



USAID
FROM THE AMERICAN PEOPLE



Technical Capacity Assessment Care and Support Services

Facilitator's Copy

New Partners Technical Initiative Technical Assistance (NuPITA) Project

June 2012

The New Partners Initiative Technical Assistance (NuPITA) project is funded by the United States Agency for International Development (USAID) and implemented by John Snow, Inc. and Initiatives Inc. contract GHS-I-00-07-00002-00.

This document is made possible by the generous support of the American people through USAID. The contents are the responsibility of John Snow, Inc. and do not necessarily reflect the views of USAID or the United States Government.

© June 2012 John Snow, Inc.

NuPITA
John Snow, Inc.
44 Farnsworth Street
Boston, MA 02210-1211
Phone: 1.617.482.9485
www.jsi.com

Technical Capacity Assessment (TCA) for Care and Support Services¹

Goal:

The goal of this tool is to assist care and support programs in assessing the critical elements for effective program implementation, and identifying those elements that need strengthening or further development.

Purpose:

The purpose of this tool is to assess an organization's ability to implement care and support programs in the specific technical areas by looking at personnel, documents and systems in place at the organizational and implementing partner levels. While the discussions will include and may focus on implementation of the NPI project, this is not an explicit objective of this assessment.

The Technical Capacity Assessment (TCA) builds on the strengths of the Organizational Capacity Assessment (OCA) designed to measure overall capacity of organizations funded by The President's Emergency Plan for AIDS Relief (PEPFAR) under the New Partners Initiative (NPI). This TCA tool is designed to provide organizations with a set of criteria to assess their current technical capacity to implement quality care and support programs, to identify key areas that need strengthening, and highlight project aspects that can serve as a model for other programs working on care and support issues.

The TCA tool assesses technical capacity in three domains – Organizational Strategy, Supplies Management, and Management Information Systems. Each domain has a number of areas, for a total of 14 areas for assessment, as follows.

Domain 1: BCC Strategy and Implementation

1. Program Approach
2. Problem/Issue Identification
3. Target Audience and
4. Key Messages
5. Positioning of Messages
6. Media Selection/Channels
7. Products/Outputs
8. BCC Materials Procurement
9. Budget
10. Quality Improvement

Domain 2: Management and Supervision

1. Human Resources Management
2. Planning and Coordination
3. Supportive Supervision
4. Leadership
5. Sustainability

Domain 3: Data Management and Management Information Systems

1. Data Collection
2. Data Quality Assurance and Improvement
3. Data Use for Decision-Making
4. Feedback and Sharing
5. Management Information Systems

¹ The assessment can be conducted at the onset of care and support and support interventions and annually during the lifecycle of the activity

Objective: To determine the soundness of the care and support (C&S) programs delivered by the organization.

DOMAIN I: ORGANIZATIONAL STRATEGY					
Area I					
Program Approach	There are limited or no C&S services being delivered by the organization at the moment.	There are some C&S services being delivered by the organization which are in response to an evidence based determination of need and audience identification.	The organization has a framework for referring clients for C&S services not offered by the program and is able to meet most client needs.	C&S clients are able to receive all necessary services, either through the organization or through linkages with other partners. In addition, the organization has the capacity to scale up its C&S activities.	The organization's approach to C&S can serve as a model for other organization implementing similar activities.
	1	2	3	4	

Probing questions:

1. Are there any C&S services being delivered by the organization at the moment? If yes, which services?
 - o *[Comprehensive care and support services include many aspects of comprehensive HIV & AIDS care: VCT, HIV & AIDS primary care, ability to screen for eligibility for ART (VCT, clinical, lab), adherence support, and management of OIs including TB (home-based or by referral), linkages with health facility /or home-based based care, STI management, PMTCT, supportive counseling, linkages to other needed services (food/nutrition, transportation, etc). Other services that should be available through linkages or at home include; family planning, prevention counseling and referral for CD4 monitoring and ART. Pediatric services should be linked to integrated management of childhood illness like essential primary care including immunizations, growth monitoring, access to supplemental nutrition, education for school going children and skills building for teenage children, etc.]*
2. What was the basis for selecting to provide these services and not any other?
3. Do the C&S services offered represent an appropriate response to evidence based need of a defined audience?
 - o *[Check if they are aware of the national priorities and if they are at hand.]*
4. Is there a framework for referring clients for services not offered by the organization?
5. Does the organization have capacity to scale up?
 - o *[Capacity refers to e.g. resources, technical know-how, etc., while scale up is in terms of geographical coverage and comprehensiveness of services offered.]*

Area I Score: _____

Objective: To determine the availability of organizational specific guidelines/standard operating procedures.

