









# Organizational Capacity Assessment Tool: Participant's Copy

For Organizations Funded by USAID

New Partners Technical Assistance Initiative (NuPITA) Project

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#### **Organizational Capacity Assessment Tool**

#### Goal:

The goal of this tool is to assist organizations in assessing the critical elements for effective organizational management, and identifying those areas that need strengthening or further development.

#### **Purpose:**

The OCA tool was designed to enable organizations to define a capacity-building improvement plan, based on self-assessed need. This Organizational Capacity Assessment (OCA) was initially designed to measure overall capacity of organizations funded by President's Emergency Plan for AIDS Relief (PEPFAR) under the New Partners Initiative (NPI). This OCA tool provides organizations with a set of criteria to assess their current management capacity to implement quality health programs, to identify key areas that need strengthening. Although many capacity assessments exist, the structure and process of this tool distinguishes it from others. Multi-level and multi-department involvement fosters team building and organizational learning. Inclusion of management, compliance, and program components ensure 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.

The OCA tool assesses technical capacity in seven domains, and each domain has a number of sub-areas.

#### **OCA Domains**

- I. Governance
- 2. Administration
- 3. Human Resources
- 4. Financial Management
- 5. Organizational Management
- 6. Program Management
- 7. Project Performance Management

#### **Using This Tool**

This Organizational Capacity Assessment tool is designed to enable organizational learning, foster team sharing, and encourage reflective self-assessment within organizations.

Recognizing that organizational development is a process, the use of the OCA tool results in concrete action plans to provide organizations with a clear organizational development road map. The OCA can be repeated on an annual basis to monitor the effectiveness of previous actions, evaluate progress in capacity improvement, and identify new areas in need of strengthening.

The OCA is an interactive self-assessment process that should bring together staff from all departments at implementing organizations, both at headquarters and in the field, for the two- to three-day assessment. Not intended to be a scientific method, the value of the OCA is in its collaborative, self-assessment process. The framework offers organizations a chance to reflect on their current status against recognized best practices. Lively discussions are also an opportunity for management, administration, and program staff to learn how each functions, strengthening the team and reinforcing the inter-relatedness of the seven OCA components.

Each page of this tool examines one area. A range of examples of services available is provided along a continuum, from 1-4.

The methodology is a guided self-assessment that encourages active participation. The facilitator and participants meet and discuss each area to determine where the organization sits along the continuum of implementation. Facilitators ask open-ended, probing questions to encourage group discussion, and take notes on participant responses. These notes are later used for the action planning.

Sample questions which might help the facilitator to probe further into the content areas are presented on each page.

The scores that are arrived at are designed to set priorities for the actions and are not used to judge performance. Facilitators use the information from the scoring and rationale sheets to define the issues and actions. The organization reviews or adjusts the problem statement and builds on the suggested actions to define action steps, responsibilities, timeframe, and possible technical assistance needs.

The ability to identify areas to be addressed will strengthen the organization and in subsequent years, enable it to view improvement and note where progress is still needed.

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#### **Governance**

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

#### Vision/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, anonymous staff and board questionnaires (see Facilitator's Guide)

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

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

# **Board Composition and Responsibilities**

**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 Resp	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 no process for electing officers  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 no process for electing officers  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 appropriate separation of roles from the executive management team  Has some understanding of its functions as defined in the TOR, but they are inconsistently carried out  Is rarely or not at all involved in strategic planning/policy formulation	<ul> <li>The board</li> <li>Is drawn from a broad spectrum; all members have relevant experience</li> <li>Has term limits that are defined and reasonable</li> <li>Informally elects officers</li> <li>Has well-planned, documented meetings held at regular intervals with good attendance</li> <li>Has clear TOR reflecting appropriate separation of roles from the executive management team</li> <li>Has a good understanding of its functions as defined in the TOR and mostly carries them out</li> <li>Is involved in strategic planning/policy formulation, but participation is not always consistent</li> </ul>	<ul> <li>The board</li> <li>Is drawn from a broad spectrum; all members have relevant experience</li> <li>Has term limits that are defined and reasonable</li> <li>Has officers elected/appointed according to board procedures</li> <li>Has regular, well-planned, documented meetings with good attendance</li> <li>Has clear TOR and a good understanding of its functions, all of which are consistently carried out with appropriate separation from the executive management team</li> <li>Displays willingness and a proven track record to learn about the organization, to participate in strategic planning/policy formulation and to address organizational issues</li> </ul>

# Legal Status

**Subsection Objective:** To assess the organization's legal standing—and therefore sustainability—by checking legal registration and compliance with local tax and labor laws.

