



**USAID**  
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# PALESTINIAN AUTHORITY CAPACITY ENHANCEMENT PROJECT

**CREATING A MORE EFFECTIVE, EFFICIENT, AND  
RESPONSIVE GOVERNMENT FOR THE BENEFIT OF  
THE PALESTINIAN PEOPLE**

## **CASE STUDY REPORT**

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## EXECUTIVE SUMMARY

USAID's Palestinian Authority Capacity Enhancement (PACE) project complemented national efforts to create more effective and responsive PA (Palestinian Authority) institutions. PACE was designed to achieve quick improvements in the delivery of government services at targeted ministries. USAID selected six government institutions to participate as partners in capacity building through the creation of Centers of Excellence (COE) within ministries, teams representing all levels that assessed their institutions to identify needs, design solutions, and oversee implementation of reforms. The project provided targeted technical expertise, coaching, tools, and training to strengthen key effective governance areas and improve service delivery.

This study analyzes PACE's contributions to the PA's improved governance, using an external framework to provide an understanding of the project's results. USAID's Organizational Capacity Assessment (OCA) measures key capacity factors, each one broken down into detailed subfactors. The OCA was tailored slightly to measure government institutions specifically, using 7 factors with 35 subfactors. The rating system has four levels, a score of 1 reflecting low capacity, 2 for basic capacity, 3 for moderate capacity, and 4 for strong capacity. The ratings were derived from data collected through quantitative and qualitative methodologies in 2009 at the project's start, and in 2012, at the close.

The Ministry of Interior showed a significant improvement in nearly all seven factors, as did the Ministry of Public Works and Housing: both rose nearly two levels. Across institutions, scores for all seven factors rose approximately an entire level. The factor reflecting the most significant changes was service delivery, rising almost two levels, demonstrating the project's emphasis on impact where citizens interact with government. The factor with the least change was human resources. Subfactors with significant improvements across most or all of the institutions include: mission/vision statements that guide policies; operations, where streamlined and newly documented procedures aid employees in performing their duties; staff training; change management; and community relations, as the project's grants program promoted citizen/institution dialogue and ministries strengthened communications and public outreach.

Key lessons from the project include the importance of leadership support, multi-level working groups to increase ownership at all levels, inclusion of entities that work across institutions to leverage project efforts, completing short-term interventions to build credibility and trust while tackling longer-term issues in parallel, and remaining flexible to seize new opportunities. Other lessons include encouraging ministries to collaborate while using competition as motivation, expecting a slow start as change must overcome fear of change, connecting to national goals, and allowing for multi-year cycles and multiple cycles to entrench the change management process.

Governments now must view citizens as consumers, and even compete at times with the private sector for citizen business. Next steps for PA institutions include expanding alternative methods to access services, providing e-government solutions, integrating services under one roof, institutionalizing overall quality management systems, installing monitoring and evaluation mechanisms, implementing gender strategies, creating knowledge management systems, improving communications, and expanding successful existing models.

## OVERVIEW OF THE PROJECT

USAID designed the PACE project to complement national efforts to create more effective and responsive PA institutions. Begun in September 2008, the project concluded in March 2013, providing approximately \$28.8 million in assistance. In a 2010 speech, Prime Minister Fayyad placed PACE and its COE initiative at the core of government reform efforts. PACE was not intended to be a broad-based public sector capacity development project; it was designed to achieve quick improvements in the delivery of basic government services at targeted ministries and contribute to the long-term impact of USAID efforts in other sectors by building institutional capacity. Within this contractual framework, PACE provided short- and medium-term capacity building assistance to achieve tangible results benefiting Palestinians throughout the West Bank.

USAID selected ministries and government institutional partners based on their services to Palestinian citizens, opportunities they presented for immediate and tangible impact, and their commitment to change. During the first three years, PACE's main partners were the Ministry of Finance, Ministry of Interior, Ministry of Public Works and Housing, Ministry of Transportation, and the Ministry of Telecommunications and Information Technology. In the last two years, the General Personnel Council joined as a partner. The project's overall objectives were:

- Improved delivery of key services that result in immediate tangible benefits to citizens,
- Increased financial transparency and accountability in public finance management,
- Enhanced and sustainable capacity of PA officials, and
- Strengthened public communications about, and participation in, PA decision-making.

PACE improved basic government services by using an integrated approach that included facility renovations, business process re-engineering, information technology (IT) upgrades, training in customer service, and other interventions that produced measurable improvements in the public's satisfaction with government services, transparency, and efficiency. At the institutional level, PACE empowered civil servants with the knowledge and skills for a sustained change management process through the Centers of Excellence (COE) framework. More than 380 COE team members from 6 ministries scored their ministries on institutional performance, and then identified and implemented approximately 100 reform initiatives. The project provided targeted technical expertise, coaching, tools, and training to strengthen key effective governance areas.

PACE improved the capacity of government entities through support that clarified institutions' missions, organizational structure, and governance; documented operating procedures; strengthened human resources, communications, and training; institutionalized methods to solicit and incorporate citizen feedback on government performance; developed strategies to remove barriers to women's access to services; and strengthened service delivery. Results are evident in increased citizen satisfaction, improved capacity to regulate prices in the telecommunications sector, 400 km of repaired roads, a re-born postal service that more than doubled revenues, transparent and efficient provision of official identification documents, increased collection of property and income taxes, and automated written driver license testing, among many others.<sup>1</sup>

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<sup>1</sup> Click on the following for a video summarizing the achievements of the PACE project: [PACE Final Report Video](#)

## CASE STUDY METHODOLOGY

USAID requested this case study to analyze how PACE has contributed to the PA's improved governance, using an external framework to provide a meaningful understanding of the project's outcomes. Initially, the World Bank's Governance Effectiveness Index (GEI) was considered for the case study's theoretical construct. However, data for the West Bank is collected on only 4 of the GEI's 17 component sources. A review of organizational capacity measurement frameworks from a variety of sources was conducted, including the World Bank, the United Nations Development Programme, the Organisation for Economic Co-operation and Development, McKinsey & Company, and others.

The framework ultimately selected was USAID's Organizational Capacity Assessment (OCA),<sup>2</sup> which was designed to measure the capacity of organizations as they grow to become stronger, more mature entities. The OCA contains eight key capacity factors, each one broken down into more detailed subfactors. However, the OCA is designed primarily for use with nonprofit organizations and includes assessment for the readiness to receive USAID funding directly. Thus, some factors were inapplicable to government institutions, while other aspects particular to government were omitted. The OCA was revised to delete irrelevant material (e.g., legal status of registration, ability to complete biodata forms) and add missing areas (such as the delivery of services to citizens). A list of the resulting 7 factors with 35 subfactors is found in Annex A.

The OCA has a four-level rating and scoring criteria to guide the rating. The scoring criteria typically consists of what formulation and documentation of policies and procedures exist on a specific topic, how complete that documentation is, how aware staff are of the documents, and whether and how consistently staff acts in compliance with the documents. The rating ranges from 1 to 4, with a score of 1 indicating the organization has low capacity in that area; 2 indicates basic capacity; 3 indicates moderate capacity, and a score of 4 indicates strong capacity. The factors and subfactors are not weighted.

For this case study, a consultant external to the PACE project prepared the revision of the OCA and developed the tools for data collection, which was conducted through document reviews, observation, focus groups, surveys, and interviews. Because five of the six ministries had completed a self-assessment tool similar to the OCA in 2009 and 2012 through the COE process, the case study relied on COE reports<sup>3</sup> where possible. Where no COE data existed, project staff conducted interviews and focus groups and reviewed institution documents to complete data collection. The project's 2009 and 2012 customer satisfaction surveys were also sources of information. Thus, quantitative and qualitative methodologies underlie the findings that follow. Because no counterfactual groups were measured, and due to the multiplicity of donors working with the various ministries, project contribution to results is noted, rather than strict attribution.

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<sup>2</sup> The July, 2011 version of the OCA is a compilation of five different organizational assessment tools, with other resources referenced.

<sup>3</sup> The COE self-assessment data collection methods included interviews, observation, focus groups, internal surveys, and document reviews.

## FINDINGS AND RECOMMENDATIONS

### General Findings

As noted above, the project was not a long-term comprehensive capacity building project, but rather was aimed to achieve short- and medium-term gains. The first six factors of the revised OCA compare the assessment of the ministry's institutional functioning at project onset (2009) and near the conclusion (2012), regardless of whether PACE worked in that area; however, PACE's areas of activity are highlighted below. The seventh factor, service delivery, measures only the specific areas in the ministries where the project worked.<sup>4</sup> The initial round of COE self-assessments resulted in reports to ministries that highlighted areas of needed improvement in all categories of institutional functioning, and COE teams identified, recommended, and led the implementation of solutions in a number of areas. No ministry implemented every solution for every identified issue, and the project was only able to support a limited number of solutions. In some instances, when the project could not support reforms for all areas, ministries undertook reforms at their own expense and initiative. While these gains are not recounted here as direct project results, there is no greater evidence of the project's contribution and sustainability.

Annex A contains the detailed chart showing the ratings for all ministries in 2009 and 2012 in each subfactor, and calculates the level of change by subfactor. Changes by factor levels are found in the following section, described by ministry. Two of the ministries were not scored in the service delivery factor, as the project's activities did not intervene in areas involving direct interaction with citizens: with the Ministry of Public Works and Housing, the project supported the creation of road maintenance crews, and the General Personnel Council's mission is to support other ministries rather than provide services directly to citizens. Table 1 below provides the average of ratings in all factors for all six of the project's major partner institutions. In the four-level scoring, a score of 1 reflects low capacity, 2 reflects basic capacity, 3 reflects moderate capacity, and 4 reflects strong capacity.

**Table 1. Comparison of overall scores of institutions**

Institution	2009 Score	2012 Score	Level of Change
Ministry of Interior	1.5	3.3	+1.8
Ministry of Telecommunication and Information Technology	2	2.7	+.7
Ministry of Transportation	2.1	2.6	+.5
Ministry of Public Works and Housing	1.4	2.8	+1.4
Ministry of Finance	2.1	2.3	+.2
General Personnel Council	1.9	2.2	+.3

<sup>4</sup> For example, the Ministry of Finance has 24 departments; PACE worked with only 2, the property tax division and until the start of another, more targeted USAID project, the income tax division (the Ministry's main revenue generation divisions). This case study measures the service delivery of only those two divisions.

The Ministry of Interior demonstrated the most change during the project activity period, followed by the Ministry of Public Works and Housing. The Ministry of Finance shows the least change, followed closely by the General Personnel Council; however, the latter institution joined the project with a little more than one year left in the project’s duration.

**Table 2. Comparison of Average Level of Change by Factor and Institution**

Factor	MOT	MTIT	MOI	MOPWH	MOF	GPC	Average Factor Change
Governance	+7	+3	+2.4	+1.4	+3	+3	+9
Administration	+7	+1	+1.7	+1.3	+6	+6	+9
Human Resources	+4	+8	+9	+1.1	--	--	+8
Financial Resources	--	+8	+1.2	+1.2	--	--	+1.1
Organizational Management	-.3	+7	+2	+1.7	--	+5	+9
Program Management	+5	+3	+2.3	1.3	--	--	+1.1
Service Delivery	+1.6	+1.4	+2.1	N/A	+1.7	N/A	+1.7

Table 2 shows the average level of change by factor for all institutions. All seven factors showed a rise in functioning at approximately an entire level, either slightly above or slightly below. One factor rose even higher, by almost two levels. The factor reflecting the most significant change was service delivery, not surprising given the project’s emphasis on impact where citizens interact with government. The factor that had the least change was human resources. While institutions tackled a few reforms in their human resources practices on their own, most were waiting for the General Personnel Council to implement system-wide reforms.

Annex A contains the detailed chart showing the scores and levels of change for each subfactor. Beyond the service delivery subfactors that uniformly saw significant change, other reforms for particular subfactors related to institutional governance stand out. Subfactors that showed significant increases across most or all of the institutions include: subfactor 1a, as the COE groups typically clarified mission statements as a foundation for improving overall ministry governance; subfactor 2a, where the project frequently supported ministries in streamlining and documenting procedures that aid employees in performing their duties better; subfactor 3h, staff training on new or documented procedures; subfactor 5c, change management, because the COE model itself became the process for managing change; and subfactor 6b, community relations, as the project’s grants program promoted citizen/institution dialogue and strengthened their communications departments.

The following subsection describes each ministry’s trajectory, including: the ministry’s mandate, and the project’s interventions generally; the ministry’s scores by factor, at baseline in 2009 and close to project close, in 2012; and a brief description of the ministry in 2009 and the challenges the project faced in introducing the COE model. Each ministry portrait also describes the project’s activities as related to the subfactors, noting examples of project interventions and results that are reflected in score changes. Priority recommendations for the particular ministry are given as identified in the most recent COE self-assessment and by project staff.

## **Ministry Portraits**

### **Ministry of Interior, Civil Affairs Directorate**

*Ministry Mandate.* The MOI has two main divisions, Security and Civil Affairs; the project worked only with the Civil Affairs (CA) division. The project used the COE process to improve the MOI's CA internal governance functions and worked with the CA district offices, which are responsible for 44 services to citizens such as issuing passports, national IDs, and birth, death, and marriage certificates.

*Scores.* The MOI made the best progress of all six ministries in both the institutional governance and the service delivery measurements. At project inception, the ministry scored in either the low or basic capacity rating in every factor and subfactor. But by the project's end, the ministry showed improvements in all factors, generally accelerating two levels of capacity. In 2012, the MOI had no subfactor ranking at low capacity, and only 2 of the 36 subfactors were still ranked at basic capacity. Eleven of the subfactors are now rated at the strong capacity level, and the most common subfactor rating is at the moderate capacity level.

<b>Factor</b>	<b>Average 2009 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	1.6	4	+2.4
Administration	1.6	3.3	+1.7
Human Resources	2	2.9	+.9
Financial Resources	1.8	3	+1.2
Organizational Management	1.3	3.3	+2
Program Management	1	3.3	+2.3
Service Delivery	1.3	3.4	+2.1

*Initial status.* When the project began, the ministry's strategic plan focused on its security division and excluded the civil affairs division. There was no process for change management. Few procedures were documented and those were incomplete, inconsistent, unclear, and inefficient. Personnel were not recruited and assigned based on qualifications. Avenues for citizen feedback were nonexistent.

*Challenges.* The lack of clear leadership and development vision hampered the project in initial stages. District offices and major departments were managed as individual fiefdoms, with little connection with or consistency between them or the main institution. Political connections were often a defining factor for hiring and promotion.

*PACE activities and results.* The MOI had significant gains in all subfactors of factor 7, service delivery. PACE renovated and refurbished citizen service centers in a variety of district offices, resulting in wider availability of access for official documents beyond just a few major cities (subfactor 7a). PACE installed IT equipment that reduces the time needed to process and produce official documents and made the service centers user-friendly, including handicapped accessibility in some locations (subfactor 7b). Queuing equipment instills order into what had

been chaos (subfactor 7b). The streamlining of procedures and their documentation into manuals, along with the implementation of a strategic training plan, has resulted into more efficient work by civil servants (by 30% or more) and consistent procedures among the service centers (subfactors 2a and 7d). Bringing district office staff together has created horizontal relationships that have improved communication and consistency. Posters and citizen guides are available at service centers, increasing transparency about processes and reducing the opportunity for corruption. A self-administered citizen satisfaction survey and complaints mechanisms provide feedback to the MOI, which is now resolving difficulties and incorporating feedback into its operations plans to improve services, earning it a strong capacity rating in subfactor 6b.

**Now That's Record Time!**

Application processing time for national IDs, birth and death certificates, and other core services was reduced from 15 days to 20 minutes in MOI service centers in Bidiya, Hawara, and Toubas.

Within the ministry, a comprehensive strategic plan lays out the vision of the MOI's mission with clarity for both citizens and employees, earning the MOI strong capacity ratings in subfactors 1a and 1b. A solid succession plan, reflected by a strong capacity rating in subfactor 1c, ensures that a change in top leadership will not hinder the daily work of the ministry. Internal communications mechanisms (subfactor 5e) allow employees to understand MOI priorities as well as provide avenues to contribute ideas for institutional improvements (subfactors 2a and 4a). Employees and divisions are now managed by clear and accessible performance standards, with promotions based on merit rather than favoritism (factor 3). The MOI is the first ministry to offer citizens on-line services (subfactor 7a).