DOMAIN I: ORGANIZATIONAL STRATEGY					
Area 2					
Organizational-Specific Guidelines/Standard Operating Procedures (SOPs)¹	There are no project specific guidelines/SOPs in place for C&S service delivery.	There are up-to-date guidelines/SOPs in place which are in line with donor and national guidelines.	There are up-to-date guidelines/SOPs in place in line with donor and national guidelines. The guidelines/SOPs have been interpreted and disseminated to staff, implementers and relevant stakeholders (as appropriate).	There are guidelines/SOPs in place which are up to date and in line with donor and national guidelines. The guidelines/SOPs have been interpreted and disseminated to relevant stakeholders (as appropriate). C&S services are being delivered in a standardized manner across all service delivery points according to documented guidelines/SOPs.	The organization's guidelines /SOPs on C&S can serve as models for other organizations.
	1	2	3	4	

Probing questions:

1. Does the organization have guidelines/SOPs for C&S service delivery?
2. Are the guidelines/SOPs up-to-date and in line with donor-specific and national guidelines?
3. Has the leadership interpreted and disseminated the guidelines/SOPs to project staff, implementers and other relevant stakeholders (as appropriate)?
4. Is there a checklist to guide activity implementers and volunteers in their daily work?
5. Are there measures to ensure consistent adherence to set guidelines/SOPs?
6. Is there a scheduled plan to update the guidelines/SOPs to incorporate new developments?

Area 2 Score: _____

¹ Organizational-specific guidelines/standard operating procedures (SOPs) refer to written procedures of how the organization implements OVC activities. This could be an adaption of national and international guidelines.

Objective: To assess the organization's ability to implement high-quality interventions by adhering to set C&S service standards.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 3					
Utilization of Service Standards¹	The organization has no service standards in place for its C&S activities.	C&S service standards exist, but are not uniformly applied across activities. Not all staff are aware of them.	C&S service standards exist and are applied uniformly across the activities. Staff are aware of these standards and trained to apply them. Standards are monitored but interventions are not improved upon when non-adherence to the standards is observed.	C&S service standards exist and are applied uniformly and regularly across activities. Staff and implementers (including volunteers) are aware of these standards and are trained to apply and monitor them. The standards are consistently and comprehensively adhered to. Standards are monitored and interventions are improved upon when non-adherence to the standards is observed.	The organization's approach to observing set service standards while implementing C&S services can serve as a model for other organizations.
	1	2	3	4	

Probing questions:

1. Does the organization have documented C&S service standards in place?
2. Are the service standards in line with national guidelines and the broader evidence base for service standards?
3. Have staff and implementing partners been oriented on the service standards?
4. Are implementing partners applying and following the service standards?
5. Is there a standards checklist that implementing partners and volunteers can apply in their daily work?
6. Does support supervision include checking for adherence to service standards?
7. If the standards are being followed, do the clients receiving services fare better? What sources of data are used to confirm this?
 - o *[Facilitator to check for source of data, e.g. Client files or other outcome monitoring agreed upon by C&S stakeholders from national plans of action.]*

Area 3 Score: _____

¹ A standard is an agreed upon level or benchmark of quality. It is measurable and, to the greatest degree possible, evidence-based. Standards define the minimum level of support to be provided and help ensure the support is provided consistently and to a minimum level of quality. Dimensions of quality include safety, access, effectiveness, technical performance, efficiency, continuity, compassionate relations, appropriateness, participation and sustainability (Quality Assurance Project, USAID). Project service standards should be documented for reference.

Objective: To assess the process by which the organization selects its C&S beneficiaries (targeting).

DOMAIN I: ORGANIZATIONAL STRATEGY					
Area 4					
Selection of Beneficiaries/ Targeting	There are no organizational guidelines on the selection of beneficiaries.	There are clear guidelines on the selection of beneficiaries which take into account reaching the most vulnerable clients and households. The organization has considered different strategies for selecting beneficiaries ¹ .	There are clear guidelines for beneficiary selection that take into account reaching the most vulnerable clients and households. Different targeting options are considered for different technical aspects of the program. Beneficiary selection is transparent and community-driven. Efforts are made to reach especially vulnerable clients (those under 5 years of age, most materially needy, are in ill health, etc).	Targeting and the selection of beneficiaries make efforts to avoid stigmatizing C & S clients and their families (takes into account a ‘do no harm’ philosophy ²). The organization is successful at reaching the most vulnerable with services.	The organization’s approach to selection of beneficiaries/targeting can serve as a model for other organizations.
	1	2	3	4	