Resources: registration, where possible and feasible, local tax laws, local labor laws

Legal Status ●			
I	2	3	4
The organization is	The organization is	The organization is	The organization is
<ul> <li>Not legally registered, registration has expired, or the organization does not know its legal status and local labor laws</li> <li>Not aware of its tax status and/or is not paying taxes</li> <li>Not aware of statutory audit and reporting requirements</li> </ul>	<ul> <li>Not currently a legally recognized entity in the country in which it operates but has applied for legal status</li> <li>Aware of its tax status and local labor laws but is not fully compliant</li> <li>Aware of statutory audit and reporting requirements but is not fully compliant</li> </ul>	<ul> <li>Legally registered and aware of its tax status</li> <li>Not always compliant with tax obligations and/or labor laws</li> <li>Not always compliant with statutory audit and reporting requirements</li> </ul>	<ul> <li>Legally registered and aware of its tax status</li> <li>Fully complies with tax obligations and labor laws</li> <li>Fully complies with statutory audit and reporting requirements</li> </ul>

# **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 ●			
I	2	3	4
The organization  Is highly dependent on the chief executive officer (CEO)/executive director (ED)  Would cease to exist or function without the CEO/ED  Has no plan for how it would continue if the CEO/ED left	The organization  Is dependent on the CEO/ED  Would continue to exist without the CEO/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 CEO/ED leaves	The organization  Has limited dependence on CEO/ED; s/he does not have sole control of, for example, finances and planning  Would continue in a similar way without the CEO/ED, but fundraising and/or program quality would suffer significantly  Has a documented plan for how it would continue should the CEO/ED leave, but no member of management could take on the CEO/ED role	The organization  Is reliant but not dependent on the CEO/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 CEO/ED role

## **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 ●			
I	2	3	4
The organization has  • No documented operational policies and procedures	<ul> <li>The organization has</li> <li>Documented some operational policies and procedures, but they are incomplete or not compliant with national and donor regulations</li> <li>Policies and procedures that are not consistently adhered to</li> <li>Not oriented or trained staff in the policies and procedures</li> </ul>	<ul> <li>The organization has</li> <li>Documented most or all operational policies and procedures and they are compliant with national and donor regulations</li> <li>Policies and procedures that are known but not consistently adhered to</li> <li>Oriented or trained staff in the policies and procedures</li> <li>No process for regularly reviewing and updating operational policies and procedures</li> </ul>	<ul> <li>The organization has</li> <li>Complete and appropriate operational policies and procedures</li> <li>Policies and procedures that are known and understood by staff</li> <li>Policies and procedures that are consistently adhered to, reviewed and updated</li> </ul>

#### **Travel Policies and Procedures**

**Subsection Objective:** To assess the availability of and adherence to travel policies and procedures, especially compliance with donor rules and regulations.

Resources: travel manual, staff questionnaires, related payment vouchers

Travel Policies and Procedures ★			
I	2	3	4
<ul> <li>The organization has</li> <li>No documented travel procedures (i.e., per diem levels, forms, approval procedures)</li> </ul>	<ul> <li>The organization has</li> <li>Documented some travel policies and procedures, but they are incomplete or noncompliant with donor requirements</li> <li>Policies and procedures that are not well-known or understood by staff and not consistently adhered to</li> </ul>	<ul> <li>The organization has</li> <li>Documented most or all travel policies and procedures, and they comply with donor requirements</li> <li>Policies and procedures that are generally known and understood by staff but not consistently adhered to</li> </ul>	<ul> <li>The organization has</li> <li>Complete and appropriate travel policies and procedures that comply with donor requirements</li> <li>Policies and procedures that are known and understood by staff</li> <li>Policies and procedures that are consistently adhered to, reviewed and updated</li> </ul>

## **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 ★			
2	3	4	
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  A documented procurement plan	The organization has  Complete and appropriate procurement policies and procedures that incorporate donor-specific 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 documented procurement	
		plan that is annually revised/updated	
	<ul> <li>Documented some procurement policies and procedures, but they are incomplete or inappropriate</li> <li>Policies and procedures that are not well-known or understood by staff and inconsistently adhered to</li> <li>No documented procurement plan, but is aware of</li> </ul>	<ul> <li>Documented some procurement policies and procedures, but they are incomplete or inappropriate</li> <li>Policies and procedures that are not well-known or understood by staff and inconsistently adhered to</li> <li>No documented some procurement plan, but is aware of</li> <li>Documented most or all procurement policies and procedures, and they are appropriate</li> <li>Policies and procedures that are generally known and understood by staff but inconsistently adhered to</li> <li>A documented most or all procurement policies and procedures, and they are appropriate</li> <li>Policies and procedures that are generally known and understood by staff but inconsistently adhered to</li> <li>A documented procurement plan</li> </ul>	