The MOI is implementing more than a dozen COE reforms without any donor support, earning its two-level increase in subfactor 5c.

*Recommendations.* Next steps for the MOI include the continued refurbishment of remaining service centers and ongoing improvements in IT. A help desk at each service center will provide assistance to citizens in understand procedures and resolving minor problems in accessing services. Web-based services can be increased, and citizen awareness about these promoted. Government approval of the new organization structure and job descriptions that the project assisted in developing will cement performance improvement reforms and provide more clarity in roles and responsibilities of various departments. The implementation of monitoring and evaluation plans, as well as quality management systems, will provide ongoing feedback to the MOI on its performance.



Deputy Minister of Interior Hassan Alawi (left), USAID West Bank Gaza Democracy and Governance Deputy Office Director David Billings (center), and USAID West Bank Gaza Deputy Director Sherry Carlin (right) open improved civil affairs office in Dura, one of 10 MOI offices improved with PACE/USAID assistance. Click on the following for a video summarizing the impact of some of PACE's effort to improve the provision of Civil Affairs services: [Improving MOI Civil Affairs Services](#)

## **Ministry of Telecommunications and Information Technology**

*Ministry Mandate.* The MTIT has the mandate of regulating and monitoring the telecommunications sector, including licensing and organizing broadcasting frequencies. It is responsible for oversight and regulation of postal offices throughout the West Bank, and has primary responsibility for the establishment of an e-government network. PACE assisted the MTIT with the postal service and other targeted areas.

*Scores.* The MTIT scored at the basic capacity level in almost every subfactor at project inception. The Ministry used the COE process to improve most of the institutional functioning subfactors to the moderate capacity level. The project's support made the most impact in improvements in service delivery, with every service delivery subfactor score increasing to at least the moderate capacity level and two of the subfactors to the strong capacity level.

<b>Factor</b>	<b>Average 2009 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	2	2.3	+.3
Administration	2	3	+1
Human Resources	2	2.8	+.8
Financial Resources	2	2.8	+.8
Organizational Management	2	2.7	+.7
Program Management	2	2.3	+.3
Service Delivery	1.7	3.1	+1.4

*Initial status.* In 2009, the postal system barely had a pulse. Mail delivery was underdeveloped and rarely used by the public, the private sector, and even government institutions because of their lack of confidence in the services. The MTIT lacked a vision for the postal service and the capacity to move postal services forward. With little use of the postal system, there was minimal revenue generation for the PA.

Licensing of telecommunications was stunted, with only one landline operator, two mobile phone companies, and a small number of internet service providers dominating and the lack of competition inhibiting the free market provision of service. The cost of telecommunications services was comparatively higher than benchmarks of neighboring countries, with the government lacking knowledge of international standard techniques for price regulation. As a ministry, MTIT lacked completed procedures manuals for major functions and had no service guides for stakeholders interested in using its services.

*Challenges.* The Ministry wanted to enforce key regulations across the telecommunication sector but did not have personnel with the requisite knowledge and abilities to fulfill their plan. There was no plan for internal knowledge management capacity, and the MTIT had no way to capture what was learned in various places and transfer it for the benefit of all. Human resource systems were weak and employee incentives were absent.

*PACE activities and results.* The MTIT was not an initial PACE project partner, but after seeing the project’s work in other ministries, MTIT made a request to USAID for project assistance. The MTIT improved its operational plans as reflected in subfactor 2a, developing 12 operating procedures manuals that addressed the functioning of the ministry as a whole. COE recommendations in the human resources practices led to improvements in six of eight subfactors under factor three, including development of specific job descriptions for many staff and documented personnel policies. The MTIT used project support for expertise to develop a cost model to regulate telecommunications, needing to analyze data to formulate the imposition of tariffs on companies that would result in reasonable prices for citizens. The most significant change in the Ministry’s institutional functioning was the use of the COE model as the mode for change management (subfactor 5c).

#### **Valuing Teamwork**

One of the products of the COE process was fostering teamwork, integrating Ministry employees to address key needs. When a consultant with requested expertise in cost modeling arrived to train MTIT staff, the entire cost modeling team, comprised of employees from lower levels to the Minister, stayed after hours to complete the training—despite the fact that their colleagues were striking to protest unpaid wages.

The project’s support for the postal service resulted in essentially a complete overhaul of that service. With PACE assistance, the MTIT developed a commercial strategy at the beginning of the project which drove initial change and service additions, and later a business plan for postal services (subfactors 5a and b) that included new products such as parcel delivery and express mail within the West Bank. The project supported refurbishment of three post offices, and the MTIT refurbished offices from its own budget as well as by partnering with the private sector, improving its score on subfactor 7b by two levels. A new branding plan increased not only public outreach and awareness of the changes in the postal service (subfactor 6b), but also renewed public confidence, reflected in the MTIT’s significant gain in the customer satisfaction rating (subfactor 7d). The evidence is found in the postal services’ new partnership agreements with the private sector and increased revenues. The MTIT is now conducting measurements of both employee and customer satisfaction, and has built a strong complaint unit with procedures to handle issues that arise with the public, raising its score in the community relations subfactor. Click on this link: [Rebirth of PalPost](#) video to see an overview of improvements of PalPost services.

*Recommendations.* Despite its gains, the MTIT has some areas that are ripe for continued improvement. Internal communication can be increased, with avenues to solicit and incorporate employee feedback to continue improving institutional functioning. Like many other ministries, the MTIT needs to develop monitoring and evaluation plans to measure and assure the quality of its services. Continued implementation of the postal business plan will cement public confidence in its services; in fact, the ambitious business plan, if fully carried out, can render the postal service as a government department that generates more revenues than it spends. Further training in financial reporting and knowledge management will boost institutional functioning across various departments. The MTIT can be empowered to enforce regulations within its mandate, and to develop and implement a gender strategy. Perhaps most importantly, the COE process can be elevated and strengthened to provide a sustained change management process for the years to come.

## **Ministry of Transportation**

*Ministry Mandate.* The Ministry of Transportation (MOT) has a diverse mandate in the West Bank. Its tasks include licensing of drivers, vehicles, and drivers' training schools; licensing of public transportation vehicles and drivers; licensing and regulation of vehicle importers; traffic control; and oversight of ports and airports. PACE worked with the MOT on select services around vehicle and driver licensing, traffic safety, and weight monitoring of vehicles.

*Scores.* The MOT showed good improvements in its delivery of services, and more marginal improvement in its institutional governance processes. There were improvements in all six of the service delivery subfactors, moving from an average of "poor" in 2009 up to an average of "moderate" in 2012. Two of the subfactors, knowledge management and decision making (subfactors 5d and 5f, respectively), declined in their 2012 scores from their 2009 scores, the only ministry among the six to show any decreases. This decline was most likely the result of changes in leadership during 2012, and changes that have yet to be fully institutionalized in terms of ministry reorganization.

<b>Factor</b>	<b>Average 2009 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	2	2.7	+.7
Administration	2.3	3	+.7
Human Resources	2.4	2.8	+.4
Financial Resources	2.3	2.3	--
Organizational Management	2.5	2.2	-.3
Program Management	1.8	2.3	+.5
Service Delivery	1.4	3	+1.6

*Initial status.* At project inception, the MOT lacked an understanding of the significance of public outreach. While there was considerable direct interaction with the public, there was no public service orientation. Service offices were poorly designed, with no organization of waiting customers, and a lack of features for comfort including heating, air conditioning, chairs, and separate bathrooms for men and women. None of the service centers where the public applied for and received licenses had handicapped access. Staff was not trained in either customer service or in procedures for accomplishing their duties. As a result, service provision was inefficient and inconsistent between offices. Lack of avenues for communication in the ministry hampered working relationships among ministry staff.

*Challenges.* MOT had three ministers over the life of the project, each with very different management styles. In many cases, competition between directors' general and other management levels and departments complicated the change process, and some departments and leaders resisted change. In other areas there was lack of proper communication between ministry layers, again hampering opportunities for overall institutional development.

*PACE activities and results.* One of measured improvements in the MOT was in their administrative policies, procedures, and systems (subfactor 2a). The COE team worked with the Ministry to support production of manuals to guide employees in their work, documenting: 63 procedures in the transport manual, 20 procedures in the equipment licensing manual, 36 procedures in the vehicle testing manual, 50 procedures in the traffic monitoring manual, and procedures in other topics for a total of 283 procedures in 7 manuals across the Ministry. For the two most important manuals for citizens, car licensing and drivers' licensing, operating processes were re-engineered and streamlined to produce greater efficiencies in public services. Re-engineered procedures improved service delivery through clarification of service offices' authorities (see text box). Job descriptions were developed or revised for staff to reflect their actual duties, and distributed to MOT employees to clarify their roles and responsibilities, reflected in an improved score in subfactor 3a. The most improved aspect of institutional functioning was in subfactor 3h, staff training; in 2009, no training for staff occurred for MOT employees and no training unit existed. By 2011, a training needs assessment had been completed and training had been developed and delivered to address critical needs. With project assistance, a gender strategy was developed to serve both sexes equally (subfactor 6c improved). Processes to measure both customer and employee satisfaction were institutionalized, reflected in an improved score in subfactor 6b, community relations. Employee teams collect data, including conducting focus groups with both customers and employees to identify areas for improvements, and staff collect and analyze statistical data.

#### **The Value of Decentralized Decisions**

The revised procedures clarified what matters could be decided at the local service office level; one service office director estimated that 90% of issues that previously required approval from MOT headquarters could now be made directly at the local level, vastly improving the time needed to serve citizens.

The service delivery score was the MOT's greatest area of improvement. With PACE assistance, five main offices were fully refurbished and six computer labs were completed. Now, more than half of the service centers offer waiting rooms with chairs, temperature control through heating and air conditioning, a queuing system for service, and a security system with cameras. Written drivers' license testing was automated in all but one location in the West Bank. In 2009, the average wait time for service was 59.5 minutes; in 2012, 96.9% of customers in the service centers waited less than 30 minutes. Scores improved in customer ratings of satisfaction with employees' knowledge around completing transactions as well as satisfaction with the attitude and behavior of employees toward customers.

*Recommendations.* Next steps for the MOT include the establishment of monitoring and evaluation methodologies that will provide ongoing data for feedback on provision of services. Like the other ministries, the MOT would benefit from the adoption of an international quality management system such as the ISO system. The



Main hall of the fully remodeled and refurbished MOT licensing bureau in Ramallah, one of five major MOT licensing bureaus improved with PACE/USAID assistance. Click on the following video for an overview of improvements to MOT licensing services: [Improving MOT Licensing Services](#)

implementation of the gender strategy will result in increased opportunities for female employees and better services for female customers. The service centers that are not yet refurbished need completion. There are other COE recommendations that can be implemented, such as identifying and increasing employee performance incentives, human resources forecasting, and other areas that were being addressed in partnership with the General Personnel Council at the end of the project.

## **Ministry of Public Works and Housing**

*Ministry Mandate.* The MOPWH is tasked with constructing and maintaining roads and public buildings, and regulating the housing sector. PACE worked with the Ministry on improving public roads in the West Bank. The project helped to establish three road repair units, procure and install safety and directional signs on key roads around Ramallah, introduced a geographic information system (GIS) to track road conditions and plan infrastructure projects, and worked on a variety of institutional reform initiatives.

*Scores.* The Ministry's substantial progress in its institutional governance reform efforts are reflected in its scores. In 2009, the most common rating among the subfactors was at the low capacity level. By 2012, the most common rating had risen to the moderate rating, an increase of two levels. The MOPWH was not measured in the service delivery factor because the project's activities did not include support involving direct interaction with the public.

<b>Factor</b>	<b>Average 2009 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	1.3	2.7	+1.4
Administration	1.7	3	+1.3
Human Resources	1.8	2.9	+1.1
Financial Resources	1.8	3	+1.2
Organizational Management	1	2.7	+1.7
Program Management	1	2.3	1.3
Service Delivery	N/A	N/A	N/A

*Initial status.* When the project began, the Ministry had a confusing and poorly defined organizational structure, due to the merger of two prior entities, the Ministry of Housing and the Ministry of Public Works. There was poor internal communication and coordination among the ministry departments, with few procedures defined or written. The MOPWH did not perform any systematic road maintenance; although it had the mandate, in reality, road repair units were inactive and the planning and maintenance capacity at the ministry was weak. The ministry lacked a strong and relevant strategic vision and no change-management methodology.

*Challenges.* The Minister of the MOPWH at project start up was supportive of the project; but there were others in the management team who did not understand the concepts around a COE approach and felt that the project could threaten their authority.

Moreover, a change in the top leadership stalled early project support. Later, management resistance melted, and the initial objectors became strong proponents of the project's efforts.

### **Facing the Public**

In 2009, the Minister of the MOPWH avoided public meetings about road conditions, as the Ministry had no way to repair roads and public comments were entirely negative. In 2012, the Minister met regularly with village councils to receive their requests and feedback on road repairs, both in his office and traveling to village meetings, and is pleased with the positive feedback about road repairs accomplished.

*PACE activities and results.* The project assisted with the establishment of three road repair units, providing equipment and training the crews to perform their duties and assisted the MOPWH in refurbishing a cold asphalt production facility that had been damaged during the second *intifada* to provide the raw materials for road repairs. These units have repaired and maintained more than 400 kilometers of roads. PACE supported the Ministry in establishing a GIS system for road maintenance, to track road conditions and plan infrastructure projects. The project also supported the Ministry in procuring and installing safety and directional signs on key Palestinian-controlled roads around Ramallah. Click on the following video for a summary of improvements in road repair, maintenance, and planning: [Better Road Repair, Maintenance, and Planning](#).

The MOPWH made good use of its COE team, clarifying its mission and vision statements along with strategic objectives, reflected in the increase in scores of subfactors 1a and 5a. Using those as a guide and with project assistance, the Ministry clarified operational procedures and standards, developing procedural manuals for eight core departments, raising its scores in subfactors 5b, 4c, 4d, and factor 2. It has improved internal report writing and communications, and started the process of strengthening archiving systems, and laid the foundations for better procurement systems (subfactors 6a and 2b). One of its strongest achievements has been in the development of staff training, reflected in its score of strong capacity for subfactor 3h. The project provided assistance around development of the staff training unit, and the unit now conducts training needs assessments, provides training for new trainers who have expertise in particular subject matter areas but lack the skills and experience to train others, develops curricula and materials, and is preparing to train other ministries in developing training for their own employees. This training unit ensures that the transfer of knowledge will continue to build the capabilities of employees long after the project ends, as reflected by subfactor 5d.

*Recommendations.* Future efforts in support of the MOPWH would include expansion of the road units to cover the entire West Bank, and creation of robust maintenance and management systems for public buildings. Among institutional governance reforms, the MOPWH could revise its organizational structure along functional purposes, and continue to implement a range of other COE solutions. Some systems that have showed improvement during PACE's assistance can continue to be strengthened, including finance, electronic archiving (extending the system to the entire ministry), and procurement. Two key elements needing introduction are a gender strategy and a monitoring and evaluation/quality assurance plan.

## **Ministry of Finance**

*Ministry Mandate.* The Ministry of Finance (MOF) is charged with managing the finances of the PA government, including collection of revenues, development of budgets for all ministries, and oversight of public expenditures. Because a number of donors work with the MOF, the PACE project focused on two revenue-generating divisions, the property tax department, and, to a lesser extent, the income tax department (before the 2010 start of the USAID-funded Investment Climate Improvement project)

*Scores.* The MOF showed the least gains in institutional governance reforms, but it also showed the highest ratings of the six institutions in the baseline 2009 scores. Because of this Ministry's key role in providing funding to other ministries and international concerns about financial transparency and accountability, it had been the recipient of significant donor interventions before the project began. Still, the service offices with which the project worked showed substantial gains, moving up an average of two rating levels, mostly from "low" to "moderate."

