World Renew

Quality and Accountability Framework (QAF)

October 2019
1. INTRODUCTION

As an organisation that is compelled by God’s deep passion for justice and mercy, World Renew is committed, at the highest levels, to being an organisation that endeavours to undertake its work in a principled, accountable and high quality manner. Two of our core values in particular highlight the foundational nature that quality and accountability both have in guiding our approach to our work:

- **Effectiveness:** We are innovative, resourceful and continual learners with partners and communities to ensure timely, appropriate, proactive and excellent interventions.
- **Stewardship:** We are grateful recipients of God’s gifts to us. We steward these gifts with integrity, accountability and systems of reporting that honour both the intent of the donors and the flourishing of people in communities.

As such, we, as the leadership in the organisation, firmly believe that our corporate commitment to quality and accountability is an outworking of our identity as a ministry of the Christian Reformed Church in North America, and as a part of Christ’s wider church in the world. We encourage all of our staff and partners to strive to continually improve the quality and accountability of all our work. We also encourage our stakeholders (donors, supporters, partners and communities we work with) to hold us accountable to the policy commitments we have made.

Carol Bremer-Bennet
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2. BACKGROUND

World Renew’s Quality and Accountability Framework (QAF) summarises our organisational commitments towards our various stakeholders. In turn, this enables stakeholders to hold World Renew accountable for these commitments. These commitments, made in policies and standards, are supported by a well-articulated set of documents, such as guidelines, procedures, forms and checklists, in order to help implement the policies effectively.

3. PURPOSE

Building and maintaining the quality and accountability framework requires input from across the whole organisation. This document is intended to provide clarity for how different documents that support our QAF are understood, developed and maintained. Annex 1 then provides a comprehensive list of all World Renew’s accountability documents, with details of what suite/category they are part of, who the owner is, when they were last reviewed and the date for next review.

4. DEFINITIONS

a. Policy

i. Board Policy

These policies are **formal, brief and high level statements** that outline World Renew’s values, goals, objectives and acceptable norms. **Board Policies** address each category of organisational decision following the Carver Model, including:

1. Global Ends Policy
2. Executive Limitations
3. Board-Executive Linkage
4. Board Process

ii. (Operational) Policy

A mandatory action or rule (commitment) designed to support and conform to a Board Policy:

- Requires compliance (mandatory actions)
- Failure to comply results in disciplinary action
- Focus on desired results, not on means of implementation
- Further defined by standards, guidelines and/or procedures

b. Standards

i. Internal Standards

A mandatory action or rule designed to support and conform to a policy.

- Requires compliance (mandatory action)
- Failure to comply results in disciplinary action
- A standard should make a policy more meaningful and effective.
- A standard must include one or more accepted specifications for hardware, software, or behaviour.
ii. External Standards

In addition to internal standards that elaborate on policy expectations, World Renew ascribes to various external professional and technical standards, for example the Core Humanitarian Standard on Quality and Accountability (CHS), Sphere Minimum Standards in Humanitarian Response, The Code of Conduct for International Red Cross and Red Crescent Movement and Non-Governmental Organisations (NGOs) in Disaster Relied and the CCIC Code of Ethics. Often our commitment to abide by these external standards is linked to World Renew’s membership or affiliation with other bodies (for example CHS Alliance, ACT Alliance etc). A list of these external standards is listed in the Table in section 7.

c. Policy Guidance

Policy Guidance includes general statements, recommendations, or administrative instructions designed to help achieve the policy's objectives by providing a framework within which to implement procedures.

- Policy Guidance can change frequently based on the environment and should be reviewed more frequently than standards and policies.
- Policy Guidance is not mandatory, rather a suggestion of good practice, and can be contextualised.

d. Procedure

Organisation-wide procedures describe the process of who does what, when they do it, and under what criteria. They can be text based or outlined in a process map. Such procedures represent implementation (the 'how') of Policy Guidance.

- A series of steps taken to accomplish an end goal.
- Procedures define "how" to implement policy and are the mechanisms to enforce policy.
- Procedures provide a quick reference in times of crisis.
- Compliance with established procedures is expected.
- The consequence of not following a set procedure is not as serious as a breach of Policy and is more at the discretion of the direct supervisor.

e. Forms and Other Supporting Documents

Forms are documentation that are used to create records, checklists, surveys, or other documentation used in the creation of a product or service. Records are a critical output of any procedure or work instruction and form the basis of process communication, audit material, and process improvement initiatives.