Probing questions:

1. What was the process by which the organization determined the selection of beneficiaries?
2. Are there documented guidelines for selecting beneficiaries included either in the SOPs or separately? Are different options considered in selecting beneficiaries, e.g., a survey based on community criteria for vulnerability, use of poverty indicators, use of local lists of households affected by HIV and AIDS, equity strategy, cluster strategy, vulnerability score, participatory weighting?
3. Is there a C&S selection and verification tool used to identify beneficiaries?
4. Is the community involved in selection of beneficiaries?
5. Has the selection process been transparent?
6. Does the targeting and selection process make efforts to avoid stigmatizing C&S clients and their families, and identify the most vulnerable?

Area 4 Score: _____

¹ For example, different methods of targeting are: 1) developing a targeting survey based on community criteria for vulnerability; 2) using poverty indicators; 3) using local lists of households that are affected by HIV and AIDS (with consideration that relying on these lists alone could reinforce stigma against these households); 4) using an ‘equity’ strategy whereby each village in the area has the same number of identified households; 5) using a ‘cluster’ strategy where villages with most vulnerable households are the focus of the work; 6) using a ‘scoring’ strategy where children with the highest levels of vulnerability (vulnerability ‘scores’) are enrolled, regardless of village.

² A ‘do no harm’ approach works to ensure that all interventions prioritize the best interests of individuals affected and their families, and make efforts to diminish any unintended negative consequences as a result of project activity. This perspective should be applied starting with the project design stage, through implementation, monitoring and evaluation.

Objective: To ascertain if the organization works to minimize furthering stigma/discrimination in its C&S activities.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 5					
Stigma and discrimination protocols¹	The organization has done no analysis which looks at the impact of its planned/implemented activities on increasing stigma/discrimination, and on how to put in place safeguards to minimize these impacts.	The organization has considered how to avoid increasing stigma and discrimination as a result of its activities and has relevant protocols in place to ensure activities do no harm. The organization does not do this during the design stage but after activities have already started.	The organization's activities take into account stigma and discrimination reduction measures, starting from the design stage onwards. The organization continues to evaluate its potential role in furthering stigma and discrimination (and addresses any concerns). The organization has consulted with relevant community members on this issue.	There is evidence/ observations that the organization has avoided furthering stigmatization/discrimination of beneficiaries in its activities. The organization continually re-assesses the impact of its programming on those who may potentially be stigmatized or discriminated against.	The organization's approach to addressing the impact of its interventions on the way the target individuals and their families are considered by the wider community, can serve as a model for other organizations.
	1	2	3	4	

Probing questions

1. Did your organization do an analysis of program activities and their potential contribution to the stigmatization/discrimination of persons affected by HIV and AIDS and their families? Does the organization do this during the project design stage, or once activities were being implemented?
2. If this analysis revealed potential harm, did the organization adjust its approach or address these concerns?
3. Are there tools/mechanisms in place to continually review potential negative impacts as a result of the organizations' activities?

Area 5 Score: _____

¹ Stigma is based on beliefs. A person is 'stigmatized' when another person thinks negatively of him/her because of something s/he has experienced or because s/he belongs to a particular group. Discrimination occurs when actions are taken (or not taken) on the basis of a stigmatizing belief. At times, C&S programs inadvertently further stigma and discrimination against people affected by HIV and their families. For example, this may occur when programs offer support to only individuals living with HIV in a household or a community where all members are equally vulnerable, or using branded tools e.g. motorcycles, uniforms, cars, etc. when visiting families, which makes the whole community conclude that these individuals have HIV. In some communities this will not be the case, but an analysis of such issues is a critical component to a strong C&S program.

