Civil Society Mutual Accountability Project (CS:MAP)

Agreement No. AID -367-A-16-00007

Organizational Capacity Assessment

Facilitator Guide

Contents

Acronyms and Abbreviations

CAP	Capable Partners Program
CS:MAP	Civil Society Mutual Accountability Project
CSO	Civil Society Organization
EA	Equal Access
GESI	Gender Equality and Social Inclusion
ICNL	International Center for Not-for-Profit Law
IIP	Institutional Improvement Plan
ISO	Intermediary Service Organization
JD	Job Description
M&E	Monitoring and Evaluation
NUPITA	The New Partners Initiative Technical Assistance
OCA	Organizational Capacity Assessment
TA	Technical Assistance
TOR	Terms of Reference

Introduction

The Civil Society: Mutual Accountability Project (CS:MAP) is a 5-year USAID-funded project implemented by FHI 360 in partnership with Equal Access (EA) and International Center for Not-for-Profit Law (ICNL). Its goal is to foster a more legitimate, accountable, and resilient Nepali civil society that is capable of advancing the public interest. CS:MAP will achieve this by accomplishing four objectives, while incorporating Gender Equality and Social Inclusion (GESI) into project activities:

1. Strengthened enabling environment for civil society and media;

2. Improved civil society and media capacity for effective policy advocacy and government engagement;

3. More coordinated and effective civil society and media oversight of public resource use and public service delivery;

4. Strengthened organizational capacity and sustainability of selected civil society organizations (CSOs) working in USAID priority sectors to advance local solutions.

The future of Nepal's development depends on institutionally sound CSOs and media organizations able to garner community participation and generate public trust to advance local solutions on priority issues. CS:MAP will partner with CSOs and media organizations and provide support that will strengthen their institutional governance, sustainability, and positive impact on communities.

CS:MAP Capacity Strengthening

CS:MAP emphasizes building effective organizations, in addition to strong technical programs. It is a defining aspect of our work with our CSO and media partners. Through core or customized training as well as technical assistance (TA), coaching and mentoring, CS:MAP focuses on strengthening performance in core organizational domains to enable our partners to advance local solutions on priority development issues in their communities as well as adapt to an ever-changing enabling environment.

CS:MAP's approach prioritizes building a stronger community of practice among those institutions positioned to provide capacity strengthening services to CSOs in Nepal. FHI 360 is partnering with five national institutions who will act as Intermediary Service Organizations (ISOs) playing a direct service provision role for CS:MAP grantee CSOs. The ISOs will take the lead in facilitating Organizational Capacity Assessments (OCAs), working with grantees to set institutional improvement objectives and delivering capacity strengthening services aligned to those objectives. Those capacity strengthening services will consist of the best mix of the following modalities:

Formal training   One-on-one technical assistance   Coaching & mentoring   Templates, job aids, & online resources   Peer exchange

FHI 360 will support and strengthen the ISOs in turn by providing them with access to an extensive array of tools, resources, templates and job aids, sharing new and enhanced approaches to service delivery and mentoring them throughout implementation. Our purpose is to strengthen capacity for improved organizational performance and internal governance, enhanced bottom up coordination for constructive advocacy, and increased use of social accountability mechanisms.

Organizational Capacity Assessment Purpose

CS:MAP has designed its Organizational Capacity Assessment process in order to ensure that it responds to critical partner priorities, establishes a clear practical and conceptual starting point for capacity strengthening and transparently identifies what activities are needed to achieve performance objectives.
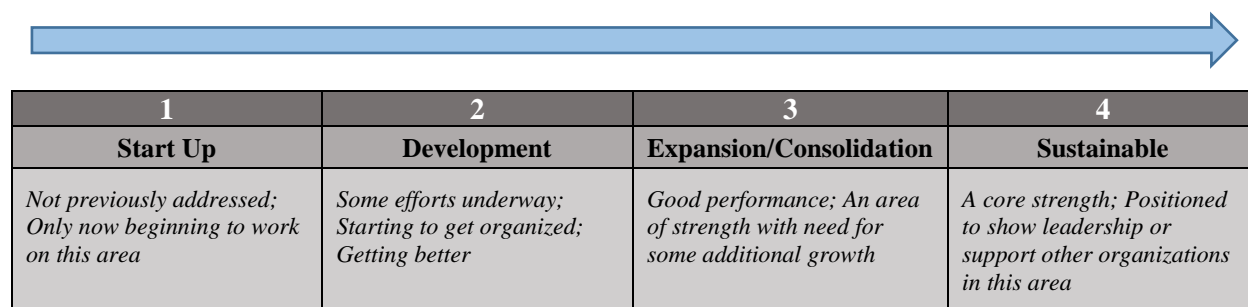
CS:MAP's OCA is a facilitated self-assessment, which means that each CSO partner will assess its own institutional capacity, set priorities for change and develop an action plan with the support of an expert ISO facilitator. During the assessment, participants use the OCA tool to rate capacities in key organizational domains across a development continuum. The assessment yields both an organizational profile and quantitative measures that present a baseline from which to track the future evolution of the organization along a development continuum. Together, we determine which domains will be addressed first. With limited time and resources, this can be difficult because staff often have their own priorities that must be balanced against organizational, beneficiary and donor priorities. This internal negotiation over organizational priorities fosters ownership of the change process.

The CS:MAP Organizational Capacity Assessment Tool

The CS:MAP OCA tool and approach have been adapted and tailored specifically for use in the Nepali context. The tool's structure and content draw from an OCA tool developed by John Snow Inc. under The New Partners Initiative Technical Assistance (NuPITA) project as well as aspects of the Institutional Development Framework previously adapted by FHI 360 in its Capable Partners Program (CAP). The purpose of the tool is to provide an objective, standards-based method to identify areas of strength and weakness and benchmark performance in a consistent manner. The OCA tool provides organizations with a set of criteria against which to assess their organizational capacity and to identify key areas that need strengthening. The CS:MAP OCA combines data collection, analysis, decision making, and planning into a single process.

The OCA tool assesses organizational capacity across seven domains—Governance, Administration, Human Resource Management, Financial Management, Organizational Management, Program Management, and External Relations—with each domain having a number of sub-sections. Taken together, the domains and subsections represent the core organizational performance functions.

Utilizing a consensus-based process of open dialogue, each subsection within a domain is rated by the organization at one of four stages along an organizational development continuum as illustrated below.

1	2	3	4
Start Up	**Development**	**Expansion/Consolidation**	**Sustainable**
Not previously addressed; Only now beginning to work on this area	*Some efforts underway; Starting to get organized; Getting better*	*Good performance; An area of strength with need for some additional growth*	*A core strength; Positioned to show leadership or support other organizations in this area*

The CS:MAP OCA not only assesses the present status of an organization, but offers a participatory process that improves communication and team work in setting organizational goals by engaging board members

and staff. It is an interactive, participatory process for improving organizational governance, management and performance.

A key output of the CS:MAP OCA is a concrete Institutional Improvement Plan (IIP) that serves as a roadmap for organizational change. The plan articulates objectives for change as well as the activities, resources, persons and timeline necessary to achieve them. The OCA can be performed on an annual basis to gauge the effectiveness of the previous action plan, monitor progress, and/or identify new priorities for strengthening.

Organizational Capacity Assessment Process

Who should participate

The CS:MAP OCA process is designed to engage everyone involved in the organization: from external stakeholders and beneficiaries, to staff involved in all aspects of administration, finance, human resources, program management including the executive director, to members of the General Assembly and the Board. Some participants will express their views by participating in one on one interviews or focus group discussions, others will have a more intensive involvement by participating in an OCA workshop.

CS:MAP supports partners to utilize this tool with the help of an expert facilitator, though after 2-3 applications, many organizations find that they can complete the process internally. Inclusion of management, compliance, and program staff ensures a holistic understanding of the organization's strengths and challenges and the guided self-assessment by skilled facilitators instills ownership on the part of the organization for its improvement plan.

How long it lasts

The first OCA takes approximately four days to complete, though most participants will not need to devote the full four days. Days 1 and 2 consist of one on one interviews and/or focus group discussions with staff and external stakeholders as well as review of key organization or project documents. Days 3 and 4 follow a workshop format in which Board members and senior staff assign capacity scores, set priorities and complete the IIP.

The assessment steps

Step 1: Pre-assessment session. Before the start of the assessment, the facilitator will meet with the organization's senior leadership to discuss the assessment process and tools, set expectations for participants and agree on a schedule. At this time, the facilitator should ask that the organization assemble relevant documents that will enable her to adequately prepare for the assessment. A checklist of possible documents for review is included in Annex 1. An OCA agenda template that can be tailored for each assessment is included in Annex 2.

Step 2: Staff interviews. On Day 1 of the assessment, the facilitator should plan to meet with as many staff as possible. The purpose of these interviews and/or focus group discussions is to solicit as much input about the critical organizational strengths and areas for improvement as possible. The more informed about the organization that the facilitator can become, the better she will be able to facilitate the assessment. As much as possible the facilitator should try to ensure contact with a mix of staff by seniority, gender, ethnicity and any other relevant factors.

Step 3: Stakeholder and/or beneficiary interviews. Day 2 of the assessment should ideally be devoted to interviews and discussions with key stakeholders and/or beneficiaries. Stakeholders such as community

leaders, government officials and others with an interest and/or a role to play in the organization's affairs can offer feedback on the organization's reputation, performance, external relations and many other areas. Beneficiaries can offer critical insights as well. Stakeholder and beneficiary availability and the logistics of meeting with them will vary from assessment to assessment and meetings should be planned well in advance to ensure smooth implementation. An interview guide with suggested questions for staff and stakeholder is included in Annex 3.

Step 4: Document Review. During Days 1 and 2 the facilitator should review any available relevant documents in order to be as well-informed about the organization as possible. Advanced reviewing of any documents made available will also provide an important source of outside verification for capacity self-assessment scores.

Step 5: Capacity Domain Scoring. The OCA workshop occurs on Days 3 and 4 of the assessment and is the setting for steps 5 to 8. In step 5, participants will determine at which stage along the development continuum their organization sits for each of the capacity domains and sub-sections, which are presented in the next section. The Capacity Domain Scoring Exercise (Annex 4) provides guidance to participants in this process. Once the group reaches consensus, facilitators will record scores and justifications for the scores in the Negotiated Score Format (Annex 5) and the OCA Calculation Sheet (Annex 6). In order to help facilitate consensus, participants may assign half-points as well.

Step 6: Prioritization and Plenary Review. After completing the scoring exercise, participants will begin prioritization. Utilizing the exercise outlined in Annex 7, participants will again explore each capacity domain and subsection in order to determine which of them is the highest priority for improvement. Following a similar process to the one used for capacity scoring, each subsection will be scored from 1 to 4, from lowest to highest priority, with scores entered into the OCA Calculation Sheet.

When both exercises are completed, both the capacity and priority scores can then be entered into the MS Excel Calculation Sheet (Appendix A). The MS Excel sheet automatically produces an organizational profile as well as a scatter plot of all subsections by capacity score and priority. The scatter plot easily outlines those areas of high capacity and high priority (core strengths) and those areas of low capacity and high priority (critical gaps). Displayed in this fashion, the facilitator will lead a plenary discussion validating the assessment findings to this point.

Step 7: Action Planning. One of the most critical outputs of the CS:MAP OCA is an Institutional Improvement Plan (IIP), which outlines improvement objectives that are aligned with CS:MAP's overall goals. Utilizing the exercise outlined in Annex 8 and the handout in Annex 9, the organization will develop a draft IIP (Annex 10). The draft IIP will be affirmed by both the organization and CS:MAP after the assessment is completed and both groups have reviewed the plan.

Step 8: Assessment Conclusion. At the conclusion of the OCA workshop, participants are asked to complete an evaluation (Annex 11) and closing remarks are made by the facilitation team and the organization. A plan for next steps should be discussed that includes reviews by both parties of the draft IIP and a meeting to finalize and sign a joint commitment for implementing the plan.

Step 9. Final Report: A brief report (Annex 12) that includes a section-by-section description of the assessment process and findings, as well as all outputs, is an appropriate product for the organization that was assessed. The final report will be shared in draft form with both CS:MAP and the participating organization. The report will be finalized taking into account input from both groups.

The Role of the Facilitator

The importance of the facilitator throughout the CS:MAP OCA process cannot be overstated. The ideal OCA facilitator will have organizational development expertise in the Nepali context combined with solid group facilitation skills. The OCA facilitator guides the participating organization through each stage of the assessment acting as a resource, a leader and an independent voice and contributor. Below are some additional key facilitator roles and responsibilities.

- Carefully listen to and note all participant inputs including those from staff, Board, stakeholders and beneficiaries.
- Encourage effective communication and team work.
- Be conscious of the power dynamics between the participants who may hold vastly different positions within the organization and encourage discussion and debate among all participants.
- Emphasize with the participants that they should be realistic in where they place their organization in the stages of development and when setting objectives.
- Act a reference to participants for all aspects of the assessment, especially for interpreting the meaning of each organizational capacity domain.
- Encourage critical thinking and debate on issues for better solutions.
- Create a supportive and trusting environment for open dialogue.
- Do not dominate group discussions, but know when to become involved if needed.
- Provide objective feedback aimed at improving performance.