Please see Annex 1 for a list of World Renew’s Accountability documents using the above categorisation.
Figure 1: Policy Pyramid

*Adapted from “The five automatic rules for creating effective policy.” [Link](https://www.garner.com/blog/post/5-automatic-rules-for-creating-effective-policy)
5. PROCESS FOR DEVELOPING AND APPROVING POLICY

The process for developing, approving and maintaining documents within the quality and accountability framework will vary depending on the nature of the document. Also, in time, as the process becomes more systematized the maintenance of the various documents will also shift. The descriptions below highlight the key differences in responsibility for the different types of accountability documents.

a) Policies and Standards:

Policies and standards, given the scope and reach, require the most rigorous approach with both legal review and final approval from the Co-Directors/CPAC. The Policy Committee plays a key role in supporting the development, review and finalization of policy for approval, working with Subject Matter Experts, such as teams or reference groups who take the lead on technical content. The ongoing review of policies is the responsibility of the Co-Directors.

b) Policy Guidance

Like policy, the Policy Committee plays a role in supporting the development of policy guidance, with specific teams or reference groups with relevant technical expertise taking the lead. As the policy guidance has application across the whole organisation, input is sought from each relevant team/department through the membership of the group. Once the policy guidance is finalised, it is approved by the relevant team leader.

c) Procedures

The development of procedures, given the technical and often specific nature of the material, falls to the respective team or department (e.g. CORE, IDR, HR). While wider consultation might be necessary or appropriate, the relevant Team Leader has the authority to finalize procedures, forms and other supporting documents that support the implementation of policy.

Summary Table:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Standard</th>
<th>(Policy) Guidance</th>
<th>Procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applies:</td>
<td>Whole Org.</td>
<td>Whole Org.</td>
<td>Whole Org.</td>
</tr>
<tr>
<td>Application:</td>
<td>Mandatory</td>
<td>Mandatory</td>
<td>Discretionary</td>
</tr>
<tr>
<td>Review:</td>
<td>5 years</td>
<td>5 years</td>
<td>2-5 years</td>
</tr>
<tr>
<td>Approved by:</td>
<td>CPAC</td>
<td>CPAC</td>
<td>Team Leaders</td>
</tr>
<tr>
<td>Example:</td>
<td>Complaints Policy</td>
<td>Code of Conduct</td>
<td>Complaints Handling and Investigations Guidelines</td>
</tr>
</tbody>
</table>
Figure 2: Policy Development Process
6. ORGANISATIONAL SUPPORT TO STAFF

Effective implementation of the Quality and Accountability Framework requires a strong commitment by the organisation to support the staff to know about the policies that are in place to guide their work, to understand the implications of those policies and the consequences of not adhering to them, and to equip the staff to be able to apply the policies to their work.

This support is provided through a number of different ways, including training and the provision of tools to support policy implementation (eg formats, procedures, guidelines etc).

On-Boarding Training

As all new staff start their role with World Renew, a summary explanation of key policies is part of any on-boarding training in order to ensure that staff are aware of the organisational policies that are in place. Access to all policies in full is provided to new staff for reference, with a requirement to read them all during their probation period.

A copy of the Code of Conduct Standard is signed when signing the employment contract.

Before the probation period is completed, compulsory training specifically on the Code of Conduct Policy and the Complaints Policy is undertaken to ensure staff responsibilities on these two important elements of organisational Policy are clear.

Depending on the role and function, supervisors may require additional compulsory training during the probation period (eg security training for frequent travelers).

Refresher Training

In order to maintain knowledge and awareness of key policies, refresher trainings are undertaken with all staff periodically. Annual refresher trainings on the Code of Conduct Policy and the Complaints Policy are a minimum requirement.

Tools to Support Policy Implementation

For specific policies that require additional support for staff to be able to implement them in an effective and consistent manner across the organisation, this is provided, often in the form of supplementary Policy Guidance, specific procedures, protocols or templates.