## 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 ★			
I	2	3	4
<ul> <li>The organization has</li> <li>No documented fixed-asset procedures (i.e., inventory of assets and systems for stock control)</li> <li>No fixed-asset register</li> </ul>	<ul> <li>The organization has</li> <li>Documented some fixed-asset policies and procedures, but they are incomplete or inappropriate</li> <li>Policies and procedures that are not well-known or understood by staff and not consistently adhered to</li> <li>A fixed-asset register that is not complete</li> </ul>	<ul> <li>The organization has</li> <li>Documented most or all fixed-asset policies and procedures, and they are appropriate</li> <li>Policies and procedures that are known and understood by staff but inconsistently adhered to</li> <li>A fixed-asset register that is complete but not regularly updated</li> </ul>	<ul> <li>The organization has</li> <li>Complete and appropriate fixed-asset policies and procedures that incorporate donor policies as required</li> <li>Policies and procedures that are known and understood by staff</li> <li>Policies and procedures that are consistently adhered to, reviewed and updated</li> <li>A fixed-asset register that is regularly updated and confirmed through a physical inventory at least every two years</li> </ul>

# **Information Systems**

**Subsection Objective:** To assess the functionality of the organization's information systems and its documentation of information system policies and procedures.

Resources: information system policies and procedures, staff interviews

Information Systems ●			
I	2	3	4
The organization has	The organization has	The organization has	The organization has
<ul> <li>No documented information system policies and procedures</li> <li>An insufficient information system to manage operations and/or programs</li> <li>No one designated to manage the information system</li> </ul>	<ul> <li>Documented some information system policies and procedures, but they are incomplete or inappropriate</li> <li>An information system that supports operations and programs at basic levels of functionality</li> <li>No one designated to manage the information system</li> </ul>	<ul> <li>Documented most or all information system policies and procedures</li> <li>An information system that adequately supports operations and programs at a good level of functionality without major inputs</li> <li>A staff member (or outside provider) designated to manage the information system</li> </ul>	<ul> <li>Complete and appropriate information system policies and procedures</li> <li>An information system that effectively and efficiently supports operations and programs at a high level of functionality and maintenance</li> <li>A staff member (or outside provider) designated to manage the information system</li> </ul>

# **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 descriptions ●			
I	2	3	4
The organization has  No JDs for staff, volunteers or interns	<ul> <li>The organization has</li> <li>JDs for each staff member, but not all key sections are covered</li> <li>Staff, volunteers and interns who are not aware of or do not have copies of their JDs</li> </ul>	<ul> <li>The organization has</li> <li>Clear JDs for each staff member that include all sections</li> <li>Staff, volunteers and interns with copies or access to copies of their JDs</li> <li>JDs that are not respected/adhered to, reviewed or regularly updated</li> </ul>	<ul> <li>The organization has</li> <li>JDs for each staff member that cover all sections</li> <li>Staff, volunteers and interns with copies of or access to their JDs</li> <li>JDs that are respected/adhered to, reviewed and updated</li> </ul>

#### 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 ●			
I	2	3	4
<ul> <li>The organization has</li> <li>Neither guidelines nor a consistent approach to recruiting staff</li> <li>No system for verifying employment history for staff or consultants</li> </ul>	<ul> <li>The organization has</li> <li>Basic guidelines for recruitment, but they are not consistently applied or reviewed</li> <li>No process for verifying staff or consultants' employment history</li> <li>Not oriented or trained HR staff in applying the guidelines</li> <li>Not provided opportunities for career advancement</li> </ul>	<ul> <li>The organization has</li> <li>Clear, transparent recruitment guidelines, but they are neither consistently applied nor regularly reviewed</li> <li>Has a process for verifying employment history but does not file or update the information</li> <li>Not consistently oriented or trained HR staff in applying the guidelines</li> <li>Not provided opportunities for career advancement</li> </ul>	<ul> <li>The organization has</li> <li>Clear, transparent recruitment guidelines that are consistently applied and reviewed</li> <li>A process for verifying, updating and filing employment history</li> <li>Consistently oriented and regularly trained/updated HR staff in applying the guidelines</li> <li>Provided opportunities for career advancement</li> </ul>

# **Staffing Levels**

**Subsection Objective:** To assess the organization's management of staffing—positions available, positions filled, vacancies—for the program and for the organization as a whole and the means for ensuring staffing levels are and remain adequate.

Resources: staffing plan and/or organizational diagram, vacancy and turnover data, attendance information, retention policy

Staffing Levels ●			
I	2	3	4
<ul> <li>The organization has</li> <li>No formal staffing plan</li> <li>Positions/vacancies that are not documented</li> <li>Many key management and technical positions open or filled by staff without the right qualifications or skills</li> <li>No system to ensure that positions are filled quickly</li> <li>High turnover and severe problems with staff attendance affecting program implementation</li> </ul>	The organization has <ul> <li>A formal staffing plan</li> <li>Documented positions and vacancy data</li> </ul> <li>Some key positions filled with qualified and skilled staff</li> <li>No system to ensure that positions are filled quickly</li> <li>High turnover rate or staff attendance problems affecting program implementation</li> <li>Not conducted or documented exit interviews</li>	<ul> <li>The organization has</li> <li>A formal staffing plan</li> <li>Documented and available vacancy data</li> <li>Qualified and skilled staff in all key positions (technical, administrative, finance)</li> <li>A system to ensure that positions are filled quickly</li> <li>Moderate turnover or minor attendance problems</li> <li>Conducted and documented exit interviews</li> </ul>	The organization has <ul> <li>A formal staffing plan</li> <li>Documented positions and vacancy data</li> <li>Qualified and skilled staff in all positions</li> <li>Active recruitment to fill gaps</li> <li>A system for rapidly filling new positions where staff turnover is high</li> <li>Minimal turnover and no attendance problems</li> <li>Conducted and documented exit interviews and used the</li> </ul>
No retention procedures			information