Objective: To determine whether the organization provides services in a physical environment that conforms to national and international minimum standards.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 6

Physical Space	There is limited or no designated space for C&S services that conforms to national standards and/or international standards.	There is sufficient space for providing specific C&S services.	The available space for C&S services is sufficient to address the confidentiality issues of the clients where required.	The organization has documented and defined minimum standards for the types of spaces required for different C&S services, has strategies to ensure these are adhered to and are using them. There is a plan to meet client space needs in the community/mobile service delivery, including confidentiality.	The organization's approach to managing space needs for C&S services can serve as a model for other organizations that are implementing similar activities.
	1	2	3	4	

Probing questions:

1. Are C&S services being provided in spaces that conform to national standards?
 - o *[Physical space includes confidential space for examinations and counseling. For services provided in a home setting, the service provider needs to work with the family to create an enabling environment for the clients to receive services. This may include scheduling visits when the other members of the household are not at home or could "excuse" themselves and leave the space for the client, as necessary. Other important space needs as program develops includes space for staff (work, office, meeting) and space to accommodate integrated services.]*
2. Is the space sufficient (and/or convenient, as for HBC) for providing specific C&S services?
3. Is the available space and facilities at home sufficient to address the confidentiality issues of the clients where required?
 - o *[This should cater adequately for visual and audial confidentiality.]*
4. Is there a plan to meet client space needs in community/mobile service delivery, including confidentiality?

Area 6 Score: _____

Objective: To determine the process which the organization employs in attracting users to services provided.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 7					
Demand Generation	There is limited or no organizational process to mobilize clients/beneficiaries.	The process to mobilize clients involves the community and the target beneficiaries are clearly defined for all projects.	The process to mobilize clients involves the community and the target beneficiaries are clearly defined for all projects. The process to mobilize clients covers all C&S services provided by the site/program.	The process to mobilize clients involves the community and the target beneficiaries are clearly defined for all projects. The process to mobilize clients covers all C&S services provided by the site/program. There has been assessment carried out to determine the impact of the mobilization process.	There is a client mobilization strategy in place which addresses the target population needs. The strategy has been assessed for effectiveness and has generated the expected demand. This is appreciated by the community and can be replicated in other programs.
	1	2	3	4	

Probing questions:

1. Is there an organizational process to mobilize clients/beneficiaries?
2. Does the process to mobilize clients involve the target community? Are the target beneficiaries clearly defined for all services?
3. Does the process to mobilize clients cover all C&S services provided by the program?
4. Has there been an assessment to determine the impact of the client mobilization process?

Area 7 Score: _____

Objective: To assess the organization's ability to maintain a resourceful pool of volunteers.

DOMAIN 1: ORGANIZATIONAL STRATEGY					
Area 8					
Volunteer Capacity and Support Systems	The organization has done no analysis of its volunteer capacity in terms skill mix in relation to C&S service delivery.	The organization has solicited the input of its volunteers in terms of their skills, capacities and constraints, and taken them into account when designing/implementing activities. However there is no volunteer retention strategy in place.	The organization's approach takes into account an analysis of volunteer skills, workload capacities and constraints. A volunteer retention strategy is in place that includes processes to support volunteer morale and address their psychosocial needs. ¹	The organization's approach reflects a realistic assessment of volunteer skills, capacities, and constraints. A functioning volunteer retention strategy is in place and the organization has a low volunteer turnover rate. The organization regularly consults with its volunteers to remain informed about their constraints and concerns.	The organization's approach to supporting volunteers and addressing their capacity can serve as a model for other organizations.
	1	2	3	4	

Probing questions:

1. Has the organization done an analysis of its volunteer skill mix, capacities, and constraints?
2. Has the organization solicited the input of its volunteers on the design of activities (in terms of their capacities and constraints), and taken this into account when designing the project?
3. Is there a volunteer retention strategy in place?
4. Does the organization offer support to its volunteers (moral support, psychosocial support)?
 - o *[This could be in the form of volunteer support groups, for example.]*
5. Is there a low volunteer turnover rate? What is the annual/ periodic attrition rate registered?

Area 8 Score: _____

¹ For those who work directly with C&S and their families, this is often referred to as 'care for the caregiver'.

Objective: To determine the extent to which the organization engages the target community in decision making regarding the services provided.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 9					
Community Involvement	There are limited or no fora where the organization meets with the community to set priorities for intervention.	The community is involved in selection of C&S clients.	The community is involved in selection of C&S clients. There is a mechanism for the C&S program to receive input from the community.	The community is involved in selection of C&S clients. There is a mechanism for the C&S program to receive input from the community. There is a framework where the organization accounts to the community for the welfare of the C&S clients.	The community participates in most C&S activities and the activities reflect the needs of this community as much as possible. There is effective and well documented referral of clients to and from the primary target community. There are structures within the targeted community to support the C&S services that can be used as a resource for other programs.
	1	2	3	4	

Probing questions:

1. Are there fora where the organization meets with the target community to set priorities for intervention?
 - o *[This can be confirmed by looking at the minutes or any documented evidence of meetings.]*
2. Is the target community involved in the selection of clients?
3. Is there a mechanism for the C&S program to receive input from the target community?
4. Is there a framework where the organization accounts to the target community for the welfare of the C&S clients?

