# Audit Your Organization Against the IASC Minimum Operating Standards for PSEA

Determine to what level your organization has implemented each of the pillars below. Mark the appropriate column to the right with a 🗸 indicating:

1. implemented
2. partially implemented
3. not implemented
4. do not know

###### **Pillar 1: Management and coordination:**

* Effective policy development and implementation
* Cooperative arrangements
* Dedicated department / focal point committed to PSEA

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | a. | b. | c. | d. |
| 1. | A policy stating standards of conduct, including acts of SEA, exists and a work plan to implement the policy is in place. |  |  |  |  |
| 2. | The policy/standards of conduct have been conveyed to current staff and senior management (at HQ and field level) on repeated occasions (such as inductions and refresher trainings). |  |  |  |  |
| 3. | SG’s Bulletin (ST/SGB/2003/13) or respective codes of conduct are included in general contract conditions. |  |  |  |  |
| 4. | Procedures are in place to receive written agreement from entities or individuals entering into cooperative arrangements with the agency that they are aware of and will abide by the standards of the PSEA policy. |  |  |  |  |
| 5. | A dedicated department/focal point have the overall responsibility for the development and implementation of PSEA policy and activities. |  |  |  |  |
| 6. | The responsible department/focal point is required to regularly report to senior management on its progress on PSEA through the Senior Focal Point on PSEA. |  |  |  |  |
| 7. | Staff members dealing with PSEA have formalised responsibility for PSEA in their job description, performance appraisal or similar. |  |  |  |  |
| 8. | They have received systematized training on PSEA and the time committed to PSEA is commensurate with the scale of implementation required under the current situation of the organization. |  |  |  |  |

**Pillar 2: Engagement with and support of local community population**

* Effective and comprehensive communication from HQ to the field on expectations regarding raising beneficiary awareness on PSEA
* Effective community based complaints mechanisms (CBCM), including victim assistance.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | a. | b. | c. | d. |
|  | The HQ has communicated in detail the expectations regarding beneficiary awareness raising efforts on PSEA (including information on the organisation’s standards of conduct and reporting mechanism). |  |  |  |  |
|  | The HQ has distributed examples of awareness raising tools and materials to be used for beneficiary awareness raising activities. |  |  |  |  |
|  | The HQ urges its field offices to participate in community based complaint mechanisms that are jointly developed and implemented by the aid community adapted to the specific locations. |  |  |  |  |
|  | There is guidance provided to the field on how to design the CBCM to ensure it is adapted to the cultural context with focus on community participation. |  |  |  |  |
|  | There is a mechanism for monitoring and review of the complaint mechanism. |  |  |  |  |
|  | The organisation has written guidance on the provision of victim assistance. |  |  |  |  |

###### **Pillar 3: Prevention**

* Effective recruitment and performance management
* Effective and comprehensive mechanisms are established to ensure awareness-raising on SEA amongst personnel

|  |  | a. | b. | c. | d. |
| --- | --- | --- | --- | --- | --- |
|  | The organisation makes sure that all candidates are required to sign the code of conduct before being offered a contract. |  |  |  |  |
|  | Each organisation commits to improving its system of reference checking and vetting for former misconduct. |  |  |  |  |
|  | Supervision and performance appraisals include adherence to participation in Code of Conduct trainings (or similar) that includes PSEA. |  |  |  |  |
|  | Performance appraisals for Senior Management include the adherence to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of the ST/SGB/2003/13 or code of conduct. |  |  |  |  |
|  | Staff receives annual refresher training on the standards of conduct, learn about the mechanism to file complaints and reports of misconduct and the implications of breaching these standards. |  |  |  |  |
|  | Training on misconduct (specifically mentioning SEA) forms part of the induction process. |  |  |  |  |
|  | Staff members are aware of their obligation to report SEA/misconduct and are aware that there is a policy for Protection from retaliation in place. |  |  |  |  |

###### **Pillar 5: Response**

* Internal complaints and investigation procedures in place

|  |  | a. | b. | c. | d. |
| --- | --- | --- | --- | --- | --- |
|  | Written procedures on complaints/reports handling from staff members or beneficiaries are in place. |  |  |  |  |
|  | Staff members are informed on a regular basis of how to file a complaint/report and the procedures for handling these. |  |  |  |  |
|  | Standard investigation operating procedures or equivalent issued and used to guide investigation practice. |  |  |  |  |
|  | Investigations are undertaken by experienced and qualified professionals who are also trained on sensitive investigations such as allegations of SEA. |  |  |  |  |
|  | Investigations are commenced within 3 months and information about out-come is shared with the complainant. |  |  |  |  |
|  | Substantiated complaints have resulted in either disciplinary action or contractual consequences and, if not, the entity is able to justify why not. |  |  |  |  |