<b>Factor</b>	<b>Average 2009 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	2	2.3	+ .3
Administration	1.7	2.3	+ .6
Human Resources	2.5	2.5	--
Financial Resources	3	3	--
Organizational Management	1.7	1.7	--
Program Management	1.5	1.5	--
Service Delivery	1.3	3	+1.7

*Initial status.* For all but part of the last year of the project, the Prime Minister also served as the Minister of Finance. In operational terms, this meant that each of the major MOF departments operated independently, with independent lines of communication to the Prime Minister, and little coordination between them. With respect to property tax assessment and related services, different service offices applied different formulas for assessing property taxes and there was little transparency in procedures. The level of automation was also low, as was the condition of major offices.

*Challenges.* Some members of the MOF leadership were initially skeptical of the project's ability to provide meaningful assistance. Their previous experience with donor interventions was that international consultants produced reports, documents, and papers that largely sat on the shelf and had little meaningful impact on the Ministry's actual functioning and development. In addition, fragmented management made it more challenging to address cross-department development issues like building stronger, unified training or communications functions.

*PACE activities and results.* The project's COE approach assisted change management processes across the ministry's departments. The COE team recommended solutions to various issues

identified, including clarification of the mission and visions statements and the MOF's strategic objectives. The revised statements and objectives were circulated to most ministry staff members, who had not previously seen these, and the new statements and objectives began to be used to guide the MOF's activities and priorities (subfactor 1a increase). The project assisted in the documentation, standardization, and streamlining of key service procedures in the income and property tax divisions, producing eight separate manuals for employees that ensured application of consistent procedures and tax formulas across service offices, and reduced processing time for citizens (improved score in subfactors 2a, 7e). The MOF now has written and approved procedures for procurement of supplies for the entire government that conform to regulations and are subject to internal audits. Property tax service offices in four major urban areas were refurbished, improving citizen access and satisfaction (subfactors 7a, b). The project helped produce citizen service guides and posters available in property tax service centers, increasing transparency. The project also assisted in promoting a public information campaign. Both the property tax and income tax departments have seen a significant increase in collection of revenues; the property tax revenues increased 97 percent between 2008 and 2012. Click on the following link for a video summarizing improvements to property tax services: [Improving Property Tax Services](#)

*Recommendations.* The MOF would benefit from improved internal and external communication; its current initiation of employee and customer satisfaction measures is a good beginning. The Ministry can expand the reach of the COE, encouraging a participatory approach to the development of detailed strategic and operation plans. Clearer definitions of department roles, authorities, and responsibilities will increase efficiency. A unified training plan would increase the knowledge and skills of employees across the institution. The MOF would benefit from the development and implementation of a knowledge management plan, capturing lessons learned and distributing them to all employees. In terms of services, the ministry should develop stronger systems to encourage the consistent and uniform implementation of procedures with stronger quality control and monitoring and evaluation functions. Like other PA institutions, the use of sound monitoring and evaluation plans will help the MOF improve its functioning for its beneficiaries, other government institutions and citizens.

## **General Personnel Council**

*Ministry Mandate.* The General Personnel Council (GPC) has the task of developing and managing the civil service sector, to improve government institutions' public services to citizens. It joined late in the project, coming on board in late 2011. Because it supports other public institutions primarily in the essential category of human resources, it is a key partner whose functioning directly impacts the performance of other institutions, rather than providing services directly to citizens.

*Scores.* The GPC was not measured in the service delivery factor, as the GPC's clients are the other ministries, and the customer satisfaction surveys were done of the general public rather than of other ministry personnel. The improvement in the administration factor below is a reflection of the project's assistance around producing new policies and procedures manuals for key human resource matters, and in developing procedural manuals for six directorates. The project's other contributions to the GPC were underway when the 2012 COE self-assessment was done, and the impact of those initiatives will not be reflected until they are complete.

<b>Factor</b>	<b>Average 2011 Score</b>	<b>Average 2012 Score</b>	<b>Average level of change</b>
Governance	1.7	2	+.3
Administration	1.7	2.3	+.6
Human Resources	2.3	2.3	--
Financial Resources	3	3	--
Organizational Management	1.7	2.2	+.5
Program Management	1.5	1.5	--
Service Delivery	N/A	N/A	N/A

*Initial status.* After observing and hearing of the support that other ministries had received from PACE, the new Chairman of the GPC requested to join the COE program and work with the project on selected internal governance and cross-institutional human resource issues. In general, the GPC was suffering from a lack of focus, reflected in fragmented efforts across departments. While a number of donors had addressed institutional strengthening issues, none had done so in a way that engaged GPC staff across various departments using a comprehensive framework.

*Challenges.* Given the GPC's late entry into the project, resources had already been committed to other ministries and the availability of resources to support GPC development initiatives was limited. Through its efforts, the GPC also had to counter the past negative perception about the GPC's role among other ministries.

*PACE activities and results.* As noted above, the project focused on helping the GPC organize itself and clarify employee duties and roles through documenting and streamlining internal procedures for six main internal directorates. Tasked with helping other ministries around human resources, the GPC first had to ensure that its own practices were clear. Building on the project's work with other ministry partners, GPC also addressed procedures for use across Palestinian

Authority institutions in three major areas: human resource forecasting, training and new employee orientation, and the distribution of incentives. Each of these initiatives aligned with GPC priorities and offered the potential to yield gains in efficiency for the civil service.

*Recommendations.* The GPC can benefit from fully implementing the recommendations its COE team has generated. This strategy addresses a number of key areas that will improve the institution's ability to serve and strengthen relations with other government institutions. Continued clarification of the lines of authorities and responsibilities between departments and their functions is a key area, as well as developing operational plans with indicators to monitor the success of reforms. The GPC needs to complete operating procedures manuals, ensure widespread understanding of the procedures, and develop mechanisms for compliance enforcement. Staff training will be necessary to promote awareness of the procedures. The GPC can use assistance in human resources and planning, as well as job forecasting, to enable it to better support the ministries. Additionally, the GPC can put into practice its own human resources initiatives, including improving the quality of performance appraisals of its employees and disseminating human resources policy manuals. A review of the civil service law will need to be done soon, and donor assistance to the GPC as it sets about this significant task will be crucial. The GPC can use assistance in the areas of developing a gender strategy, knowledge management, and opening lines of communication with its employees.

Because the GPC supports other ministries, strengthening the GPC as a priority institution should have a multiplying effect, as its improved systems and performance will impact the functionality of other institutions. The GPC's current enthusiasm for project support and the COE approach provides a significant window of opportunity to leverage donor assistance across a number of institutions.

## LESSONS LEARNED

PACE brought its full staff together for a two-day workshop, with USAID in attendance the second day, to review the scoring charts and reflect on what was learned throughout the project's implementation of the COE approach. Here are the project's thoughts and insights about what worked well and why, and what did not work and why not.

*Leadership support.* Leadership support is a key ingredient of a successful COE activity. Where ministers or other senior leaders stood strongly behind the COE approach and promoted the model, the teams made good progress on identifying needs and overseeing implementation of solutions. Without solid support of key leaders in the organization, teams found it more difficult to make meaningful contributions.

*Multi-level working groups.* While leadership counts, implementation of ministry vision and strategies can be thwarted by personnel at various levels. Composing multi-level COE teams increased the ownership of the process at all levels, aiding understanding of the team's purpose and goals throughout the organization and promoting cooperation. The project found that allowing ministry personnel to apply for COE slots, rather than having senior leadership choose team members, better ensured both team member commitment as well as organization acceptance of the model.

*Cross-ministry issues.* Choosing organizations that work across government institutions as project partners leverages project efforts. For some matters, such as human resource policies, individual ministries cannot make changes without the GPC or other institution with a cross-governmental mandate. Engaging such institutions helps raise individual ministry successes and initiatives to the level of the government as a whole, benefiting the entire civil service.

*Short-term interventions.* Particularly in donor-intensive environments, completing short-term interventions with visible results helps to win partner confidence and build implementer credibility. Identifying and completing initial quick wins can help establish the project as a trusted source of assistance. It also helps ministries increase citizen confidence quickly as they implement long-term development goals.

*Parallel work.* While quickly completing initial short-term interventions, begin tackling longer-term issues at the same time. This demonstrates that both short- and longer-term interventions are important, and increases investment in the change processes that take longer to accomplish.

*Flexibility.* Windows of opportunity can open unexpectedly, and initially committed partners can lose interest. Some interventions can prove to be more significant than others, and projects learning along the way need to be able to modify activities to reflect that learning. Structuring the project in a flexible manner provides for the maximum impact possible.

*Collaboration and competition.* Having multiple partners can increase the effectiveness of project activities if the partners are regularly brought together to discuss their processes and

results. Partners can learn from each other, and offering a recognition award or other award spurs competition that motivates leaders to push their organization reforms.

*Expect slow starts.* Initial assessments are important; misdiagnosing a problem can lead to implementation of an ineffective solution, so taking the time to fully understand issues matters. When a change management process is offered, counterparts at all levels can fear what those changes might bring; resistance to new concepts and donor program interventions is understandable. Programs designed around change management need time to build credibility and secure the trust of partners.

*Broaden the perspective.* Ministers are held accountable to national goals as well as internal ministry goals, so make the bridge between a program's activities, ministry needs, and the ministry's contributions to national goals. What might be best for a particular ministry might not correspond directly with national plans; solutions may need to identify and tolerate trade-offs.

*Multi-year cycle and multiple cycles.* Some organizational changes require a lengthy process, particularly when the implemented solution stretches across numerous divisions and departments. Donors can allow the change process to take the time it needs and avoid compressing processes into an inadequate time frame. Supporting organizations through more than one cycle ensures wider participation on COE teams, instilling more capacity throughout the organization and entrenching the change process.

*Manageable solutions.* Implementers should encourage the COE team to identify solutions that are within the manageable interest of the project where possible. If a significant number of solutions are identified that are beyond the project's ability to support, the COE process can suffer some loss of credibility when solutions are not implemented.

*Staffing.* A supporting change management generalist is typically sufficient in ministries whose services do not involve technical or professional specifications. Where a ministry's mission and services involve highly specialized knowledge or skills, project staff liaisons without the technical background may not be accepted as credible coaches.

*Short-term technical assistance.* Different organizations value different qualities in short-term experts. Some prefer local consultants, some want experts from regions with similar language, geography, or socioeconomic conditions, and others look for international experts. Gauge what qualities and background will be the most effective for supporting each partner.

## NEXT STEPS

The provision of government services is entering a new era, where citizens are viewed as consumers. In some services, governments are competing with the private sector for citizen business. As businesses do to promote profit, governments are now considering how to make government services as accessible, user-friendly, convenient, timely, and appealing as possible. Even when governments have a monopoly on a service, citizens are demanding value for cost, effective and efficient services, and respectful treatment from government employees.

*E-government services.* As more and more citizens join the on-line world, government institutions can offer information about services via the internet. When services must be delivered on site, citizens can arrive fully prepared, expediting processes and increasing customer satisfaction. Some government services can be offered and delivered electronically.

*Provide alternatives for access.* Government offices that are open only during business hours on business days can unintentionally create hardships for citizens who cannot easily access offices during those times. Modern governments are moving toward providing multiple methods of service access, such as on-site, via telephone, fax, and electronic application/submission/receipt, and providing at least some service office hours during evenings and weekends.

*Service integration.* One-stop windows are becoming an international best practice in delivering government services, allowing citizens to complete a transaction in one location instead of requiring visits to multiple agencies. Some government entities are offering multiple unrelated but common services under one roof, to facilitate citizen access to a variety of services in one place.

*Monitoring and evaluation.* Currently, PA institutions do little to no monitoring and evaluation of their processes and results to assess their performance. Basic principles and tools need to be introduced around indicator formulation and data collection, along with the knowledge and skills needed to interpret the data and use findings to manage for results.

*Overall quality management approach.* International tools and measures now exist to gage an entity's ability to identify, document, and monitor processes and procedures. Institutions would benefit from the adoption of a common approach to assess the quality of services rendered.

*Gender strategies.* Some institutions have developed initial gender strategies, while others are just beginning this exercise. All need support around identifying the ways in which service delivery impacts men and women differently, thinking through methods to reach women equally, and implementing activities and services to decrease the differential status of women.

*Knowledge management.* Little expertise exists in PA institutions to capture and disseminate institutional knowledge and lessons learned. A system and network for knowledge management would promote efficiency, innovation, and increased human capacity.

*Communications.* Both vertical and horizontal communications need support. Senior leadership can benefit from disseminating information throughout the organization, and just as important, learning to listen to employees for feedback and input. Communication between departments within an institution, and between institutions, can promote clarity of roles, authorities, and responsibilities.

*Expansion of working models.* The successful COE approach has proved to be a good fit for PA institutions. The PA can use the ministries and COE teams that have seen good results to promote the model and mentor other teams.

## ANNEX A: DETAILED SCORE CHART

Number	Factor	MOT 2009	MOT 2012	change	MTIT 2009	MTIT 2012	change	MOI 2009	MOI 2012	change	MOPWH 2009	MOPWH 2012	change	MOF 2009	MOF 2012	change	GPC 2009	GPC 2012	change
<b>Governance</b>																			
1a	mission statement	2	3	+1	2	3	+1	2	4	+2	1	3	+2	2	3	+1	2	3	+1
1b	org structure	2	2		2	2		2	4	+2	2	2		2	2		2	2	
1c	succession plan	2	3	+1	2	2		1	4	+3	1	3	+2	2	2		1	1	
<b>Administration</b>																			
2a	Operations	2	3	+1	2	3	+1	2	4	+2	1	3	+2	1	2	+1	1	2	+1
2b	procurement	2	3	+1	2	3	+1	1	3	+2	2	3	+1	2	3	+1	2	3	+1
2c	fixed assets	3	3		2	3	+1	2	3	+1	2	3	+1	2	2		2	2	
<b>Human Resources</b>																			
3a	job description	2	3	+1	2	3	+1	2	3	+1	2	3	+1	2	2		2	2	
3b	recruitment	2	2		2	3	+1	1	3	+2	1	3	+2	3	3		3	3	
3c	staff levels	3	3		2	2		2	2		2	2		2	2		2	2	
3d	personnel policies	3	3		2	3	+1	2	3	+1	2	3	+1	3	3		3	3	
3e	salaries/benefits	3	3		2	3	+1	1	3	+2	1	3	+2	3	3		3	3	
3f	performance mgmt	3	3		2	2		2	2		2	2		2	2		2	2	
3g	gender diversity	2	2		2	3	+1	2	3	+1	2	3	+1	3	3		1	1	
3h	staff training	1	3	+2	2	3	+1	2	4	+2	2	4	+2	2	2		2	2	
<b>Financial Resources</b>																			
4a	financial systems	3	3		2	3	+1	2	3	+1	2	3	+1	3	3		3	3	
4b	financial controls	2	2		2	3	+1	2	3	+1	2	3	+1	3	3		3	3	
4c	documentation/rpt	3	3		2	3	+1	2	3	+1	2	3	+1	3	3		3	3	
4d	audits	1	1		2	2		1	3	+2	1	3	+2	3	3		3	3	
<b>Organizational Management</b>																			
5a	strategic planning	3	3		2	3	+1	2	4	+2	1	3	+2	3	3		3	3	
5b	operational plans	3	3		2	3	+1	2	4	+2	2	3	+1	1	1		1	1	
5c	change management	2	2		1	3	+2	1	3	+2	1	3	+2	1	1		1	3	+2
5d	knowledge mgmt	2	1	-1	2	2		1	3	+2	1	3	+2	1	1		1	1	
5e	communication emp	2	2		2	2		1	3	+2	1	2	+1	2	2		2	3	+1
5f	decision making	3	2	-1	3	3		1	3	+2	1	2	+1	2	2		2	2	
<b>Program Management</b>																			
6a	technical reporting	3	3		2	2		1	3	+2	1	2	+1	2	2		2	2	
6b	community relations	2	3	+1	2	3	+1	1	4	+3	1	3	+2	1	1		1	1	
6c	gender in ops	1	2	+1	2	2		1	3	+2	1	2	+1	2	2		2	2	
6d	monitoring/eval	1	1		2	2		1	3	+2	1	2	+1	1	1		1	1	



## ANNEX B. REVISED OCA FRAMEWORK

Note: the OCA was designed to assist in evaluating NGOs, private businesses, and government partners for direct USAID assistance. The framework is useful for assessing the level of functioning for organizations. This study of the PACE project uses the framework, with slight alterations in places to make it solely applicable to government institutions, and eliminating the factors that relate specifically to USAID requirements for organizations to receive direct funding and those that pertain only to nongovernmental organizations. Where sub-factors are changed, notations are indicated above the scoring criteria for that sub-factor. Other factors were added, including Service Delivery and the sub-factor Staff Training.