Organization Assessment Domains

Governance

Objective: To assess the organization's motivation and stability by reviewing its guiding principles, structure and oversight.

Vision and Mission

Subsection Objective: To review the organization's vision and/or mission statements, learn what drives the organization, how the statements reflect what it does and how they are communicated and understood by staff.

Resources: Vision and/or mission statements, staff and board interviews

Vision and Mission			
1	**2**	**3**	**4**
The vision and/or mission is • Not set/not a clearly stated description of what the organization aspires to achieve or become	The vision and/or mission is • A moderately clear or specific understanding of what the organization aspires to become or achieve • Not widely known by staff • Rarely used to direct actions or to set program priorities	The vision and/or mission is • A clear, specific statement of what the organization aspires to become or achieve • Well-known to most but not all staff • Sometimes used to direct actions and to set priorities	The vision and/or mission is • A clear, specific and forceful understanding of what the organization aspires to become or to achieve • Well-communicated and broadly known within the organization • Consistently used to direct actions and to set priorities

Guiding Questions

Vision and Mission				
Subsection Checklist	Yes	No	N/A	Comments/Quality Notes
Does the organization have documented mission and/or vision statements?				
Are the statements understood and relevant to the organization's current purpose?				
Is the vision or mission statement posted where staff and/or visitors see it regularly?				
Does the organization review the vision and mission statements in conj unction with strategic planning?				
Are the vision and mission used to set priorities? If so, please describe how.				

General Assembly

Subsection Objective: To assess organizational governance system and its ability to foster ownership among members and stakeholders.

Resources*:* Constitution, membership register

General Assembly			
1	**2**	**3**	**4**
General Assembly • Is not held within the organization	General Assembly • Is held but not on time (within three months of fiscal year closing) and not done regularly each year • Does not present any necessary documents • Does not involve major stakeholders, e.g., respective program government line agencies, community member and DDC/VDC representative • Membership register is not placed	General Assembly • Is held regularly each year but with delays, i.e., not within three months of fiscal year closing • Presents most but not all necessary documents, such as program and organizational achievements, audit report, and upcoming year planning and budget • Involves most major stakeholders • Membership is registered but renewal process is not followed properly • Report is sometimes prepared and shared with all stakeholders	General Assembly • Is held on time in an accessible place • Presents all necessary documents • Involves all major stakeholders • Membership are renewed in a yearly basis and record is keeping properly. • General Assembly report is prepared, shared and documented • Executive Board are held in line with constitution/by laws • Consider GESI in constitution/by laws

Guiding Questions

General Assembly				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Does your organization hold General Assemblies each year as per constitution?				
Are the memberships of all members renewed before the general assembly meeting?				
Is GA held systematic and process wise as mention in the constitution?				
Does the organization prepare a general assembly report and maintain a register of each year?				

Organizational Structure

Subsection Objective: To determine if the organization's structure—most often depicted in an organogram but also perhaps in a narrative—is in line with its mission, goals and programs and if systems exist to ensure strong coordination among departments or functions.
Resources: Organizational diagram, organogram or narrative

Organizational structure			
1	**2**	**3**	**4**
The organization has • No formal structure • An unclear description of its departments and their functions	The organization has • A basic structure, but it is incomplete and/or undocumented • A structure that is not aligned with its mission/goals and programs • Unclear definitions of department functions • Somewhat clear lines of responsibility and communication among departments	The organization has • A well-designed structure (e.g., organogram) relevant to its mission/goals and programs • Identified the functions and responsibilities of departments • Clearly defined and appropriate lines of responsibility and communication among departments	The organization has • A well-defined structure relevant to its mission/goals and programs • Clearly defined and appropriate functions and responsibilities of departments • Clear, appropriate lines of communication and coordination among departments • A narrative description of the structure if appropriate

Guiding Questions

Organizational Structure				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Is the organizational and reporting structure clearly documented and disseminated?				
Is there an organogram or similar document outlining supervisory and staff responsibilities?				
Please describe the functions of the departments and how departments communicate with each other.				
Please describe how the structure supports the mission.				

Board Composition and Responsibility

Subsection Objective: To assess the board's composition, terms of reference (TOR), procedures and oversight to ensure that the board is capable of providing adequate guidance to the organization.

Resources: Board membership, board TOR, board meeting minutes, anonymous board questionnaire

Board Composition and Responsibility			
1	**2**	**3**	**4**
The Board • Is drawn from a narrow spectrum; members have little or no relevant experience • Has term limits that are not defined or are unreasonably long or short • Has infrequent or poorly attended and undocumented meetings • Does not have TOR or a clear understanding of its key functions	The Board • Is drawn from a somewhat broad spectrum; some members have relevant experience • Has term limits that are not defined or are unreasonable • Has well-planned meetings at regular intervals, but attendance and/or documentation is irregular • Has TOR, but they are incomplete and/or do not provide separation of roles from management • Is rarely or not at all involved in strategic planning/policy formulation	The Board • Is drawn from a broad spectrum; all members have relevant experience • Has term limits that are defined and reasonable • Has well-planned, documented meetings held at regular intervals with good attendance • Has clear TOR reflecting separation of roles from management • Has an understanding of its functions and mostly carries out • Is involved in strategic planning/ policy formulation, but not consistently	The Board • Is drawn from a broad spectrum; all members have relevant experience • Has term limits that are defined and reasonable • Has regular, well-planned, documented meetings with good attendance • Has clear TOR and a good understanding of its functions; carried out with separation from management • Participates in strategic planning/policy formulation and to address organizational issues

Guiding Questions

Board Composition and Responsibility				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there regular board meetings? How often?				
Are the board meetings well-attended? What percentage attends each meeting?				
Does the board have clearly defined TOR that detail key functions?				
Are board members involved in strategic planning and high-level decision-making for the organization? Describe their involvement.				
What is the actual composition of the Board in terms of gender, ethnicity, and ability?				
Is there separation of board and management roles? Is this written and adhered to?				

Succession Planning

Subsection Objective: To assess the organization's ability to continue smooth operations and to manage programs in the event of an absence of, or shift in, leadership.
Resources: Job descriptions of senior management, succession plan, organizational chart

Succession Planning			
1	**2**	**3**	**4**
The organization • Is very dependent on the ED or senior staff • Would cease to exist or function without the ED or senior staff • Has no plan for how it would continue if the ED left	The organization • Is dependent on the ED/senior staff • Would continue to exist without the ED but most likely in a very different form, or with significantly less capability and reduced program quality • Has a very basic succession plan describing how the organization will continue if the ED leaves	The organization • Has limited dependence on ED; s/he does not have sole control of, for example, finances and planning • Would continue in a similar way without the ED, but fundraising and/or program quality would suffer significantly • Has a documented plan for how it would continue should the ED leave, but no member of management could take on the ED role	The organization • Is reliant but not dependent on the ED • Has a clear, documented succession plan • Has the potential for a smooth transition to a new leader; fundraising and program quality would not be major problems • Would handle transition by having a senior management team fill in or one or more members of the management team would take on the ED role

Guiding Questions

Succession Planning				
Subsection checklist	**Yes**	**No**	**N/A**	**Comments/Quality notes**
Is there a staff/board member who can fulfill the duties of the ED for short or long periods?				
Is this role documented in the organizational structure and in the job description of the staff/board member?				
In what ways is the capacity of the person to take on the role being built?				
Is there a plan for handling a transition process, including fundraising, operations and program quality? Please describe.				

Administration

Objective: To assess the organization's capacity to develop and apply policies and procedures, the existence and quality of its administrative systems and its staff knowledge of the systems.

Operational Policies, Procedures and Systems

Subsection Objective: To assess the availability of and adherence to operational policies.
Resources: Policy and procedures manual, anonymous staff questionnaires, related payment vouchers

Operational Policies, Procedures and Systems			
1	**2**	**3**	**4**
The organization has • No documented operational policies and procedures	The organization has • Some documented operational policies and procedures, but they are incomplete or not compliant with national and donor regulations • Policies and procedures that are not consistently adhered to • Not oriented or trained staff in the policies and procedures	The organization has • Documented most or all operational policies and procedures and they are compliant with national and donor regulations • Policies and procedures that are known but not consistently adhered to • Oriented or trained staff in the policies and procedures • No process for regularly reviewing and updating operational policies and procedures	The organization has • Complete and appropriate operational policies and procedures • Policies and procedures that are known and understood by staff • Policies and procedures that are consistently adhered to, reviewed and updated

Guiding Questions

Operational Policies, Procedures and Systems				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Do the documented procedures *adequately support* the operational needs of the organization? *Note: Not all organizations have the same operational needs*				
Are staff oriented/trained in the procedures? How often? How is the orientation/training documented?				
Are the operational procedures formally reviewed/updated? How often? What is the process? Is it documented?				

Procurement

Subsection Objective: To assess the availability of and adherence to procurement policies and procedures.
Resources: Procurement policies, procurement files, related payment vouchers, procurement plan

Procurement			
1	**2**	**3**	**4**
The organization has • No documented procurement procedures • No documented procurement plan	The organization has • Documented some procurement policies and procedures, but they are incomplete or inappropriate • Policies and procedures that are not well-known or understood by staff and inconsistently adhered to • No documented procurement plan, but is aware of procurement regulations	The organization has • Documented most or all procurement policies and procedures, and they are appropriate • Policies and procedures that are generally known and understood by staff but inconsistently adhered to	The organization has • Complete and appropriate procurement policies/procedures incl. donor-specific policies • Policies and procedures that are known and understood by staff • Policies and procedures that are consistently adhered to, reviewed and updated • A documented procurement plan that is annually revised/updated

Guiding Questions

Procurement of good and services				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are procurement policies and procedures documented, and if yes, where?				
Do the documented policies and procedures adequately support the needs of the organization?				
Are donor-specific procurement regulations addressed in the policies?				
Does the organization have a documented procurement plan which reflects organizational requirements? How often is it updated?				

Fixed Asset Control

Subsection Objective: To assess the availability of and adherence to policies and systems for managing fixed assets.
Resources: Fixed asset policies, fixed asset register, physical inventory reports

Fixed Asset Control			
1	**2**	**3**	**4**
The organization has • No documented fixed asset procedures (i.e., inventory of assets and systems for stock control) • No fixed asset register	The organization has • Documented some fixed asset policies and procedures, but they are incomplete or inappropriate • Policies and procedures that are not well-known or understood by staff and not consistently adhered to • A fixed-asset register that is not complete	The organization has • Documented most or all fixed asset policies and procedures, and they are appropriate • Policies and procedures that are known and understood by staff but inconsistently adhered to • A fixed asset register that is complete but not regularly updated	The organization has • Complete and appropriate fixed-asset policies and procedures that incorporate donor policies as required • Policies and procedures that are known and understood by staff • Policies and procedures that are consistently adhered to, reviewed and updated • A fixed-asset register that is regularly updated and confirmed through a physical verification of inventory at least annually

Guiding Questions

Fixed Asset Control				
Subsection Checklist	**Yes**	**No**	**N/A**	**Comments/Quality notes**
Are fixed asset policies and procedures documented, and if yes, where?				
Do the documented policies adequately support the needs of the organization (i.e., fixed asset registers, inventory marking, depreciation rates, transfer/borrowing of equipment, etc.)?				
Are donor-specific procurement regulations incorporated into the policies? How is this done?				
Does the organization use a fixed asset register? What is included in the register? Is it up-to-date?				
Are physical verifications of inventories completed? How is this done? How often?				
Is there a provision for disposal of assets?				

Human Resources Management

Objective: To assess the organization's ability to maintain a satisfied and skilled workforce, to manage operations and staff time and to implement quality programs.

Job Descriptions

Subsection Objective: To review the systems for developing, disseminating, following and updating job descriptions (JDs) to ensure that staff roles and responsibilities are clearly defined and understood and that they are relevant to the needs of the organization.

Resources: Sample job descriptions for each position or level (depending on size of organization)

Job Description			
1	**2**	**3**	**4**
The organization has • No JDs for staff, or interns	The organization has • JDs for each staff member, but not all key sections are covered • Staff or interns who are not aware of or do not have copies of their JDs	The organization has • Clear JDs for each staff member that include all sections • Staff or interns with copies or access to copies of their JDs • JDs that are not respected/adhered to, reviewed or regularly updated	The organization has • JDs for each staff member that cover all sections • Staff or interns with copies of or access to their JDs • JDs that are respected/adhered to, reviewed and updated

Guiding Questions

Job Descriptions				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there JDs with relevant details –title, job duties/responsibilities, reporting requirement, supervisory responsibilities (if any), qualifications, and skills required—for all positions in the organization, including those for volunteers and/or interns?				
Are JDs accessible to staff, volunteers and interns?				
Are JDs stored in personnel files, and are the files updated?				
Is there a process for reviewing JDs for adherence and/or revision?				