## **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 manual, staff time records, work schedule policies, 2–3 personnel files, payment vouchers

Personnel Policies ★			
I	2	3	4
The organization has  No personnel policy manual	The organization has  Basic personnel policies that include either a drug-free workplace policy, nondiscrimination policies (for	<ul> <li>The organization has</li> <li>Comprehensive and donor compliant personnel policies including a drug-free workplace policy, discrimination policies</li> </ul>	<ul> <li>The organization has</li> <li>Comprehensive and donor compliant personnel policies</li> <li>Policies that are adhered to and correspond to HR practices</li> </ul>
	<ul> <li>US organizations), or timekeeping policy</li> <li>Inconsistently applied the polices</li> <li>Not disseminated the policies to all staff and/or required signature statements</li> <li>No process for updating personnel policies, manuals or staff time records</li> </ul>	<ul> <li>(for US organizations), and timekeeping policy, at a minimum</li> <li>Polices that are adhered to and aligned with HR practices</li> <li>Not disseminated the policies to all staff or required signature statements</li> <li>Not updated personnel policies and manuals or time records</li> </ul>	<ul> <li>Disseminated policies to all staff and required and filed signature statements</li> <li>Regularly reviewed and updated policies, manuals and staff time records</li> </ul>

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

# **Staff 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

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

## **Volunteers and Interns**

**Subsection Objective:** To review the organization's systems for managing field and office volunteers and interns.

**Resources:** volunteer/intern policy, samples of completed performance appraisals

Volunteers/Interns ●				
I	2	3	4	
<ul> <li>The organization has</li> <li>No policy for selecting or managing volunteers/interns</li> <li>No training program for volunteers or interns</li> <li>No job descriptions</li> <li>No performance standards or feedback process</li> <li>No supervisory guidance to support volunteers/interns</li> </ul>	<ul> <li>The organization has</li> <li>A basic volunteer/intern policy that includes guidance on selection, supervision and support</li> <li>Job descriptions</li> <li>Orientation and/or training for volunteers that is not consistent</li> <li>No performance standards or regular review of performance</li> <li>Inconsistent or irregular supervision</li> <li>High volunteer turnover that affects program implementation</li> </ul>	<ul> <li>The organization has</li> <li>A comprehensive volunteer/intern policy that includes guidance on selection, supervision and support</li> <li>Job descriptions</li> <li>Volunteers/interns appropriately trained for their tasks</li> <li>Performance standards but no performance review</li> <li>Provided regular, consistent supervision and feedback</li> <li>Moderate turnover</li> </ul>	<ul> <li>The organization has</li> <li>A comprehensive volunteer/intern policy that includes guidance on selection, supervision and support</li> <li>Volunteers/interns who are appropriately and consistently trained for their tasks</li> <li>Performance standards and regular performance reviews</li> <li>Provided regular, consistent supervision and feedback</li> <li>Minimal turnover</li> </ul>	

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

#### **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

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

## **Internal Controls**

**Subsection Objective:** To assess if internal controls adequately 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

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

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

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

# 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 statements, financial reports to donors, donor grant agreements, management reports, senior management meeting minutes, board meeting minutes

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

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

## **Cost Share**

**Subsection Objective:** To assess whether the organization has systems to track, report, and document cost share in compliance with donor regulations.

**Resources:** approved grant agreements/budgets, cost-sharing plan and procedures, cost-share vouchers

Cost Share ★			
I	2	3	4
The organization has  No documented cost-sharing procedures  No cost-share plan	The organization has  Documented some cost-share procedures  Procedures that are incomplete and/or inappropriate  An inconsistent accounting system for entering and reporting on cost share  No cost-share plan	The organization has  Documented most or all cost- share procedures, and they are appropriate  Procedures that are not known to staff  Procedures that are inconsistently adhered to An inconsistent accounting	The organization has  Complete and appropriately documented cost-share procedures  Procedures known and understood by staff  Procedures consistently adhered to, reviewed and updated  A consistent accounting system
		system for entering and reporting on cost share  • A cost-share plan	for entering and reporting on cost share  • A cost-share plan