### I. List of Factors

#### 1. Governance

**Objective:** The objective of this section is to assess the organization's motivation and stability by reviewing its guiding principles, structure, and oversight.

**Sub-section Factors include:** a) vision/mission statement, b) organizational structure, c) succession planning

#### 2. Administration

**Objective:** The objective of this section is to assess the organization's ability to operate in a systematic manner through document policies and procedures.

**Sub-section Factors include:** a) operational policies, procedures, and systems, b) procurement, c) fixed assets control

#### 3. Human Resources

**Objective:** The objective of this section is to assess the organization's ability to maintain a satisfied and skilled workforce, manage operations and staff time, and implement quality programs by reviewing human resource management systems and processes.

**Sub-section Factors include:** a) job descriptions, b) recruitment, c) staffing levels, d) personnel policies, e) salaries and benefits, f) performance management, g) gender diversity in staffing, h) staff training

#### 4. Financial Resources

**Objective:** The objective of this section is to assess the organization's functionality by measuring its capacity to develop and apply financial policies and procedures that comport with international best practices, the existence and quality of financial systems, and staff knowledge of these systems.

**Sub-section Factors include:** a) financial systems, b) financial controls, c) financial documentation and reporting, d) audits

#### 5. Organizational Management

**Objective:** The objective of this section is to assess the organization's ability to operate in a systematic manner, coordinate and partner with others and grow by examining its planning processes, management of external relations, information management, and processes for identifying and capitalizing on new opportunities.

**Sub-section Factors include:** a) strategic planning, b) work plan development, c) change management, d) knowledge management, e) communication with employees, f) decision making

#### 6. Program Management

**Objective:** The objective of this section is to assess the organization's ability to implement comprehensive programs that respond sensitively to local needs and priorities by reviewing key compliance issues, technical reporting and processes for ensuring comprehensive services that meet the needs of the population.

**Sub-section Factors include:** a) technical reporting, b) community relations, c) gender services, d) monitoring and evaluation

#### 7. Service Delivery

**Objective:** The objective of this section is to assess the organization's ability to deliver services that improve the safety, welfare, and well being of citizens and the community

**Sub-section Factors include:** a) ease of access b) timeliness of service c) citizen satisfaction d) service staff .

## II. Rating scale

The rating scale is as follows: 1 = low capacity; 2 = basic capacity; 3 = moderate capacity; 4 = strong capacity.

### III.Sub-Section Factors

#### 1. a) Vision/Mission

**Objective:** The objective of this sub-section is to review the organization’s vision and/or mission statement learn what drives the organization, how the statements are reflected in what they do, and how they are communicated and understood by staff.

**Resources:** Vision and/or mission statement of the institution, COE self-assessment reports, strategic and operational plans.

1	2		4
The organization does not have a clearly stated vision and/or mission of what it aspires to achieve or become	The vision and/or mission provides a moderately clear or specific understanding of what the organization aspires to become or achieve; lacks specificity or clarity; is not widely held and rarely used to direct actions or set priorities	The vision and/or mission is a clear and specific statement of what the organization aspires to become or achieve; is well known to most but not all staff and is sometimes used to direct actions and set priorities	The vision and/or mission provides a clear, specific, and forceful understanding of what the organization aspires to become or achieve; is broadly held within the organization and consistently used to direct actions and set priorities

Governance: Vision/Mission Scoring Guidance	
Score	Criteria
1	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> No documented vision and/or mission statement</li> </ul>
2	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> A documented vision and/or mission statement exists</li> <li>• <b>Quality:</b> The statement is not short, clear and/or relevant to what the organization does and/or does not communicate the organization’s aspirations or intentions.</li> <li>• <b>Staff Awareness:</b> Responses to the staff questionnaire indicate that few staff are aware of or understand the statement</li> <li>• <b>Application:</b> The statement(s) is/are not used to guide organizational activities and priorities</li> </ul>
3	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> A documented vision and/or mission statement exists</li> <li>• <b>Quality:</b> The statement is short, clear, and/or relevant to what the organization does and communicates the organization’s aspirations or intentions.</li> <li>• <b>Staff Awareness:</b> Responses to the staff questionnaire indicate that staff are not widely aware of or understand the statement</li> <li>• <b>Application:</b> The statement(s) is/are sometimes used to guide organizational activities and priorities</li> </ul>
4	<ul style="list-style-type: none"> <li>• <b>Quality:</b> the statement(s) is/are short, clear, and/or relevant to what the organization does and communicates the organization’s aspirations or intentions.</li> <li>• <b>Staff Awareness:</b> Staff are widely aware of and understand the statement</li> <li>• <b>Application:</b> The statement(s) is/are routinely used to guide organizational activities and priorities</li> </ul>

Notes:

### 1. b) Organizational Structure

**Objective:** The objective of this sub-section is to review the organizational structure – which is most often depicted in an organogram, but may be outlined in narrative – and determine if the structure is in line with the organization’s mission, goals and strategic and operational plans and if systems are in place for ensuring strong coordination among departments or functions.

**Resources:** Institution organogram and narrative description of organization structure; interviews and/or focus group(s) with ministry staff and leadership.

1	2	3	4
The organization has no formal structure and department and or key functions responsibilities are not clearly defined and/or functions are not clear.	The organization has a basic organizational structure with adequate definitions of departmental responsibilities and/or key lines of responsibility and communication among departments and/or key functions somewhat clear.	The organization has an organizational structure which is well designed and relevant to its mission/goals; roles and responsibilities of departments and/or functions are clearly defined and appropriate.	The organization has an organizational structure which is well designed and relevant to the mission/goals, roles and responsibilities of departments and/or key functions are clearly defined and appropriate, and lines of communication and coordination among departments and/or key functions is clear and functional.

Governance: Organizational Structure	
Score	Criteria
1	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> There is no formal written structure or defined functions for the organization</li> <li>• <b>Note:</b> Large organizations may have organograms that list departments and key functions within the executive team and departments. Smaller organizations may have organograms framed simply around key functions.</li> </ul>
2	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> Organization has a basic, documented, organizational structure that accounts for most management, administrative and technical departments and/or functions but the structure is incomplete or not documented</li> <li>• <b>Relevance:</b> Lines of responsibility among departments/functions is not fully clear and/or organogram is not complete or organizational structure is not in line with the organization’s mission, goals and programs</li> </ul>
3	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> The entity’s organizational structure is documented and clear</li> <li>• <b>Relevance:</b> The structure is in line with the organization’s mission, goals and programs</li> <li>• <b>Quality:</b> Function, role and responsibility of each department or position is clear and relevant</li> </ul>
4	<ul style="list-style-type: none"> <li>• <b>Documentation:</b> Organization ‘s organizational structure is documented and clear</li> </ul>

- **Relevance:** The structure is in line with the organization's mission, goals and programs
- **Quality:** Function, role and responsibility of each department or position is clear and relevant
- **Linkages:** Relationship among departments or functions is clear, communication systems are well defined and operational such that there is good coordination among different departments or functions

**Notes:**

### 1. c) Succession Planning

**Objective:** The objective of this sub-section is to assess the institution's ability to continue smooth internal operations and service delivery in the extended absence of or during (or following) a transition in leadership, with most lower- and mid-level personnel remaining, and some senior management remaining after a transition. Senior management can keep the ministry functioning and service delivery levels constant during a Minister's extended absence.

**Resources:** Job descriptions of senior management, succession plan, organizational chart, and COE self-assessment results.

**Changes from OCA factor:** Government ministries are not created by a person or group, and do not cease to exist when a Minister leaves. The Minister and a few key senior team members replace the OCA's reference to a CEO/executive director.

1	2	3	4
Very high dependence on the Minister and a few key senior team members, institution would have substantial drops in international functioning and service delivery without their presence. The transition of a Minister results in significant change in personnel at all levels.	High dependence on Minister and a few key senior team members, institution experiences much change with significant drops in quality and delivery of services when the Minister/key team transitions (or has an extended absence). Most of senior and mid-level personnel change.	Limited dependence on Minister and a few key senior team, institution would continue in a similar way without their presence, but quality and extent of service delivery would suffer after the transition. A plan for how the institution will continue when the Minister/key senior team leaves exists, but no member of management could potentially take on Minister/key senior team's role.	Reliance but not dependence on a particular Minister and a few key senior team members; a clear succession plan exists. A smooth transition to new leader could be expected; operations and service delivery would continue without major problems; others of the senior management team can fill in during transition time; one or more members or the management team could take on the Minister/key senior team's role if needed.

Governance: Succession Planning	
Score	Criteria
1	<ul style="list-style-type: none"> <li>• <b>Reliance:</b> The organization is almost entirely dependent on the current Minister and a few key senior team members, who effectively run the entire institution, maintaining knowledge and control over institutional management to the near-total exclusion of other senior managers. The majority of staff will change, at all levels, when there is a new Minister.</li> <li>• <b>Sustainability:</b> Institution internal functioning and service delivery would decrease to almost nothing, a near collapse of the institution, without the current Minister/key senior team. Most policies and procedures will change when there is a new Minister.</li> <li>• <b>Planning:</b> The institution does not have a succession plan</li> </ul>
2	<ul style="list-style-type: none"> <li>• <b>Reliance:</b> The institution is largely dependent on the Minister and a few key senior team members who have oversight over institutional management and service delivery. There is little authority, skill or capability among other management staff. The majority of the senior and mid-level management will change when there is a new Minister.</li> <li>• <b>Sustainability:</b> Internal institutional operations and service delivery would suffer declines in functionality and quality in the extended absence or transition of the Minister/key senior team but some basics would likely continue. Many policies and procedures will change.</li> <li>• <b>Planning:</b> The organization has a very basic succession plan</li> </ul>
3	<ul style="list-style-type: none"> <li>• <b>Reliance:</b> The organization has limited dependence on the Minister and a few key senior team members. The Minister/key senior team have significant oversight but not sole control of key processes such as financial planning and spending and service delivery planning and management. Many of the senior and some of the mid-level managers will change when there is a new Minister.</li> <li>• <b>Sustainability:</b> The institution would continue functioning in more or less the same fashion without the Minister/key senior team in an extended absence, but the quality and extent of service delivery would suffer. Some policies and procedures will change.</li> <li>• <b>Planning:</b> The organization has a succession plan</li> <li>• <b>Internal Capacity:</b> No other member of management could step in (either in interim or long-term) to keep the organization functioning</li> </ul>
4	<ul style="list-style-type: none"> <li>• <b>Reliance:</b> The organization relies on the Minister for policy direction but is not dependent on the Minister/key senior team members for institutional functioning. The Minister has a decision-making role on key processes, financial planning and spending, service delivery planning and management etc. but is not actively in control of all those processes. While some senior managers will change following a transition, most mid- and lower-level personnel will remain in their positions.</li> <li>• <b>Sustainability:</b> The organization would continue to function well without the Minister/key senior team during an extended absence, and will continue functioning smoothly during the transition to a new Minister – service delivery would be maintained</li> <li>• <b>Planning:</b> The organization has a succession plan</li> <li>• <b>Internal Capacity:</b> One or more members of the management team could step in(either in interim or long-term) to keep the organization functioning</li> </ul>

**Notes:**

**2. a) Administrative policies, procedures, and systems**

**Objective:** The objective of this sub-section is to assess the availability of and adherence to key administrative policies in the organization.

**Resources:** Policy and Procedures Manual, Staff Questionnaires, Related Payment Vouchers

1	2	3	4
The organization has no documented administrative procedures and information systems are insufficient to manage its operations and/or programs.	The organization has some documented administrative procedures but they are not complete and appropriate. Information systems support operations and programs at basic levels of functionality.	The organization has most or all documented administrative procedures and they are appropriate. They are either not known to staff and/or are not consistently adhered to. Information systems are sufficient to support operations and programs at a good level of functionality without major inputs.	The organization has complete and appropriate documented administrative procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated. Information systems support operations and programs at a high level of functionality and systems are in place for sustaining them.

<b>Administration: Administrative policies, procedures, and systems</b>	
<b>Score</b>	<b>Criteria</b>
1	There are no written administrative procedures and there is not sufficient information technology systems to manage the organization's operations and services.
2	The organization has some written office procedures but not all procedures are written, and they are not updated. There are information technology systems in place that support some basic procedures, but many procedures are not supported by the IT system.
3	The organization has written office procedures that cover most of the needs of the organization. These procedures are not known by most staff, are not easy to understand, or are not followed consistently. Staff training may or may not be available on those procedures that are more complex; if there is training, it is not offered regularly or to all staff. There are some information technology systems in place that support the procedures that do not require constant support from IT staff.
4	The organization has written office procedures that adequately support the needs of the organization. These procedures are easily accessible to staff, and are written so that they are easy to understand and follow. Staff training is regularly available on those procedures that are more complex. Procedures are reviewed and updated on a regular basis. Staff across the organization consistently follow the procedures in carrying out their jobs. There are information technology systems in place that support the procedures.

**Notes:**

## 2.b) Procurement

**Objective:** The objective of this sub-section is to assess the availability of and adherence to key procurement policies and procedures including adherence to Palestinian Authority legal requirements.

**Resources:** Procurement Policies, Procurement Plan, Related Payment Vouchers, COE self-assessment results.

**Changes:** References to meeting donor requirements for procurement are changed to legal requirements.

1	2	3	4
The organization has no documented procurement procedures. (i.e. procurement plan, procurement manual, approvals).	The organization has some documented procurement policies procedures but they are not complete and appropriate (in line with laws and governed by regulations).	The organization has most or all documented procurement procedures and they are appropriate. They are either not known to staff and/or are not consistently adhered to.	The organization has complete and appropriate documented procurement procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated.
<b>Administration: Procurement</b>			
<b>Score</b>	<b>Criteria</b>		
1	There are no written procedures such as a procurement plan or manual that address purchasing of goods and services.		
2	The institution has written, reasonable procedures that cover some aspects of procurement but they are not complete and appropriate (they are not compliant with existing laws and regulations have not been promulgated to govern the procedures).		
3	The institution has written, accessible procedures that cover most but not all aspects of the procurement process that follow procurement laws and are governed by regulations. Staff don't know these procedures or don't follow the procedures regularly.		
4	The institution has written, accessible procedures that cover all aspects of the procurement process, including codes of conduct, conflicts of interest, and the approval process. These procedures are reviewed and updated regularly (at least annually but more often if needed). Staff know these procedures and have received training on more complex procedures. The procedures are consistently followed by staff at all levels.		

**2.c) Fixed Assets Control**

**Objective:** The objective of this sub-section is to assess the availability of and adherence to policies and systems for fixed asset management.

**Resources:** Fixed Asset Register, Physical Inventory Reports, COE self-assessment report results

1	2	3	4
The organization has no documented fixed asset procedures. (i.e. inventory of assets and systems for stock control, equipment, and buildings.)	The organization has some documented fixed asset policies but they are not complete and appropriate.	The organization has most or all documented fixed asset procedures and they are appropriate. They are either not known to staff and/or are not consistently adhered to.	The organization has complete and appropriate documented fixed asset procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated.

**Administration: Fixed Assets Control**

Score	Criteria
1	There are no written policies and procedures in place around the inventory, maintenance, insurance, disposition, and custody of non-expendable equipment or buildings (where the Ministry is in charge of its building).
2	There are some written policies and procedures in place around the inventory, maintenance, insurance, disposition, and custody of non-expendable equipment (that defines what is non-expendable equipment) and buildings, but they are not complete and appropriate.
3	There are many written policies and procedures in place around the inventory, maintenance, insurance, disposition, and custody of non-expendable equipment and buildings. Procedures are not known by staff, and staff do not consistently follow these procedures.
4	There are written policies and procedures in place around the inventory, maintenance, insurance, disposition, and custody of non-expendable equipment. Procedures are available to staff, training on procedures is available for complex procedures, and the procedures are regularly reviewed and updated. Staff follow these procedures.