Recruitment

Subsection Objective: To assess the organization's systems for recruiting staff and consultants including confirming and documenting professional and salary history.
Resources: Recruitment manual/guidelines or policy, recruitment guidelines, documentation of employment history, personnel manual

Recruitment			
1	2	3	4
The organization has • Neither guidelines nor a consistent approach to recruiting staff • No system for verifying employment history for staff or consultants	The organization has • Basic guidelines/policy for recruitment, but they are not consistently applied or reviewed • No process for verifying staff or consultants' employment history • Not oriented or trained HR or other staff in applying the guidelines • Not historically considered GESI during staff recruitment	The organization has • Clear, transparent recruitment guidelines, but not consistently applied nor regularly reviewed • Has a process for verifying employment history but does not file or update the information • Not consistently oriented or trained HR or other staff in applying the guidelines • A policy in place to increase ratio of female and disadvantage people on staff but little or no action	The organization has • Clear, transparent recruitment guidelines that are consistently applied and reviewed • Consistently oriented and regularly trained/updated HR staff in applying the guidelines • A process for verifying, updating and filing employment history • Consistently considered GESI policy in recruitment processes

Guiding Questions

Recruitment				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Are there written recruitment guidelines?				
Are there procedures for verifying employment history and for filing that information?				
Do the guidelines include announcing/advertising, collecting CVs/short-listing, interviewing candidates, checking references and are they transparent?				
Has appropriate staff been trained to follow recruitment procedures?				
Are recruitment procedures always followed?				
Are there opportunities for career advancement with the organization?				

Staff Skills

Subsection Objective: To assess the staff technical capacity to enhance program performance of the organization.
Resources: Staff CV, job vacancy, staff interviews

Staff Skills			
1	**2**	**3**	**4**
The organization's staff Do not possess sufficient skills required of their positions.	The organization's staff - Possess technical skills required of their positions. - Are unaware that they need broader analytical, communication/ presentation, and management skills for better job performance.	The organization's staff - Possess technical skills required of their positions - Possess broader analytic, communication/ presentation, and managerial skills.	The organization's staff - Are recognized for excellence for all aspects of their job. - Act as resources for similarly reputed organizations.

Guiding Questions

Staff Skills				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have staff with the necessary technical skills in place?				
Do staff have advance skills in presentation, communication and management?				
Are staff skills broadly in use within and outside the organization?				
Does the organization have any approach to assessing and/or building staff skills?				

Staff Development

Subsection Objective: To assess the organization's systems for staff skill development to enhance program performance.
Resources: Staff capacity development need assessment, staff capacity building plan and capacity building resources

Staff Development			
1	**2**	**3**	**4**
The organization • Lacks any deliberate or conscious staff development plan or practice.	The organization • Realizes that as part of human resources management, a staff development plan is necessary. • Has not been able to actively initiate a plan.	The organization • Has performs staff development needs assessment one a regular basis • Has a staff development action plan.	The organization • Considers professional development to be an essential part of job performance • Has a comprehensive staff development system.

Guiding Questions

Staff Development				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Are there any common staff development practices or activities within the organization?				
Is there any documented staff development policy or procedures?				
Is there recognition by staff and management of the importance of staff development?				
Are staff development opportunities given to staff in a transparent or otherwise equitable manner?				

Personnel Policies

Subsection Objective: To ensure that personnel policies document and verify staff time and that best practices in managing personnel are adhered to.
Resources: personnel policy including staff time records, work hour policies, staff personnel files/folder, staff performance appraisal and staff development, staff code of conduct, harassment.

Personnel Policies			
1	**2**	**3**	**4**
The organization has • No personnel policy manual	The organization has • Basic, but incomplete personnel policies • Inconsistently applied the polices • Not disseminated the policies to all staff and/or required signature statements • No process for updating personnel policies, manuals or staff time records	The organization has • Comprehensive personnel policies which include staff time records, work hour policies, staff personnel files/folder, staff performance appraisal and staff development, staff code of conduct, harassment, etc. • Polices that are adhered to and aligned with practices • Not disseminated the policies to all staff or required signature statements of all board member • Not updated personnel policies and manuals or time records	The organization has • Comprehensive personal policies are in place • Policies that are adhered to and correspond to practices • Disseminated policies to all staff and required and filed signature statements of all board members • Regularly reviewed and updated policies, manuals and staff time records

Guiding Questions

Personnel Policies				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there documented personnel policies that include guidelines such as work schedules, employee compensation (salary) and benefits, leave, performance reviews, grievances and disciplinary procedures, ending employment (resignation/termination), administrative procedures and employee conduct?				
Does organization have practice to orient new staff on personnel policies and procedure and inform about new changes.				
How often is the personnel manual reviewed and updated?				

Personnel Files

Subsection Objective: To ensure that personnel files are consistently maintained, complete and securely stored.
Resources: staff personnel files/folder

Personnel Files			
1	**2**	**3**	**4**
The organization has • No process for maintaining individual personnel files or maintains records that are not standardized.	The organization has • A standard written or electronic record format for personnel files and a record is maintained for each staff member.	The organization has • A standard written or electronic record format for personnel files and a record is maintained for each staff member. • The personnel files are adequately complete and kept in a secure location.	The organization has • A standard written or electronic record format for personnel files and a record is maintained for each staff member. • The personnel files are adequately complete and kept in a secure location. • The files are organized so that any needed record is quickly accessible.

Guiding Questions

Personnel Files				
Subsection Checklist	**Yes**	**No**	**N/A**	**Comments/Quality notes**
Are staff personnel files maintained in the organization?				
Is there any checklist or other guidance on what should be contained in a personnel file?				
Is access to personnel files restricted to authorized staff?				
Are personnel files securely stored?				
Are records quickly accessible when necessary?				
Are changes in staff status, salary, and benefits documented in the personnel files?				

Staff Salaries and Benefits

Subsection Objective: To review the organization's systems for setting and managing salaries and benefits.

Resources: Salary grades and ranges, 2–3 personnel files from different levels

Staff Salaries and Benefits			
1	**2**	**3**	**4**
The organization has • No clear rationale/structure for staff salaries such as pay grades and ranges or salary history • Not clearly documented benefits in a policy manual • Salaries and benefits that are not equitably applied and/or do not conform to national labor requirements	The organization has • A clear rationale/structure for staff salaries, such as pay grades and ranges and salary history • A process for documenting salary history • Not consistently applied the rationale or reviewed or updated it • Clearly documented benefits in a policy manual • Benefits of which staff are aware, but they are neither equitably applied nor conform to national labor requirements	The organization has • A clear rationale/structure for staff salaries such as pay grades and ranges and salary history • A process for documenting salary history • Consistently applied the rationale to all staff, but does not review or update salaries regularly • Benefits that are clearly documented in a policy manual • Benefits of which staff are aware, that are equitably applied and conform with national labor requirements	The organization has • A clear rationale/structure for staff salaries such as pay grades and ranges and salary history • A process for documenting salary history • A rationale for salaries that is consistently applied to all staff, reviewed and updated regularly • Pay increases that follow the salary framework and/or policy • Benefits that are documented, equitably applied and conform to national labor laws • Pay increases coordinated with performance reviews

Guiding Questions

Staff Salaries and Benefits				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
How are staff salaries determined? Is salary history, a salary scale with pay grades and ranges used? Is it documented and understood by staff?				
Is salary history and determination of salary verified, documented and filed?				
If pay grades and ranges are used, is the system documented and applied to all staff (regardless of donor or project)? Is the scale updated annually?				
Are pay increases and performance reviews coordinated?				
Are employee benefits equitably applied? Are they documented? Are staff aware of the benefits?				
Do staff salaries and employee benefits conform to national labor laws?				

Performance Management

Subsection Objective: To review the organization's systems for managing staff performance including performance appraisals.
Resources: Samples of completed performance appraisals or a blank form

Performance Management			
1	**2**	**3**	**4**
The organization has • No process for regularly assessing staff performance • No probationary period or review process for new staff • Not updated or filed changes in staff work status, salary and benefits	The organization has • A process for assessing staff performance, but it does not include setting objectives, listing responsibilities/tasks, supervision or professional development • A three-month probationary period for new staff but no formal review • A process that is not participatory and follows an auditing rather than a supportive approach • Inconsistently filed or updated changes in staff work status, salary and benefits	The organization has • A process for assessing staff performance that includes setting objectives, listing responsibilities/ tasks, assessing performance on past activities, supervision and professional development • A performance review process for new staff that is not timely or consistently done • A participatory process regularly used for performance appraisals • Conducted appraisals for some, but not all, staff • Consistently filed and updated changes in staff work status, salary and benefits	The organization has • A process for assessing staff performance that includes setting objectives, listing responsibilities/ tasks, assessing performance on past activities, supervision and professional development • Regularly conducted appraisals for all staff at least once a year • Regularly reviews new staff performance after the probationary period • Consistently filed, updated and made changes in staff work status, salary and benefits

Guiding Questions

Performance Management				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Is there a documented process for assessing staff performance including setting objectives, assessing performance on past activities, and reviewing supervision and professional development?				
Is the performance assessment participatory, allowing discussion by both staff and supervisors?				
Are performance assessments done for all staff and conducted regularly?				
Are performance assessments conducted for new staff at the probationary period conclusion?				

Financial Management

Objective: To assess the quality of the organization's financial system and policies and procedures and the staff's knowledge of the system.

Financial Systems

Subsection Objective: To assess the existence and use of the financial system, especially its ability to respond to management needs and donor requirements.
Resources: Financial manual, accounting journals, chart of accounts, payment vouchers, staff training plan/curricula, staff interviews

Financial Systems			
1	**2**	**3**	**4**
The organization has • No formal financial system • Transactions that are either not recorded or are recorded on an ad hoc basis • A filing system that maintains only invoices/receipts for all expenditures and incoming funds	The organization has • A basic financial system, but it is incomplete and/or not compliant with accounting standards • Systems that are not consistently adhered to • Not oriented or trained financial staff on systems	The organization has • A good financial system with most or all required components • A computerized accounting system that is not fully operational • Systems that are consistently adhered to • Oriented or trained financial staff on systems No process for reviewing and updating the financial system • Not included a narrative description of its financial system in its financial manual	The organization has • A complete and appropriate financial system • A fully operational, computerized accounting system • Systems that are consistently adhered to, reviewed and updated • Systems known and understood by trained staff • A narrative description of its financial system in its financial manual

Guiding Questions

Financial Systems				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have a cash, accrual or modified system?				
Is the organization using accounting software? If so, which system?				
Is there a chart of accounts (income and expenses, assets and liabilities)? Does it address donor-specific requirements?				
Does the organization use another set of codes to assign transactions to a specific project/donor?				
Are all payments and receipts recorded in the organization's bookkeeping system? How often are they recorded?				

Financial Policies and Procedures

Subsection Objective: To assess the existence and use of financial policies and procedures and their ability to respond to management needs and donor requirements.
Resources: Financial manual, accounting journals, chart of accounts, staff interviews, payment vouchers, staff training plan/curricula

Financial Policies and Procedures			
1	**2**	**3**	**4**
The organization has • No documented financial policies and procedures	The organization has • Some documented financial policies and procedures, but they are incomplete and/or do not comply with donor requirements • Policies and procedures that are inconsistently adhered to • Not oriented or trained staff in the policies and procedures	The organization has • Documented most or all financial policies and procedures and they are compliant • Policies and procedures that are consistently adhered to • Oriented or trained staff in the policies and procedures • No process for regularly reviewing and updating financial policies and procedures	The organization has • Complete and appropriate financial policies and procedures • Policies and procedures that are known and understood by staff • Policies and procedures that are consistently adhered to, reviewed and updated

Guiding Questions

Financial Policies and Procedures				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there written financial procedures?				
Are the policies and procedures comprehensive and responsive to the organizational needs?				
Do the written procedures address donor specific requirements?				
Are staff oriented/trained in the procedures? How and how often?				
Are financial procedures formally reviewed/updated? How often? What is the process for revisions? Is the process documented?				
Are there systems to ensure compliance with financial procedures? Please explain. Have there been findings in external or internal audits related to noncompliance with financial procedures?				

Internal Controls

Subsection Objective: To assess if internal controls safeguard the organization's assets, manage internal risk and ensure the accuracy and reliability of accounting data.
Resources: Financial manual, signatory policy/authority matrix, payment vouchers, staff interviews, audit reports on internal controls, insurance policies

Internal Controls			
1	**2**	**3**	**4**
The organization has • No documented internal controls • Improper segregation of duties and checks and balances (1–2 people are responsible for all steps in financing or procurement)	The organization has • Some documented internal controls, but they are incomplete and inappropriate • Procedures not well-known and understood by staff and not consistently adhered to • Inadequate segregation of duties	The organization has • Most or all documented appropriate internal controls • Procedures that are generally known by staff but not consistently adhered to • Adequate segregation of duties • No process for reviewing and updating internal controls or for assessing financial risk	The organization has • Complete and appropriately documented financial controls • Procedures known and understood by trained staff • Internal controls that are consistently adhered to, reviewed and updated • A process for assessing financial risk

Guiding Questions

Internal Controls				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there written internal control procedures?				
Are staff oriented/trained in internal controls? How and how often?				
Are internal controls formally reviewed/updated? How often? What is the process? Is it documented?				
Is there a signatory authority/approval matrix? Does it include authorization limits? Who are check signatories?				
Is there a proper separation of duties among procurement staff (making sure that one person cannot carry a transaction form beginning to end)?				
Is there proper segregation among financial staff (i.e., for payment authorization, cash accounts reconciliation, payroll processing)?				
What procedures are in place to safeguard financial assets (Are cash, checkbooks and records kept in a safe/secure location? Is access limited to relevant people)?				
How is potential fraud handled?				
What systems ensure compliance with internal controls? Have there been findings in external or internal audits related to internal control deficiencies?				