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

# **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 ●			
I	2	3	4
The organization has  No strategic plan	<ul><li>The organization has</li><li>A basic strategic plan that does</li></ul>	The organization has  • A comprehensive, written	The organization has  • A comprehensive, written
	not reflect its vision, mission and values	strategic plan that reflects its mission, vision and values	strategic plan that reflects its mission, vision and values
	<ul> <li>A plan that is not based on an analysis of strengths and weaknesses, the external environment and clients' needs</li> </ul>	<ul> <li>Based the plan on a review of strengths and weaknesses, the external environment and clients' needs</li> </ul>	<ul> <li>Based the plan on a review of strengths and weaknesses, the external environment and clients' needs</li> </ul>
	<ul> <li>A plan that does not include priorities, measurable objectives</li> </ul>	<ul> <li>Included priorities, measurable objectives and clear strategies</li> </ul>	<ul> <li>Included priorities and measurable objectives</li> </ul>
	<ul><li>or clear strategies</li><li>Not used the plan for management decisions or</li></ul>	<ul> <li>Not used the plan for management decisions or operational planning</li> </ul>	<ul> <li>Referred to the plan for management decisions and operational planning</li> </ul>
	operational planning	No process for regular reviews	Regularly reviewed the plan
	<ul> <li>No process for regularly reviewing the plan</li> </ul>	<ul> <li>Not defined resource needs or does not have a corresponding</li> </ul>	<ul> <li>Clear resource needs and a corresponding budget</li> </ul>
	<ul> <li>Not defined its resource needs</li> </ul>	budget	

## **Resource Mobilization**

**Subsection Objective:** To assess the organization's ability to identify and capitalize on new business opportunities through grants and partnerships.

Resources: business development plan, resource development plan, funding strategy

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

# **Operational Plan Development**

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

**Resources:** operational plan

Operational Plan ●			
I	2	3	4
The organization has  No operational plan	<ul> <li>The organization has</li> <li>An annual operational plan</li> <li>Included goals, measurable objectives and strategies, but no timelines, responsibilities or indicators</li> <li>Not linked the operational plan to project or program workplans and budgets</li> <li>Not developed the operational plan with staff participation</li> <li>Not set dates for quarterly reviews</li> <li>Not submitted the plan on time to HQ or donors (if required)</li> </ul>	<ul> <li>The organization has</li> <li>An annual operational plan</li> <li>Included goals, measurable objectives, strategies, timelines, responsibilities and indicators</li> <li>Linked the plan to project/program workplans and budgets</li> <li>Not developed the operational plan with staff participation</li> <li>No dates for quarterly reviews</li> <li>Not submitted the plan on time to HQ or donors (if required)</li> </ul>	<ul> <li>The organization has</li> <li>An annual operational plan</li> <li>Included goals, measurable objectives, strategies, timelines, responsibilities and indicators</li> <li>Linked the plan to program/project workplans and budget</li> <li>Developed the plan with staff participation</li> <li>Set dates for quarterly reviews</li> <li>Submitted the plan on time to HQ or donors (if required)</li> </ul>

# **Communication Strategy**

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

**Resources:** communication strategy, sample USAID-funded and non-USAID-funded publications

l	2	3	4
<ul> <li>No strategy for identifying audiences, channels, materials, and dissemination for promotion of technical/best practice innovation and overall achievements</li> <li>No one assigned responsibility for developing/overseeing communication strategy and products (written, oral and/or online)</li> <li>No process/tools for testing the materials/messages</li> <li>No branding/marking policies or procedures for documents or equipment</li> </ul>	<ul> <li>An incomplete strategy, lacking objectives, responsibility, timelines and dissemination mechanisms</li> <li>Assigned responsibility for communication strategy development</li> <li>No process/tools for testing materials/messages</li> <li>Developed branding/marking policies for projects as required by USAID but does not have an organizational branding/marking policy</li> </ul>	<ul> <li>A complete communication strategy,</li> <li>Tasked staff member(s) with communication strategy management including documentation oversight</li> <li>A process for testing materials/messages and revising based on test results</li> <li>Developed its own branding policy (including appropriate USAID branding/marking requirements) and oriented staff, but it is inconsistently adhered to</li> <li>Created templates for documents and a style guide</li> </ul>	<ul> <li>The organization has</li> <li>A comprehensive communication strategy</li> <li>Tasked staff member(s) with communication strategy management, including documentation development and oversight</li> <li>A process for testing and revising materials/messages based on test results</li> <li>Developed its own branding policy (including appropriate USAID branding/marking requirements), oriented staff, and instituted a system to monitor compliance</li> <li>Created templates and a style guide and trained staff on their use</li> </ul>

# **Change Management**

**Subsection Objective:** To assess the organization's sustainability and relevance by reviewing its systems and processes for responding to internal or external emerging situations, reviewing programs and analyzing needs.