**Notes:**

### 3. Human Resources

#### 3.a) Job descriptions

**Objective:** The objective of this sub-section is to review the organization’s systems for developing, disseminating, following and updating job descriptions to ensure that staff roles and responsibilities are clearly defined and understood and that they remain relevant to strategic plans and objectives.

**Resources:** Sample job descriptions for each position or level in the organization, COE self-assessment results.

1	2	3	4
The organization has no job/task descriptions for staff.	The organization has job/task descriptions for some key positions and departments, but not all positions; staff are not aware of or do not have copies of their job/task descriptions. Job descriptions do not include all key sections.	The organization has clear job/task descriptions for most positions; these staff have copies or access to copies; most job descriptions cover all key sections; but job/task descriptions are not respected/adhered to, reviewed or updated.	The organization has job/task descriptions for all positions; staff have copies of or access to the descriptions; job descriptions have all key sections; they are respected/ adhered to, reviewed and updated. Both staff and the organization have job descriptions on file.

Human Resources: Job Descriptions	
Score	Criteria
1	<b>Documentation:</b> Organizations does not have job descriptions for each staff member
2	<b>Documentation:</b> Job descriptions exist for some key staff members and departments, but not all (less than 50 percent). <b>Completeness:</b> Some of the checklist items related to job descriptions are fulfilled (checklist: title, duties, responsibilities, qualifications, skills required, supervisory responsibilities (if any)). <b>Staff Awareness:</b> All staff do not have copies of their job descriptions or know where to find them
3	<b>Documentation:</b> Job descriptions exist for most key positions and directorates.(more than 50 percent but less than 100 percent) <b>Completeness:</b> Most or all of the checklist items related to job descriptions are fulfilled. Job/task descriptions are not reviewed or updated. <b>Staff Awareness:</b> Most staff (with written job descriptions) have copies of their job descriptions (or at least have reviewed copies and know where to find them or who to ask to receive them) <b>Application:</b> Some or all staff do not adhere to their job descriptions or some staff do, or are asked to do additional tasks or take on responsibilities that are not in their job description.
4	<b>Documentation:</b> Job descriptions exist for all staff members. <b>Completeness:</b> All of the checklist items related to job descriptions are fulfilled <b>Staff Awareness:</b> All staff have copies of their job descriptions (or at least have reviewed copies and know where to find them or who to ask to receive them)

	<p><b>Application:</b> The organization and the staff adhere to the job descriptions meaning they do and are asked to do what is listed in the job description</p> <p><b>Updating:</b> There is a process for reviewing and updating job descriptions that can include annual updates when the workplan is reviewed, modifications if job responsibilities/tasks need to be added or changed due to structure or program changes.</p>
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**Notes:**

### 3.b) Recruitment

**Objective:** The objective of this sub-section is to assess the organization's processes for recruiting staff. Organizations with strong processes are able to identify and bring on qualified staff members who work well in the organization. Strong systems improve organizational functioning and reduce interruptions in service delivery.

**Resources:** Recruitment manual/guidelines or policy, Recruitment guidelines example, Outline of a complete personnel manual

**Changes:** Deleted "retention," as retention is an issue for NGOs but less so for governments.

1	2	3	4
Organization has no guidelines or consistent approach to recruiting qualified staff.	Organization has basic guidelines for recruitment and hiring but they are not consistently applied and priorities are not developed. HR staff have not been trained/oriented to apply them.	The organization has clear recruitment and hiring guidelines and the process is transparent; but the guidelines are not consistently applied. HR staff have not been trained/oriented to apply the guidelines.	The organization has clear recruitment guidelines. The process is transparent; the guidelines are consistently applied and HR staff have been trained/oriented to apply the guidelines.

Human Resources: Staffing Levels and Recruitment	
Score	Criteria
1	<b>Documentation:</b> The organization does not have recruitment procedures. Staff are often hired based on existing relationships rather than organization needs or position qualifications.
2	<b>Documentation:</b> The organization has basic recruitment procedures. <b>Completeness:</b> Some of the items in the checklist are addressed/available (checklist: policies on announcing positions/advertising, collecting CVs, interviewing candidates, checking references and salary history, making offers, employment agreements and

	transparency) <b>Staff Competence:</b> Staff have not been oriented or trained to implement recruitment processes <b>Application:</b> Processes are not consistently applied
3	<b>Documentation:</b> The organization has clear recruitment procedures. <b>Completeness:</b> Most or all of the items in the checklist are addressed/available <b>Staff Competence:</b> Staff have been oriented or trained to implement the recruitment processes <b>Application:</b> Processes are not consistently applied
4	<b>Documentation:</b> The organization has clear recruitment procedures <b>Completeness:</b> All of the items in the checklist are addressed/available <b>Application:</b> Staff have been oriented or trained to implement the recruitment processes, and processes are consistently applied

**Notes:**

### 3.c) Staffing levels

**Objective:** The objective of this sub-section is to assess the organization's ability to function by reviewing its management of staffing – positions available, positions filled, vacancies – for the organization as a whole, and assess processes for ensuring staffing levels are maintained at the level required for the organization to function effectively.

**Resources:** Staffing Plan and/or Organizational Diagram

1	2	3	4
The organization has no formal staffing plan. Many key management and technical positions within the organization are unfilled, or filled by persons without the right qualifications or skills. Attrition is high or staff attendance problems severe.	The organization has a formal staffing plan and most key management, technical, administration and finance positions are filled with qualified and skilled staff and the organization's attrition rate and/or staff attendance problems are moderate.	The organization has a staffing plan and all key management and other positions (technical, admin, finance) within the organization are staffed with qualified and skilled persons and the organization's attrition rate and/or attendance problems are minimal.	All positions within the organization are staffed with qualified and skilled persons. When gaps exist they are minimal, recent and recruitment is active. No attendance problems exist. The organization has an approach to rapidly filling new positions in environments where staff turnover is high.

**Human resources: Staffing Levels**

Score	Criteria
1	<p><b>Documentation:</b> The organization has no documentation of positions or vacancies.</p> <p><b>Sustainability:</b> Staff attrition and/or attendance problems are severe and no system is in place for ensuring positions are quickly filled by qualified persons.</p>
2	<p><b>Documentation:</b> The organization has documentation of positions, and some data on positions filled and plans for filling vacancies.</p> <p><b>Suitability:</b> Most positions in key divisions are filled by staff with the needed qualifications and skills.</p> <p><b>Sustainability:</b> Staff attrition and/or attendance problems are moderate.</p>
3	<p><b>Documentation:</b> The organization has documentation of positions, and most data on positions filled and plans for filling vacancies.</p> <p><b>Suitability:</b> All positions in key divisions are filled by staff with the needed skills and qualifications.</p> <p><b>Sustainability:</b> Staff attrition and/or attendance problems are minimal.</p>
4	<p><b>Documentation:</b> The organization has documentation of positions and complete data on positions filled and plans for filling vacancies.</p> <p><b>Suitability:</b> All positions in the organization are appropriately allocated and filled by staff with the needed qualifications and skills.</p> <p><b>Sustainability:</b> Staff attrition is minimal and systems are in place to address staff turnover in settings where turnover is high. There are no attendance problems.</p>
<p><b>Notes:</b></p>	

### 3.d) Personnel Policies and Attendance System

**Objective:** The objective of this sub-section is to review the organization’s personnel policies to ensure that personnel policies are in Place and that best practices regarding personnel policy management are adhered to, including keeping staff timesheets.

**Resources:** Personnel Manual, Staff Attendance System

**Changes:** Combines the OCA’s separate sub-factor of “Staff Time Management”

1	2	3	4
<p>The organization has no personnel policy manual and no system for documenting staff work hours.</p>	<p>The organization has personnel policies that may include timekeeping policies. The policies may or may not correspond to the organization’s practice with regard to HR but the attendance control practices do not demonstrate solid business practices. Attendance control system is not reviewed by a supervisor and staff are not trained to follow attendance procedures and related approval processes properly. The personnel policy manual does not require signature statements and have not been disseminated to all staff. There is no process for updating personnel policies and manuals.</p>	<p>The organization has personnel policies including a timekeeping policy that demonstrates solid business practices. The policies correspond with the organization’s practice with regard to HR, but the policy manual does not require signature statements and/or have not been disseminated to all staff. Staff are oriented to the attendance control system but system is not always adhered to in a timely manner, and payments is not based on the information in the attendance control system. Supervisors review and sign attendance information triggered by the system. There is no system for updating personnel policies and manuals.</p>	<p>The organization has personnel policies which include timekeeping policies and practices that demonstrate good operational practices. The personnel policies correspond with the organization’s practice with regard to HR. They require signature statements and have been disseminated to all staff and are on file. Staff are trained to comply with the attendance control system, supervisors review and sign on attendance information, and attendance system is adhered to in a timely manner. Payment corresponds to the records of the attendance system. There is a system for updating personnel policies and manuals.</p>

Score	Criteria
1	The organization has no personnel policy manual and no system for documenting staff work hours.
2	<p><b>Documentation:</b> Personnel policies and procedures are partially documented. The document includes policies on: recruitment and selection of staff, work schedule, employee compensation (salary) and benefits, leave, performance review, grievance and disciplinary procedures, ending employment (resignation, termination), administrative procedures, employee code of conduct (ethics), tracking paid time off, and accounting for staff time through attendance system that is reviewed and signed by a supervisor, and payment corresponds to the information documented in the system.</p> <p><b>Compliance:</b> The policies may or may not correspond to the organization's human resources practices. There is no process for disseminating the policies to all staff, and staff are not required to sign the manual. Staff are not oriented to deal with attendance control system properly and supervisors do not review and sign attendance records.</p> <p><b>Updating:</b> There is no process to update personnel policies and manuals.</p>
3	<p><b>Documentation:</b> Personnel policies and procedures are mostly documented. The document includes policies on: recruitment and selection of staff, work schedule, employee compensation (salary) and benefits, leave, performance review, grievance and disciplinary procedures, ending employment (resignation, termination), administrative procedures, employee code of conduct (ethics), tracking paid time off, and accounting for staff time through attendance system that is reviewed and signed by a supervisor, and payment corresponds to the information documented in the system.</p> <p><b>Compliance:</b> The policies correspond to the organization's human resources practices. There is no process for disseminating the policies to all staff, and staff are not required to sign the manual. Staff are oriented to deal with attendance control system properly, but they are not always completed and submitted on time. Payment is not based on the information in the attendance control system.</p> <p><b>Updating:</b> There is no process to update personnel policies and manuals.</p>
4	<p><b>Documentation:</b> Personnel policies and procedures are documented. The document includes policies on: recruitment and selection of staff, work schedule, employee compensation (salary) and benefits, leave, performance review, grievance and disciplinary procedures, ending employment (resignation, termination), administrative procedures, employee code of conduct (ethics), tracking paid time off, and accounting for staff time through attendance system that is reviewed and signed by a supervisor, and payment corresponds to the information documented in the system.</p> <p><b>Compliance:</b> The policies correspond to the organization's human resources practices. The policies have been disseminating to all staff, staff are required to sign the manual, and the signatures are on file. Staff are trained on using the attendance system. Attendance system is properly dealt with in a timely manner, supervisors review and sign attendance records, and payment corresponds to the information in the timesheets.</p> <p><b>Updating:</b> There is a system in place to update personnel policies and manuals.</p>

**Notes:**

**3.e) Salaries and benefits**

**Objective:** The objective of this sub-section is to review the organization's systems for setting and managing salaries and benefits.

**Resources:** Organization's salary grade and range, 2-3 personnel files representative of different levels

1	2	3	4
The organization has no clear rationale for staff salaries, such as pay grade and range, benefits are not clearly documented in a policy manual and/or are not equitably applied and/or do not conform to national labor requirements.	The organization has a clear rationale for staff salaries, such as pay grade and range, but it is not consistently applied and is not reviewed and updated annually; benefits are clearly documented in a policy manual but are not equitably applied and/or do not conform to national labor requirements.	The organization has a clear rationale for staff salaries, such as pay grade and range, and this is consistently applied to all staff but is not reviewed and updated annually; benefits are clearly documented in a policy manual, are equitably applied and conform to national labor requirements.	The organization has a clear rationale for staff salaries, such as pay grade and range, that is consistently applied to all staff and is reviewed and updated annually; pay increases follow the salary framework and or pay increase policy; benefits are clearly documented in a policy manual, are equitably applied and conform to national labor laws. Performance review and pay period are coordinated.

Score	Criteria
1	<b>Documentation:</b> The organization does not have a salary structure or documented benefits <b>Completeness:</b> There is no equitable application of salaries and benefits and there is no compliance with national labor laws.
2	<b>Documentation:</b> The organization has a salary structure and/or documented benefits in a policy manual. <b>Completeness:</b> There is a clear rationale for staff salaries, such as pay grade and range, but these are not consistently applied. There is no compliance with all national labor laws.
3	<b>Documentation:</b> The organization has a salary structure and/or documented benefits in a policy manual. <b>Completeness:</b> There is a clear rationale for staff salaries, such as pay grade and range, and compliance with all national labor laws. <b>Application:</b> Salary grade consistently applied and followed and benefits are equitably applied, but not reviewed and updated annually or coordinated with performance reviews.
4	<b>Documentation:</b> The organization has a salary structure and/or documented benefits in a policy manual. <b>Completeness:</b> There is a clear rationale for staff salaries, such as pay grade and range, and compliance with all national labor laws. <b>Application:</b> Salary grade consistently applied and followed and benefits are equitably applied; salary grade is reviewed and updated annually, coordinated with performance reviews.

**Notes:**

### 3.f) Performance Management

**Objective:** The objective of this sub-section is to review the organization's systems for staff performance management, including performance review processes and systems.

**Resources:** Examples of completed performance appraisal forms or, if not, the form.

1	2	3	4
The organization has no process for regularly assessing staff performance including objective setting, listing of responsibilities/tasks and assessment of performance. Changes in staff work status are not kept on file.	The organization has a process for assessing staff performance, but it does not include objective setting, list of responsibilities/tasks, supervision or professional development. It is not participatory and follows an auditing approach rather than a supportive supervision approach. Changes in staff work status, salary and benefits are neither consistently filed nor up to date.	The organization has a process for assessing staff performance that includes objective setting, listing of responsibilities/tasks, assessment of performance on past activities, supervision and professional development. It is conducted as a participatory process, but is not regularly applied or not conducted for all staff. Changes in staff work status, salary and benefits are consistently filed and up to date	The organization has a process for assessing staff performance that includes objective setting, listing of responsibilities/tasks, assessment of performance on past activities, supervision and professional development. It is conducted for all staff at a minimum of once a year. Changes in staff work status, salary and benefits are consistently filed and up to date and available to staff.

Human Resources: Performance Management	
Score	Criteria
1	<b>Documentation:</b> The organization has no documented system for assessing staff performance
2	<b>Documentation:</b> The organization has a documented system for assessing staff performance. Changes in staff work status are not filed consistently and are not up to date <b>Quality:</b> The process does not include objective setting, listing responsibilities, supervision and professional development. Performance appraisal does not follows a participatory approach, but more resembles an audit than a supportive supervision approach. <b>Application:</b> Performance appraisal is conducted for all staff a minimum of once a year. <b>Staff Awareness:</b> Staff have indicated that they have received feedback from supervisors in the last year.
3	<b>Documentation:</b> The organization has a documented system for assessing staff performance. Changes in staff work status are consistently filed and up to date <b>Quality:</b> The process includes objective setting, listing responsibilities, supervision and professional development. Performance appraisal follows a participatory approach

	<b>Application:</b> It is a participatory process, but is not done regularly and all staff do not receive performance reviews.
<b>4</b>	<p><b>Documentation:</b> The organization has a documented system for assessing staff performance. Changes in staff work status are consistently filed and up to date</p> <p><b>Quality:</b> The process includes objective setting, listing responsibilities, supervision and professional development. Performance appraisal follows a participatory approach</p> <p><b>Application:</b> Performance appraisal is conducted for all staff a minimum of once a year.</p> <p><b>Staff Awareness:</b> Staff have indicated that they have received feedback from supervisors in the last year.</p>

**Notes:**

### 3.g) Gender Diversity in Staffing

**Objective:** The objective of this sub-factor is to review the organization's policies and practices around hiring women at all staffing levels.