Area 9 Score: _____

Objective: To establish how the organization links with other service providers for its clients.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 10					
Referral systems	There are limited or no referrals being done at the moment and no list of all the organizations providing C&S care and related services in the project area is available.	Mapping of other service providers has been completed and there exists a list of organizations/ providers/facilities providing related or complementary services. There are no clear referral guidelines in place.	There are clear referral guidelines in place and referrals are being made. There exists a formal referral partnership with other service providers and documentation of referrals is available and able to capture all the referred clients.	There is a referral strategy in place that is operational. Referrals made are tracked and reported. The organization is able to monitor and evaluate the extent to which the referral network is achieving its intended objectives and meeting all clients' needed services.	Clients are referred for services, there is a formal referral arrangement with the other providers and organization receives referral. Referral documentation is available and able to capture all the referred clients who accessed the services. The organization is able to cover all components of C&S and related services, both directly and through effective referrals.
	1	2	3	4	

Probing questions:

1. Are there any referrals being done at the moment? If yes, for which services?
2. Is there a list of all the organizations providing C&S and related services in project areas?
 - o *[Check for a list of other organizations providing related services in the project area.]*
3. Have referrals been made to other providers for services not provided by this organization?
 - o *[Look for referral notes, client return forms, list of other providers, etc. that show existence of a referral relationship.]*
4. Is there documentation on the clients referred?
5. Is there a means of verifying whether services were received?

Area 10 Score: _____

Objective: To assess the relevancy and effectiveness of internal skills building conducted by the organization.

DOMAIN I: ORGANIZATIONAL STRATEGY					
Area II					
Internal Skills Building	There are no organization-specific skills-building/professional development activities conducted for staff.	There are some internal skills building activities conducted but on an inconsistent basis.	Internal skills-building activities are based on needs assessments of gaps/skills needed to implement project activities; as well as on areas of interest to staff. Appropriate, technically sound curricula are used and/or adapted.	Internal skills building activities are based on needs assessments. Appropriate, technically sound curricula are used and/or adapted. A documented skills-building plan is in place. Refresher trainings are offered as needed. The skills-building plan is updated regularly.	The organization has a high-quality staff training and skills development process. The organization's staff development approach offers a model that can be replicated.
	1	2	3	4	

Probing questions:

1. Are there any organization-specific skills building activities being conducted?
2. Are there structured skills needs assessment tools?
3. Are the skills building activities based on a needs assessment? Are appropriate curricula used?
4. Is there a mechanism to evaluate the relevancy and effectiveness of the skills building activities conducted?
 - o *[Check for availability of support supervision guide.]*

Area II Score: _____

Objective: To assess the overall coordination of the services provided by the organization.

DOMAIN I: ORGANIZATIONAL STRATEGY

Area 12					
Leadership	Has limited or no identified Leadership or committed members at site or in community.	Has clear leadership at each level of implementation with some knowledge of C&S program management and is running some C&S activities.	Has committed leadership with good experience and clear vision in providing C&S services. Leadership needs some assistance to set up and lead good systems for C&S service delivery.	Has committed leadership with full understanding of C&S issues and is able to provide strategic thinking and direction. Leadership is engaged in establishing, strengthening and expanding C&S care access points as well as coaching and mentoring staff.	Has strong leadership with full understanding of C&S issues, has a clear team and is able to train other teams to expand C&S access points.
	1	2	3	4	

Probing questions:

1. Is there an identified leader or leadership team within the organization who is responsible for providing overall technical direction in C&S programs?
2. Does the identified leader(s) have the technical expertise and experience managing C&S-related programs/services?
3. Does the leadership need assistance in setting up C&S programs?
4. Is the leadership engaged in capacity building for C&S programs?
5. Does the leader(ship) sit on national/local C&S coordinating bodies?
6. Is the leader(ship) engaged in capacity building for C&S programs?
7. Is the identified leader(ship) used as a resource by other C&S programs?

Area 12 Score: _____

Objective: To assess whether organizational activities can be implemented in the long-term beyond the life of specific projects.