Resources: policy review plan or timeline

Change Management ●			
I	2	3	4
<ul> <li>The organization has</li> <li>No process for responding to internal changes (staffing, leadership and budget issues)</li> <li>No process for planning for or responding to external changes (government policies or donor priorities/funding)</li> </ul>	<ul> <li>The organization has</li> <li>Basic processes for reviewing internal changes, such as policy reviews or the funding environment</li> <li>No process for planning for or responding to external changes, such as regular reviews of the operational plan and budget monitoring</li> <li>Inconsistently involved staff in reviewing the effectiveness of new/revised management systems and policies</li> <li>Significant delays or problems encountered in response to change</li> </ul>	<ul> <li>Established processes for reviewing internal change</li> <li>Processes for planning for and responding to external change</li> <li>Consistently involved staff in reviewing the effectiveness of new/revised management systems and policies, processes, programs</li> <li>Few delays or major problems encountered in response to change</li> </ul>	<ul> <li>Established effective and consistent routines for planning and reviewing and responding to internal and external change</li> <li>Consistently involved staff in reviewing the effectiveness of new/revised management systems and policies</li> <li>Systems for monitoring whether changes are implemented and lead to improvements</li> <li>Ways to gauge staff comfort with the way change is introduced and addressed</li> </ul>

#### Knowledge Management

**Subsection Objective:** To assess the organization's ability to link with other organizations (government, national, international, community, technical, academic) and its system for sharing knowledge, experiences, technical expertise and best practices with staff.

**Resources:** listing of association memberships and linkages with external organizations, staff reports on meetings attended, organizational newsletters

Knowledge Management ●			
I	2	3	4
<ul> <li>The organization has</li> <li>No technical linkages with other organizations to share best practices or program experiences</li> <li>No process for ensuring staff are continuously updated on best practices</li> </ul>	<ul> <li>The organization has</li> <li>Basic technical linkages with other organizations to share best practices or program experiences</li> <li>Staff who are updated on best practices, but not regularly</li> <li>No process for ensuring learning is applied to the program or shared with stakeholders</li> </ul>	<ul> <li>The organization has</li> <li>Essential and appropriate links with other organizations to share best practices or program experiences</li> <li>A process for routine staff sharing of best practices and lessons learned</li> <li>Not applied new knowledge or best practices to ongoing programs or shared them with stakeholders</li> <li>Has no process for reviewing/integrating new/current knowledge and best practices in annual planning</li> </ul>	<ul> <li>The organization has</li> <li>Active links with appropriate organizations to share best practices or program experiences</li> <li>A process for routinely sharing technical expertise and experiences with staff and stakeholders</li> <li>Applied best practices to its program and shares information with stakeholders and appropriate staff</li> <li>Annual planning that includes reviews and integration of new/current knowledge and best practices</li> </ul>

#### Stakeholder Involvement

**Subsection Objective:** To assess the organization's ability to coordinate programs and to involve stakeholders.

**Resources:** list of key stakeholders, stakeholder report

Stakeholder Involvement ●				
I	2	3	4	
<ul> <li>The organization has</li> <li>No information about key stakeholders and service providers in the same geographic and/or technical areas in which it operates</li> </ul>	<ul> <li>The organization has</li> <li>Some information about stakeholders and service providers in the same geographic and/or technical areas in which it operates</li> <li>Information that is incomplete and out of date</li> </ul>	<ul> <li>The organization has</li> <li>Current information about stakeholders working in the same geographic and technical areas</li> <li>Identified where stakeholders are, what they do, their expectations and how/if they can collaborate</li> <li>No regular meetings with stakeholders</li> </ul>	<ul> <li>The organization has</li> <li>Complete and up-to-date information about all stakeholders working in the same geographic and technical areas and, if appropriate, collaborative agreements with them</li> <li>Regular (at least annually) meetings with stakeholders to review relevant activities and their impact on the organization's area of operations</li> </ul>	

#### **Internal Communication**

**Subsection Objective:** To review the organization's approach to internal communication.

**Resources:** staff questionnaires (Facilitator's Guide)

Internal Communication ●			
I	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	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	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	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
Staff who feel uncomfortable raising issues	<ul> <li>Staff who feel uncomfortable raising issues</li> </ul>	difficult to raise challenging ones	initiating discussions, contributing ideas and raising issues

### **Decision Making**

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

**Resources**: staff questionnaires (Facilitator's Guide)

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

## **Program Management**

**Objective:** To assess the organization's ability to implement comprehensive programs that respond to local needs and priorities by reviewing compliance with donor requirements, management of sub-grants with partners, technical reporting and whether its comprehensive health services meet the needs of specific target populations.

