of what field sites should provide to whom. Clarity needed. |
| Benchmark 3 | | | | | Policies in place but clarity needed with regards to M&E role DCA can plan with partners.. |
| Benchmark 4 | | Requirement 4.2 CAR: 01/11/09 | | Requirement 4.2 CAR: 01/11/09 | Misunderstanding of what this benchmark represented. Quality Assurance of appraisal system needed. |
| Benchmark 5 | | Requirement 5.2 1. CAR: 01/02/09 2. CAR: 01/11/09 | | Requirement 5.1 CAR: 01/02/09 Requirement 5.2 CAR: 01/11/09 Requirement 5.3 CAR: 01/11/09 Requirement 5.4 CAR: 01/11/09 | Ad Hoc complaints received from a variety of stakeholders, but DCA still at trail stage in 3 field sites. Integration into ongoing activities could be explored. |
| Benchmark 6 | | Requirement 6.1 CAR: 01/11/09 Requirement 6.2 CAR: 01/11/09 | | Requirement 6.1 CAR: 01/11/09 Requirement 6.2 CAR: 01/11/09 | A strategic plan to support partners in the agreed means of strengthen the quality and accountability of work is limited. |
| Total | 0 | 5 | 0 | 11 | |