**Resources:** Personnel policy manual, staff demographics, disaggregated by sex.

**Changes:** Ministries do not have boards, and there is little ethnic diversity in the West Bank.

1	2	3	4
There is no gender diversity in the composition of the management nor staff and no plans or strategy to diversify. Staff is severely under-represented by women except in very low positions.	A plan or strategy is established to reflect greater gender representation. Increased numbers of women hiring begun. Women are rarely promoted.	Representation of women noticeably improved at a variety of levels. There is a significant representation of women among staff in mid-level management positions. Women have a reasonable opportunity of promotion.	Equal gender representation at all levels of staffing, including the senior management team. Women are promoted as routinely as men to higher level positions.

Human Resources: Gender Diversity in Staffing	
Score	Criteria
1	There is no consideration, plan or strategy (written or unwritten) to increase diversity in hiring men and women, and women are rarely found in positions beyond the lowest level. There is no policy or strategy to ensure that women are given equal opportunities for training and experiences that qualify them for promotion.
2	Gender hiring, promotion, and training plans or strategies exist (as stand-alone document or included in the operational plan), but are

	weak or are not practiced or enforced. Women are hired but usually only in the low levels of staffing and are rarely promoted or given opportunities for training and experiences that increase their skills and knowledge.
<b>3</b>	Gender diversity plan and/or strategy for diversity exists, and is often referred to in hiring, promotion, and training/experiential opportunity decisions. Women are hired at significant levels in mid-management positions, and have a reasonable opportunity of being promoted from their starting position.
<b>4</b>	Sound gender plan and/or strategy for diversity is in full force. Women are represented equally at all levels in the organization, including in the senior management team. Women are routinely given opportunities for training, experiences to increase their skills and knowledge, and promotion.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
There is no training offered to staff of the organization.	Some training of staff takes place, but it is not systematic or driven by a training needs assessment. Staff are selected to attend training without a discernible basis.	Curricula is developed based on a needs assessment, but not regularly updated. Training topics do not necessarily reflect the skills and knowledge staff need to fulfill their jobs effectively. Not all staff have regular access to training.	Training needs assessments and updates to training curricula are conducted regularly. Initial job orientation is offered to all employees. The training curricula reflects the knowledge and skills staff need to effectively carry out their functions. All staff have access to training on a regular basis.

**Notes:**

### 3.h) Staff Training

**Objective:** The objective of this sub-factor is to assess the organization's ability to ready its workforce to do their jobs.

**Resources:** Training division procedures, Human Resources manual

**Changes:** Not part of the OCA; added as proper training of employees is important to their ability to function effectively in their positions.

### 4.a) Financial systems

**Objective:** The objective of this sub-section is to assess whether there are adequate internal controls in place to safeguard funds and check the accuracy and reliability of accounting data.

**Resources:** Financial Manual, Staff interviews, Payment Vouchers

1	2	3	4
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Human Resources: Staff Training			
Score	Criteria		
1	No training is offered to the staff of the organization.		
2	Some staff attend training, but the selection of who receives training is not clear and not all staff are offered training. Training topics do not necessarily reflect the skills and knowledge that employees need to do their jobs effectively.		
3	A training needs assessment has been conducted, but may not be done regularly. The training curricula is not updated regularly. The training curricula does not provide courses and modules around the knowledge and skills that staff need to perform their job duties effectively. Training is offered to most staff, but not all or not regularly.		
4	Training is offered regularly to all staff. Staff receive an orientation to the organization when they are hired, and to their positions. A training needs assessment is regularly conducted and the training curricula reflects the findings of the needs assessments, with		
<b>Notes:</b>	courses and modules delivering the knowledge and skills that staff need to perform their job duties effectively. The training curricula is updated regularly.		
The organization has no	The organization has some	The organization has most or all	The organization has complete and

documented financial management systems (i.e. budget tracking, annual budget, projections).	documented financial management systems but they are not complete and appropriate.	documented financial management systems and they are appropriate. They are either not known to staff and/or are not consistently adhered to.	appropriate documented financial management systems, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated.
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<b>Financial Resources: Financial Systems</b>	
<b>Score</b>	<b>Criteria</b>
1	The organization has no documented financial management systems (written financial controls, a separation of duties among financial staff including the person preparing payment and the person authorizing it, a signatory authority/approval matrix, access to books, records, cash limited to a minimal number of relevant people).
2	The organization has some documented financial management systems, but they are not complete, do not reflect internationally accepted best practices in accounting, and are not relevant to the organization.
3	The organization has most documented financial management systems, that reflect internationally accepted best practices in accounting, and are relevant to the organization. However, not all finance staff know of them and they are not consistently adhered to.
4	The organization has complete and appropriate documented financial management systems, that reflect internationally accepted best practices in accounting, and are relevant to the organization. Finance staff know and adhere to these systems, and regularly updated.

**Notes:**

#### 4.b) Financial controls (procedures)

**Objective:** The objective of this sub-section is to assess whether there are adequate internal controls in place to safeguard funds and check the accuracy and reliability of accounting data.

**Resources:** Financial Procedures Manual, Staff interviews, Payment Vouchers

1	2	3	4
The organization has no documented financial control procedures (i.e. standard accounting practices, segregation of duties, checks and balances, etc.)	The organization has some documented financial control procedures but they are not complete and appropriate.	The organization has most or all documented financial control procedures and they are appropriate. They are either not known to staff and/or are not consistently adhered to.	The organization has complete and appropriate documented financial control procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated.

Financial Resources: Financial Controls	
Score	Criteria
1	There are no written financial control procedures (such as a separation of duties among financial staff, including the person preparing payment and the person authorizing it; a signatory authority/approval matrix; and access to books, records, and cash limited to a minimal number of relevant people).
2	The organization has some documented financial controls but they are not complete and appropriate.
3	The organization has most financial controls documented and they are appropriate. Staff do not necessarily know of these controls, or do not consistently adhere to them.
4	The organization has complete and appropriate documented financial controls that are regularly reviewed and updated. Staff know, understand, and follow these procedures.
<b>Notes:</b>	

#### 4.c) Financial documentation and reporting

**Objective:** The objective of this sub-section is to assess whether record keeping is adequate to meet internationally accepted documentation practices for expenditure of funds and whether the organization has a routine reporting system for financial information. A key focus of this subsection is to assess whether financial files are audit-ready.

**Resources:** Staff interviews, Financial Files, financial reports

**Changes:** Combined financial reporting, previously a separate subfactor

1	2	3	4
The organization has no documented financial documentation procedures (i.e. filing system, invoices/receipts purchase orders, Ministry of Finance-required approvals if appropriate, etc.) and no documented reporting procedures.	The organization has some documented financial documentation procedures, including financial reporting procedures but they are not complete and appropriate.	The organization has most or all documented financial documentation procedures, including financial reporting procedures and they are appropriate. They are either not known to staff and/or are not consistently adhered to.	The organization has complete and appropriate documented financial documentation procedures, including financial reporting procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed and updated.

Financial Resources: Financial Documentation	
Score	Criteria
1	There are no written processes for managing financial documentation, including financial reporting. Receipts, approvals, payment vouchers are not kept. There is no designated person to manage financial files. Financial reporting is not done.
2	There are some documented financial control procedures, including financial reporting procedures, but they are not complete and appropriate. There are designated staff to manage financial files, but they receive no training and there is no organized system. Financial reporting is done occasionally, but is not complete.
3	Most or all financial documentation procedures are written and appropriate, including financial reporting procedures, but financial staff do not know them or consistently adhere to them. Reports may not be made regularly or may not be complete.
4	The organization has complete and appropriate documented financial documentation procedures, including financial reporting procedures. Staff are trained in them and know how to access them. The procedures are consistently adhered to, and are regularly reviewed and updated. Reports are regularly made and are complete.
<b>Notes:</b>	

#### 4.d) Audits

**Objective:** The objective of this sub-section is to assess whether the organization undergoes routine internal audits and has a system for addressing audit findings.

**Resources:** Financial Audits, Post-Audit Management Plans, Staff interviews

**Changes:** Government institutions are not audited by external entities, but should perform internal audits on their financial systems.

1	2	3	4
The organization has no documented internal audit procedures and self-audits are not conducted.	The organization has some documented internal audit systems but either the system is not complete or self-audits are not completed.	The organization has complete and documented internal audit systems. Self-audits are conducted, but findings are not consistently disseminated and/or addressed.	The organization has complete and appropriate documented internal audit systems. Self-audits are conducted annually and findings are consistently disseminated and addressed.

<b>Financial Resources: Audits</b>	
Score	Criteria
1	There are no written processes and the institution does not undertake internal audits regularly.
2	The organization has some written processes for conducting regular internal financial audits but they are not complete. Self-audits occur but not regularly or are not complete. Few audit recommendations are implemented, and no schedule exists for resolving audit findings.
3	The organization has most written processes for complying with regular internal financial audits and conducts regular self-audits. Records are kept of audit reports but not all audit recommendations are implemented, and no schedule exists for resolving audit findings.
4	The organization has written processes for complying with regular internal financial audits and conducts regular self-audits. Records are kept of audit reports, audit recommendations are implemented, and a schedule exists for resolving audit findings.
<b>Notes:</b>	

### 5.a) Strategic Planning

**Objective:** The objective of this sub-section is to assess the organization's ability to realize its mission and goals by reviewing its strategic plan.

**Resources:** Strategic Plan

1	2	3	4
No strategic plan exists for the organization	The organization has a strategic plan but it does not reflect its vision, mission and values; is not based on an analysis of its strengths and weaknesses, external environment and client needs; does not include priority areas, measurable objectives, clear strategies, or is not used for management decisions or operational planning and is not regularly reviewed.	The organization has a written strategic plan that reflects its mission, is based on a review of strengths and weaknesses, the external environment and client needs, states priority areas, and measurable objectives, and clear strategies, but is not referred to for management decisions or operational planning and is not regularly reviewed.	The organization has a written strategic plan that reflects its mission, is based on a review of strengths and weaknesses, the external environment and client needs, states priority areas and measurable objectives, is referred to for management decisions and operational planning and is regularly reviewed

Organizational Management: Strategic Planning	
Score	Criteria
1	<b>Documentation:</b> A strategic plan has not been developed
2	<b>Documentation:</b> A basic strategic plan exists <b>Completeness:</b> The strategic plan is incomplete. It does not reflect the organization's vision/mission, was not developed based on an analysis of the organization's strengths and weaknesses (an organizational assessment and program review), does not clearly state priority areas or have measurable objectives <b>Application:</b> The strategic plan is not used by management to make decisions or when developing operational plans and is not reviewed on a regular basis
3	<b>Documentation:</b> A solid strategic plan exists <b>Completeness:</b> The strategic plan is comprehensive. It reflects the organization's vision/mission, was developed based on an analysis of the organization's strengths and weaknesses (an organizational assessment and program review), clearly states priority areas and has measurable objectives <b>Application:</b> The strategic plan is not used by management to make decisions or when developing operational plans and is not

	reviewed on a regular basis
<b>4</b>	<p><b>Documentation:</b> A solid strategic plan exists</p> <p><b>Completeness:</b> The strategic plan is comprehensive. It reflects the organization's vision/mission, was developed based on an analysis of the organization's strengths and weaknesses (an organizational assessment and program review), clearly states priority areas and has measurable objectives</p> <p><b>Application:</b> The strategic plan is used by management to make decisions or when developing operational plans and is reviewed on a regular basis</p>

**Notes:**

### 5.b) Operation Plan Development for Service Delivery

**Objective:** The objective of this sub-section is to assess the organization's readiness by reviewing the content of operation plans.

**Resources:** Annual organizational operation plan(s)

1	2	3	4
The organization has an operation plan but it does not have stated goals, measurable objectives, strategies, timeline, responsibilities and indicators, or those that are indicated are not adequate. Operation plan is neither linked to a program budget nor developed with participation of staff and has no quarterly review plans	The organization has an operation plan with stated goals, measurable objectives, and strategies, but has no stated timelines, responsibilities and indicators, and is neither linked to a program budget, nor developed with participation of staff and has no dates for quarterly review plans and is not submitted on time	The organization has an operation plan with stated goals, measurable objectives, and strategies, stated timelines, responsibilities and indicators, and is linked to the program budget, but is not developed with participation of staff and has no dates for quarterly review plans and is not submitted on time	The organization has an operation plan with stated goals, measurable objectives, and strategies, timelines, responsibilities and indicators, and is linked to the program budget, developed with participation of staff, has dates for quarterly reviews and is submitted on time

Score	Criteria
1	<p><b>Documentation:</b> The organization may have project-related operation plans</p> <p><b>Completeness:</b> The operation plan is incomplete. It does not have stated goals, measurable objectives, strategies, a timeline, defined responsibilities and indicators.</p> <p><b>Quality:</b> The operation plan elements that exist are not adequate. They are not linked to the organization's budget, were not developed through staff participation, and have no quarterly review plans.</p>
2	<p><b>Documentation:</b> The organization has project-related operation plans</p> <p><b>Completeness:</b> The operation plan is incomplete. It does not have a timeline, defined responsibilities and indicators and/or</p> <p><b>Quality:</b> The operation plan elements that exist are of acceptable quality</p>
3	<p><b>Documentation:</b> The organization has project-related operation plans</p> <p><b>Completeness:</b> The operation plan is complete. It has stated goals, measurable objectives, strategies, a timeline, defined responsibilities and clear indicators</p> <p><b>Quality:</b> The operation plan elements that exist are of acceptable quality</p> <p><b>Budget Linkages:</b> The operation plan is linked to a program budget</p>
4	<p><b>Documentation:</b> The organization has project-related operation plans</p> <p><b>Completeness:</b> The operation plan is complete. It has stated goals, measurable objectives, strategies, a timeline, defined responsibilities and clear indicators</p> <p><b>Quality:</b> The operation elements that exist are of good quality, for example indicators relate to the program objectives and are reasonable and feasible</p> <p><b>Budget Linkages:</b> The operation plan is linked to a program budget</p> <p><b>Staff Involvement:</b> The operation plan was developed with participation of staff</p> <p><b>Application:</b> The operation includes plans for and is reviewed on a quarterly basis to check for progress and up-dated</p> <p><b>Compliance:</b> The operation was submitted in a timely manner</p>

**Notes:**

### 5.c) Change Management

**Objective:** The objective of this sub-section is to assess the organization's sustainability and relevance by reviewing its systems and processes for responding to emerging situations, reviewing programs and analyzing needs.