Financial Documentation

Subsection Objective: To assess if record keeping is adequate and if financial files are audit ready.
Resources: Financial files, finance manual, staff interviews

Financial Documentation			
1	**2**	**3**	**4**
The organization has • No written financial documentation procedures • No filing system, and financial files are not readily available • No one designated to manage the financial files	The organization has • Some written financial documentation procedures, but they are incomplete and/or inappropriate • Procedures that are not consistently adhered to and/or are not known to staff • A basic filing system, but financial files are not complete • No one designated to manage the financial files	The organization has • Financial documentation procedures that are mostly or completely documented in writing and appropriate • Procedures that are generally adhered to, known and understood by staff • Financial documentation files that are not regularly updated or secure • A staff member designated to manage the financial files	The organization has • Complete and appropriate financial documentation procedures • Procedures that are known and understood by staff • Procedures that are consistently adhered to, reviewed and updated • Up-to-date financial files in a secure location • A staff member designated to manage the financial files

Guiding Questions

Financial Documentation				
Subsection Checklist	**Yes**	**No**	**N/A**	**Comments/Quality notes**
Is there a written process for managing financial documentation?				
Are there written guidelines describing the documentation required for each type of transaction?				
Are these guidelines formally reviewed/updated? How often? What is the process for revisions? Is it documented?				
Does each transaction (and payment voucher) include and/or reference supporting documentation?				
Is financial documentation up-to-date?				
Is financial documentation kept in a secure and consistent location?				
Is/are there a designated person(s) to manage financial files?				
Is there a policy on which and how long financial documents are kept? Is the policy compliant with local law and donor regulations?				

Budgeting

Subsection Objective: To assess the organization's financial planning and if there is a system for monitoring budgets and determining additional funding requirements.
Resources: Organization's budget, project budgets, budget worksheet, chart of accounts, budget tracking worksheet

Budgeting			
1	**2**	**3**	**4**
The organization has • No formal master budget • No core-cost budget • Project budgets, but they are not clear and/or not aligned with project needs • Not included core costs in its project budgets	The organization has • A basic master budgeting process, but it is incomplete • A core-cost budget, but it is not aligned with the strategic plan and/or is not regularly reviewed to address shortfalls • Project budgets, but they are not always clear and not consistently aligned with project needs • An inconsistent methodology for including core costs in its project budgets	The organization has • A good master budgeting process that includes required components • A core-cost budget that is generally aligned with the strategic plan, but is not regularly reviewed • Project budgets that are clear, but not reviewed regularly nor consistently aligned with project needs • A consistent way of including core costs in budgets, but the methodology is not documented and does not ensure full cost recovery	The organization has • A complete and appropriate master budget • A core-cost budget that is aligned with the strategic plan and regularly reviewed • Clear project budgets that are reviewed regularly by senior management and adapted to align with project needs and donor requirements • A consistent way of including core costs in budgets that is documented and ensures full cost recovery

Guiding Question

Budgeting				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have a master budget that includes the costs of running the organization, only project budgets and a separate admin/overhead budget?				
Are core costs included in budgets consistently? Is full cost recovery achieved?				
Does the budget align with the strategic plan and is it approved by the board?				
Are budgets prepared or reviewed annually? Who approves the budget?				
Are program and financial staff involved in budgeting?				
Is there a budget holder (named individual) responsible for managing each budget? How are budgets monitored?				
Are there regular meetings with senior management and relevant program staff to review budget status?				
How are non-budgeted expenses handled (i.e., approval, budget allocation)? How are funds re-allocated between line items as a result?				

Financial Reporting

Subsection Objective: To assess whether the organization's routine financial reporting system allows it to meet statutory and donor requirements and stakeholders' needs for information.

Resources: Annual financial statement

Financial Reporting			
1	**2**	**3**	**4**
The organization has • No routine system for financial reporting • No recent financial statements • Not yet submitted a financial report to a donor and/or other stakeholders • No one designated to prepare or approve reports or financial statements	The organization has • A basic system for financial reporting, but reporting requirements and deadlines are not adhered to • Designated staff to prepare and approve reports and financial statements • Inconsistently delivered financial reports to stakeholders (donor, budget holders, senior management, board members) • Irregular reviews of financial reports by senior staff	The organization has • A good financial reporting system; reporting requirements and deadlines are generally adhered to • Regularly delivered financial reports to stakeholders, but they are not always accurate and/or complete • Sporadic reviews of financial reports by senior staff • Some documented financial reporting procedures	The organization has • A complete and appropriate financial reporting system; reporting requirements and deadlines are consistently adhered to • Regularly delivered accurate and complete financial reports to stakeholders • A system for senior staff to review financial reports at least every three months and to use the reports to make decisions • Complete and appropriately documented financial reporting procedures regularly reviewed and updated

Guiding Questions

Financial Reporting				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Are there written procedures for financial reporting?				
What reports (organizational, management, donor) are prepared and how often?				
Are the reports accurate and submitted on time?				
Is there a person designated to prepare financial reports (statements, management and donor reports)? Review the reports? Approve the reports?				

Audits

Subsection Objective: To assess whether the organization undergoes routine audits that meet statutory and donor requirements and has a system for addressing audit findings.

Resources: Financial audit reports, post-audit management plans, financial manual staff interviews

Audits			
1	**2**	**3**	**4**
The organization has • No internal or external auditing system • Not complied with statutory and/or donor auditing requirements	The organization has • A basic audit/review system, but auditing requirements and deadlines are not adhered to • Completed a recent statutory and/or donor audit, but the scope of the audit does not meet requirements • Not implemented previous audit report recommendations • Not shared audit reports with board members and other stakeholders	The organization has • A good system for managing audits; audit findings and recommendations are generally addressed • Consistently complied with its statutory and donor audit requirements in a timely manner • No internal audit function that regularly assesses risk or reviews and updates financial management systems to reflect the changing environment • Not shared audit reports with board members and other stakeholders	The organization has • A complete and appropriate system for managing audits; audit findings and recommendations are systematically addressed • A written narrative of its audit systems in the finance manual • Consistently complied with its statutory and donor audit requirements in a timely manner • An internal audit function that assesses risk and updates financial management systems as needed • Consistently shared audit reports with board members and other stakeholders

Guiding Questions

Financial Reporting				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Is the organization legally required to have an annual audit?				
Is the organization regularly audited? If so, what kinds of audits are done?				
How are external auditors selected and approved?				
Is there a person designated to manage external audits?				
Are audit recommendations implemented? Is there a process for resolving findings?				
Are audit reports shared with the board and other stakeholders?				
Does the organization have an internal audit function? If not, is there a process for assessing and managing risk?				

Financial Sustainability

Subsection Objective: To assess the organization's finance strategy and its ability to secure a diversified revenue base, to generate reserves and to sustain its operations without donor funds.

Resources: organization's budget, annual financial statements, strategic plan, finance strategy (business plan)

Financial Sustainability			
1	**2**	**3**	**4**
The organization has - Full dependence on one external donor - No unrestricted funds - Not enough liquidity to pay all outstanding financial obligations - No documented finance strategy	The organization has - Almost full dependence on external donor funds (more than one donor) - Limited unrestricted funds - Not enough liquidity to pay all outstanding financial obligations - A finance strategy that is not fully documented	The organization has - A somewhat diversified funding base, but is too reliant on restricted income - Limited reserves to operate without donor grants - Enough liquidity to pay all outstanding financial obligations - A documented finance strategy that is not fully in line with the strategic plan and is not reviewed regularly	The organization has - A diversified funding base with strong stakeholder relationships - Income-generating activities and/or unrestricted sources of income - Enough liquidity to pay all outstanding financial obligations - Enough reserves to run for a few months without any donor funding - A written policy for building/maintaining reserves - A documented finance strategy in line with the strategic plan and reviewed regularly

Guiding Questions

Financial Sustainability				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have a diversified funding base? If so, who are its funders?				
Does the organization have unrestricted income? If so, is it a regular source?				
Does the organization have income-generating activities? If so, how much of the annual budget comes from this source?				
Does the organization have a policy for building/maintaining reserves?				
Does the organization generate any reserves? If so, does the board approve how those reserves are utilized?				
Does the organization have the cash flow to meet its financial obligations?				
Is the organization able to manage and finance overhead costs?				

Organizational Management

Objective: To assess the organization's planning, management of external relations and information and means of identifying and capitalizing on new opportunities.

Strategic Planning

Subsection Objective: To assess the organization's ability to realize its mission and goals by reviewing its strategic plan.
Resources: Strategic Plan

Strategic Planning			
1	**2**	**3**	**4**
The organization has • No strategic plan	The organization has • A basic strategic plan that does not reflect its vision, mission and values • A plan that is not based on SWOT • A plan that does not include priorities or measurable objectives • Not used the plan for management decisions or operational planning • No process for regularly reviewing the plan • Not defined its resource needs	The organization has • A comprehensive, written strategic plan that reflects its mission, vision and values • Based the plan on a review of SWOT • Included priorities, measurable objectives and clear strategies • Not used the plan for management decisions or operational planning • No process for regular reviews • Not defined resource needs or does not have a corresponding budget .	The organization has • A comprehensive, written strategic plan that reflects its mission, vision and values • Based the plan on a review of SWOT • Included priorities and measurable objectives • Used the plan for management decisions and operational planning • Regularly reviewed the plan • Clear resource needs and a corresponding budget

Guiding Questions

Strategic Planning				
Subsection Checklist	Yes	No	N/A	Comments/Quality Notes
Does the organization have a strategic plan? When was it developed and for what period of time?				
Did strategic planning include stakeholders?				
Does the strategic plan outline the mission, niche, competitors, and partners?				
Does the strategic plan include priority areas and measurable objectives?				
Is the strategic plan used to guide work-planning and staffing decisions?				
Does the plan include a process for regular reviews?				
Does the plan identify resource needs and costs?				

Operational Planning

Subsection Objective: To assess the contents, approval and reviews of the annual operational plan.
Resources: Operational plan

Operation Planning			
1	**2**	**3**	**4**
The organization has • No operational plan	The organization has • An annual operational plan • Included goals, measurable objectives and strategies, but no timelines, responsibilities or indicators • Not linked the operational plan to project or program work plans and budgets • Not developed the operational plan with staff participation • Not set dates for quarterly reviews • Not submitted the plan on time to Executive Board and donors.	The organization has • An annual operational plan • Included goals, measurable objectives, strategies, timelines, responsibilities and indicators • Linked the plan to project/program work plans and budgets • Not developed the operational plan with staff participation • No dates for quarterly reviews • Not submitted the plan on time to Executive Board and donors	The organization has • An annual operational plan • Included goals, measurable objectives, strategies, timelines, responsibilities and indicators • Linked the plan to program/project work plans and budget • Developed the plan with staff participation • Set dates for quarterly reviews • Submitted the plan on time to Executive Board and donors.

Guiding Questions

Operational Planning				
Subsection checklist	**Yes**	**No**	**N/A**	**Comments/Quality notes**
Does the organization have an annual operational plan? How are project work plans integrated into the annual operational plan?				
Does the plan have clearly stated goals and measurable objectives and strategies, clear timelines, responsibilities and indicators? Please describe its contents.				
Is the plan linked to the annual budget?				
Was the plan developed with staff participation?				
Does the organization have an annual planning cycle?				

Stakeholder Involvement

Subsection Objective: To assess the organization's ability to coordinate programs and to involve stakeholders.
Resources: list of key stakeholders, stakeholder report, social audit results

Stakeholder Involvement			
1	2	3	4
The organization has • No information about key stakeholders and service providers in the same geographic and/or technical areas in which it operates. • No real engagement with beneficiaries or participants.	The organization has • Identified where stakeholders are, what they do, their expectations and how/if they can collaborate. • No regular meetings with beneficiaries or participants.	The organization has • Complete and up-to-date information about all stakeholders working in the same geographic and technical areas and, if appropriate, collaborative agreements with them . • Regular (at least annually) meetings with beneficiaries and other stakeholders.	The organization has • Complete and up-to-date information about all stakeholders working in the same geographic and technical areas and, if appropriate, collaborative agreements with them. • Regular (at least annually) meetings with beneficiaries and other stakeholders. • Systematic practice of conducting social audits and documenting results.

Guiding Question

Stakeholder involvement				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have an appropriate and broad definition of stakeholders?				
Does the organization have complete and up-to-date information about all stakeholders working in the same geographical and technical areas? Are there collaborative agreements where appropriate?				
Does the organization conduct social audits or any other systematic way of engaging beneficiaries and other stakeholders to review its performance? If so, does it follow AIN guidelines? Another methodology?				
Are regular meetings held with beneficiaries and other stakeholders to share information, review relevant activities and impact and explore ways to collaborate? How often are these meetings held?				

