

Certification Audit Summary Report of the 2010 HAP Standard

Application Organisation Information

Organisation:	Lutheran World Federation Department for World Service (LWF/DWS)	Audit Ref / No:	E014/0112-H
Head Office Location:	Geneva, Switzerland	Programme Site locations:	Nepal
Date of Head Office Audit:	22–25 November 2011	Dates of Programme Site(s) Audit:	28-2 nd December 2011
Agency Representative:	Maryssa Camaddo, Programme Officer, Quality Assurance and Accountability	Auditor (s):	Johnny O'Regan, Independent Auditor

Background

The Lutheran World Service (LWF) is a global communion of Christian churches in the Lutheran tradition. Founded in 1947, the LWF has 145 member churches in 79 countries representing over 70 million Christians. The LWF Department for World Service (LWF/DWS) is the relief and development arm of the LWF. LWF/DWS works in 35 countries through three regional programmes, 16 country programmes and ten associate programs that have transferred governance to a local structure.

LWF/DWS responds to emergencies via existing national and regional structures in areas where it has a strategic presence. LWF/DWS has approximately 50 international staff and 5,000 national staff. LWF/DWS is highly decentralized; only 15 people work in LWF/DWS Geneva (Head Office), which is responsible for overall management and coordination; HO staff liaise directly with country program representatives and offices. The majority of development work is through implementing partners; humanitarian interventions are generally likely to be undertaken directly.

The LWF is a founding member of the ACT Alliance (Action by Churches Together), one of the world's largest networks of church and church-related humanitarian relief and development organizations.

LWF/DWS focuses on six priority areas, adapted to local contexts and informed by local communities:

- Responding to and preparing for disasters
- Creating sustainable communities
- Combating HIV & AIDS
- Promoting peace, reconciliation and human rights
- Transforming gender relations
- Protecting the environment

Audit History

- Baseline Analysis – Head Office 22-24 June 2009
- Baseline Analysis – Programme Site Uganda 21-25 September 2009

Audit Methodology

This is a sample quality assurance audit to review current status against the HAP 2010 Standard of the LWF Department for World Service (LWF/DWS). The review includes:

- *Documentation*

LWF/DWS provided core documents electronically before, during and after the visit. Some hard copies were also provided on site during the audit. The auditors reviewed over 200 documents for the LWF/DWS audit.

- *Interviews*

The interviews followed a semi structured approach and focused on exploring all six benchmarks of the 2010 HAP standard¹. The auditors interviewed a cross section of staff in Geneva, Switzerland (15 Head Office, 1 ACT Alliance) and in Kathmandu and Damak, Jhapa (14 staff) on perceptions, awareness and understanding of the accountability framework and quality management responsibilities. The auditors also interviewed local partners, 4 staff from SOLVE, 2 staff from Sanischware Butanese Refugee Camp, 2 staff from Sahara as well as 1 staff from RCDO to assess the quality of the partnership, their awareness and understanding

¹ The text indicates the source of the information upon which the findings are made, either interviews or documents. The names of the interviewees are kept confidential.

of the LWF/DWS accountability framework and quality management responsibilities. The auditor conducted focus group discussions and individual interviews with members of affected communities from the Ujjwal Community Organisation, the Yangsila Village Development Committee, Aanptar, Ward 8 to ascertain their views of LWF/DWS's application of its accountability and quality commitments. The auditor met with 25 beneficiaries, including women, men, and children.

- *Observation of practice*

The auditor reviewed core documents relevant to the HAP Standard and through observation noted good practice and achievement of quality and accountability commitments.

Translation: An independent interpreter accompanied the auditor during community interviews.

Audit Plan

- Head Office – Geneva, Switzerland: 22-25 November 2011
- Programme Site – Nepal: 28 – 2nd December 2011. The programme site and national partners were selected by the auditor.

The audit schedule was established by the auditor, including interviews with all staff in the office and programme sites. Some minor adjustments were made to avoid schedule conflicts.

The scope of this audit is specific to the **LWF Department for World Service (LWF/DWS)** program and activities. This audit report covers both the Head Office and Nepal programme audit. Agreed Corrective Actions (ACA) are issued separately.

Findings

The independent HAP auditor audited the LWF Head Office in Geneva, Switzerland and the programme site in Nepal for conformity with the *HAP 2010 Standard in Accountability and Quality Management* (HAP Standard). The audit was carried out in Geneva from 22-25 November 2011 and in Nepal from 28 to 2nd December 2011.