DOMAIN 1: ORGANIZATIONAL STRATEGY					
Area 13					
Sustainability¹	The organization has no explicit sustainability plan and/or exit strategies in place for its C&S activities.	The organization has identified the requirements for ensuring C&S care activities over time, including an exit strategy.	The organization's activities reflect the emphasis on sustainability, and/or the exit plan is being carried out.	The organization's activities fully reflect the emphasis on sustainability and/or there is an exit plan being implemented. Organization leadership is able to identify areas for further consideration in the long-term in consultation with the target communities.	The organization has a clear vision for promoting sustainability that is reflected in all its activities. The organization's sustainability approach offers a model that can be replicated.
	1	2	3	4	

Probing questions:

1. What efforts are being undertaken to ensure that C&S services continue beyond the life of individual project?
2. Does the organization have a sustainability plan for its activities beyond specific project life cycles?
3. Which sustainability approaches are being implemented by the organization?
4. Is the organization involved in strengthening networks and coordination?

Area 13 Score: _____

Total Domain I points: _____

Domain I Score (Total Points / 13): _____

¹ Caring for individuals and families directly affected by HIV and AIDS requires long-term effort. The process of building the long-term sustainability for care and support interventions requires planning for continuity of service delivery to and by the community.

Objective: To assess the robustness of the organization's procurement system.

DOMAIN 2: SUPPLIES MANAGEMENT					
Area I					
Procurement Planning	There is a limited or no procurement plan to meet the planned C&S program needs and ensure that procurement for items to be obtained from central stores is planned effectively.	There is a reliable system for procurement and management of C&S supplies that conforms to USG guidelines.	There is a reliable system for procurement and management of C&S supplies that conforms to USG guidelines. There is a quality-assurance process for product availability and certification.	The organization has a supply-chain management system that accommodates the specific requirements of the C&S services provided and ensures supply continuity.	The inventory and supply-chain management system used by the organization is comprehensive for continued services with no stock-out.
	1	2	3	4	

Probing questions:

1. Does the organization have a procurement plan to meet C&S program needs?
 - o *[This should detail what, when, and how the items are to be procured during the workplan period so as to meet client and project needs.]*
2. Is the procurement plan consistent with annual and quarterly work plans?
3. Does the organization have a reliable system for procurement and management of C&S supplies and does it conform to USG guidelines?
4. Does the organization have a quality-assurance process for product availability and certification?
5. Does the organization have a supply-chain system in place that accommodates the specific requirements of C&S services and ensures supply continuity?

Area I Score: _____

Objective: To determine the appropriateness of the supplies handling system of the organization.

DOMAIN 2: SUPPLIES MANAGEMENT					
Area 2					
Commodity Storage and Utilization	There is limited or no designated area for storage of procured commodities.	There is a storage area sufficient for C&S supplies procured that meets safety standards.	There is a storage area sufficient for C&S supplies procured that meets safety standards. There is a system for C&S commodity management and stationery to track authorized usage and disposal and other practices.	There is a storage area sufficient for C&S supplies procured that meets safety standards. There is a system for C&S commodity management and stationery to track authorized usage and disposal and other practices. There is a good inventory and logistics management system in place that takes care of fair forecasting.	The organization has an elaborate supplies and logistics management system and best practices; it can be used as a resource or training centre.
	1	2	3	4	

Probing questions:

1. Does the organization have a designated storage area for C&S supplies?
2. Is the storage area appropriate for the storage of C&S supplies and does it meet safety standards?
3. Is there a system and stationery for proper storage and management of the C&S commodities?
 - *[System refers to controls and documentation of items movements; it includes the stock and bin cards, authorization and other control stationery regularly used by staff. C&S commodities include ITNs, HBC kits, gloves, etc.]*
4. Does the organization have an inventory management procedure that takes care of fair forecasting?

Area 2 Score: _____

Total Domain 2 points: _____

Domain 2 Score (Total Points / 2): _____

Objective: To assess organizational capacity to collect and manage data accurately.

DOMAIN 2: DATA COLLECTION, QUALITY ASSURANCE AND IMPROVEMENT, MANAGEMENT INFORMATION SYSTEMS, FEEDBACK AND SHARING, AND USE FOR DECISION MAKING

Area 1					
Data Collection	The organization has no documented procedures to guide data collection at various levels.	The organization has documented procedures to guide data collection at the various levels, including appropriate tools. Tools have been reviewed to capture information required for specific donor reporting requirements (i.e., appropriate indicators). Some information the organization is collecting is not used for either donor reporting or to inform other organization activity implementation.	Data collection tools have been standardized to collect data across sub-partners and service delivery points, and adhere to standards of confidentiality. This requirement is clearly documented in MoUs with sub-partners. The staff and community involved in data collection have been adequately trained and supervised in the use of the tools. The organization collects only relevant data.	The organization has a documented and fully functional procedure for data transmission (data flow plan). Staff and community involved in data collection have been adequately trained and supervised in use of the tools. Sub-partners collect and submit PEPFAR data as required.	The organization’s data collection approach offers a model that can be replicated.
	1	2	3	4	