#### **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 USAID A-122 Cost Principles, staff interviews (Facilitator's Guide)

Donor Compliance ★			
I	2	3	4
<ul> <li>The organization</li> <li>Is not familiar with the terms of the cooperative agreement, A-I22 Cost Principles (i.e., reasonable, allocable, and allowable) or Standard Provisions</li> <li>Has not listed and assigned responsibility for all donor requirements</li> </ul>	<ul> <li>The organization</li> <li>Is knowledgeable of the terms of the cooperative agreement, A-122 Cost Principles and Standard Provisions</li> <li>Is aware of donor requirements, has assigned responsibility, but does not have systems in place to ensure compliance</li> </ul>	<ul> <li>The organization</li> <li>Is knowledgeable of the terms of the cooperative agreement, A-122 Cost Principles and Standard Provisions</li> <li>Has systems in place to ensure compliance with donor requirements</li> <li>Does not comply consistently</li> </ul>	<ul> <li>The organization</li> <li>Is knowledgeable of the terms of the cooperative agreement, A-122 Cost Principles, and Standard Provisions</li> <li>Has systems in place to ensure compliance with donor requirements</li> <li>Complies consistently</li> </ul>

#### Sub-grant Management

**Subsection Objective:** To assess the organization's ability to subcontract with other organizations, and monitor technical implementation and financial management of sub-grants.

**Resources:** sub-grants management and monitoring manual or written procedures, partner agreements, staff interviews, USAID approval documentation, technical reports from grantees, supervisory trip reports, financial reports from grantees, financial tracking of grantees

Sub-grant Management ★			
I	2	3	4
<ul> <li>No policies and procedures to guide sub-grant management and support</li> <li>No formal sub-grants with partner organizations</li> </ul>	<ul> <li>The organization has</li> <li>Some documented sub-grant management policies and procedures, but these are incomplete or non-compliant</li> <li>Formal sub-grants with some partners, but they have not been oriented to their responsibilities</li> <li>Sub-grantees who do not submit regular financial and technical reports in accordance with their agreements</li> <li>Basic policies and guidance for supervising and supporting subgrantees</li> <li>No regularly scheduled supervisory visits</li> </ul>	<ul> <li>Most or all documented and compliant sub-grant management policies and procedures</li> <li>Formal sub-grants with all partners; some sub-grantees are oriented to their responsibilities</li> <li>Sub-grantees who do not consistently submit financial and technical reports</li> <li>Policies and guidance for supervising and supporting subgrantees, but not all staff are aware of or utilize the guidance</li> <li>Conducted infrequent supervisory visits</li> </ul>	<ul> <li>The organization has</li> <li>Complete and appropriate subgrant management policies and procedures</li> <li>Formal sub-grants with all partners, and they are oriented to their responsibilities</li> <li>Sub-grantees who submit all required reports in a timely manner</li> <li>Solid policies and guidance for providing regularly scheduled supervision and support</li> <li>Regular supervisory visits to assess inventory and financial records and implementation; feedback is shared with partners and used for follow-up visits.</li> </ul>

# Technical 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, workplan

Technical Reporting ★			
I	2	3	4
The organization  Does not document quantitative or qualitative progress on its workplan 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	The organization  Documents qualitative progress on its workplan, 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	The organization  Documents both qualitative and quantitative workplan 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	The organization  Documents both quantitative and qualitative workplan 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

### Referral

**Subsection Objective:** To assess the organization's systems and processes for directing clients to other providers, ensuring those providers offer quality services and monitoring clients' access to services.

Resources: referral plan, memoranda of understanding with referral sites, referral reports or data

Referral ●			
I	2	3	4
The organization has  Not mapped referral sites  Not established links for referring clients for HIV and AIDS treatment or other health/support services	The organization has  Mapped referral sites  No agreements with government, private or NGO health or social service providers to ensure that clients requiring HIV and AIDS treatment or other health or support services have access to them	The organization has  A clear referral process with government, private or NGO health or social service providers to ensure that clients requiring HIV and AIDS treatment or other health or support services have access to them  A process for following clients and monitoring quality of care  Clients who are not always appropriately referred or who encounter problems at referral sites	The organization has  A clear referral process system and strong linkages with government, private or NGO health or social service providers to ensure that clients requiring HIV and AIDS treatment or other health or support services have access to them  A process for following clients and monitoring quality of care  Clients who are consistently referred to appropriate locations and who do not encounter problems at referral sites

## **Community Involvement**

**Subsection Objective:** To ensure the organization's programs respond to and address community needs by reviewing how they involve community members in planning and decision-making.

Resources: community participation and/ or mobilization plan; if not documented, discuss approach with appropriate staff

Community Involvement ●			
I	2	3	4
<ul> <li>The organization</li> <li>Orients communities on its programs, but does not actively include them</li> <li>Does not involve affected families and communities in planning and decision-making</li> </ul>	<ul> <li>The organization</li> <li>Orients communities on its program and discusses its approach with community leaders</li> <li>Inconsistently involves affected families and communities in planning and decision-making</li> </ul>	<ul> <li>The organization</li> <li>Orients communities and leaders on its program and actively engages them in the activities</li> <li>Involves affected families and communities in planning and decision-making and sometimes integrates their ideas into program design and revision</li> </ul>	<ul> <li>The organization</li> <li>Orients communities and leaders on its program and actively engages them in activities and service provision</li> <li>Involves affected families and communities in planning and decision-making and consistently integrates their views into program design and revision</li> </ul>

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

# **Project Performance Management**

**Objective:** To assess the organization's systems for overseeing field activities, setting standards and monitoring actual performance against them, and setting indicators and monitoring progress toward achieving outcomes.

