CERT-MA1-NABAA-2017-004

HUMANITARIAN QUALITY ASSURANCE INITIATIVE

Maintenance audit report

Developmental Action Without Borders - Naba'a

March 29, 2017

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1. General information

Organisation Name:	Developmental Action Without Borders / Naba'a	Certification No:	HQAI2016-002
Type of organisation: ☒ National ☐ International ☐ Federated ☐ Membership/Network ☒ Direct assistance ☐ Through partners		Organisation Mandate: ☒ Humanitarian ☒ Development ☐ Advocacy Verified Mandate(s) ☒ Humanitarian ☒ Development ☐ Advocacy	
Organisation size:	21 project locations	Legal Registration:	NGO
Head Office Location:	Saida, Lebanon	Field locations verified:	NA
Date of Head Office Verification:	2017-03-10	Date of Field Verification:	NA
Lead Auditor:	Elissa Goucem	2nd Verificator's Name: *(indicate if Trainee)*	NA
		Observer's Name and Position	NA

2. Scope

☐ External verification ☒ Maintenance audit

☐ Certification audit ☐ Recertification audit

The auditor did not identify substantial changes in Nabaa's systems that would require an investigation on areas that were not part of the non-conformities identified in the initial audit report.

The maintenance audit thus focused on the non-conformities identified in the previous audit report and found that Nabaa took action to close the non-conformities in the given times for resolution.

Auditor's Name and Signature	Elissa Goucem	Date and Place: 2017-03-29, Geneva

3. Schedule summary

3.1 Verification Schedule

Type of people interviewed	Number of people interviewed
Head Office	
Senior Management team	1

3.2 Opening and closing meetings

	Opening meeting	Closing meeting
Date	2017-03-10	2017-03-10
Location	Saida	Saida
Number of participants	1	1
Any substantive issue arising		

4. Summary on actions taken to resolve non-conformities

CAR 4.1.1: Information on the organisation, its principles and the expected behaviours of staff are not systematically provided to new communities with whom Naba'a works.

Time for resolution: 2 years

CAR in resolution

Naba'a has put in place several new systems to ensure information on the organisation, its principles and expected behaviours of staff are systematically provided to new communities. Since 2015, "Project orientations" are given to local communities, other local NGO's and stakeholders at the beginning of all projects and on a regular basis. The complaints handling mechanism and process are shared during these orientations.

Information about the organisation and its values is also shared through the newly established self-support groups at the level of the neighbourhoods. The support groups were created as a tool to provide decentralised and ongoing information to beneficiaries and other stakeholders at project locations.

Evidence: Documents 1, 4, 6, 11, 9, and interviews with staff.

CAR 5.1.2: Consultations on the implementation and monitoring of complaints handling processes are not systematic and do not engage the communities involved in new programmes.

Time for resolution: 2 years

CAR in resolution

In the context of its strategic review, Naba'a held a series of consultations with communities in 2015 and 2016. Feedback were received on the complaints handling mechanism which fed into its review, such as the designation of two responsible focal points for sensitive issues (now the Executive manager and the Chairman of the Administrative Board) and the necessity to publish a direct access number for complaints in all Naba'a offices and centres. The auditor observed that the number was now broadcasted in the entrance door of the main office.

From April to June 2016, Naba'a implemented 10 raising awareness workshops in 10 project locations. During these sessions, large groups of beneficiaries (600 adults and 600 youth, adolescent and children) received relevant information on the reviewed complaints handling mechanism, including the different paths to lodge a complaint depending on the sensitivity of the issue and the role of the monitoring committees and the complaints focal points of Naba'a.
Also see 4.1.

Evidence : Documents 1, 3, 4, 12, 10, 8, and interviews with staff.

5. Decision

Certification	Intermediate audit
☐ Certified ☐ Not certified (Major CARs)	☒ Maintenance of certificate ☐ Suspension of Certificate (Major CARs)

Pierre Hauselmann

Executive Director

Acknowledgement and Acceptance of Findings

(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

Organisation's Representative Name and Signature: Dr. Qassem Saad

Date and Place:

List of key documents

Nª	Title	Date	CHS link