Probing questions:

1. Is there is a documented data collection procedure¹ to guide data collection at various levels?
2. Are there tools for collecting data at the various levels²?
3. Are there mechanisms in place to avoid double counting (for example, unique client identification)³?
4. Have the tools been reviewed to capture information required for specific donor indicators?
5. Does the organization have standardized tools across sub-partners and service delivery points?
6. Have staff been trained in the use of the tools?
7. Does the organization have documented procedures for data transmission (data-flow plan) to and from various levels?

¹ There is a list of operational definitions of what is being counted for each indicator (e.g., what constitutes a person receiving a service). All groups delivering the same services use standardized or compatible data-collection forms. Within all groups delivering the services, there are designated staff responsible for the review and validation of aggregated numbers prior to submission to the next level (i.e., it is in their job description).

² Various levels refer to household, community, sub county, district, regional and head office level.

³ The reporting system avoids double counting within each group delivering services [e.g., when an individual receiving identical or related services from the same group is improperly counted more than once] and across groups delivering similar services [e.g. when an individual receiving identical or related services from different groups is improperly counted more than once]. For example, an individual receiving psychosocial support and /or nutritional support from different groups.

Objective: To assess the capacity of the organization to maintain quality of collected data.

DOMAIN 2: DATA COLLECTION , QUALITY ASSURANCE AND IMPROVEMENT, MANAGEMENT INFORMATION SYSTEMS, FEEDBACK AND SHARING, AND USE FOR DECISION MAKING

Area 2					
Data Quality Assurance and Improvement	The organization has not identified the need for having data quality assurance processes in place.	The organization has identified the need for data quality assurance processes, as well as the requirements for such a system. The organization has a nascent data quality assurance process in place.	The organization has an effective data quality assurance process in place and is able to identify and address gaps and/or weaknesses in data.	The organization has an effective data quality assurance process in place, and has identified a feedback mechanism to routinely assess quality in critical areas of service delivery. The feedback mechanism is known by relevant project staff.	The organization’s approach to data quality assurance and improvement offers a model which can be replicated.
	1	2	3	4	

Probing questions:

1. Has the organization identified the need for and the requirements for having data quality assurance processes in place?
2. Has the organization identified a strategy to address gaps and/or weaknesses in data?
 - o *[Gaps refer to inadequate data or the missing link between data and the decisions to be taken, e.g. decision to procure consumables.]*
3. Has the organization been able to address gaps in and/or weaknesses in the data, and does the organization have the capacity for data management tasks?
 - o *[Tasks may include Excel format conversions, data cleaning, data aggregation and analysis.]*
4. Has the organization identified a feedback mechanism (including all stakeholders) and a system to routinely assess quality in critical areas of service delivery?

The Organization	Yes	No	N/A	Comments
Has an M&E plan with clearly specified M&E roles and responsibilities				
Has SOPs for data collection, tracking clients' records, & data storage				
Has SOPs for conducting data quality assessments, validation, & cleaning				
Has SOPs for aggregation & analysis of data				
Has SOPs for ensuring data security				
Staff who have been trained on all the relevant SOPs				
SOPs displayed and accessible for easy reference by all relevant staff				
A mechanism to ensure unique client identification across sites, services, and longitudinally				
Tools are standardized across projects				
There is a clear data-flow plan (with clear timelines for submission of data and provision of feedback)				
Data collection tools that are updated to accommodate variations in indicator requirements				
Data quality assessments to assess reliability, validity, and accuracy of collected data				
Data review processes to ensure feedback for quality improvement				

Area 2 Score: _____

Objective: To assess if data is used to inform decision making processes within the organization.