The provision of evidence in support of the Application for Certification is the responsibility of the Officer for Quality and Accountability and the Senior Management of LWF/DWS. It is the responsibility of the HAP auditors to express an opinion both on the evidence provided and on the interviews carried out during the audit. I confirm that the audit team conducting the audit meets the requirements for HAP auditors concerning professional competence and independence.

The 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 as to the agency's conformity with the HAP Standard. The audit team audited LWF/DWS on a sample test basis through an examination of documentary evidence provided and through interviews with LWF staff in the Geneva and Nepal offices. In the Nepal programme site, the auditor interviewed LWF staff, the staff of partner agencies and disaster survivors of LWF funded programmes. The audit findings provide a reasonable basis for the recommendation.

The HAP Certification and Accreditation Review Board reviewed the auditor's findings and on that basis determined that LWF/DWS is in compliance with the HAP 2010 Standard with findings summarised in the auditor's report. The Certification and Accreditation Review Board has awarded certification on that basis.

Ester Dross
 Certification Manager, Regulatory Services

Summary Report compiled by Ester Dross, Certification Manager, HAP International
 17 January 2012

Summary Table of Findings

ACA: Agreed corrective action

Timeframe: Deadline for providing a response to the ACA that demonstrates what action have been undertaken to rectify the minor non-compliance identified.

HAP Standard	Head Office (HO) and Programme Site (PS)	
Qualifying Norms	met	
Covenant	met	
	FINDINGS	AGREED CORRECTIVE ACTION
Benchmark 1.1		
Benchmark 1.2		
Benchmark 1.3		
Benchmark 1.4		
Benchmark 1.5		
Benchmark 1.6		
Benchmark 2.1		
Benchmark 2.2		
Benchmark 2.3		
Benchmark 2.4		
Benchmark 2.5		
Benchmark 2.6		
Benchmark 2.7		
Benchmark 2.8		
Benchmark 3.1		
Benchmark 3.2		
Benchmark 3.3 Head Office		LWF/DWS documentation should require that the information specified in requirement 3.2 is presented in languages, formats and media that are appropriate for, accessible to, and can be understood by the people it aims to assist and other stakeholders. Timeframe: 13 th January 2013
Benchmark 3.4		
Benchmark 3.5		
Benchmark 3.6		
Benchmark 3.7		
Benchmark 4.1		
Benchmark 4.2		
Benchmark 4.3		
Benchmark 4.4		
Benchmark 4.5		
Benchmark 5.1		
Benchmark 5.2		
Benchmark 5.3		
Benchmark 5.4		
Benchmark 5.5		
Benchmark 5.6		

Benchmark 5.7		
Benchmark 6.1		
Benchmark 6.2		
Benchmark 6.3		
Benchmark 6.4		
Benchmark 6.5 Head Office		Develop central guidance on working with partners to agree how to jointly monitor and evaluate programmes, the quality of the partnership, and each other's agreed performance, and to put this agreement into practice. Timeframe: 13 July 2013
Benchmark 6.6		
Total		2

Audit Key

Major Non Compliance: this will result in a delay in the recommendation for certification process, which can only proceed once the correction actions have been met and verified.

A major non-compliance could be due to a number of reasons such as:

- Complete absence of a procedure as noted in the Standard
- A series of minor non-conformances all focused on the same element of the standard; unless, at re-certification, a time frame agreed for corrective action on first certification has not expired, and the auditor assesses that corrective action is likely to be completed within that time frame
- A serious violation of qualifying norms and/or humanitarian principles
- A clear lack of control on some key management issues
- Immediate dangers for the beneficiaries or for the quality of the service to the beneficiaries
- A Minor detected in a previous audit not addressed within the specified time
- False Declarations

Minor Non Compliance: this will not result in a delay of the recommendation for certification but will require corrective action within a specified time frame. Certain corrective actions on first certification may warrant a time frame of more than three years (but never more than six years).

A minor non-compliance could be due to a number of reasons such as:

- Failure to implement management system policy / guidelines systematically
- Incomplete key documents / records
- Oversight

Exoneration: this is when, due to the context of the location audited, a justifiable and up to date explanation has been given by the agency as to why a benchmark / requirement has not been met – rationale should be based on the humanitarian accountability principles in the Covenant.

Recommendation: This is a non-binding improvement proposition given by the auditor that if not addressed could weaken the agency's humanitarian accountability and quality management assurance.

Observation: An observation is the value added input an auditor can give to draw the agency's attention to issues noted during the audit that could impact the agency either negatively or positively. It captures both observed good practice and areas where improvement should be looked into.