Internal Communication

Subsection Objective: To review the organization's approach to internal communication.
Resources: Staff interviews

Internal Communication			
1	**2**	**3**	**4**
The organization has • Limited communication between and among management and staff • Few structured opportunities to exchange ideas or to discuss management, program or technical issues • Not encouraged staff ideas or input • Staff who feel uncomfortable raising issues	The organization has • Limited communication between and among management and staff • Opportunities for discussions between and among management and staff, but they are rarely used • Sometimes encouraged staff ideas and input • Staff who feel uncomfortable raising issues	The organization has • Open communication between and among management and staff • Regular opportunities for discussing management, program or technical areas • Encouraged staff ideas and input • Staff who are comfortable raising issues but find it more difficult to raise challenging ones	The organization has • Open communication between and among management and staff • Regular opportunities for exchanging ideas or discussing management, program or technical issues • Consistently encouraged and incorporated staff ideas and input • Staff who feel comfortable initiating discussions, contributing ideas and raising issues

Guiding Questions

Internal Communications				
Subsection checklist	Yes	No	NA	Comments/Quality notes
Are management and staff accepting of different communication styles and flows (formal, informal, face-to-face, and confidential)?				
How often are meetings held for all staff? What other mechanisms are there for assisting internal communication (e.g., internal newsletters, memos, social events)?				
Does management encourage and incorporate staff ideas and input?				
Are staff comfortable raising challenging issues using the existing communication mechanisms?				

Decision-Making

Subsection Objective: To assess how the organization makes decisions, who is involved, and how decisions are communicated.
Resources: Staff interviews

Decision-Making			
1	**2**	**3**	**4**
The organization has - Not included staff in the decision-making process - Not communicated or explained decisions that affect the organization - Staff who feel excluded	The organization has - An unclear process for seeking and including staff ideas in the decision-making process - Inconsistently communicated or explained decisions to staff - Staff who feel they play a minor role in making decisions	The organization has - Encouraged staff ideas but seldom incorporated them into decisions - Communicated and explained decisions to staff - Not fully included staff participation in making decisions	The organization has - Sought, respected and incorporated staff ideas into decision-making - Communicated and explained decisions to staff - Staff who feel a sense of responsibility, accountability and ownership of decision-making

Guiding Questions

Decision-Making				
Subsection Checklist	Yes	No	NA	Comments/Quality notes
Does the organization encourage staff to participate in decision-making forums (staff meetings, strategic planning, visioning)?				
Are multiple staff members (technical, administrative, financial) involved in relevant decision-making processes?				
Are multiple methods used in making decisions? What methods are used?				
Does management communicate and explain decisions affecting the organization?				
Do forums exist for staff to voice concerns and competing ideas should a conflict arise about a decision(s)?				

Program Management

Objective: To assess the organization's ability to implement programs/project priorities by reviewing compliance, management of sub-grants, technical reporting

Donor Compliance

Objective: To assess the organization's capability to respond to USG donor requirements; thereby ensuring the effective implementation of its USG-funded programs.
Resources: Copy of the grant agreement

Donor Compliance			
1	**2**	**3**	**4**
The organization • Is not familiar with the terms of the grant agreement • Has not listed and assigned responsibility for all donor requirements	The organization • Is knowledgeable of the terms of the grant agreement • Is aware of donor requirements, has assigned responsibility, but does not have systems in place to ensure compliance	The organization • Is knowledgeable of the terms of the grant agreement • Has systems in place to ensure compliance with donor requirements • Does not comply consistently	The organization • Is knowledgeable of the terms of the grant agreement • Has systems in place to ensure compliance with donor requirements • Complies consistently

Guiding Questions

Donor Compliance				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have a copy of all donor agreements readily available?				
Does the organization have copies of all the modifications that have been made to the donor agreements				
Is the organization aware of all USG requirements which may be applicable, including, but not limited to, submission of work plans, marking and branding plans, environmental compliance plans, financial reports, semiannual and annual technical reports, inventory reports, VAT reports, audit reports, DEC submissions, procurement approvals, sub-grant approvals, sub-grant certifications, etc.?				
Has responsibility for each of the above requirements been assigned?				
Are requirements fulfilled correctly and on-time?				
Is a system in place to ensure compliance with the requirements? Describe the system.				
Have there been findings in external or internal audits related to non-compliance with donor regulations?				

Program Reporting

Subsection Objective: To review the organization's ability to document technical activities and results for donors, program planning and program development.
Resources: Most recent technical report, work plan

Program Reporting			
1	**2**	**3**	**4**
The organization	The organization	The organization	The organization
• Does not document quantitative or qualitative progress on its work plan or its objectives and strategies, facilitating factors or barriers • Does not identify lessons learned and/or best practices • Does not report on donor, government or other program indicators • Does not use information to review/revise its strategy with staff and stakeholders	• Documents qualitative progress on its work plan, including objectives and strategies, facilitating factors and barriers • Does not identify lessons learned or best practices • Does not report on government, donor or other program indicators • Does not use information to review/revise strategies with staff or stakeholders	• Documents both qualitative and quantitative work plan progress and reviews objectives and strategies, facilitating factors and barriers • Documents lessons learned and best practices • Reports on donor, government or other program indicators • Does not use information to review/revise strategies with staff and stakeholders	• Documents both quantitative and qualitative work plan progress, and reviews objectives and strategies, facilitating factors and barriers • Documents lessons learned and best practices • Reports on donor, government and other program indicators • Uses information to review/revise strategies with staff and stakeholders

Guiding Questions

Program Reporting				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Are there systems for regularly reviewing and documenting progress on the work plan (program, donor or national indicators, objectives and strategies)? Please explain.				
Are systems in place to identify facilitating factors and barriers to progress?				
Are there systems for identifying lessons learned or best practices?				
Are lessons learned, gaps or shortfalls and best practices documented?				
Does the organization review findings and revise strategies with staff and stakeholders based on the findings?				

Culture and Gender

Subsection Objective: To evaluate the organization's systems for assessing culture and gender issues among the populations it serves and for integrating cultural and gender concerns into its programs.

Resources: Community or client assessments, program plans

Culture and Gender			
1	**2**	**3**	**4**
The organization does • Not consider local cultural or gender issues in programming • Not have tools for assessing local cultural or gender issues • Not discuss the role of local culture and gender norms in program design with staff	The organization does • Consider local cultural or gender issues in its programming • Not have tools for assessing local cultural or gender issues relevant to programs • Discuss the role of local culture and gender norms in program design with staff	The organization does • Consider local cultural or gender concerns in its programming • Have tools for assessing cultural and gender issues • Have guidelines for culturally relevant and gender based approaches and programming • Not train staff on how to use the tools or findings	The organization does • Consider local culture or gender concerns in its programming • View culture and gender as integral to program success • Have tools for assessing cultural and gender issues • Have guidelines for culturally relevant and gender-based approaches and programming • Train staff on the tools, interpreting findings and incorporating elements of culture and gender in program design

Guiding Questions

Culture and Gender				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does organization have a written GESI policy?				
Does the organization have clearly documented guidelines for culturally relevant and/or gender-based approaches and programming?				
Does the organization provide training in gender and/or cultural issues and survey tools?				
Does the organization consider local culture and gender in programming? Please describe how.				
Are findings from culture and/or gender assessments used in program development and implementation? Are monitoring tools used to continue assessing local issues?				

Supervision

Subsection Objective: To assess the organization's systems for supportive review of and feedback on staff performance and program activities.
Resources: Supervision plan or guidelines, supervisors' reports

Supervision			
1	**2**	**3**	**4**
The organization has • Not clarified supervisory responsibilities • Not trained supervisors or provided tools • No process for carrying out supervision and reporting	The organization has • Detailed supervisory responsibilities, but they are not followed • Not trained supervisors or provided tools • An unclear process for supervision • No process for reviewing findings with staff and management • Has informal reporting practices	The organization has • Detailed supervisory responsibilities that are followed • Trained supervisors and provided them with tools • Logistical and program barriers to providing regular supervision • No process for documenting or discussing findings with staff and management	The organization has • Detailed supervisory responsibilities that are followed • Trained supervisors and provided them with tools • A mechanism for carrying out visits according to the timeline • A process for documenting and discussing findings with staff and management • A process for following up and addressing issues

Guiding Questions

Supervision				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Is supportive supervision training conducted regularly?				
What supervisory tools does the organization use?				
Are findings documented and discussed with management and staff?				
Is there a process for following up and addressing findings?				

Monitoring and Evaluation

Subsection Objective: To assess how the organization collects and uses data to plan, monitor and evaluate its programs.
Resources: M&E plan, M&E tools, M&E reports

Monitoring and Evaluation			
1	**2**	**3**	**4**
The organization has • No M&E plan • No process for monitoring program implementation • Not identified indicators to monitor • No system for data processing: tools, trained data collectors, data quality review or a plan for analyzing and using information	The organization has • A basic M&E plan • Identified outcome indicators • Developed data collection tools • Trained staff in M&E • No system for regularly collecting, analyzing or reporting data • No review of data quality • No process for reporting progress against targets	The organization has • A well-defined M&E plan • Process and outcome indicators • Trained staff to collect data, and data collection is consistently done • A process for consistently using data/findings for follow-up monitoring, support or planning and reporting against targets • No process for sharing results with field and stakeholders	The organization has • A well-defined M&E plan • Process and outcome indicators • A process for using data for follow-up monitoring, program adjustments, planning and determining progress towards achieving targets • A process for data quality review • A strategy for reporting on progress against targets and involving staff and data collectors in reviewing and using findings • A strategy for regularly sharing information with stakeholders, including the community

Guiding Questions

Monitoring and Evaluation				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Is there a documented M&E plan that includes process (output) and outcome indicators, data collection tools and schedule, quality review and methods for sharing and using data?				
Has the M&E plan been approved (if appropriate)? By whom?				
Is M&E training offered to relevant staff?				
Is M&E data collected by trained staff using standardized tools on a regular basis?				
Is someone responsible for data quality review?				
Are M&E findings reported on and shared with staff and appropriate stakeholders, including the community?				
Are M&E results used to improve the program?				

External Relations

Objective: To assess the organization's ability to engage and maintain relations with key external stakeholders.

Communication Strategy

Subsection Objective: To assess the comprehensive, completeness and effectiveness of the organization's communication strategy.
Resources: Communications strategy, staff interviews

Communication Strategy			
1	**2**	**3**	**4**
The organization has	The organization has	The organization has	The organization has
• No strategy for identifying audiences, channels, materials, and dissemination for promotion of technical/best practice innovation and overall achievements • No one assigned responsibility for developing/overseeing communication strategy • No process/tools for testing the materials/messages	• An incomplete strategy, lacking objectives, responsibility, timelines and dissemination mechanisms • Assigned responsibility for communication strategy development • No process/tools for testing materials/messages	• A complete communication strategy, • Tasked staff member(s) with communication strategy management including documentation oversight • A process for testing materials/messages and revising based on test results • Created templates for documents and a style guide	• A comprehensive communication strategy • Tasked staff member(s) with communication strategy, including documentation development and oversight • A process for testing and revising materials based on test results • Created templates and a style guide and trained staff on their use

Guiding Questions

Communication Strategy				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Does the organization have a communication strategy? Is it comprehensive (i.e., including objectives, responsibility, audience, channels, resources, testing, dissemination, timeframe and monitoring)?				
Does the organization have its own brand/logo/tagline?				
Does the organization have a documented branding/marking policy?				
Is/are qualified staff member(s) tasked with communication strategy management and documentation (oral, written and online) oversight?				
Does the organization pre-test materials/messages as part of documentation development and are revisions made based on the test results?				

Government Engagement

Subsection Objective: To assess the organization's ability to engage constructively with government
Resources: Staff interviews; stakeholder interviews

Government Engagement			
1	**2**	**3**	**4**
The organization has • Tense relationship with government. • Government viewed as opposition.	The organization has • Friendly, but distant relations with government.	The organization has • Frequent, but usually on informal collaboration on specific tasks or activities. • Been asked once or twice by government for their input or assistance.	The organization has • Formal and informal mechanisms for collaboration. • Frequent, constructive engagement with government. • Been asked regularly by government for their input or assistance.

Guiding Questions

Government Engagement				
Subsection Checklist	Yes	No	N/A	Comments/Quality notes
Is the organization on friendly terms with the government?				
Does the organization ever collaborate with government outside of mandatory requirements?				
Does the government ever ask for assistance or support from the organization?				
How does the organization engage with the government? Is it mostly formal or informal contact?				

Resource Mobilization

Subsection Objective: To assess the organization's ability to identify and capitalize on new business opportunities.
Resources: Business development plan, resource development plan, funding strategy

Resource Mobilization			
1	**2**	**3**	**4**
The organization has	The organization has	The organization has	The organization has
• No business plan or funding strategy • Not estimated its future resource needs • Taken no steps to identify additional local, national or international resources or opportunities to support its programs and activities, either directly or through partnerships • Not created a communication strategy for resource mobilization	• A business plan and has taken preliminary steps to estimate future resource needs based on an analysis of its programs and/or its strategic plan • Identified local resource providers or opportunities and their interests and potential for support • Totally dependent on outside or donor funding sources	• A business plan based on an analysis of its programs and resource needs and the activities in its strategic plan • Identified local resource providers • Created a communication strategy for resource mobilization • Received support from at least one local source or has a clear plan for fundraising or proposal writing	• A business plan based on an analysis of its programs and resource needs and the activities in its strategic plan • Identified local resource providers • Created a communication strategy for resource mobilization • Successfully bid for resources from one or more sources • Sufficient funds to support its activities

Guiding Questions

Resource Mobilization				
Subsection checklist	Yes	No	N/A	Comments/Quality notes
Has the organization designated a person to carry out resource mobilization activities? Does the person have the required skills and qualifications task?				
Does the organization have a business plan or funding strategy? Is it in line with its strategic plan?				
Does the organization know the resources it needs based on an analysis of its programs or through reviewing strategic planning resource needs?				
Are there sufficient funds to support activities for the next year? Three years?				
Does the organization receive support from multiple donors? Who are the donors?				
Have potential local resource providers (sources) been identified?				
Is there a development plan (fundraising/proposal writing) for obtaining local resources?				
Is there a communication and networking strategy to attract resources?				
How many proposals has the organization submitted in the past year?				