**Resources:** Center of Excellence or comparable unit/process

1	2	3	4
The organization does not have a process to respond to internal changes, for example in staffing, leadership, budgets or to external changes such as government policies, security threats, etc.	The organization has a basic process to respond, when needs arise, to changes in the internal or external environment. It involves staff in adjustments to management systems and processes.	The organization has an established routine for involving staff in modifying existing policies, processes, programs, or plans to make ongoing program or administrative adjustments, and to managing staff involvement in implementing and responding to change	The organization has an established routine for involving staff in modifying existing policies, procedures, programs or plans to make ongoing program or administrative adjustments, and to managing staff involvement in implementing change and response to change. There is a review process for monitoring whether revisions are implemented and lead to improvements; staff comfort with changes is addressed

Organizational Management: Change Management	
Score	Criteria
1	<p><b>Systems:</b> The organization does not have a system to review or update policies (e.g. personnel policy, administrative policies) programs or operation plans/strategic plans</p> <p><b>Responsiveness:</b> The organization experiences delays, problems in operations or in program implementation when personnel change, new programs are added, or external conditions shift.</p>
2	<p><b>Systems:</b> The organization has a basic system to review or update policies (e.g. personnel policy, administrative policies) programs or operation plans/strategic plans that includes active involvement of staff</p> <p><b>Application:</b> The system is not applied</p> <p><b>Responsiveness:</b> The organization experiences delays, problems in operations or in program implementation when personnel change, new programs are added, or external conditions shift</p>
3	<p><b>Systems:</b> The organization has a system to review or update policies (e.g. personnel policy, administrative policies) programs or plans (workplans/strategic plans) that includes active involvement of staff</p> <p><b>Application:</b> The system is applied (meetings are held, staff are informed and/or involved, changes are made)</p>

	<b>Responsiveness:</b> The organization experiences few delays, problems in operations or in program implementation when personnel change, new programs are added, or external conditions shift.
<b>4</b>	<p><b>Systems:</b> The organization has a system to review or update policies (e.g. personnel policy, administrative policies) programs or plans (workplans/strategic plans) that includes active involvement of staff</p> <p><b>Application:</b> The system is applied (meetings are held, staff are involved, changes are made and staff response is managed)</p> <p><b>Responsiveness:</b> The organization experiences almost no delays, problems in operations or in program implementation when personnel change, new programs are added, or external conditions shift.</p> <p><b>Follow-up:</b> a review process is in place to monitor implementation of revisions or changes and whether the changes lead to desired improvements/outcomes.</p>

**Notes:**

### 5.d) Knowledge Management

**Objective:** The objective of this sub-section is to assess the organization’s ability to maintain a high standard of technical knowledge and implementation by reviewing linkages with other organizations and government agencies and its internal systems for sharing best practices.

**Resources:** Association memberships with technical organizations, staff reports on meetings attended

1	2	3	4
The organization has neither technical linkages with external organizations (other government, national or international organizations) to share best practices or program experiences, nor an internal process for ensuring staff are continuously share and are updated on best practices.	The organization has either external linkages with organizations (e.g. other government, national or international organizations) for best practices sharing or an internal sharing process but does not apply learning to the program or share these with stakeholders.	The organization has active external linkages and an internal process for sharing and plans to use best practices but has not implemented these plans or updated stakeholders and staff.	The organization has actively linked with external organizations (other government, national or international organizations) and has an internal process to share technical expertise & experiences, has applied best practices to its program and shared this information with stakeholders and appropriate staff.

**Organizational Management: Knowledge Management**

Score	Criteria
1	<p><b>Linkages:</b> The organization has no active technical linkages with external organizations. Technical linkages can include but should not be limited to: formal relationships with other organizations, other government institutions or private entities for service provision or technical consulting, informal links for information sharing, such as email for an association membership with organizations focusing on same technical area.</p> <p><b>Staff Awareness:</b> Staff are not routinely updated on best practices or share lessons learned from their own programs either through meetings or reports</p>
2	<p><b>Linkages:</b> The organization has active technical linkages with external organizations OR</p> <p><b>Staff Awareness:</b> Staff are routinely updated on best practices and time is made to share lessons learned from their own programs either through meetings or reports</p> <p><b>Application:</b> New knowledge/best practices are not applied to ongoing programs or shared with stakeholders</p>
3	<p><b>Linkages:</b> The organization has active technical linkages with external organizations.</p> <p><b>AND</b></p> <p><b>Staff Awareness:</b> Staff are routinely updated on best practices, and share lessons learned from their own programs either through meetings or reports</p> <p><b>Application:</b> New knowledge/best practices are not applied to ongoing programs or shared with stakeholders</p> <p><b>Planning:</b> Annual planning process does not include a review of current best practices and discussion of how programs can be updated to reflect these best practices and systems for updating staff knowledge</p>
4	<p><b>Linkages:</b> The organization has active technical linkages with external organizations.</p> <p><b>AND</b></p> <p><b>Staff Awareness:</b> Staff are routinely updated on and share and adapt best practices from their own program and external organizations either through meetings or reports</p> <p><b>Application:</b> New knowledge/best practices are applied to ongoing programs and shared with stakeholders</p> <p><b>Planning:</b> Annual planning process includes a review of current best practices and discussion of how programs can be updated to reflect these best practices and systems for updating staff knowledge</p>

## 5.e) Communication

**Objective:** The objective of this sub-section is to review the organization's internal communication approach to function effectively, maximize efficiency and foster creativity by reviewing internal dynamics.

**Resources:** Staff Questionnaires

1	2	3	4
Communication is limited between and among management and staff; few opportunities exist to exchange ideas or discuss management, program or technical issues. Staff ideas are not sought or respected; staff do not raise issues	Communication opportunities for discussion between and among management and staff exist but are rarely used. Staff are listened to but their input is not actively sought; staff feel uncomfortable raising issues	Communication between and among management and staff is open, regular opportunities for discussion on management, program or technical areas exist; staff ideas are sought and incorporated but staff are not comfortable raising challenging issues	Communication between and among management and staff is open, regular opportunities are created to exchange ideas or discuss management, program or technical issues. Staff initiate discussion, contribute ideas and feel comfortable raising issues

Organizational Management: Communication	
Score	Criteria
1	<b>System:</b> No system exists for regular communication among management and staff, <b>Openness:</b> Organizational culture inhibits free flow of informal communication and staff do not feel comfortable raising issues <b>Staff Voice:</b> Staff ideas are not sought by management or respected.
2	<b>System:</b> A system exists for regular communication among management and staff, but it is not put into practice <b>Openness:</b> Organizational culture allows for some flow of informal communication but staff do not feel comfortable raising issues <b>Staff Voice:</b> Staff are listened to by management, but their ideas are not sought or respected
3	<b>System:</b> A system exists for regular communication among management and staff and is followed regularly <b>Openness:</b> Organizational culture allows formal and informal communication, but staff do not feel comfortable raising issues <b>Staff Voice:</b> Staff are listened to by management and their ideas are sought, respected and incorporated into decision making.
4	<b>System:</b> A system exists for regular communication among management and staff and is followed regularly <b>Openness:</b> Organizational culture encourages openness and allows for formal, informal and transparent communication; staff feel comfortable initiating discussions and raising issues <b>Staff Voice:</b> Staff are listened to by management and their ideas are sought, respected and incorporated into decision making.

## 5.f) Decision Making

**Objective:** The objective of this sub-section is to assess how the organization makes decisions, who is involved and how decisions are communicated.

**Resources:** Staff Questionnaires

1	2	3	4
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### Notes:

Staff are not part of the decision making process; their input is rarely sought; decisions affecting the organization are not communicated or explained	Staff ideas are sometimes sought for making decisions, but decisions are not consistently communicated or explained.	Staff ideas are encouraged but seldom incorporated into decisions; Decisions are explained but staff do not fully participate in the decision making process	Staff ideas are sought, respected and incorporated into the decision making process, staff share a sense of responsibility, accountability and ownership of the decision making process.
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Organizational Management: Decision Making	
Score	Criteria
1	<b>Process:</b> Controlled by leadership or management <b>Openness:</b> Closed <b>Staff Voice:</b> Staff feel excluded
2	<b>Process:</b> Controlled from above with minimal input from staff <b>Openness:</b> Lacks clarity and rationale, staff don't understand when they can share their views, management listens but shows little interest <b>Staff Voice:</b> Staff feel they play a minor role
3	<b>Process:</b> Controlled from above but allows some input from staff <b>Openness:</b> Open and clear, staff understand when they can share their views, management listens and shows some interest <b>Staff Voice:</b> Staff feel they are not full participants in the decision making process
4	<b>Process:</b> Controlled from above but with input of staff actively sought and used by management

	<p><b>Openness:</b> Open and guided, staff understand when they can share their views, management is eager to listen and incorporate staff insights and/or ideas</p> <p><b>Staff Voice:</b> Staff feel empowered and accountable</p>
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**Notes:**

**6.a) Technical Reporting**

**Objective:** The objective of this sub-section is to review the organization’s ability to document technical activities through quarterly and annual progress reports development.

**Results:** Most recent Technical Report

1	2	3	4
The organization does not document quantitative or qualitative progress on its operational and development plan, including a review of its objectives and strategies, facilitating factors and barriers, identification of lessons learned and/or best practices, report on national plans program indicators or use information to review/revise strategy with staff and stakeholders.	The organization documents qualitative progress on its operational and development plan, including a review of objectives and strategies facilitating factors and barriers, but does not identify lessons learned or best practices or report on national plans program indicators or use information to review/revise strategies with staff or stakeholders or submit on time in compliance with overall government parameters,	The organization documents both qualitative and quantitative operational and development plan progress including a review of objectives and strategies, facilitating factors and barriers, lessons learned and best practices, and reports on program indicators but does not use information to review/revise strategies with staff and stakeholders or submit on time in compliance with overall government parameters,	The organization documents both quantitative and qualitative operational and development plan progress, including a review of objectives and strategies, facilitating factors and barriers, lessons learned and best practices, reports on national plans program indicator results, and reports are submitted on time in compliance with overall government. parameters, Organization uses information to review/revise strategies with staff and stakeholders.

**Program Management: Technical Reporting**

Score	Criteria
1	<p><b>Documentation:</b> The organization has not completed a technical report</p> <p><b>Systems:</b> Few, if any, processes are in place for regular review of progress on operational and development plan</p>
2	<p><b>Documentation:</b> The organization has a completed a technical report that documents progress on the operational and development plan and specifies reasons for gaps or shortfalls</p> <p><b>Systems:</b> Systems are in place for regularly reviewing progress on operational and development plan</p> <p><b>Quality:</b> Systems do not include the identification of lessons learned or best practices and do not assess or report on indicators</p>
3	<p><b>Documentation:</b> The organization has a completed a technical report that documents progress on the operational and development plan and specifies reasons for gaps or shortfalls</p> <p><b>Systems:</b> Systems are in place for regularly reviewing progress on operational and development plan</p> <p><b>Quality:</b> Systems include the identification of lessons learned or best practices and assess and report on indicators</p>
4	<p><b>Documentation:</b> The organization has a completed a technical report that documents progress on the operational and development plan and specifies reasons for gaps or shortfalls</p> <p><b>Systems:</b> Systems are in place for regularly reviewing progress on operational and development plan</p> <p><b>Quality:</b> Systems include the identification of lessons learned or best practices and assess and report on PEPFAR or program indicators</p> <p><b>Staff Awareness:</b> The organization reviews findings and revises strategies, based on findings, with staff and stakeholders</p> <p><b>Timeliness:</b> Reports are submitted on time</p>

**Notes:**

**6.b). Community relations**

**Objective:** The objective of this sub-section is to ensure the organization’s programs are responsive to and address community needs by reviewing processes for sharing information with the public and receiving public views, as well as incorporating these views into service delivery planning.

**Resources:** Communications strategy, organogram,

**Changes:** Focus shifted to sharing information with the public, and ensuring the public’s views are incorporated into service delivery.

<p>The organization does not have a communications department or strategy that involves sharing information with the public and mechanisms to engage with and receive feedback from the public.</p>	<p>The organization has designated staff charged with a communications strategy that involves sharing basic information and informal or ad hoc ways to engage the public as well as receive limited feedback, but public viewpoints are not integrated into operation plans to improve service delivery.</p>	<p>The organization has a communications division that implements a communications strategy, although the strategy might not be updated regularly or be comprehensive. There are official ways to engage the public and receive public feedback but these are not regularly conducted and public viewpoints are sometimes integrated into operations plans to improve service delivery.</p>	<p>The organization has a communications division with staff trained in public relations that implements a regularly updated and comprehensive communications strategy. There are officially designated methods for engaging with the public on a regular basis and for receiving public feedback. Public viewpoints are consistently integrated into operation plans to improve service delivery.</p>
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Organizational Management: Community Relations	
Score	Criteria
1	<p><b>Systems:</b> The organization has no systems for sharing information with the public, and for receiving information from the public regarding service delivery.</p>
2	<p><b>Systems:</b> The organization has staff designated to handle communications but they might handle communications as one of numerous duties, and not have training in communications; the communications to the public are basic information. Public viewpoints and feedback are received in an ad hoc manner.  <b>Quality:</b> The views of community members are not integrated into operation planning for service delivery.</p>
3	<p><b>Systems:</b> The organization has systems for sharing information, including a communications division or trained staff and a communications strategy, although the strategy is not updated regularly and not comprehensive. There are designated methods for receiving public viewpoints and feedback, although they are not regularly available.  <b>Quality:</b> The views of community representatives are sometimes integrated into operation planning to improve service delivery.</p>

<b>4</b>	<p><b>Systems:</b> The organization has systems for sharing information, including a communications division with trained staff and a communications strategy that is updated regularly and is comprehensive. There are designated methods for receiving public viewpoints and feedback that are regularly available.</p> <p><b>Quality:</b> The views of community representatives are consistently integrated into operation plans to improve service delivery</p>
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**Notes:**

**6.c) Gender (operations)**

**Objective:** The objective of this sub-section is to assess the organization’s ability to ensure high quality, relevant programs by reviewing its systems for assessing gender issues in service delivery and integrating gender concerns into its programs.

**Resources:** Community or client assessments, Program plans

**Changes:** “Local culture” deleted from OCA phrase “local culture or gender.”

1	2	3	4
Organization does not consider gender issues when programming its activities and has no strategy, tools or process for assessing gender issues.	The organization considers gender issues when programming activities, but does not have a written strategy, tools or a process for assessing gender issues relevant to its programs and incorporates elements only when convenient.	The organization considers or gender concerns when programming activities; it views gender as integral to program success, has a written gender strategy and process and tools for assessing gender issues relevant to its programs but incorporates elements in its programming and activities only when convenient.	The organization considers gender concerns when programming activities; it views gender as integral to program success, has a clear gender strategy, process and tools for assessing gender issues relevant to its programs and specifically incorporates elements in its programming and activities. It uses gender sensitive indicators as part of its gender strategy and operational plan.

<b>Program Management: Gender (operations)</b>	
Score	Criteria
1	<p><b>Documentation:</b> The organization has no tools for gender assessments, no gender strategy, and does not take different impact of service delivery on men and women into consideration in its operation plans</p> <p><b>Assessment:</b> Gender assessments are not carried out.</p>
2	<p><b>Documentation:</b> The organization has no tools for gender assessments, no written gender strategy.</p>

	<p><b>Assessment:</b> Gender assessments are not carried out.</p> <p><b>Planning:</b> Gender issues might be considered in operation planning for service delivery, but it is on an ad hoc basis, and at the convenience of the organization. When the organization's strategies and plans incorporate understanding of gender issues, it is based on staff perceptions but not on objective assessments.</p>
3	<p><b>Documentation:</b> The organization has tools for gender assessments and has a written gender strategy.</p> <p><b>Assessment:</b> Gender assessments are carried out.</p> <p><b>Planning:</b> Findings of gender assessments are only sometimes used when developing program strategies and plans for service delivery, when it is convenient for the organization.</p>
4	<p><b>Documentation:</b> The organization has tools for gender assessments and has a written gender strategy.</p> <p><b>Assessment:</b> Gender assessments are regularly carried out.</p> <p><b>Planning:</b> Findings of gender assessments are specifically and consistently used when developing program strategies and plans for service delivery. Gender sensitive indicators are developed to measure the impact of service delivery on men and women.</p>

### 6.d) Monitoring and Evaluation

**Objective:** The objective of this sub-section is to assess the organization's ability to implement quality programs and demonstrate results by reviewing the organization's processes for planning, data collection, and data usage

**Resources:** Monitoring and Evaluation (M&E) plan, M&E tools, M&E reports

1	2	3	4
The organization has no M&E plan and has not identified key process and outcome indicators and has no tools, data collection system, or process to, analyze and report on its programs, activities and impact as defined in the workplan.	The organization has a basic M&E plan. Systems & trained individuals are in place to collect and analyze information on programs, activities & impact, including process and outcome indicators but information is not regularly collected or reported.	The organization has a good M&E plan that has been approved as required. Systems & trained individuals are in place to collect and analyze information on programs, activities & impact, including process and outcome indicators Most data on programs & activities are available and up to date and reports are drafted and shared with relevant stakeholders but data/findings are not consistently used for follow-up monitoring, support or planning.	The organization has a good M&E plan that has been approved as required. Data on program activities are available, are up to date and the data are regularly used for follow-up monitoring, program adjustments and planning and determining progress towards achieving stated targets as well as shared with relevant stakeholders

Score	Criteria
1	<p><b>Documentation:</b> The organization has no M&amp;E plan And/or • <b>M&amp;E Elements:</b> No process or outcome indicators have been identified, no M&amp;E tools exist, there is no system for collecting data or process for analyzing data</p>
2	<p><b>Documentation:</b> The organization has a basic M&amp;E plan that includes a description of monitoring systems, defined indicators, how/who collects data and how often, how data are analyzed and used <b>Staff Competence:</b> Relevant staff members have been trained to implement M&amp;E plan and processes <b>Application:</b> Data are not regularly collected <b>Reporting:</b> Data are not reported</p>
3	<p><b>Documentation:</b> The organization has a good M&amp;E plan that includes a description of monitoring systems, defined indicators, how/who collects data and how often, how data are analyzed and used <b>Compliance:</b> The M&amp;E has been approved as required <b>Staff Competence:</b> Relevant staff members have been trained to implement the M&amp;E plan and processes <b>Application:</b> Most data are available and up to date <b>Reporting:</b> Reports are completed and shared with stakeholders <b>Planning:</b> M&amp;E findings are not consistently used for follow up monitoring, supervision support, and planning</p>
4	<p><b>Documentation:</b> The organization has a good M&amp;E plan that includes a description of monitoring systems, defined indicators, how/who collects data and how often, how data are analyzed and used <b>Compliance:</b> The M&amp;E has been approved as required <b>Staff Competence:</b> Relevant staff members have been trained to implement the M&amp;E plan and processes <b>Application:</b> Most data are available and up to date <b>Reporting:</b> Reports are completed and shared with relevant stakeholders <b>Planning:</b> M&amp;E findings are consistently used for follow up monitoring, supervision support, and planning</p>

**Notes:**

## 7. Service Delivery

**Objective:** The objective of this section is to assess the organization's ability to deliver services that improve the safety, welfare, and well being of citizens and the community.