#### **Field Oversight Activities**

**Subsection Objective:** To assess the organization's systems for overseeing field activities.

Resources: field oversight policies and procedures, trip reports, management meeting minutes

Field Oversight ●			
I	2	3	4
The organization  • Has no formal procedures and processes for overseeing field administrative and programmatic operations	<ul> <li>The organization</li> <li>Has some documented field oversight policies, but they are incomplete</li> <li>Reviews annual workplans and progress reports, but irregularly</li> <li>Monitors compliance with program and donor requirements</li> </ul>	<ul> <li>The organization</li> <li>Has most or all documented oversight policies and procedures</li> <li>Approves annual workplans on a regular basis</li> <li>Monitors compliance with program and donor requirements</li> <li>Reviews and approves field-level HR and finance manuals</li> <li>Reviews quarterly project M&amp;E data and progress reports</li> <li>Provides technical and administrative guidance</li> <li>Makes irregular supervision visits</li> </ul>	<ul> <li>The organization</li> <li>Has documented and comprehensive field oversight policies and procedures</li> <li>Approves workplans and provides feedback</li> <li>Reviews data and progress reports and provides feedback</li> <li>Monitors compliance with program and donor requirements</li> <li>Reviews and approves field-level HR and finance manuals</li> <li>Provides technical and administrative guidance</li> <li>Makes at least semi-annual supervisory visits, and results are discussed with management and technical staff</li> </ul>

### Standards

**Subsection Objective:** To assess the organization's application of recognized standards in service delivery.

**Resources:** standards/guidelines used, monitoring reports

Standards ●				
I	2	3	4	
<ul><li>The organization has</li><li>No standards for service delivery</li></ul>	<ul> <li>The organization has</li> <li>Minimal standards for service delivery</li> <li>Not made staff aware of the standards</li> <li>Not applied the standards appropriately</li> </ul>	<ul> <li>The organization has</li> <li>A good system for using standards for service delivery</li> <li>Made staff aware of the standards</li> <li>Appropriately trained staff to apply and monitor the standards</li> <li>A process for monitoring standards, but it is not applied comprehensively</li> </ul>	<ul> <li>The organization has</li> <li>Solid standards for service delivery</li> <li>Made staff aware of the standards and has trained staff to apply them</li> <li>A process for monitoring adherence to standards that is consistently adhered to</li> <li>A process for improving adherence to standards</li> </ul>	

# **Quality Assurance**

**Subsection Objective:** To assess the organization's ability to identify and address gaps in meeting performance standards.

**Resources:** quality monitoring tools (could be part of M&E tools)

Quality Assurance ●					
I	2	3	4		
<ul> <li>The organization has</li> <li>Unclear performance expectations</li> <li>No process for monitoring the quality of services it provides, either through program evaluations, quality monitoring or supervision</li> </ul>	The organization has  • Performance expectations, but no process to assess performance against standards	<ul> <li>The organization has</li> <li>Performance expectations and a process that assesses performance against standards</li> <li>Taken client satisfaction into consideration</li> <li>Included an analysis of gaps or weaknesses</li> <li>Not developed an improvement plan</li> </ul>	<ul> <li>The organization has</li> <li>Performance expectations and a system that assesses performance against standards</li> <li>Taken client satisfaction into consideration</li> <li>Analyzed gaps or weaknesses to identify root causes</li> <li>Identified a plan to address root causes</li> <li>An improvement plan to address gaps or weaknesses</li> <li>Studied and incorporated the results into the program</li> </ul>		

# 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 ●					
I	2	3	4		
<ul> <li>The organization has</li> <li>Not developed a supervision plan or approach</li> <li>Not clarified supervisory responsibilities</li> <li>Not trained supervisors or provided tools</li> <li>No process for carrying out supervision</li> </ul>	<ul> <li>The organization has</li> <li>A supervision plan but no approach</li> <li>Detailed supervisory responsibilities, but they are not followed</li> <li>Not trained supervisors or provided tools</li> <li>An unclear process for supervision</li> <li>No process for reviewing findings with staff and management</li> </ul>	<ul> <li>The organization has:</li> <li>A clear supervision plan with a supportive approach</li> <li>Detailed supervisory responsibilities that are followed</li> <li>Trained supervisors and provided them with tools</li> <li>Logistical and program barriers to providing regular supervision</li> <li>No process for documenting or discussing findings with staff and management</li> </ul>	<ul> <li>The organization has</li> <li>A detailed supervision plan with a supportive approach</li> <li>Detailed supervisory responsibilities that are followed</li> <li>Trained supervisors and provided them with tools</li> <li>A mechanism for carrying out visits according to the timeline</li> <li>A process for documenting and discussing findings with staff and management</li> <li>A process for following and addressing issues</li> </ul>		

# Monitoring and Evaluation (M&E)

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