Civil Society Engagement

Subsection Objective: To assess the organization's ability to engage and partner with other civil society organizations.
Resources: Staff interviews

Civil Society Engagement			
1	**2**	**3**	**4**
The organization has • Little or no experience working with other CSOs. • Not been known or trusted by CSO community.	The organization has • Some experience collaborating with other CSOs • Been increasingly known and trusted by CSO community.	The organization has: • Regularly formal and informal collaboration with other CSOs. • Participation in CSO networks, but has not played a leadership role in promoting CSO coalitions and/or projects.	The organization has • Regular formal and informal collaboration with other CSOs. • Leadership role in CSO networks, in promoting coalitions and supports other CSOs • Helped resolve CSO-CSO or CSO-government conflict.

Guiding Questions

Supervision				
Subsection Checklist	**Yes**	**No**	**N/A**	**Comments/Quality Notes**
Is the organization a member of any CSO networks? If so, has it played any leadership role?				
Has the organization ever partnered with another CSO for an activity? For a project?				
Does the organization regularly engage with other CSOs? If so how and why?				

Annex 1: Organizational Documents Checklist

No	Organizational Documents Checklist	Yes	No
	Organization Name:		
No	**Assessment Dates:**	**Yes**	**No**
	Governance		
	Registration Documents		
	Mission and Vision Statements		
	Constitution or By-Laws		
	Administration		
	Administrative Policy Documents		
	Procurement Guidelines		
	Inventory Records		
	Human Resource Management		
	Organizational Chart		
	Human Resource Manual or Policy		
	Records Management Policy		
	Staff File Checklist or Other Guidance		
	Sample Performance Management Documents		
	Staff Time Sheet		
	Sample Job Description		
	Sample Employment Contract		
	Staff Orientation Materials		
	Financial Management		
	Financial Policies and Procedures		
	Project Budget		
	Organizational Budget		
	Financial Reports		
	Organizational Management		
	Strategic Plan		
	Work Plan		
	Internal Communications Policy or Guidance		
	Social Audit		
	Program Management		

	Quarterly or Monthly Project Report		
	Activity Report, Field Report or Training Report		
	Gender and Social Inclusion Policy or Similar Guidance		
	Supervisory Tools or Other Guidance		
	M&E Plan—Date Collection Instruments, Indicator Reference Sheets, Indicator Tracking Sheets, Database		
External Relations			
	Communication Strategy or Similar Guidance		
	Brochures or other Communication Materials		
	Annual Report		
	Scope(s) of Work, Memoranda of Understanding or Similar Between Organization and Government or Other CSO		
	Business Plan or other Resource Mobilization Plan or Strategy		

Annex 2: OCA Sample Agenda

ORGANIZATIONAL CAPACITY ASSESSMENT

SAMPLE AGENDA

Day 1	**Purpose**: Meet individual staff and explore their perceptions about the organization's current capacities and greatest needs. • Individual interviews with key staff including leadership from programs, administration, human resources, finance, board members, and executive director. • Sharing of important documentation about the organization including strategic plans, administration and finance manuals, program SOPs, organizational charts, etc. • Confirm plans for a field visit to project sites for Day 2, if possible. **Important Considerations**: This day follows a loose structure and does not require any large meetings or group events. This should not require much staff time outside of individual staff appointments and should be very flexible.
Day 2	**Purpose**: Meet beneficiaries and explore project implementation successes and needs with project field staff. • Site visit or stakeholder/beneficiary meeting. • Continue with document review or remaining staff interviews. **Important Considerations**: All efforts should be made in order to minimize impacts on organizational resources, costs and time.
Day 3	**Purpose**: Day 1 or the OCA workshop – plenary discussions, capacity scoring, priority setting and action planning • Ideally a representative mix of staff and board members will convene for 1.5-2 days. • CS:MAP ISOs will facilitate the process, but participation and leadership from the organization is essential. • Emphasis on Day 1 is completing the capacity scoring exercise and setting organizational priorities. **Important Considerations:** Think of this as a more a management meeting than a formal workshop. When deciding who should attend the workshop senior leadership across all org functions is essential, but also include a few field or support staff to make it more representative. We recommend minimizing costs and using organization training halls or conference rooms for the workshop if possible.
Day 4	**Purpose**: Day 2 of the OCA workshop • This is a continuation of the process from Day 1. • The emphasis on Day 2 is in developing an Institutional Improvement Plan that captures the grantee's priorities for organizational growth in the coming year. **Important Considerations:** We begin Day 2 where Day 1 left off. Day 2 frequently is a half-day only, but could stretch the full two days.

Annex 3: Staff and Stakeholder Interview Guide

I.   Interviewees by Section

Section	Sub-section	Potential Interviewee
Governance	Vision and Mission	Executive Director/Program Manager
	General Assembly	
	Organizational Structure	Board Members
	Board Composition and Responsibility	General Assembly Members
	Succession Planning	Stakeholders
Administration	Operational Policies, Procedures and Systems	Executive Director/Program Manager
	Procurement	Administrative and Procurement Staff
	Fixed Asset Control	Other Staff
Human Resource Management	Job Descriptions	Senior Management
	Recruitment	Human Resources Staff
	Staff Skills	Other Staff
	Staff Development	
	Personnel Policies	
	Personnel Files	
	Staff Salaries and Benefits	
Financial Management	Financial Systems	Executive Director/Program Manager
	Financial Policies and Procedures	Financial Manager
	Internal Controls	Finance Officer or Staff
	Financial Documentation	Board Member
	Budgeting	
	Financial Reporting	
	Audits	
	Financial Sustainability	
Organizational Management	Strategic Planning	Executive Director/Program Manager
	Operational Planning	Other Staff
	Stakeholder Involvement	Stakeholders
	Internal Communication	
	Decision-Making	
Program Management	Donor Compliance	Senior Management
	Program Reporting	M&E Staff
	Culture and Gender	Stakeholders
	Supervision	
	Monitoring and Evaluation	
External Relations	Communication Strategy	Senior Management
	Government Engagement	Stakeholders
	Resource Mobilization	
	Civil Society Engagement	

II.   Introduction

Welcome—Explain purpose of the interview

- Thank you for agreeing to do this interview. My name is [NAME], and I'll be talking with you today.
- As you know, this project is being funded by the U.S. Agency for International Development and implemented by FHI 360. The project's overall goal is to foster a more legitimate, accountable, and resilient Nepali civil society that is capable of advancing the public interest.
- The purpose of this interview today is to learn more about your experiences and perceptions about this organization's primary strengths and areas for improvement. Your input is valuable and I thank you again for participating.

Ground rules

- Everything you tell us will be confidential. To protect your privacy, we won't connect your name with anything that you say in our notes or in the report.
- At any time during our conversation, please feel free to let me know if you have any questions or if you would rather not answer any specific question. You can also stop the interview at any time for any reason.
- Please remember that we want to know what you think and feel and that there are no right or wrong answers.
- Do you have any questions?

Background

- The OCA has 7 sections: Governance, Administration, Human Resource Management, Financial Management, Organizational Management, Program Management, and External Relations. The questions that I will ask are in relation to one or more of these areas.

III.   Sample Interview Questions

Governance

Mission and Vision

1. Does your organization have a Mission and/or a Vision Statement? If so, what are they?

2. Is the Vision or Mission Statement posted visibly where staff and/or visitors see it regularly?

3. Is the statement used regularly in guiding organizational activities and priorities? In human resource materials (i.e. staff handbooks, orientation materials, etc.)?

4. Have the vision or mission statements changed within the past five years? If yes, can you please describe the process?

General Assembly, Board and Succession Planning

5. Are general assembly meetings held on a regular basis in line with your constitution?

6. Are documented roles and responsibilities of Board members available?

7. Is there separation of Board and executive/management roles? Is this written up and adhered to?

8. Are there written procedures for Board term limits, transitions, and procedures?

9. Have there been successful transitions among senior Board positions?

10. Are records kept of Board meetings?

11. Have Board members formed or maintained any relationships critical to the Org?

12. Have Board members led any fundraising efforts?

13. Have Board members been involved in decision making related to strategic direction and policy formulation for the organization?

14. Have Board members been involved in strategic planning for the organization?

Administration

Administrative Policies

1. Does the department or team have comprehensive administrative policies? If yes, do those policies address the following: Comprehensively address use of office equipment, supplies, office vehicles, taxis, and personal vehicles; handling of mail, phone, faxes, and photocopying; safety and security; lost or stolen equipment; and the hiring and use of consultants?

2. Are there areas where the policies and procedures need to be clarified or expanded?

3. Are forms and approval processes consistently and appropriately standardized and computerized?

4. Are there any internal or external compliance assessments or audits to determine the extent to which staff follow the policies? If no, why not? If yes, What are the most common findings?

5. Are administrative staff trained based on the policies? What about non-administrative staff?

6. How often are administrative policies updated?

Procurement

7. Are procurement policies documented? If yes, how often are they revised?

8. Do the policies Include guidance on codes of conduct; fair and open competition; prohibited goods, services, and suppliers?

9. Are the policies consistently followed? How is monitoring of compliance carried out? Are there any common challenges identified?

10. Are procurement records available and easy to follow?

11. Are procurement staff supported with regular procurement training? Does it include ethics training?

12. How does the organization avoid duplicate payments (e.g., are all invoices marked "paid" and are payment vouchers pre-numbered)?

Fixed Asset Management

13. Are fixed asset management policies documented? If yes, how often are they revised?

14. Is there a policy for inventory, maintenance, insurance, disposition and custody of non-expendable equipment?

15. Is physical inventory conducted in compliance with policies and documented?

16. Are assets consistently marked with inventory control numbers and ownership?

17. Are assets usually properly maintained, replaced, and disposed of?

18. Is there unusable equipment visible that has not been properly disposed of? If yes, please give an explanation.

Human Resource Management

Job Descriptions

1. Are there job descriptions with relevant details (title, job duties/responsibilities, report to details, supervision responsibilities (if any), qualifications, skills required, etc.) for all positions in the team or department, including those for volunteers and/or interns?

2. Do all staff have written job descriptions, delegations of authority, and re-assignments that are up to date?

3. Are job descriptions accessible by staff, volunteers and interns?

Recruitment

4. Are there written recruitment guidelines? Do the guidelines have or include: announcing/advertising, collecting CVs/short-listing, interviewing candidates, checking references and salary history, making offers, employment agreements and transparency around the process?

5. Have appropriate staff been trained to follow recruitment procedures?

6. Are recruitment procedures always followed? What are the exceptions?

Staff Skills & Development

7. Does the organization have a policy framework for professional development?

8. Does the policy establish how staff development needs assessments are done?

9. Does the policy establish how staff development resources are used?

10. Do staff regard staff development to be managed in a transparent manner?

11. Are staff involved in setting their own professional development goals?

Human Resource Policies

12. Do the organization's human resources policies value and aim to increase diversity in the gender, ethnic, religious, and cultural composition of management and staff? If yes, are these variables monitored and reported on?

13. Are there documented Personnel Policies that include guidelines on: work schedule, employee compensation (salary) and benefits, leave, performance review, grievance and disciplinary procedures, ending employment (resignation, termination), administrative procedures, and employee conduct?

14. How often is the personnel policy updated?

Personnel Files

15. Are sensitive files (personnel, M&E, etc.) stored securely?

16. Does the organization have written guidance for staff about which documents must be retained and how they should be organized?

17. Does filing guidance include e-documents?

18. Are files kept in boxes or cabinets?

Staff Salaries and Benefits

19. How are salaries determined for incoming staff?

20. How are salary increases determined? Is it based on performance? Time in service? Something else?

21. How are benefits determined? Are they consistently followed?

Performance Management

22. Is there a documented process for assessing staff performance that includes objective setting; listing of responsibilities/tasks for the review period; assessment of performance on past activities; and supervision and professional development?

23. Is the performance assessment process participatory, allowing both staff and supervisors to assess performance and discuss performance related issues?