DOMAIN 2: DATA COLLECTION, QUALITY ASSURANCE AND IMPROVEMENT, MANAGEMENT INFORMATION SYSTEMS, FEEDBACK AND SHARING, AND USE FOR DECISION MAKING

Area 3					
Data Use for Decision Making	The organization and/or its implementing partners have limited or no historical (or baseline) data against which current data can be compared to help in decision making.	The organization and/or its implementing partners have a process for comparison of achievement against goals and past progress.	The organization and/or its implementing partners have a process for comparison of achievement against goals and past progress that result in plans to modify action or approach/tools. The organization and/or its implementing partners follow a procedure of time-bound corrective action and tracking achievements against plans in all areas of the intervention.	The organization and/or its implementing partners' current approach to implementation and/or the referral, community or demand generation activities carried out reflect greater effectiveness. Data is shared with stakeholders and partners.	The organization's approach to data for decision making offers a model that can be replicated.
	1	2	3	4	

Probing questions:

1. Does the organization have historical (or baseline) data against which reports can be compared to help in decision making?
2. Does the organization have a process for comparison of achievement against goals and past progress that result in plans to modify action or approach/ tools?
 - *[There should be a mechanism of triangulation of data sources for comparison.]*
3. Do the organization's management and staff follow a procedure of time-bound corrective action and tracking achievements against plans in all areas of the intervention?
4. Does the organization's current approach to implementation or the referral, community or demand generation activities reflect greater effectiveness arising from data used for decision making?

Area 3 Score: _____

Objective: To determine whether the organization networks and shares information with relevant stakeholders.

DOMAIN 2: DATA COLLECTION , QUALITY ASSURANCE AND IMPROVEMENT, MANAGEMENT INFORMATION SYSTEMS, FEEDBACK AND SHARING, AND USE FOR DECISION MAKING

Area 4					
Feedback and Sharing	The data collected and reports made by the organization and/or its implementing partners are not shared outside the organization or are shared in an irregular manner.	The organization and/or its implementing partners have a plan to share data and reports with relevant staff and stakeholders and regularly share this information.	The organization and/or its implementing partners have a plan to share data and reports with relevant staff and stakeholders and regularly share this information. The organization solicits feedback from stakeholders.	The organization and/or its implementing partners have a plan to share data and reports with relevant staff and stakeholders and regularly share this information. The organization solicits feedback from stakeholders. Program information is also shared with outside parties via documentation such as success stories and newsletters.	The organization's approach and success with sharing information and soliciting feedback from stakeholders and interested parties can serve as a model for other organizations.
	1	2	3	4	

Probing questions:

1. Has the organization shared data collected and reports made outside the organization?
2. Does the organization have a clear plan by which it regularly shares information outside the organization?
3. Does the organization solicit feedback from the stakeholders with whom it shares the information?
4. Does the organization have examples of external organizations referring to this organization's reports or changing their plans of implementation due to information shared by the organization?

Area 4 Score: _____

Objective: To assess the capacity of the organization to maintain quality of collected data.

DOMAIN 2: DATA COLLECTION, QUALITY ASSURANCE AND IMPROVEMENT, MANAGEMENT INFORMATION SYSTEMS, FEEDBACK AND SHARING, AND USE FOR DECISION MAKING

Area 5: Management Information Systems					
Management Information Systems (MIS)¹	The organization does not have a functional MIS to track data generated from various activities.	The organization has a simple MIS system that has built-in data quality and validation checks (manual and electronic).	The organization has an MIS system with built-in data quality and validation checks, and capacity for most specialized data retrievals. This system is used and understood by the relevant staff and management.	The organization has an MIS system with built-in data quality and validation checks, and the capacity for most specialized data retrievals. The system has a documented and functional back-up procedure (computerized or manual) and there is a sufficient system for preventing unauthorized access. This system is used and understood by the relevant staff and management, and produces the needed information.	The organization's MIS can be used as a model by other organizations.
	1	2	3	4	

Probing questions:

1. Does the organization have an MIS to track clients/beneficiaries? Is it functional?
2. Is this system well understood by the relevant staff and management, and are they able to accurately use the system?
3. Can the system generate reports?
4. Does the system have built-in data quality and validation² checks (manual and electronic)?
5. Does the organization have a system for preventing unauthorized access?
6. Does the organization have a documented and functional back-up procedure (computerized or manual)?

Area 5 Score: _____

Total Domain 2 points: _____

Domain 2 Score (Total Points / 5): _____

¹ Management information system (MIS) refers to a planned system of collecting, processing, storing and disseminating data in the form of information needed to carry out the functions of management. In a way, it is a documented report of the activities that were planned and executed. It also incorporates data quality assurance mechanisms, and should be utilized to provide data for decision making.

² There are quality controls in place for when data from paper-based forms are entered into a computer (e.g., double entry, post-data entry verification). At all intermediate levels at which data are aggregated, mechanisms/procedures are in place to reconcile discrepancies in reports. All reporting forms used for aggregating or analysis are available for auditing purposes at all levels at which data is being reported.