**Sub-section Factors include:** a) ease of access b) quality of facilities c) timeliness of service d) customer satisfaction d) service staff e) service staff f) effective procedures for service delivery g) standards for quality of service delivery h) control of corruption.

### 7.a) Ease of access

**Objective:** The objective of this sub-factor is to assess the ease with which citizens can access services. Scoring should consider that location can impact men and women differently.

**Resources:** Observation, institution documents

1	2	3	4
There is only one (or very limited) location(s) where services are provided and one way to access customer services. Hours of access are limited to business hours. There is no handicapped accessibility to physical facilities.	There are multiple locations to access services, but the level of service at locations is inconsistent and only one method. Citizens can only access services during business hours. There is no handicapped accessibility to physical facilities.	There are multiple locations where citizens can access services, with the majority offering a full range of services. Citizens can access services during business hours. There is handicapped accessibility in at least one facility.	There are multiple locations to access the services that the institution is providing, with most locations providing the full range of services. . Most facilities are handicapped accessible, citizens can access services during some evening and weekend hours because of the availability of at least more than one method.

Score	Criteria
1	There is only one or a few locations where the service is provided. Many citizens must travel to other towns or cities to receive the service. There is no handicapped accessibility in that facility(ies). There is only one method (e.g., walk in, telephone, via internet, mail) to access services. Citizens can only access the services during regular business hours.
2	There are multiple locations where citizens can access services, allowing a majority of citizens to access services in urban areas. Not all facilities offer all services or offer services at the same level. There is no handicapped access to any of these facilities. Citizens can only access services through one method, during business regular business hours.
3	There are multiple locations where citizens can access services, a majority of which offer a full range of services, allowing mostcitizens to access services in or near their home town. One or more of the facilities provides handicapped access. Citizens can only access

	services through one method, during business regular business hours.
<b>4</b>	There are multiple locations where citizens can access services, a majority of which offer a full range of services, allowing nearly all citizens to access services in or near their home town. Nearly all facilities provide handicapped access. There are two or more methods by which citizens can access services (all or most), and at least one of those is available to citizens after regular business hours (e.g., through the Internet, through evening/weekend hours of the facility, by telephone, or by mail).

### 7.b) Quality of facilities

**Objective:** The objective of this sub-factor is to assess the quality and comfort of facilities where services are provided to citizens.

**Resources:** Observation, interview, institution documents

1	2	3	4
No or only the main service center provides comfortable facilities for citizens through signs for citizen orientation, comfortable waiting areas, air conditioning/heating, bathroom facilities, queuing systems.	Some service centers provide comfortable facilities for citizens through signs for citizen orientation, comfortable waiting areas, air conditioning/heating, bathroom facilities, queuing systems.	Many service centers provide comfortable facilities for citizens through signs for citizen orientation, comfortable waiting areas, air conditioning/heating, bathroom facilities, queuing systems.	Most if not all service centers provide comfortable facilities for citizens through signs for citizen orientation, comfortable waiting areas, air conditioning/heating, bathroom facilities, queuing systems.

Score	Criteria
1	None or only the main service center provides for at least two of the following: indoor seated waiting areas with chairs that have air conditioning/heating, clean bathroom facilities for men and women, queuing systems, or signs for orientation when accessing services.
2	Less than half of service centers that serve at least 100,000 citizens provide for at least two of the following: indoor seated waiting areas with chairs that have air conditioning/heating, clean bathroom facilities for men and women, queuing systems, or signs for orientation when accessing services.
3	At least half of service centers that serve at least 100,000 citizens provide for at least two of the following: indoor seated waiting areas with chairs that have air conditioning/heating, clean bathroom facilities for men and women, queuing systems, or signs for orientation when accessing services.
4	Nearly all of service centers that serve at least 100,000 citizens provide for at least two of the following: indoor seated waiting areas with chairs that have air conditioning/heating, clean bathroom facilities for men and women, queuing systems, or signs for orientation when accessing services.

### 7.c) Timeliness of Services

**Objective:** The objective of this sub-factor is to assess satisfaction of customers with the timeliness of service delivery to citizens.

**Resources:** Customer satisfaction surveys (PACE and ministries)

1	2	3	4
Most citizens wait an average of more than an hour and are dissatisfied with the speed of the service they receive.	Many citizens wait an average of 45 minutes to an hour total, and are somewhat dissatisfied with the speed of the service they receive.	Most citizens wait an average of 30 to 45 minutes and are at least somewhat satisfied with the speed of the service they receive.	Most citizens wait less than 30 minutes and are satisfied with the speed of the service they receive.

Score	Criteria
1	More than 85 percent of citizens wait an average (mean) total time of at least one hour, and state that they are not satisfied with the service they receive.
2	More than 50 percent but fewer than 85 percent of citizens wait an average (mean) total time between 45 minutes and one hour and rate their satisfaction with the speed of services as poor or fair.
3	More than 50 percent but fewer than 85 percent of the citizens seeking services wait an average (mean) time of between 30 and 45 minutes and rate their satisfaction with the speed of services as fair or good.
4	In 85 percent or more cases, citizens total wait time to receive the service is less than 30 minutes and rate their satisfaction with the speed of services as good or excellent.

**7.d) Customer satisfaction**

**Objective:** The objective of this sub-factor is to assess the satisfaction of citizens with the delivery of services and the institutions' concern with customer satisfaction.

**Resources:** Customer satisfaction surveys, interviews

1	2	3	4
The organization does not measure citizen satisfaction. External measurers find that citizens are generally dissatisfied with the service delivery of the organization.	The organization has, at one time, taken a limited measure of citizen satisfaction with its services. Citizens are largely dissatisfied with service delivery.	The organization has taken a comprehensive measure of citizen satisfaction with its services. At least 50% of citizens are largely satisfied with service delivery.	The organization regularly takes a comprehensive measure of citizen satisfaction with its services. Most citizens are satisfied with service delivery. The organization uses the results to guide improvements in service delivery.

<b>Service Delivery: Customer Satisfaction</b>	
<b>Score</b>	<b>Criteria</b>
1	The organization does not measure citizen satisfaction with service delivery. If an external measure of satisfaction was taken by another entity, the findings show that most citizens are generally dissatisfied with the organization's delivery of its services.
2	The organization has taken a measure of citizen satisfaction on several aspects of its service delivery. More than 50 percent of the citizens are dissatisfied with service delivery.
3	The organization has taken a measure of citizen satisfaction on a number of different aspects. At least 50 percent of the citizens are satisfied with service delivery.
4	The organization has a way of measuring citizen satisfaction on a number of different aspects, and does so regularly. At least 75 percent of citizens are satisfied with most aspects of service delivery. The results of the measure of citizen satisfaction are used as a basis to improve service delivery.

**7.e) Service staff**

**Objective:** The objective of this sub-factor is to assess whether the citizens feel that the staff having direct and frequent contact with them in the delivery of the institution’s service are effective.

**Resources:** Customer Satisfaction surveys

1	2	3	4
Staff do not know how to provide citizens with effective service, do not treat citizens like customers, and do not make effort to ensure that the institution’s service is delivered.	Staff have a general knowledge about providing citizens with the institution’s service but do not function well when faced with any challenge. Many citizens are not treated fairly, and staff make only minimal efforts to ensure service delivery is effective.	Staff have a good understanding of general procedures to effect service delivery, and cannot figure out how to resolve challenging situations, but know where to seek assistance. Most citizens are treated fairly. Staff make reasonable efforts to ensure effective service delivery.	Staff are knowledgeable about the processes needed to deliver services, can figure out how to accomplish service delivery when faced with challenging situations, treat citizens fairly, and make an extra effort to ensure that citizens get the service they came for.

Score	Criteria
1	Staff do not have enough understanding of general processes to assist citizens with services. Most (at least 75%) citizens feel that they are not treated fairly. Staff do not take time or make efforts to ensure that the institution’s service is delivered.
2	Staff have a general understanding of the usual processes needed to deliver services to citizens, but cannot assist citizens who require more than ordinary efforts. Many citizens (more than 50%) feel that they are not treated fairly. Staff take only minimal time and efforts to ensure that citizens receive the services that they are seeking.
3	Staff have a good understanding of the general processes needed to deliver services to citizens, but do not have the skills and tools to assist citizens who require more than ordinary efforts. However, staff know how to seek help in the institution to resolve challenging situations. Many citizens (at least 50%) feel that they are treated fairly. Staff take reasonable amounts of time and efforts to ensure that citizens receive the services that they are seeking.
4	Staff have a good understanding of the general processes needed to deliver services to citizens, and have the skills and tools to assist citizens who require more than ordinary efforts. Most citizens (at least 75%) feel that they are treated fairly. Staff take the time and make extra efforts to ensure that citizens receive the services that they are seeking.

**7.f) Effective procedures for service delivery**

**Objective:** The objective of this sub-factor is to assess the efficiency and consistency of services delivered to citizens.

**Resources:** Observation, institution documents

1	2	3	4
There are no documented procedures for delivery of services. The quality of service delivery is inconsistent.	Some key procedures for service delivery are documented but they are incomplete and have not been reviewed for efficiency. Some staff know of these procedures, but many do not. Procedures are not followed consistently. No quality control system for procedures exists.	Key procedures for service delivery are mostly documented and most are followed consistently; some procedures have been streamlined to improve service delivery. Many staff are aware of these procedures and are trained to apply them. No system is in place to monitor the consistency or efficiency of procedures for service delivery or regularly review and improve procedures.	Key procedures for service delivery are fully documented; most staff are aware of these procedures, trained to apply them, and are consistently followed. A monitoring system with indicators and targets is used to improve the efficiency and consistency of service delivery on a regular basis.

Score	Criteria
1	There are no documented procedures to standardize services delivery and/or procedures vary by location where service is delivered.
2	Some key documented procedures exist but are not followed consistently by all locations where service is delivered, and these procedures are incomplete (not in sufficient detail) and/or include significant service inefficiencies. Most staff are not aware of the procedures. No quality control system exists.
3	Key service procedures are mostly documented and followed consistently by most employees across service locations, and some procedures have been reviewed and improved to streamline service delivery. Many staff are aware of the procedures and are trained to apply them. But, no institutionalized system exists to monitor service delivery or ensure regular review and improvement to procedures.
4	Key service procedures are fully documented and followed consistently by most employees across service locations. Most or all staff are aware of the procedures and are trained to apply them. Most procedures have been reviewed and streamlined, where possible. An institutionalized system is in place to monitor consistent service delivery in accordance with approved procedures, and to review and improve procedures on an ongoing basis. Monitoring system includes benchmark standards and quantitative results goals and measurements (e.g., targets for timeliness of service delivery, consistent quality of documents produced, etc.)

## 7.g) Standards for quality of service delivery

**Objective:** The objective of this sub-factor is to assess the quality of services delivered to citizens.

**Resources:** Institution documents, interviews

1	2	3	4
There are no documented standards around quality of delivery of services, and the quality is inconsistent.	Some standards around quality of service delivery are documented but they are incomplete, inconsistent, and have not been reviewed against international best practices. No quality control measures exist.	Standards for service delivery are fully documented; some have been derived from international best practices. No system is in place to monitor service delivery or regularly review and improve standards.	Standards and procedures for service delivery are fully documented and reflect current international best practices, and are consistently followed. A monitoring system with indicators and targets is used to improve service delivery on a regular basis.

Score	Criteria
1	Policies reflecting standards for service delivery do not consider externally generated standards or international best practices. The quality of the delivery of services is inconsistent.
2	There are some documented policies reflecting standards for service delivery but they are incomplete (not in sufficient detail), inconsistent, and have not been developed in line with international best practices. No quality control system exists and procedures do not necessarily reflect the standards.
3	Policies that set standards for service delivery are fully documented and some are derived from international best practices. Many procedures reflect the standards. But, no institutionalized system exists to monitor the quality of service delivery or ensure regular review and improvement to standards.
4	Standards for the quality of service delivery are fully documented and consistently reflect current international best practices; procedures reflect these standards. An institutionalized system is in place to monitor the consistency of the quality of service delivery in accordance with best practices on a regular basis.

## 7.h) Control of corruption

**Objective:** The objective of this sub-factor is to assess the perception and experiences of citizens around corruption in service delivery, and the steps institutions take to build in measures of transparency and accountability.

**Resources:** Survey

1	2	3	4
There are no documented policies and procedures to control corruption of government officials in service delivery; citizen perception of corruption is high; few, if any, institutional systems or measures are transparent.	There are some documented policies and procedures to control government corruption, but they are inconsistently followed. Many citizens perceive the government as corrupt. There are some systems or measures in place to increase transparency of government actors.	There are many documented policies and procedures to control government corruption, but they are followed inconsistently, and government employees are not trained on anticorruption. Some citizens perceive the government as corrupt. There are some systems or measures in place to increase transparency of government actors, and occasionally acts of corruption are revealed.	Documented policies and procedures to control government corruption are widespread, are consistently followed, and employees are trained on anticorruption. A small number of citizens perceive the government as corrupt. There are numerous systems or measures in place to increase transparency of government actors, and acts of corruption are often caught.

Score	Criteria
1	There are no documented policies and procedures to control corruption of government officials around service delivery, such as ethics codes for employees interfacing with the public, conflict of interest policies, or regulations; citizen perception and experience of government official corruption is high; few, if any, institutional systems or measures are designed to make government employee actions transparent.
2	There are some documented policies and procedures to control government corruption around service delivery, but they are inconsistently followed. Many citizens perceive the government as corrupt and numerous documented experiences of government corruption justify that perception. There are some systems or measures in place to increase transparency of government actors, but only occasionally are government actors caught in acts of corruption.
3	There are many documented policies and procedures to control government corruption, but they are followed inconsistently, and government employees are not trained on anticorruption policies, procedures, and issues. Some citizens perceive the government as corrupt, although the actual experiences of citizens around government corruption is smaller than the perception. There are some systems or measures in place to increase transparency of government actors, and occasionally acts of corruption are revealed.
4	Documented policies and procedures to control government corruption are widespread, are consistently followed, and employees are trained on anticorruption policies, procedures, and issues. A small number of citizens perceive the government as corrupt, and is

	consistent with citizen experience of government corruption. There are numerous systems or measures in place to increase transparency of government actors, and acts of corruption are often caught.
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