24. Are performance assessments carried out for all staff and conducted regularly (at least once a year)?

25. Are performance assessments conducted for new staff at the conclusion of the probationary period?

Financial Management

Financial Systems and Policies

1. Are there written financial procedures?

2. Are there definitions of reasonable, allocable, and allowable/unallowable expenses included?

3. Are there petty cash systems and policies?

4. Are payment vouchers prepared? Who has check signing authority?

5. Are there separate bank accounts per funding sources? Are they reconciled monthly? Who are the signatories?

6. Are there written VAT policies that include tracking and reimbursement (as applicable)?

Budgeting

7. Are the organization's financial and program managers trained in budget preparation?

8. Does the organization have established methods for calculating and budgeting for core and consistent costs?

9. Do both program and financial managers utilize budgets as a project management tool?

10. Are budgets reviewed and evaluated for accuracy?

11. Does the budget account for different funding sources and/or different projects?

12. Is there a budget tracking tool? Does it contain projections?

Financial Reporting and Documentation

13. Are there written procedures to complete and submit financial reports?

14. Are financial reports submitted on time and in accordance with the deliverable schedule?

15. Is there a person designated to prepare financial reports?

16. Is there a person designated to review and sign off on financial reports?

Audits

17. Is there a written process regarding regular financial audits?

18. Is the organization regularly audited?

19. Are there records kept of audit reports?

20. How are audit recommendations implemented and what is the schedule for resolving audit findings?

21. Are audit reports shared with the Board?

Financial Sustainability

22. Does the organization have a diversified funding base? If so, who are its funders?

23. Does the organization have unrestricted income? If so, is it a regular source?

24. Does the organization have income-generating activities? If so, how much of the annual budget comes from this source?

Organizational Management

Strategic Planning

1. Does the organization perform strategic planning on a regular basis?

2. When was the most recent plan developed and for how long? How many planning cycles has the organization completed?

3. Does the strategic planning process include stakeholders?

4. Does the strategic plan include measurable objectives?

5. Is the strategic plan used to guide work planning and staffing decisions?

6. Does the strategic plan include cost information?

Operational Planning

7. Does the organization have an annual work plan?

8. If so, does the work plan have clear stated goals and measurable objectives and strategies?

9. Does the work plan have clear timelines, responsibilities and indicators?

10. Is the work plan linked to the project budget?

11. Was the work plan developed with the participation of staff?

Stakeholder Involvement

12. Is community participation limited to the project-level only?

13. Are there any organization-level bodies representing constituency or community interests, e.g. a committee on the Board?

14. Is there a process for soliciting feedback and information from the beneficiaries?

15. Are target beneficiaries involved in organizational processes and decision making?

16. Does the organization have regular interactions with the beneficiaries?

17. Does the organization use feedback and information gleaned from the beneficiaries to inform program activities?

18. Does the organization perform social audits? If so, which approach is followed?

Internal Communication

19. Does an internal communication policy exist for management and staff communication practices (expectations, standard organizational procedures, breaches)?

20. Is management and staff accepting of different communication styles and flows (formal, informal, face-face, confidential)?

21. Are staff inputs sought and incorporated into decision making?

Decision-Making

22. Does the organization encourage staff to participate in decision-making forums (staff meetings, strategic planning, visioning)?

23. Are multiple staff members (technical, administrative, financial) involved in relevant decision-making processes?

24. Do forums exist for staff to voice concerns and competing ideas should a conflict arise about a decision(s)?

Program Management

Donor Compliance

1. Does the organization have a copy of all donor agreements readily available?

2. Is the organization aware of all USG requirements which may be applicable, including, but not limited to, submission of work plans, marking and branding plans, environmental compliance plans, financial reports, semiannual and annual technical reports, inventory reports, VAT reports, audit reports, DEC submissions, procurement approvals, sub-grant approvals, sub-grant certifications, etc.?

3. Are requirements fulfilled correctly and on-time?

4. Is a system in place to ensure compliance with the requirements? Describe the system.

Program Reporting

5. Does the organization regularly produce reports detailing the technical implementation of projects or activities as they appear in work plans?

6. Are reports consistently produced and submitted on time or are they often late?

Culture and Gender

7. Does the organization have clear guidelines documented for culturally-relevant and/or gender-based approaches and programming? If so, please give some examples.

8. Are any staff employed by the organization expert(s) in gender and/or culture issues? If yes, please describe.

9. Has staff received training and resources for incorporating cultural or gender elements in its programming and activities?

10. Are findings from culture and/or gender assessments used in stages of program development and implementation or in office administration? If yes, please give examples.

11. Do tools (checklists, score cards) exist for assessing local cultural and gender issues for programs?

Supervision

12. Does the organization have a documented guidance for the roles and responsibilities of supervisors? If yes, does that guidance emphasize the tasks to be performed only or does it also talk about the role of a supervisor as coach, mentor, and/or support system?

13. Are there clear lines of authority, e.g., do all staff clearly understand who supervises their work?

Monitoring and Evaluation

14. Are there dedicated staff for M&E? Is the number of M&E staff sufficient in relation to the program size?

15. Does the M&E team (if >3 persons) have an appropriate skills mix (e.g. data analysis, evaluation/research, MIS)?

16. Have members of the Program M&E team received initial M&E training?

17. Is there an M&E plan which is up to date?

18. M&E plan includes indicators for measuring input, outputs, outcomes and where relevant, impact indicators, and the indicators are linked to the project objectives. Have targets been set for key performance indicators?

19. Do project staff use a standard reporting template(s)?

20. Are training registers/documentation available and in use?

21. Are data collection tools in place that include all program/project indicators?

22. Do data management guidelines exist (e.g. filing systems for paper forms or back up procedures for electronic data)?

23. Does the organization have one or more electronic M&E databases which are up to date?

24. Is data disaggregated by gender and age?

External Relations

Communication Strategy

1. Does the organization have defined advocacy approaches or strategies? A communication strategy?

2. Is public outreach a clearly defined role within the organization? If so, who is responsible?

3. Does the organization utilize social media? If yes, which platforms?

4. Is media relations a clearly defined role within the organization? If so, who is responsible?

5. Which mass media outlets has the organization interacted with in the past six months?

Government Engagement

6. Is the organization on friendly terms with the government?

7. Does the organization ever collaborate with government outside of mandatory requirements?

8. Does the government ever ask for assistance or support from the organization?

9. How does the organization engage with the government? Is it mostly formal or informal contact?

Resource Mobilization

10. Has the organization designated a person to carry out resource mobilization activities? Does the person have the required skills and qualifications task?

11. Does the organization have a business plan or funding strategy? Is it in line with its strategic plan?

12. Does the organization know the resources it needs based on an analysis of its programs or through reviewing strategic planning resource needs?

13. Are there sufficient funds to support activities for the next year? Three years?

14. Does the organization receive support from multiple donors? Who are the donors?

15. Have potential local resource providers (sources) been identified?

16. Is there a development plan (fundraising/proposal writing) for obtaining local resources?

Civil Society Engagement

17. Is the organization a member of any CSO networks? If so, has it played any leadership role?

18. Has the organization ever partnered with another CSO for an activity? For a project?

19. Does the organization regularly engage with other CSOs? If so how and why?

IV.   Closing

Overall, what do you feel are the organization's greatest strengths? Areas for improvement?

What is the most important message that you want us to take away from this interview?

Is there anything else that you would like to add about any of the topics that we've discussed or other areas that we didn't discuss but you think are important?

Thank you!

Annex 4: Capacity Domain Scoring Exercise

Exercise Type: Small group discussion
Materials: Organizational Capacity Assessment Participant's Guide
Time Allotted: 20 minutes per domain (more for those domains with the most subsections)

Objective: Enable wide participation and facilitate consensus for capacity domain scoring

Overview: This exercise is intended to encourage active participation in discussions of organizational strengths and areas for improvement. By working in small groups, participants will be able to engage in discussion more easily and a wider array of views should be represented. Periodically, the small groups will present their findings and capacity scores to the larger group, who must then reach consensus.

Special Facilitator Instructions

1. Using a digital projector, project the organizational capacity domains and subsections. If logistics do not permit the use of a projector, then prepare flip charts with each domain and subsection title and spaces to record the scores of each group as well as the final negotiated score.

2. With the help of the senior staff and board members, divide the group into two and arrange them in two separate parts in the room. Ask each group to select a leader.

3. If you have not done so already, provide a copy of the domain and subsection, one set one at a time. The first should be *Governance: Vision and Mission*.

4. Participants may assign half-points as well if they feel that they fall between two scores. This is often useful when generating consensus among the group.

Exercise Tasks

1. In your groups read the description for each stage in the development of the subsection.

2. Discuss in your group what you think the descriptions mean and which stage best represents where your organization is currently.

3. Note down which stage (1 to 4) the group feels is the most accurate. Also note in detail why the group chose that stage over any of the others.

4. When your group has finished the discussion, and marked the score for each subsection, be prepared to present findings in plenary.

Exercise Wrap Up

As the groups present their findings in plenary, note down in the Negotiated Score Format each group's score. If both groups reach the same conclusion, then note the final score in the OCA Calculation Sheet as well as the justification for the score.

If the two groups present different scores, then discuss in the large group and negotiate until consensus is reached. Once there is consensus on the correct score and justification, note both in OCA Calculation Sheet.

Note: Recording in detail the justification for each final capacity score in the OCA Calculation Sheet is critical. This information will be used to help guide the development of the Institutional Improvement Plan and recorded in the OCA Final Report.

Annex 5: OCA Negotiated Score Format

OCA Negotiated Score Format

Name of Grantee/CSO: **Date of Assessment**:

Domain		**Subsection**	**Group 1**	**Group 2**	**Negotiated Score**
Governance	1	Vision and Mission			
	2	General Assembly			
	3	Organizational Structure			
	4	Board Composition and Responsibility			
	5	Succession Planning			
Administration	1	Operational Policies, Procedures and Systems			
	2	Procurement			
	3	Fixed Asset Control			
Human Resource Management	1	Job Descriptions			
	2	Recruitment			
	3	Staff Skills			
	4	Staff Development			
	5	Personnel Policies			
	6	Personnel Files			
	7	Staff Salaries and Benefits			
	8	Staff Performance Management			

Domain		Subsection	Group 1	Group 2	Negotiated Score
Financial Management	1	Financial Systems			
	2	Financial Policies and Procedures			
	3	Internal Controls			
	4	Financial Documentation			
	5	Budgeting			
	6	Financial Reporting			
	7	Audits			
	8	Financial sustainability			
Organizational Management	1	Strategic Planning			
	2	Operational Planning			
	3	Stakeholder Involvement			
	4	Internal Communication			
	5	Decision-Making			
Program Management	1	Donor Compliance			
	2	Program Reporting			
	3	Culture and Gender			
	4	Supervision			
	5	Monitoring and Evaluation			
External Relations	1	Communication Strategy			
	2	Government Engagement			
	3	Resource Mobilization			

Domain		Subsection	Group 1	Group 2	Negotiated Score
	4	Civil Society Engagement			

Annex 6: OCA Calculation Sheet

CS:MAP Organizational Capacity Assessment – Calculation Sheet: [CSO Name]

Assessment Date:

DOMAIN	ASSESSMENT SCORING RESULTS		PRIORITY (1 – 4)	COMMENTS
	RAW SCORE (1 – 4)	COMPOSITE SCORE FOR SECTION		
GOVERNANCE				
Vision and Mission				
General Assembly				
Organizational Structure				
Board Composition and Responsibility				
Succession Planning				
ADMINISTRATION				
Operational Policies, Procedures and Systems				

DOMAIN	ASSESSMENT SCORING RESULTS		PRIORITY (1 – 4)	COMMENTS
	RAW SCORE (1 – 4)	COMPOSITE SCORE FOR SECTION		
Procurement				
Fixed Asset Control				
HUMAN RESOURCE MANAGEMENT				
Job Descriptions				
Recruitment				
Staff Skills				
Staff Development				
Personnel Policies				
Personnel Files				
Staff Salaries and Benefits				

DOMAIN	ASSESSMENT SCORING RESULTS		PRIORITY (1 – 4)	COMMENTS
	RAW SCORE (1 – 4)	COMPOSITE SCORE FOR SECTION		
Performance Management				
FINANCIAL MANAGEMENT				
Financial Systems				
Financial Policies and Procedures				
Internal Controls				
Financial Documentation				
Budgeting				
Financial Reporting				
Audits				
Financial Sustainability				

DOMAIN	ASSESSMENT SCORING RESULTS		PRIORITY (1 – 4)	COMMENTS
	RAW SCORE (1 – 4)	COMPOSITE SCORE FOR SECTION		
ORGANIZATIONAL MANAGEMENT				
Strategic Planning				
Operational Planning				
Stakeholder Involvement				
Internal Communication				
Decision-Making				
PROGRAM MANAGEMENT				
Donor Compliance				
Program Reporting				
Culture and Gender				

Domain	Assessment Scoring Results		Priority (1 – 4)	Comments
	Raw Score (1 – 4)	Composite Score for Section		
Supervision				
Monitoring and Evaluation				
External Relations				
Communication Strategy				
Government Engagement				
Resource Mobilization				
Civil Society Engagement				

Annex 7: Capacity Domain Prioritization Exercise

Exercise Type: Small group discussion
Materials: Organizational Capacity Assessment Participant's Guide
Time Allotted: 15 minutes per domain (more for those domains with the most subsections)

Objective: Enable wide participation and facilitate consensus for prioritization

Overview: This exercise is intended to encourage active participation in discussions of which capacity domain subsections are the highest priority for improvement over the next 12 months. By working in small groups, participants will be able to engage in discussion more easily and a wider array of views should be represented. Periodically, the small groups will present their findings and prioritization scores to the larger group, who must then reach consensus.

Special Facilitator Instructions

1. Using a digital projector, project the organizational capacity domains and subsections. If logistics do not permit the use of a projector, then prepare flip charts with each domain and subsection title and spaces to record the scores of each group as well as the final negotiated score.

2. With the help of the senior staff and board members, divide the group into two and arrange them in two separate parts in the room. Ask each group to select a leader.

3. If you have not done so already, provide a copy of the domain and subsection, one set one at a time. The first should be *Governance: Vision and Mission*.

4. Do not post of refer to the capacity scores for the subsections being discussed. Encourage participants to consider the priority for each subsection *independent* of the capacity score previously assigned.

Exercise Tasks

1. In your groups reflect again on each capacity subsection.

2. Discuss in your group what you think the impact for your organization would be if it were to take immediate action over the coming year to improve performance related to that subsection. If taking action would have a significant impact, then that subsection has a high priority (4). If taking action would have relatively little impact, then it is low (1).

3. Note down which priority score (1 to 4) the group feels is the most accurate. Also note in detail why the group chose that score over any of the others.

4. When your group has finished the discussion, and marked the score for each subsection, be prepared to present findings in plenary.

Exercise Wrap Up

As the groups present their findings in plenary, note down each group's score. If both groups reach the same conclusion, then note the final score in the OCA Calculation Sheet as well as the justification for the score.

If the two groups present different scores, then discuss in the large group and negotiate until consensus is reached. Once there is consensus on the correct score and justification, note both in OCA Calculation Sheet.

With a complete set of both capacity and priority scores, the facilitator should present the combined results in plenary, using the MS Excel Calculation Sheet if possible, in order to validate the results with the group. If necessary, make amendments to the findings based on the group's feedback.

Annex 8: Action Planning Exercise

Exercise Type: Small group work
Materials: Organizational Capacity Assessment Participant's Guide
Time Allotted: 30 – 45 minutes for group work, 10-15 minutes per group for presentations

Objective: To draft an Institutional Improvement Plan utilizing the OCA findings

Overview: This exercise is intended to engage participants in a priority setting and action planning process. After rank ordering those capacity subsections of highest priority and selecting between 2 and 4 to focus on, participants will work in small groups to craft improvement objectives, and draft action plans for achieving them.

Special Facilitator Instructions

1. Before beginning the action planning exercise, you must first work with the plenary to rank order the top 5-10 capacity domain subsections that the organization is interested in focusing on over the next 12 months. From this larger list, work with the group to select between 2 and 4 subsections that will become the focus of their Institutional Improvement Plan.

2. Form a group for each subsection chosen and ask for volunteers to join a group of their choosing.

3. Working in groups, the participants will first draft a performance improvement objective related to the selected capacity subsection. Once finished, they should present to the group. Once the group has accepted the objective, the groups should proceed in developing each activity utilizing the Institutional Improvement Plan template provided.

Institutional Improvement Plan (IIP) Facilitation Tips

Integrated: Each performance improvement objective should have a clear link to the organizational capacity domain prioritized by the group, but it should also be closely aligned with one of CS:MAP's overall objectives. Capacity strengthening under CS:MAP is intended to develop stronger organizational systems, but it must not occur in isolation. For each objective, the organization must articulate how improved performance in a given area will also advance CS:MAP objectives.

Realistic: The grantee needs to think strategically about committing to the activities in the IIP for which they are responsible, as the IIP adds extra responsibilities to the team beyond normal project work plans. In some cases, CS:MAP support depends on the progress the grantee makes on its activities in the IIP. For instance, the organization's activities for a certain objective could include preliminary steps such as purchasing software or assessing a current operations manual on which CS:MAP's support activity depends.

Specific: The activities within the IIP should be as specific as possible, with clear explanations of what steps are required to complete the activity. Each activity should also be tasked to individuals.

Time bound: The IIP is inherently time bound as it is linked to a 12 month period. In addition, each activity should also have a specific deadline that's set based on real commitments.

Balanced: The IIP should be as inclusive and robust as the organization wants to make it. That said, the facilitator needs to emphasize that CS:MAP cannot respond to all of the needs of the grantee. Therefore, the grantee needs to commit its own resources and think strategically about other pools of resources (human, financial, etc.) beyond CS:MAP that may assist it to realize its objectives.

Exercise Tasks

1. In your group, discuss what the impact to the organization would be if it were to successfully improve performance in relation to the chosen priority capacity domain. How would the organization be different as a result? With this in mind, draft an objective that captures those effects on the organization. How does this objective also advance the overall objectives of CS:MAP? What method of verification will you use in order to assess the objective?

2. Once your group has drafted an objective statement, share it in plenary. Discuss as a group until there is consensus around the objective statement.

3. Utilizing the Institutional Improvement Plan template provided, develop a set of activities that will enable you to achieve the performance goal. For each activity, name the resources required, the source of the resources, the lead person, the contact person and the timeline for completion. Be as realistic, specific, time bound and balanced as possible.

4. When your group has finished filling in the IIP template, share it once again in plenary.

Exercise Wrap Up

As the groups present their performance improvement objectives and draft IIPs in plenary, ensure that you as the facilitator challenge them to develop outputs that meet the desired standard.

Remind the groups that the IIP is only a draft at this stage. The organization must review it internally to validate the plan and CS:MAP must review as well to ensure that it is in a position to provide the indicated resources.

Agree on a time after the assessment when both sides will meet again to finalize and commit to the IIP.

Annex 9: Objective Setting Handout

All objective statements need to clearly convey what the project or program is trying to achieve. Objective statements express progress project designers hope to achieve and are written in present tense. Objective statements should be measurable and objectively verifiable, meaningful and realistic.

When Conceptualizing Objective Statements:

- <u>Conduct a well-grounded and realistic problem analysis</u>. If a problem analysis is conducted properly and grounded in information learned through needs assessments, project designers can understand the causes of specific problems and identify the most appropriate ways to address them.
- <u>Precisely identify what will change</u>: Who or what will change?
- <u>Be clear and specific about the type of change sought</u>: What specifically is expected to change as a result of the activities: a situation or condition, a behavior, knowledge or attitude? Is this expected change absolute or relative?
- <u>Ensure that objective statements are in line with CS:MAP's strategic interests</u>: There are many changes that could benefit participants. For CS:MAP to have an impact beyond the organizational level, improvement objectives should be aligned with CS:MAP's overall objectives.
- <u>Ensure that achieving the results described is feasible and within the required timeline</u>: Is the result described a result that the project can be reasonably expected to bring about or contribute to? Can the objectives be achieved by the end of the project? If not, revise the statements to truly reflect results that can be measured and achieved within the project's timeframe.

When Writing Objective Statements:

- <u>Project participants, (individuals, the organization) or targets for change (finance unit, the Board) should be the grammatical subject of objective statements</u>, and objective statements should describe the change participants hope to bring about as a result of the program or project. This ensures that objective statements are focused on changes that participants hope to achieve as a result of the program or project.
- <u>Use strong action verbs</u>. Does the verb clearly describe what will take place in the activity? Will monitors know what kind of activity they are looking for and therefore whether or not the project is being implemented as planned?
- <u>Make each objective statement unidimensional</u>. Is the statement capturing only one result? Does the result statement contain only one verb and a manageable number of subjects and objects? Measuring more than one change in one objective or result statement is complicated.

Annex 10: Institutional Improvement Plan Template

Institutional Improvement Plan (IIP)

(Insert name of organization)

(Insert date when prepared)

Background & Summary

A participatory assessment of [organization name] was facilitated by [facilitator name] from [ISO name] from [date] to [date]. As part of the process, the organization was asked to select the organizational development domains that they believe are the most urgent priorities for improvement. The areas chosen are not necessarily those areas with the lowest scores. From those selected priority organizational development categories, the organization crafted specific objectives for improvement aligned with their project objectives. The objectives to which the grantee assigned the highest priority are the following:

1.   [Insert First Priority Objective]

[Give a brief description of why this priority objective was chosen, which project objective it is aligned with and how it advances that project objective.]

2.   [Insert Second Priority Objective]

[Give a brief description of why this priority objective was chosen, which project objective it is aligned with and how it advances that project objective.]

3.   [Insert Third Priority Objective]

[Give a brief description of why this priority objective was chosen, which project objective it is aligned with and how it advances that project objective.]

4.   [Insert Fourth Priority Objective]

[Give a brief description of why this priority objective was chosen, which project objective it is aligned with and how it advances that project objective.]

Planned Improvement Activities

[Complete the table below for each Improvement Objective. Fill in all rows and complete all columns in as far as possible. It is particularly important to show under "Resources (internal)" the human, financial and technical resources that the organization can draw upon to complete the specific activity. Under "Resources (external)", the organization should highlight the specific type of assistance requested from CS:MAP and that which the grantee will obtain from other external sources to complete the specific activity.]

Objective 1: [Should be as detailed, realistic and achievable as possible]

Method of Verification:

Organizational Development Domain: [Include the most relevant category linked to the Objective]

Organizational Development Subsection: [Include the most relevant subcategory (or subcategories) linked to the Objective]

Activity	Required Resources	Source	Lead Person	Point of Contact	Timeline
1.1					
1.2					
1.3					
1.4					

Objective 2: [Should be as detailed, realistic and achievable as possible]

Method of Verification:

Organizational Development Domain: [Include the most relevant category linked to the Objective]

Organizational Development Subsection: [Include the most relevant subcategory (or subcategories) linked to the Objective]

Activity	Required Resources	Source	Lead Person	Point of Contact	Timeline
2.1					
2.2					
2.3					
2.4					

Objective 3: [Should be as detailed, realistic and achievable as possible]					
Method of Verification:					
Organizational Development Domain: [Include the most relevant category linked to the Objective]					
Organizational Development Subsection: [Include the most relevant subcategory (or subcategories) linked to the Objective]					
Activity	*Required Resources*	*Source*	*Lead Person*	*Point of Contact*	*Timeline*
3.1					
3.2					
3.3					
3.4					

Objective 4: [Should be as detailed, realistic and achievable as possible]					
Method of Verification:					
Organizational Development Domain: [Include the most relevant category linked to the Objective]					
Organizational Development Subsection: [Include the most relevant subcategory (or subcategories) linked to the Objective]					
Activity	*Required Resources*	*Source*	*Lead Person*	*Point of Contact*	*Timeline*
4.1					
4.2					
4.3					
4.4					

Annex 11: OCA Evaluation Template

Civil Society and Mutual Accountability Project (CS:MAP)

Organizational Capacity Assessment
Evaluation

We would appreciate you completing this evaluation form. Please be frank and forthcoming with your observations and suggestions. Kindly do **not** put your name on this form.

Please circle your answer.	Low - - - - - - High	N/A
1. Extent to which the **content** of this activity matched the announced objectives	1 2 3 4 5	X
2. Extent to which you have **acquired information** that is new to you	1 2 3 4 5	X
3. **Relevance** of this activity to your **current work** or functions	1 2 3 4 5	X
4. **Relevance** of the activity to **CS:MAP's** work	1 2 3 4 5	X
5. **Relevance** of the activity to **Nepal's Civil Society** needs	1 2 3 4 5	X
6. **Focus** of this activity on what you specifically **needed to learn**	1 2 3 4 5	X
7. **Overall usefulness** of this activity	1 2 3 4 5	X

8. Please *comment* on the quality of the **facilitation** provided.

9. If there is a topic that would like **more** information on or additional support for please explain below.

10. If there is a topic on which you would have preferred spending **less** time, please explain below.

11. Please add any further comments or recommendations on any aspect of the workshop.

Annex 12: OCA Final Report Template

Organizational Capacity Assessment Final Report

Introduction
[Summarize the OCA process, key findings, and performance objectives]

Organization Overview
[Brief description of organization, its characteristics, and history]

Organizational Capacity Assessment Process
[Describe in some detail the process followed for the OCA, dates and locations, priority capacity domains, performance objectives]

Organizational Capacity Assessment Findings

[Provide a graph with scoring by domain and subsection]

[For each assessment domain, highlight the key strengths and areas for improvement. For all areas mentioned, include an analysis of the underlying causes]

Governance (Score:)

Administration (Score:)

Human Resource Management (Score:)

Financial Management (Score:)

Organizational Management (Score:)

Program Management (Score:)

External Relations (Score:)

Draft Institutional Improvement Plan
[Summarize the draft IIP and provide a justification for the performance objectives, their link to CS:MAP overall objectives and the identified activities]

Annexes

A. Organizational Capacity Assessment Participants

SN	Name	Position	Sex	Interview or Workshop

B. Organizational Capacity Assessment Calculation Sheet

C. Organizational Capacity Assessment MS Excel Calculation Sheet

D. Draft Institutional Improvement Plan

E. Organizational Capacity Assessment Workshop Evaluation Results

Appendix A: MS Excel OCA Calculation Sheet

The MS Excel OCA Calculation Sheet is designed to allow OCA facilitators to input capacity self-assessment scores and priority scores and have powerful graphs created automatically. These graphs are especially valuable during validation of the OCA assessment and to aid in selecting those subsections that will become the basis for the organization's IIP. The MS Excel OCA Calculation Sheet is included here as an appendix to the OCA tool itself.